# Fifty Golden Pears

A Short History of

# Sacred Heart Hospital

Spokane, Washington



Years of Jubilee 1886 - 1936

# A Precious Message

N audience with His Holiness, Pope Pius XI, May 22, 1935, the Reverend Alphonse M. Schwitalla, S. J., president of the Catholic Hospital Association, presented to His Holiness a spiritual bouquet of six volumes, composed of the spiritual offerings from the entire religious personnel of all the Catholic hospitals in the United States and Canada. Sacred Heart Hospital of Spokane was included.

His Holiness addressed to the reverend president a precious message to be transmitted to the sisterhoods of the United States and Canada, which is here reproduced from an editorial which appeared in the Hospital Progress, June, 1935. (With permission of the editor.)

#### The Message

"I wish to bless, first of all, the sisters of the Catholic Hospital Association; I wish to bless the members of your staff; and all those nurses and helpers, the old and the young, your student nurses too; all your patients and lastly yourself, so that your work for the sisters may prosper. Yourself and the patients and the helpers, the doctors, the nurses, and the sisters—to all of these I send my apostolic blessing that God may encourage them and strengthen them to do their arduous work for His love.

"Tell the sisters that I prize these books as symbols of their allegiance and love, beyond any words which I can find. I shall take time to look at each of these volumes and to read as many as possible of their messages, but the gift itself I prize as I value only few, if any others, that I have received. I prize their labors in the hospital but I also prize the labors which they have shown in assembling these volumes.

"The sisters must understand that much of the social work of today is characterized by a materialistic spirit, which serves only the body and is evanescent because it effects no permanent result. Each act of service in the hospital must be twofold; it must benefit the body and it must touch the soul. To do so, it must be performed by one who appreciates the deep significance of service for Christ. This twofold aspect of our ministration, the one in and for this world, the other in and for the other world, can be kept alive only by those who are themselves spiritually minded and spiritually visioned. Such a mind and such an insight demand constant attention to spiritual exercises, to frequent prayer, to spiritual reading, to frequent visits to the Blessed Sacrament, to self-examination. I recommend to the sisters, therefore, a reawakening of their own spiritual lives so that their work may have a meaning for this world and for the next, for themselves and for all those to whom they minister and with whom they come into daily contact."

I PAGE FOUR!



Society Caritates a Proventia in moreomir SS. Gil Jefor in civitate Spokane
et infinnil quilou pro Christi amore responsive Apoptilicam Benedictionem peramenter
in Souries impertunur.

25.77. 24

#### TRANSLATION

To the Sisters of Charity of Providence, of the Sacred Heart Hospital in the City of Spokane, and to the sick to whom they minister for the love of Christ, we impart in perpetuity the Apostolic Benediction in our Lord.

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# The Sarred Apostolic Penitentiary

OFFICE FOR INDULGENCES



#### Most Holy Father,

HE Spiritual Director of the Association, known as "The Catholic Hospital Association of the United States and Canada" canonically erected in the United States and Canada, prostrate at the feet of Your Holiness, humbly begs a Plenary Indulgence to be gained under the usual conditions on the feasts of our Blessed Mother of Perpetual Help (the third Sunday of June), of St. Luke, of St. Camillus of Lellis and of St. John of God by the Sisters and Brothers who are members of this Association; by the physicians who constitute the staffs of these hospitals; by the nurses, by the patients and by all the other members of the auxiliary personnel including students of medicine.

#### The 31st of March, 1936

The Sacred Apostolic Penitentiary by virtue of faculties granted by His Holiness, Pope Pius XI, graciously concedes this favor according to the petition, for seven years, all things to the contrary notwithstanding.

By order of His Eminence,

(Signed) S. Luzio, Regent

J. Rossi, Secretary

Seal

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#### Koreword

HE observance of important anniversaries in the history of noble institutions, inspires us first of all with sentiments of profound gratitude to God from Whom all blessings come and without Whose help all our labors are in vain. "Unless the Lord build the house, they labor in vain who build it."

To God our Father, then, be glory given for the multiple works of mercy and charity performed in Sacred Heart Hospital during the past fifty years. To Him be glory given for inspiring His daughters, the Sisters of Charity of Providence, to devote themselves so cheerfully and unselfishly day and night their whole lives through, without any hope or desire of any earthly recompense, to the care of those so much in need of care, the sick and dying.

The majestic edifice of Sacred Heart Hospital, situated high above and commanding the extensive Spokane valley, is indeed imposing and impressive; but no master-piece of architecture and no physical equipment even the most perfect that human ingenuity can devise, nor yet in addition the skill of medical science and professional nursing, suffice to produce the perfect hospital.

Above all these things there is needed in all who attend the sick the spirit of Him to Whom Sacred Heart Hospital is dedicated, of Him Who says: "Come to Me, all you who labor and are burdened, and I will refresh you. Learn of Me, because I am meek and humble of heart: and you shall find rest to your souls." To become like unto Him Who "having joy set before Him, endured the cross, despising the shame," solves the mystery of suffering for all who would be taught by Him. This is the constant endeavor of the sister who attends the sick, an inspiration and a striving for us all to emulate.

May God be praised too for inspiring so great a number during the past half-century to cooperate with the Providence Sisters in the pursuit of their work of mercy, devoted priests, physicians, nurses, and generous benefactors.

May these pages that briefly sketch the history of Sacred Heart Hospital from its beginning in 1886, and that recall the labors and achievements of some of the pioneer sisters of the community, inspire many new laborers to devote themselves to the noble cause.

Spokane, Washington Feast of St. Ann July 26, 1936 +Charles D. White Bishop of Spokane

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His Excellency Most Reverend Charles D. White Bishop of Spokane

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# Dedication

Mother Tarcisius of the Blessed Sacrament, Provincial Superior, to the hundreds of sisters who during the past fifty years have nobly and generously spent themselves in a spirit of self-sacrifice and kindliness, ministering to the sick and dispensing the charity of Christ to the needy, to all who have helped to make Sacred Heart Hospital what it is today, this summary of achievements is affectionately dedicated.

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# The Blessing of the Sacred Heart

May the grace and blessing of the Sacred Heart be with you;

The peace of the Sacred Heart encompass you;

The merits of the Sacred Heart plead for you;

The love of the Sacred Heart inflame you;

The sorrows of the Sacred Heart console you;

The zeal of the Sacred Heart animate you;

The virtues of the Sacred Heart shine forth in every word and work,

And may the joys of the Beatific Vision be your eternal recompense.

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Mother Gamelin, Founder of the Sisters of Charity of Providence

## Mother Gamelin

ME story of the founding of the Sisters of Providence is, like that of all great movements, the story of a personality. Emmelie Tavernier, a daughter of sterling Christian parents, was born in Montreal in 1800. Gifted with a sunny disposition she grew up into a young woman of unusual charm and of deep but unobtrusive piety. From babyhood she had a strongly-marked love for the poor and afflicted, and since her relatives were well-to-do, she was able, all through her early years, to indulge this attraction. Her character was made strong by suffering. While a small child, she was deprived of her parents and spent her girlhood in the homes of relatives. Her marriage, at the age of twenty-three to Jean Baptiste Gamelin, a prosperous citizen, seemed to open the way to permanent happiness, as both were pious and both devoted to God's suffering ones in the person of the poor. Four years later, nevertheless, she found herself alone in the world. One by one death had taken her babies and her husband. It was in the hidden design of Providence that by experimental knowledge of pain, she should become a consoler of all the afflicted.

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Instead of giving way to a luxury of grief, Madame Gamelin now devoted herself more entirely to the service of the poor, whom she visited, comforted, and relieved. She was moved to pity at the condition of the aged poor, so often wretched and neglected, and resolved to make a home for fifteen old women, of whom she undertook the entire support. Sacrifice after sacrifice followed. In spite of the harsh criticism of her friends, she resolved to give up her privacy and independence and go to live with her aged and unreasonable charges. By 1843 her works of charity had expanded so greatly that the bishop of the diocese, the holy and zealous Ignace Bourget, decided to found a new community for their care. Madame Gamelin, in spite of the repugnance of nature, felt herself urged to make the supreme sacrifice and gave up her relatives and her liberty to become at forty-three years, a novice in the little community of seven members. Soon she became its first superior.

Swiftly she advanced on the way of heroism and of the cross, and swiftly her works multiplied to include day schools and boarding schools, the care of orphans, of the insane, of deaf mutes. The heroic work of the little community during the terrible typhus epidemic of 1847-48 should be written in letters of gold. Not only did the sisters care for the fever-stricken Irish immigrants, but Mother Gamelin sheltered 650 little ones orphaned by the plague. Again in 1849 her community did heroic work during an epidemic of cholera that ravaged the city of Montreal. At the suggestion of the mayor, Mother Gamelin opened an emergency hospital, where the sisters cared for the stricken during the long hot summer of that sad year.

It was an attack of the same dreaded disease that two years later carried off this valiant woman after an illness of a few hours. But her work was done and her little community firmly established. Well does the tablet that marks her resting place bear the words: "She hath considered a field and bought it; with the fruit of her hands she hath planted a vineyard."

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We exalt, O Lord, Thy Providence, And we submit to all its decrees.

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Mother Joseph of the Sacred Heart Founder Mother in the West

# The Institute of Providence In the West

T was during the term of office of the heroic Mother Caron, second general superior of the institute of the Sisters of Charity of Providence, that the first permanent foundation in the West was made. Augustine Magloire Blanchet, Bishop of Nisqually, as the See was then known, asked and obtained five Sisters of Providence to carry on the works of charity and education in his diocese. On the third day of November, 1856, the little band of pioneers left Montreal for the far-off mission. They were five in number: Sister Joseph of the Sacred Heart, Sister Praxedes of Providence, Sister Blandine of the Angels, Sister Mary of the Precious Blood, and Sister Vincent de Paul. Their superior was Sister Joseph of the Sacred Heart whose name was to be a name of benediction throughout the Pacific Northwest.

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They embarked from New York on November 5 on the steamship Illinois (their sailing had been delayed a day in order that the ship might bring to San Francisco the news of the election of James Buchanan as president of the United States) and reached Aspinwall, now Colon, on November 14. They embarked again on the steamship Golden Age on a sea that was fortunately calm, for their ship broke a propeller and had to be towed into San Francisco after two days of tossing on the Pacific. Worse was their experience between San Francisco and Astoria, for they encountered a storm so terrific that it seemed no ship could weather it. Finally after battling the tempest for eighteen hours their ship passed the dreaded Columbia Bar, and they found themselves on a broad and placid river. At three o'clock on the afternoon of December 8, the Feast of the Immaculate Conception, they disembarked at Fort Vancouver, a trading and military post with a mixed population of whites, half-breeds, and Indians.

As no provision had been made for their coming, the sisters were obliged to use a small building which had been occupied by Indians the preceding winter. After cleaning their dwelling and making it habitable, they began immediately the care of the sick in their homes. Soon they opened a school, now Providence Academy, the oldest school in the state of Washington, and a hospital, the present St. Joseph Hospital. Very soon, too, they opened the first novitiate in the Northwest, that this promising vineyard of the Master might have an abundance of generous workers. From the House of Providence at Vancouver, foundations spread throughout the Pacific Northwest, until today hospitals, schools, homes for the aged are found from Alaska to California and from the Rockies to the Pacific. The list is too long for enumeration, but among the splendid edifices that crown the hilltops of so many of our western cities, a place of honor must be given to Sacred Heart Hospital, one of the chief glories of Spokane.

The motto of the Institute, "Charitas Christi Urget Nos," which came straight from the heart of St. Paul, has given to the members of the community the character both of apostles and of pioneers. There is pioneering still today, but it is into the terrifying domains of human misery. It is a work without the exaltations of the successful pathfinders, but a work even more vital to the well-being of humanity.

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# History of Sacred Heart Hospital

HE work of pioneer nuns who first traversed the sagebrush plains and pineclad hills of eastern Washington in prairie schooners is commemorated with the celebration of the Golden Jubilee of Sacred Heart Hospital. The day, September 7, will go down in the annals of history as marking the completion of the first half century of the work of the Sisters of Charity of Providence of Spokane.

In every new venture of the Sisters of Providence, whether it be a school, a hospital, or an asylum for the afflicted, the young recruits are spurred on by the record of achievements of their seniors; indeed they burn with a holy envy of the sisters whose trials but urged them on to attain their ideals through insurmountable difficulties, their eyes fixed on the inscription on their banner: "The Charity of Christ Presseth Us Onward." Strong, brave spirits they were, seeking to plant the faith of God in the hearts of men,—giving their strength, their health, their very lives, if necessary, to carry out His designs.

As early as 1863, at the request of the Jesuit Fathers, who were working among the Indians, the first sisters made their way into the wilds of Montana. It took a month for them to make the trip from Vancouver on the banks of the Columbia, to Saint Ignatius Mission. They traveled by prairie schooner, on horseback, and by canoe, camping out in the winter, bravely enduring its hardships, to bring a Christian education to the Indian children.

To recount the notable contribution to the civic welfare of Spokane by the Sisters of Charity of Providence over a period of fifty years, we trace in this book the work of the sisters from the hospital's modest beginning in 1886 to the golden jubilee of what is now one of the most imposing institutions of the Pacific Northwest.

Steadfastly through half a century it has solaced the afflicted and warmed the hearts of the needy with the fire of its charity. It has been a "lamp unto the feet of youth, and a light unto the path thereof;" it has enriched the years with deeds too precious to be left unchronicled.

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From the hospital, resting as a tower of strength on the brow of Manito Hill, bathed in the sun's ardent rays, amid fragrant pines and well kept lawns, surrounded by beautiful homes, there is offered from every side an unbroken vista of fertile valleys, timbered hills, and snow-clad mountains.

Today Sacred Heart Hospital stands, a monument that would enhance any city, a compliment to the countryside, a tribute to the undaunted courage, industry, and self sacrifice of the religious women whose influence is found in every department.

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Spokane Falls about 1873—the stream raced tumultuously in roaring cataracts before veering to the Northwest.

The pioneer group faithful to the traditions of the founder mother were truly instruments in the Hand of God. Laborers of the present hour may derive stimulus from the careers of those valiant women who, in far less auspicious conditions than those now prevailing, gave examples of trust in Providence, courage, fortitude, and dedication to duty.

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In 1873 another band of Mother Gamelin's daughters, also recruited in Vancouver, traveled by covered wagon under similar conditions. They passed through Spokane Falls on their way to the Colville Indian Reservation one hundred miles farther north to found a school for the children of the forest, under the supervision of the Jesuit Fathers.

In 1878 the Mission of De Smet, sixty miles south of Spokane, was established for the education of the Coeur d'Alene Indians. These missions were isolated from the outer world until the advent of railroads. Spokane was the focal point from whence radiated the Indian trails and rough wagon roads through sage brush and virgin forest far into the Rockies.

With the completion of the Northern Pacific Railway in 1881 and the locally owned road of the Spokane Falls and Northern Railway which reached the Canadian border, the Colville Mission emerged from its isolated position and thereafter daily enjoyed the sight of passing trains. New life came into the existence of the pioneers, and the little town at Spokane Falls began to forge ahead. New settlers flocked to

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the fast growing city, attracted by the mines which had been recently opened in the Coeur d'Alene mountains of Idaho, only a few miles removed.

With the daily increasing population, there also came into vision the necessity for some organization to assume the charge of caring for the sick, the injured, and the needy of the community.

The Jesuit Fathers, ministering to the spiritual wants of the town and surrounding country, were, since 1856, familiar with the work of the Sisters of Providence in western Washington. This was the only order which maintained hospitals and refuges for the afflicted along the Pacific coast to California. The Jesuits applied to the provincial superior, Mother John of the Cross, and earnestly invited her to make a foundation in Spokane Falls. She had headed the first band into Colville in 1873.

The new project was confided to Mother Joseph of the Sacred Heart, business manager and architect for the community, and Sister Joseph Arimathea, first superior of the foundation. To them fell the duty of securing desirable property and of erecting a suitable building in which to carry on the works peculiar to the Order.

The appointment of Mother Joseph of the Sacred Heart for the task was significant and in keeping with the traditions of her sisterhood. Mother Joseph was the pioneer founder in the Oregon Territory, having been selected by Monseigneur Bourget in 1854 to head the band of first missionaries to the Pacific Coast.

The choice which superiors made in selecting this noble woman was a wise one. In her father's workshop she had learned the trade of a draftsman, as well as the art of building, and these accomplishments eminently qualified her for the constructing of institutions in a new country. Many of the spacious edifices we so much admire today were her inspiration and were erected under her supervision.

Mother Joseph's talent as an architect was recognized by master builders and skilled workmen wherever she supervised construction. For more than thirty years she, with the aid of J. B. Blanchet, nephew of Right Reverend A. M. A. Blanchet, the first Bishop in Washington, chose the land, drafted the plans, and superintended the building of every academy, hospital, and orphanage of the order in Oregon, Washington, Idaho, Montana, and British Columbia. Who will say that her choice of location was not at all times the best?

Mother Joseph of the Sacred Heart devoted all her talents and energy to furthering the highest interests of her order. Her great ability and determined will not only commanded the respect of the workmen with whom she dealt in close contact but also distinguished her as a truly religious woman. To her sound judgment and keen business insight, superiors entrusted every transaction of importance. Her death in 1901 was a distinct loss to the Order of Sisters of Providence.

Unlike the beginnings of other institutions, where remodeled buildings became the first abodes, the Sacred Heart Hospital was begun by the purchase of the site. On

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April 13, 1886, Mother Joseph of the Sacred Heart and Sister Joseph Arimathea traveled on the Northern Pacific Railway to Spokane and took up lodgings in the California hotel until they could build a rough cabin for their convenience near the property selected.

A piece of land two blocks in size, situated at the intersection of Trent and Browne Streets and extending to the river on the north, was purchased for the sum of \$2,000.00. The plans of the new hospital were drafted and contracts awarded without delay. On July 2, 1886, Feast of the Sacred Heart, the building was sufficiently advanced for the laying of the corner stone, and the event was scheduled for that date, which coincided with the visit of Right Reverend Aegidius Junger, Bishop of Nisqually. The latter had arranged to be in town for the dedication of the new church of Our Lady of Lourdes on the following Sunday.

Correspondence with the Motherhouse concerning the name of the establishment had failed to reach the sister superior, but as invitations had been issued to persons of note who were to take part, the ceremony was not to be postponed. Bishop Junger, assisted by the late Reverend James J. Rebmann, S. J., pastor of the new church, and other Jesuit fathers, performed the ceremony amid a throng of people gathered for the occasion. In the course of the prayers of the ritual, the officiating prelate asked for the name under which the institution would henceforth be known. Sensing the good mother's embarrassment, Reverend Aloysius Ragaru, S. J. turned to the bishop and said with decision, "Sacred Heart Hospital." Thus the name was written in the archives.

The entire community of the Falls was greatly interested in the success of the building. In the minds of the townspeople, a brick building in the city spelled progress and stability. As the structure neared completion in December, four sisters came from Vancouver to prepare rooms for the admission of patients and to assist with a bazaar, the proceeds of which were to be used for furnishings. These were Sister Peter Baptist, Sister Aegidius, Sister Euphemia, and Sister Achille.

The first name inscribed on the register, January 15, 1887, was that of John Cox, a poor transient found in an abandoned shed, too ill with pneumonia to respond to treatment. It is to be regretted that the name of the attending physician is not recorded. At that time the sisters were not really ready to receive the sick. Workmen, still scattered throughout the building, would, at Mother Joseph's bidding, hasten to finish and make way for the urgent cases of illness for which the doctors deemed hospital care necessary.

The equipment and facilities of those days were crude and insufficient as compared with today's furnishings and means of efficient service. Nevertheless, the nursing care given by the sisters to the sick was of a high character as physicians testified. The work increased so rapidly that it became necessary to call for more sisters. Six came

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to the rescue. These were Sister Mary Hyacinth, Sister Mary Melanie, Sister Rita, Sister Pancratius, Sister Mary Hiltrude, and Sister Gregory. They took charge of departments and assisted in the care of the sick.

Since the undertaking was not the creation of some generous benefactor, the in-adequacy of financial support made it necessary for two sisters to visit the mining districts of the Coeur d'Alenes, Burke, Wallace, and Kellogg in order to collect funds for the maintenance of the institution and for the carrying on of charity work among the poor whom the sisters visited regularly. Everywhere the miners greeted the sisters with generous response and a cordial invitation to return the following year. This gracious welcome more than repaid them for the hardships endured at times in their journeys through the mountains.

Sister Joseph Arimathea, first superior and founder of Sacred Heart Hospital, was gifted with an unusual personality. Her earliest acquaintances in Spokane were among the lowly. It is customary with the Sisters of Charity of Providence to begin a new foundation by visiting families, particularly the sick, in their homes. Sister Icseph, true to the traditions of the founder mother, made the rounds of the town and soon became familiar to non-Catholic and Catholic alike. She was called "the Angel of Mercy," a friend in adversity as well as in prosperity. Long before Sister Joseph and her companion visited the mines of the Coeur d'Alene district to collect funds, her fame had reached the mining camp. The first man she approached was Phil O'Rourke, who headed the subscription list with \$100.00. Many others followed his example of generosity. Sister Joseph's favorite story was about her meeting with Dennis Clark. He had just received his first day's wages, and he debated whether he should split the day's pay with Sister Joseph or give to charity the entire amount. His generosity was equal to her errand of mercy. He subscribed the day's pay. In after years he often related how he struggled to do this, and ascribed all of his later prosperity to this particular act of generosity.

In 1888 the increasing population and the constant demands for more hospital beds compelled the sisters to make application to enlarge the building. At once Sister Joseph obtained permission to add the west wing. This was completed early within the year. It supplied two surgeries and doubled the bed capacity. All the known improvements which could in any way better the service of the sick were also installed. At that time coal-oil lamps were still in vogue in Spokane Falls, and the absence of electric lights, bells, and elevators left much to be desired.



A disastrous fire swept the town in 1889 and destroyed more than forty acres of the business section of the city, seriously threatening the hospital. Many injured persons and the sick driven from their homes found a welcome and a shelter in the Sacred Heart Hospital. As many as could be crowded into the wards and rooms were gladly received as a thank offering to God for preservation from the dreadful

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conflagration. Sister Joseph's heart would have embraced every unfortunate victim of the city, but there were limitations to the capacity of her house. She sought out the needy, the penniless, the sick and in every conceivable way dispensed the charity of Christ among them.

After three years of incessant labor Sister Joseph was recalled to begin another hospital. To her credit is ascribed the founding of five such institutions in five cities in the Northwest. Later Spokane again became her field of activity, and here, after a period of twenty years, she gave up her great soul to God.

The coming of the Oregon and Washington Railway in October, 1889, greatly heartened the downcast citizens and had much to do with the subsequent growth of the city.

Following the calamity people took heart and then and there rose to build a bigger and better city on the ruins of the old shacks that had disfigured the town of Spokane Falls. On the part of the hospital management there followed months and years of superhuman exertions to relieve distress and to respond to the unlimited requests for hospitalization of the poor.

Sister Mary of Mercy, Sister James Kisai, later provincial superior, and Sister Blandine of the Angels, one of the original five to reach Vancouver, Washington, in 1856, were superiors for a period of one year each, from 1889 to 1892. These sisters were distinguished by mild, gentle dispositions, and their relations with everyone were pleasant and friendly. Their household was noted for harmony and goodwill, and in no way did the institution suffer from the frequent change in administration. These three religious women hold an honored place in the annals of the Sisters of Charity of Providence.

The first hospital staff was organized in 1888 with the following members: Doctors Geo. Allison, N. Fred Essig, A. S. Campbell, G. W. Libby, Dr. Lockhart, and Dr. Parmlee. These were later joined by Dr. Patrick S. Byrne and Dr. T. L. Catterson, the only surviving member. As other physicians came to try their fortunes in the city they also joined as members. These were Doctors D. G. Russell, H. C. Hood, C. K. Merriman, C. G. Brown, H. T. Doolittle, and Henry B. Luhn. The annals of 1892 speak of the twelve members of the staff and the loyalty which the physicians always manifested toward the hospital.

From the very inception of the sisters' work in Spokane and the surrounding country from Walla Walla on the south to the Canadian border on the north, the greatest appreciation was always manifested. In point of financial support, there were no handsome gifts of note, no large donations from millionaires; but moral support, respect, esteem, friendship, and goodwill were ever present, with the result that whole-hearted cooperation was given by the citizens, non-Catholic as well as Catholic, during fund-raising bazaars. This stimulated the sisters to do even greater things for charity's sake.

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In this connection the annals record the names of the distinguished Jesuit Fathers: Cataldo, Jacquet, Van Gorp, de la Motte, and Rebmann. An honored place must be given to the names of Mr. and Mrs. M. M. Crowley, Mr. and Mrs. Patrick Clark, Mr. and Mrs. James Monaghan, Mr. and Mrs. Daniel Crowley, Mr. and Mrs. D. Clark, Mr. and Mrs. Charles Sweeney, Mrs. Bell, Mrs. Graham, Mrs. Conlan, Mrs. Flournoy, Phil O'Rourke, the Kearney Brothers, Mr. Havermale, Mr. Cannon, Mr. Brown, Mr. Glover, Mr. and Mrs. C. P. Robbins, Mr. and Mrs. J. B. Buchanan, Mr. and Mrs. R. B. Porter, Mr. and Mrs. James M. Geraghty, Mr. and Mrs. Nicholas Codd, Mr. and Mrs. John Codd, Mr. and Mrs. Thomas Welch, Mr. and Mrs. R. O'Shea, Judge P. G. Chadwick, Mrs. Mary A. Finnigan, Mr. and Mrs. Michael Dunne, Mr. and Mrs. Michael O'Shea, Mr. and Mrs. Edward O'Shea, Mr. and Mrs. Quinn, Mr. and Mrs. Harry Baer, Mr. Hamill, Mr. John C. Wahl, Mr. and Mrs. M. D. Shea, Mr. and Mrs. John Jordan, Mr. and Mrs. Mulligan, and a host of other helpful friends whose names we regret to omit.

In 1892, during the superintendency of Sister Columban, the Great Northern Railway opened negotiations with the sister superior to buy that strip of property which lay along the river bank and expressed the intention of purchasing the entire hospital site in the near future. This came as a warning and the sisters began to prepare for the purchase of a new location.

Among the pioneer band of religious, the first death to be recorded was that of Sister Peter Baptist, who had served from the opening day as pharmacist. Her charity, zeal, and devotedness toward the sick knew no bounds. The most lonely and dejected were the particular objects of her self sacrifice. These she especially endeavored to reclaim for the Master whom she served so well. Worn out by long years of devotedness among the Indians as well as among the white settlers of Montana, Idaho, and Washington, she expired in Sacred Heart Hospital November 25, 1897. Her demise left a void in the hearts of all who had ever come into contact with the gentle, prayerful religious.

Sister Columban, the fifth superior to direct Sacred Heart Hospital, took charge in 1892. She governed for six years with remarkable success and tact. Of a winning personality, she had the enviable gift of gaining the esteem and sympathy of all acquaintances. The financial panic of 1893, with all the distress following in the wake of bank failures, and unemployment, only served to bring to the fore the sterling qualities of a master executive. Her keen sense of justice attracted persons in all walks of life in need of advice or assistance. She promoted harmony and good understanding among the sisters of her house, the physicians, and the patients. Sister Columban's noble qualities of heart and mind were truly appreciated by all with whom she came into contact. Her entire life was characterized by remarkable charity towards the poor, among whom she had done extensive social work in the city of Montreal, Canada, before coming to Spokane. Her life was filled with unselfish labors for God and suffering humanity.

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Mother Peter of Alcantara followed as sixth superior in 1898. The story of her religious career would fill a volume. As a young religious she had lived for six years in Santiago, Chili, where the Sisters of Charity conducted flourishing institutions of learning.

Returning to the United States in 1869, she was missioned to the Pacific coast. Here she became distinguished as a teacher and as mistress of novices. Appointed superior of Providence Hospital, Seattle, in 1878, she served for twelve years without interruption. Under her intelligent administration, the institution advanced rapidly in size and service. The following three years she spent in the important office of provincial superior. In 1898 she was entrusted with the supervision of Sacred Heart Hospital. During her administration the east wing was completed to increase the bed capacity to 130 patients. Mother Peter's charming manner and gracious hospitality endeared her to the hearts of her sisters, as well as to her friends who were legion. Her resignation, necessitated by her advancing years, was reluctantly accepted in 1906. But her retirement from office in no way lessened the sphere of her activity in the social field.

Mother Mary Antoinette, general superior of the order, making her first visitation of the western missions in 1898 inaugurated the school of nursing. This work proved a valuable asset to the institution. Sister Emerita, a graduate nurse from St. Vincent's Hospital, Portland, Oregon, and a registered pharmacist, was made first supervisor and remained in charge until 1910. So rapidly did the classes increase that the housing of the young women became a problem. The solution came with the addition in 1901. This afforded temporary relief from overcrowding and added many private rooms and wards for the increased number of patients. To the great satisfaction of every one, electric lights and electric bells were installed throughout the hospital. But the luxury of an elevator was not provided in the old plant although the building was four stories high and the patient capacity had increased to one hundred thirty.

As it became increasingly evident that before long the railroads and business encroachments would render the location entirely untenable and that the building of a new hospital would soon be imperative, only indispensable repairs and alterations were made.

With keen foresight and wisdom, Sister Vincent Ferrier, who had become superior in 1902, acquired the valuable plot of two city blocks on Eighth and Browne streets. Her daring and abiding confidence in Divine Providence, and a vision of the future of Spokane made her plan for a building worthy of a metropolis.

From 1905 to 1910, with the expansion of the city, the construction of the much desired new hospital went steadily forward and became the marvel of the interested citizens. The completed structure with its massive walls and the spacious grounds surrounding it, now forms one of the most imposing architectural and landscape features of the city.

[PAGE TWENTY-FOUR]

# = fifty Golden years =====



Jesus Christ Himself being the chief cornerstone in whom all the building being framed together groweth up into a Holy Temple in the Lord. (Saint Paul)



Sacred Heart Hospital 1900-1936

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We quote from a newspaper clipping of May 7, 1907 (condensed).

"Unusual scenes attended the laying of the cornerstone of the new Sacred Heart Hospital of the Sisters of Charity of Providence. Fully 6000 persons viewed the ceremonies which were presided over by the Right Reverend Edward J. O'Dea, Bishop of the Diocese. About twelve hundred people were in the line of parade which formed in front of the old hospital on Front Street, headed by the Gonzaga cadets, the Gonzaga band, and Kirchner's band. Carriages carrying Governor Albert E. Mead, Bishop Edward J. O'Dea, and Mayor Moore then fell in line. Mother Mary Eugene, provincial superior, Sister Vincent Ferrier, superintendent of the hospital, and the sisters superior of the neighboring missions were among those present. The procession reached the new location on Eighth Avenue before three o'clock.

"Bishop O'Dea, clad in pontifical robes, assisted by the Very Reverend H. J. Goller, S. J., president of Gonzaga College, Reverend C. Mackin, S. J., Reverend A. Verhagen, Reverend T. Pypers, and Reverend J. DeKanter, attended by a retinue of acolytes clad in red cassocks and white surplices, proceeded to the second story to which the stone had been hoisted, directly above the spot where it was to be laid. The bishop read the prayers from the ritual of the Catholic Church while the attending priests responded. Taking the silver trowel he made the sign of the cross on each of the four sides of the block of stone which was then placed in the northwest corner of the building. After the ceremony the bishop addressed the crowd from the platform erected on the second floor. In part he said:

"This building is to be a monument to the charity of the church. Christ typifies the spirit of charity, the spirit of ministering to the wants of our suffering brethren. His gospel has given inspiration to the church in the noble work of Christian benevolence. The belief in the fatherhood of God and the brotherhood of man has led to the erection of this edifice for the purpose of ministering to the wants of suffering humanity. Although I do not claim that the old church has a monopoly of this great work . . . I do know that the old church was the first in the field. Though differing in faith we all meet here today on the broad platform of Christian charity and benevolence. The Sisters of Charity of Providence have been in the field for more than half a century, and if you wish to know of their work you have but to look around and see the monuments to their zeal.'

"Governor Mead and Mayor Moore in turn expressed their appreciation of the great work so successfully carried on by the noble women of pioneer days."

Sister Vincent Ferrier labored unselfishly and untiringly for the improving of the hospital, winning many friends for the institution by her kindness and exquisite courtesy. After six years of devotedness here, she was called elsewhere to begin the building of another hospital.

Since then Mother Vincent Ferrier has served for twelve years as superior of Providence Hospital, Seattle, and twelve years as provincial superior in Sacred Heart Province. At present, in spite of her advanced age, she is completing six years as superior of St. Vincent's Hospital, Portland, Oregon. Always sweetly dignified, she greets with the same gracious manner the highest dignitaries as well as the poorest unfortunate who appeals to her charity for an alms and makes everyone happier for the joy of having known her. In 1935 Mother Vincent's sixtieth anniversary took

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place. This jubilee year of Sacred Heart Hospital is one of great joy for this valiant religious, for the sorrows and tribulations of the builder are now past. She can now gather with joy the sheaves of the harvest she sowed in tears.

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Mother Mary Melanie, beloved by all members of her religious family, took up the task of completing the yet unfinished hospital in May, 1908, with Sister Mary de la Garde as supervisor. Through their united efforts the building was completed in March, 1910.

Representatives of the Great Northern Railway had called upon the sisters on August 6, 1909, to make a final decision in regard to the sale of the remainder of the old property. With the stipulation that the house must be vacated by May 1, 1910, the railroad officials deposited \$310,000.00 in the bank for immediate use. Needless to say the sisters considered this a manifestation of the watchful care of Divine Providence, and the community rendered fervent thanksgiving to God for this great financial relief. The money was promptly paid out to the workmen.

One month before the time appointed for vacating the old building, the new structure was ready for occupancy. The transfer of patients from the old to the new hospital was made during Holy Week, for Mother Mary Melanie was determined at any cost to celebrate Easter Day in the big new building on the hill. All the ambulances and other vehicles of the city were placed at the convenience of the sisters, and citizens vied with one another to be of service in the denuding of the old hospital.

All the women patients were transported to the new building where an equal number of nurses made them comfortable in new beds and saw that nothing was wanting in the service. March 24, the following day, the rest of the 130 patients were handled in the same skillful manner. Many compliments were paid the sisters for their calm composure and for the good order they maintained under such trying circumstances. It was with a pang of regret that the sisters bade a last goodbye to the home that had been theirs for twenty-four years.

The beautiful cross that crowns the summit of the central gable overlooking the city was brilliantly illuminated on Good Friday evening, proclaiming to the world that the fire of Christ's charity was still burning in the souls of men. The first Mass was celebrated Easter Sunday in the tastefully arranged chapel, and the Eucharistic King was given a permanent dwelling in the new tabernacle in the midst of His faithful followers. The formal blessing and dedication of the building took place June 3, on the Feast of the Sacred Heart. Right Reverend E. J. O'Dea, assisted by several of the clergy, officiated.

The great brick structure of six stories was the last word in hospital construction. It could accommodate three hundred patients, and had a total capacity of five hundred beds. In every department there was installed the most modern and scientific equipment to be found on the market, while competent technicians were selected to

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take charge of laboratories, x-ray, and all other necessary auxiliaries. These departments are described elsewhere in this book by the specialists in charge.

No sketch of the work done at Sacred Heart Hospital would be complete without a reference to the work of the late Sister Mary Magdalen, for years the buyer for the institution. Known to practically all of the business men of the city, she was credited by them as a woman of genius.

Once in the new hospital, for which she had previously solicited funds, she turned her attention to the landscaping of the grounds. An estimate from Olmstead Brothers of Boston asked \$11,000 for the job. Sister Magdalen only smiled, knowing that no money was available, and set about to do the work herself. Many of the men who had been fed and nursed by the hospital were pressed into service to dig the soil and prepare the ground for seed. Sister canvassed her friends for trees and shrubs and seeds. Two of the most beautiful trees in front of the hospital were the gift of May Awkwright Hutton, champion of women's rights, given in recognition of the achievement of the sisters as women.

Everywhere friends were glad to help Sister Magdalen and perhaps no more effective arrangement and planning for the grounds could have been secured than that which graces the hospital today and is a lasting memorial to a woman who will always be remembered by those who knew her. Sister Aurelia of the Sacred Heart, her successor, has continued to make the grounds what they are today, the admiration of all who view them.



The financial difficulties ever present with the opening of a new enterprise were not wanting to Sacred Heart Hospital. The large sum of money received for the sale of the old site was really not equal to half the expense incurred by the erection of the new building. In other institutions Sister Mederic had proved her exceptional business ability, and it was not without design that the general superior selected her for the next superintendent of the new Sacred Heart Hospital. Sister Mederic realized at once the gigantic task she was called upon to handle. With her usual energy she went to work. The business office was organized, with experienced bookkeepers at the desks. The superior kept a very close scrutiny on expenditures, and without stinting or denying the service in any manner enforced strict economy. Before the six years of her office had expired she saw the results of her efforts crowned with success. The house was on a firm financial basis.

These were the times when large numbers of unemployed congregated at the kitchen daily to ask for a meal. Here her compassionate heart and great charity had ample scope and it assumed a variety of forms. Sister Mederic attributed her success in the financial administration of her house to the alms distributed to the many mendicants who came to the hospital especially in the winter months.

On one occasion a police officer presented himself to inform the superior that

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only a few of those applying for a meal were really in need. The kind superior listened calmly and then begged him to point out the deserving few among those present. After a searching glance toward the starving crowd the officer simply lowered his head and departed, leaving the sister superior to continue her charities. Her sympathetic nature attracted the affection and deep devotion of her sisters, who yet speak of the noble traits of character of regretted Sister Mederic. She holds a high place in the esteem and affection of all the members of the institute.

When Sister Gaudentia was appointed to the charge of Sacred Heart Hospital, she came as one well acquainted with the work and no stranger to Spokane, since she had spent eighteen years as a nurse in the old building. When she was appointed superior of St. Ignatius Hospital, Colfax, Washington, in 1910, her departure left a great void in the nursing profession of Sacred Heart Hospital. After six years, Sister Gaudentia returned as superior. The same quiet, unassuming, tactful qualities which had characterized her early years, now strengthened by maturity, left their impress upon her work as superintendent. The present home for nurses, an annex to the greater Sacred Heart Hospital, was the crowning work of Sister Gaudentia's term of office. The construction began in 1921. True, her term of six years expired before the addition was completed and furnished, yet she was the main factor in initiating and developing this enterprise.

Her appointments as superior of St. Vincent's Hospital, Portland, Oregon, and of Columbus Hospital, Great Falls, Montana, with an intervening term spent as provincial superior, with residence in Sacred Heart Hospital, in 1926, speak volumes for her executive ability and for the esteem in which she is held. In 1934 it was the happy privilege of Mother Gaudentia to celebrate the fiftieth anniversary of her religious profession as a Sister of Charity of Providence, in company with her own sister, Sister Rosula of the Blessed Sacrament, also widely known in the Inland Empire.

The religious life of Mother Gaudentia, as she is now fondly addressed, has been noted for her charity. No one could appeal to her for an alms without receiving a response. Many were the tangible proofs accorded her that what is given in Christ's Name returns a hundred-fold. One instance will suffice to illustrate this statement. An unknown man applied to the great-hearted superior for an alms. After satisfying herself that the mendicant was worthy, she handed him a five-dollar bill and bade him God-speed. A few days later Sister Gaudentia requiring money for another needy applicant, opened the alms box to take the pennies usually found therein. To her great surprise the box contained a one-hundred-dollar bill. Thus did God seem to manifest His approval of her charity.

The school of nursing which at first occupied the sixth floor of the Sacred Heart Hospital has kept pace with the years. The large number of applications, together with the need of more nurses for the increasing registration of patients, created a pressing need for more spacious apartments for the student body.

[FAGE TWENTY-NINE]

Under the direction of Mother Praxedes of Providence, then provincial superior, and Sister Petronilla, superior of the hospital, the seven-story wing extending south from the west end of the hospital was completed in 1922 to afford a home for nurses and to enlarge the maternity and pediatric departments. When this addition was completed, furnished, and occupied, a house warming was given on May 12, National Hospital Day. The occasion attracted a large number of visitors.

Four stories of this annex are occupied by the student nurses. The fifth floor forms a distinct pediatric department, while the sixth floor, on the level with the fifth floor of the main building, furnishes the obstetrical department with many small private rooms and other accessories. The seventh floor is used for sleeping apartments.

The power plant and laundry were enlarged at this time. They form an important adjunct to the functioning of the hospital.

After the transfer of the school of nursing to its new home, much greater space in the main building was available for surgical purposes. The x-ray, laboratory, and physio-therapy equipment was transferred to the main corridor and installed in commodious quarters.

Sister Petronilla's excellent judgment and financial ability have been a very decided asset to the institutions which she has governed. In 1922 she was transferred to St. Vincent's Hospital, Portland, Oregon, the largest establishment of the order in the West. In 1928 she was appointed provincial superior of the Province of the Sacred Heart, with headquarters in Seattle.



When Sister Mary Alice came to Sacred Heart Hospital as superior, she was no stranger to the workings of the institution. Twice before had she been stationed here as a bookkeeper. The soul of hospitality and goodwill, she ever had a warm welcome for the stranger at her door. Her kindly manner and exceptionally cheerful disposition are qualities greatly to be desired in an institution for the sick. Sister Mary Alice has made it her particular aim to establish model housekeeping and especially improved service in the institution. During her six years, 1926 to 1932, most of the rooms were redecorated. New Simmons beds and beautyrest mattresses, new drapes, and furnishings contributed to the comfort and attractiveness of the rooms.

In the kitchen new electric ranges replaced the coal and wood stoves. Everything that could be found to lessen the drudgery of the culinary department was cheerfully furnished to meet the needs of the cooks.



Sister Blasius, present superior, was appointed in November, 1932. Her long experience as supervisor of schools of nursing in Saint Vincent's Hospital, Portland, Oregon; Saint Joseph's Hospital, Vancouver, Washington; Providence Hospital, Oakland, California; as well as the general nursing in other hospitals of the order, qualified

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# = fifty Golden years =

her for the position of superintendent of Sacred Heart Hospital. It has been her aim even to surpass the standards set by her predecessors. Despite the depression years the patient census has increased, requiring more outlay and a greater number of student nurses. Anyone who visits Sacred Heart Hospital will be impressed with the freshness of the mural decorations and the general good order that reigns. The great number of unemployed who find their way to the kitchen door daily and are given a generous portion bespeaks the generosity and charity of the superior.

### A Record of the Years

Number of patients admitted in 1887	354
Number of patients admitted to 1910	40,793
Total number of patients admitted to July 1, 1936	175,063
Total number of infants born to July 1, 1936	13,359
Average number of patients per year for ten years	7,500
Average number of hospital days per month as of January, 1936	6,500
Number of charity cases cared for	21,543
Number of free days to charity cases	321,561
Number of meals served to the outside poor	290,769
Visits to the poor and sick in their homes	10,314
Alms and clothing distributed to the needy	\$47,105.00



Courtesy Spokane Camera Club Entrance—Winter Scene

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## Appreciations

His Excellency Most Reverend Charles D. White is worthy of our profound respect, unswerving loyalty, and heartiest cooperation. Spokane is indeed to be congratulated for the splendid record of achievements already ascribed to his energetic development in the field of Catholic action. May His Excellency have a long and glorious reign as bishop of Spokane.

It is said that success in almost any undertaking depends largely upon the sympathy which supports its incipient stages. Then in large measure credit is due to the whole-hearted cooperation which has been accorded to the work of the Sisters of Charity of Providence by the Reverend Jesuit Fathers, who first requested the founding of the hospital in their field of labor, and who have during each succeeding year upheld the traditions of their noble predecessors. The debt of gratitude that the hospital owes to its chaplains among the Jesuit Fathers is great. Among those who served, we may mention the Reverend Fathers John Nicholson, I. Vasta, A. Van der Velden, G. Leggio, P. Barcelo, Charles Greenwood, acting chaplain for fourteen years, W. H. Bennett, and the present chaplain, Reverend Harold A. Reily.



This chronicle would not be complete without a special tribute to the late Bishop Edward J. O'Dea, who, from early manhood, through the days of priesthood, and during his long episcopacy, was ever the staunch friend, the devoted father and advisor of the Sisters of Charity of Providence on the Pacific coast. To this eminent pastor of souls we owe a lasting debt of gratitude.

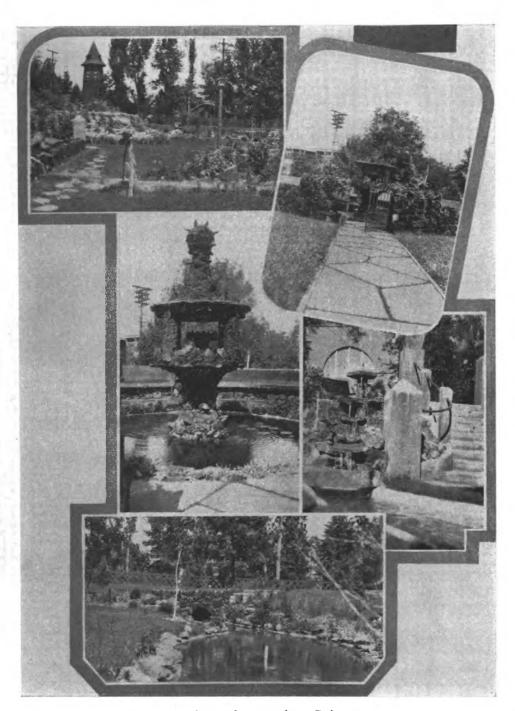
To His Excellency, Most Reverend Augustine Schinner, gratitude is also due for many favors granted to the hospital during ten years of his episcopacy.

The reverend clergy of the diocese in general have always been most helpful in seconding the work of the sisters. The constant moral support of these zealous priests, ready at all times to be of service to the institution, merits the deepest gratitude and loyalty of the management. May God bless their arduous labors for souls.

Without the cooperation of the visiting staff of physicians the hospital could never have attained the success it enjoys today. The splendid harmony which has always existed among the doctors has won for the Sacred Heart Hospital a prestige which is a source of pride with the people of Spokane. It is through the high standards which the physicians set for themselves that class "A" was bestowed on the institution in which they chose to do their work. For this and all the noble deeds of healing they have brought about under the roof of Sacred Heart Hospital, the management wishes to express most hearty thanks, loyalty, and appreciation.

The Sacred Heart Hospital Alumnae has been a great factor in the success which today crowns with the beauty of half a century's maturity the work of fifty golden years.

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A garden is a lovesome thing, God wot!

Rose plot,
Fringed pool,
Fern'd grot—
The veriest school of peace.

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The hundreds of young women who have gone forth from the Sacred Heart school of nursing have ever been outstanding in their chosen profession.

The courtesy and hospitality of Spokane is proverbial. The spirit of kindliness and fraternal goodwill that has ever existed among the citizens of this charming city is one of our sweetest recollections. A more friendly group of people would be hard to find. It is customary with the Sisters of Charity of Providence to foster among themselves the spirit of loyalty and gratitude toward their benefactors; therefore we assume the pleasant duty of paying tribute to the spirit of friendship and respect manifested by the people of Spokane toward this institution.

The many thousands of patients who have passed through the portals of the hospital and have been nursed back to health have, in great measure, contributed to the success and recognition which the institution enjoys in its golden year of service to humanity.

# A Distinguished Visitor

URING the summer of 1923, President Warren G. Harding, accompanied by the first lady of the land, made a tour of the Pacific coast. Arriving in Spokane on July 2, the presidential party was escorted by the officials of the city over the principal scenic routes leading to the beauty spots surrounding the city of Spokane. Word had reached the hospital that the presidential parade of automobiles would return to town by way of Grand Avenue. This route led to the door of Sacred Heart Hospital where a large number of disabled soldiers were being hospitalized. In order to give these heroes of the late war an opportunity to meet the chief executive every veteran that could leave his bed was transported by wheel-chair, or stretcher, or cot to the lawn on the south side of the building. Here likewise congregated a large number of the personnel, sisters, nurses, employees, and visitors. The president's automobile parked, and amid cheers His Excellency stepped to the curb. After the prolonged greetings had subsided, the president honored each veteran with a handshake and some word of kindly inquiry concerning his progress toward rehabilitation. His Excellency manifested particular interest in the children who were visiting their disabled fathers. After courteously shaking hands with each sister the president waved a smiling goodbye to his interested audience and proceeded on his journey amid a tumult of applause.

It was only a glad afternoon
As he sped along the way,
But it spread a golden glory
O'er the passing hours that day.

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Mother Praxedes of Providence General Superior

OTHER PRAXEDES OF PROVIDENCE, well known on the Pacific coast as provincial superior, was elected general superior of the Sisters of Charity of Providence, July 5, 1934. She now holds the highest honor that can be bestowed on a member of the institute. As general superior she governs a religious body of 3,264 religious, scattered in 112 establishments—academies, hospitals, orphanages, schools for the deaf mutes, homes for the aged, insane asylums, and foundling asylums.

Forty-five years of her religious career were lived in the Pacific Northwest. Mother Praxedes of Providence has served as superintendent of St. Paul's Hospital, Vancouver, British Columbia; of Providence Hospital, Seattle, Washington; and of Sacred Heart Hospital, Medford, Oregon. For six years she was acting provincial in the Province of Holy Angels, western Canada; from this important post she was recalled to the mother house in Montreal, Canada, to assume the charge of general superior. As provincial superior for six years in the Province of the Sacred Heart in Washington, Mother Praxedes of Providence acquired extensive knowledge in building. Several of the most modern institutions on the coast and in British Columbia were planned and erected under her able administration.

Under her supervision, and with the assistance of Sister Joseph Anselm, the home for nurses was built and completed in 1923 as an annex to Sacred Heart Hospital. As local, provincial, or general superior, Mother Praxedes of Providence has distinguished herself by a great sense of justice and the most practical good judgment. In every possible manner she seeks at all times to supply whatever is needed in building or equipment to satisfy the service. Mother Praxedes is greatly beloved by all who have the good fortune to know her.

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### Medical Board



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Dr. D. G. Corbett Dr. J. W. Lynch Dr. A. E. Lien

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Medical Staff

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# The Staff

ROB'T L. ROTCHFORD, A.B., M.D., F.A.C.S.

HE word staff, as applied to a hospital, does not as in common usage apply to the entire personnel of the institution but rather to the physicians and surgeons who are not only engaged in the practice of their profession in the hospital, but who also take an important part in its activities aside from the actual treating of patients. For example, there are physicians and surgeons who do the major part of their work at one or more of the other hospitals on whose staff they may be members, yet have occasion to treat patients in the Sacred Heart Hospital while not having a vote in affairs of this institution. There are therefore, as in other similar institutions, staff and non-staff physicians and surgeons practicing their professions.

The medical staff of Sacred Heart Hospital has changed from time to time, not only in its personnel but in its activities aside from the actual practice of medicine and surgery. Prior to 1913, very little was done by the doctors aside from their professional duties. During that year the American College of Surgeons, in order to standardize hospitals, formulated a set of plans or if you choose to call it such, laid down rules governing the actual operating of hospitals in general. In these rules or modus operandi, the keeping of records, the running of a well-equipped pathological laboratory with examination of all tissues removed from patients, the minimum training, practical and theoretical, for the nursing staff, the establishing of an interne service, and many other like requirements were set forth. According to the manner in which these rules of the American College of Surgeons were met, hospitals were to be classified with a rating of "A," "B," or "C." Obviously therefore, as previously stated, duties other than the care of patients became the lot of the medical man. The necessity for the formation of a regular, active, energetic staff was evident. Scarcely had this organization gotten under way, when the World War caused an interruption.

The war being terminated, the aim of the American College of Surgeons was executed vigorously. Sister John Gabriel was delegated to organize a staff in every hospital conducted by the Sisters of Providence. Sacred Heart Hospital, being a member of this group, at once set out to form its medical staff. Invitations were sent to all licensed physicians of the city and county, calling a meeting to be held at the Sacred Heart Hospital Thursday evening, August 28, 1919, to acquaint them with the plans and hear a discussion of the same. One hundred forty doctors attended. Sister John Gabriel called the meeting to order and briefly set forth the conditions and requirements exacted by the American College of Surgeons to obtain a class "A," "B," or "C" rating. Each physician was notified that the hospital would be open to him, provided he conform to the standards set forth by the American College of Surgeons. Immediately an election took place to name officers to govern

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Medical Staff

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the practice of medicine and surgery in the hospital and in the future to pass on the applications of those who should wish to become members of the staff. By unanimous choice, Dr. Henry B. Luhn was made President; Dr. J. G. Cunningham was named Vice-President; Dr. Carroll Smith, Secretary-Treasurer; Doctors R. J. Kearns, H. P. Marshall, G. A. Downs, C. E. Eikenbary, and O. T. Batchellor were elected to serve on the Executive Board. Doctors Wm. O'Shea, H. E. Wheeler, C. M. Doland, W. S. Frost, and Stanley Titus were appointed as a committee in charge of records. Following earnest deliberation, a set of by-laws was adopted. The staff now began to function. In 1920, the hospital received a class "A" rating. This rating has been continuously maintained.

Yearly progress has taken place and Spokane may well be proud of the Sacred Heart Hospital. It has been frequently stated by nationally known medical authorities that no city of its size in the entire country can boast of a better equipped and functioning hospital. Its laboratories, x-ray and pathology, diet kitchens, obstetrical, pediatric, surgical, and medical departments are second to none, made so by the never ending efforts and loyalty of its staff, combined with the one hundred per cent cooperation of the management, and the efficiency of the nursing personnel. The staff greatly appreciates the cooperation and encouragement of the sisters who are in charge of the hospital.

The staff, now numbering seventy-four doctors, is composed of men well trained to carry on their chosen profession. We may justly know that the staff is truly efficient, for its members measure up to the yardstick that guarantees ability; namely: graduation from recognized medical schools, ample interneship and residency with proper post-graduate training. There exists no institution in the United States that can render a service or treatment, be it special or otherwise, that the staff of the Sacred Heart Hospital is not capable of thoroughly and efficiently giving.

As president of the staff, it is my wish that our members continue their whole-hearted cooperation and observance of rules laid down by the American College of Surgeons; that we continue our interest in the scientific meetings which by requirement are held at least monthly; that each and every one feel it not only his privilege but his duty to make suggestions and recommendations for the betterment of the hospital. We may rest assured all constructive recommendations will, where humanly possible, be carried out by the managing Sisters, be these recommendations requests for additional equipment, a change of service to the patient, or anything that leads towards perfection in the care of the sick. If the present spirit of our staff continues, there exists not a doubt that when the progress and hospital achievements of the present come to be tabulated, they will in no small degree measure up to those of the last two or three decades and perhaps lead us on to heights, the level of which we had never anticipated.

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Medical Staff

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## In Memriam



Doctor Henry B. Luhn

MONG the names of the medical men that are linked with the history of the Sacred Heart Hospital, that of Dr. Henry B. Luhn stands high. Dr. Luhn was born in New York, August 14, 1867. His father, the late Major Gerhard L. Luhn, a native of Germany, had a distinguished career in the United States Army, which he joined in 1852. He fought in the Mormon War of 1858 and throughout the Civil War.

Dr. Luhn was graduated from Notre Dame University, entering the college when only sixteen and completing the course when nineteen. He was the first captain of the famous school's football team.

After leaving Notre Dame, he entered the University of Pennsylvania Medical School and was graduated from there in 1891 when only twenty-three. Dr. Bloodgood, later of Johns Hopkins; Dr. John Clark, late professor of gynecology at the University of Pennsylvania, and Dr. Park Weed Willis of Seattle were classmates of Dr. Luhn.

In 1892 he came to Spokane where he practiced until the time of his death. In December, 1931, he was injured in an automobile accident, and while convalescent from his injuries, he developed influenza and died suddenly, February 10, 1932.

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## In Memoriam

He was identified with many prominent positions in the medical profession. He was first president of the reorganized staff of the Sacred Heart Hospital and the Spokane County Medical Society, and during the World War served as a member of the draft board. He was a member of the American Medical Association, the American College of Surgeons, and the North Pacific Surgical Association, of which he was among the founders. He was division surgeon for the Union Pacific Railroad for many years.

Dr. Luhn was among the foremost surgeons of the community. He was bold without being rash, and his excellent surgical judgment was respected among his colleagues. His loyalty to Sacred Heart Hospital was unswerving and the hospital authorities always found in him a clear-headed and dependable advisor.

(Contributed by Dr. Charles M. Doland)

Doctor John Busby, a very close friend of Sacred Heart, passed away in the hospital, March 9, 1933. As a token of his appreciation of the work of the sisters and his medical confreres, the eminent physician willed his medical library to the institution.

The books and cases now occupy a place in the physicians' consultation room in the surgical department. The management here expresses regret for the untimely death of Dr. John Busby and records sincere appreciation of the valuable gift.

Dr. X. L. Anthony	Dr. Geo. Gray	Dr. W. E. Preston
Dr. W. J. Austin	Dr. G. H. Green	Dr. G. W. Roberts
Dr. A. C. Baker	Dr. S. B. Hopkins	Dr. C. F. Rigg
Dr. N. M. Baker	Dr. J. Johnson	Dr. L. A. Robinson
Dr. C. G. Brown	Dr. A. C. Johnson	Dr. G. P. Robinson
Dr. P. Byrne	Dr. C. S. Kalb	Dr. T. A. Russell
Dr. C. E. Butts	Dr. J. H. Hall	Dr. G. A. Rohrer
Dr. J. Busby	Dr. A. R. Lundgren	Dr. D. L. Smith
Dr. J. H. Broderecht	Dr. G. W. Libby	Dr. M. F. Setters
Dr. J. P. Driscoll	Dr. H. B. Luhn	Dr. Wm. Sellars
Dr. C. T. Doolittle	Dr. M. Langworthy	Dr. C. N. Suttner
Dr. F. A. Decker	Dr. H. Martin	Dr. J. A. True
Dr. F. N. Essig	Dr. C. K. Merriam	Dr. Stanley H. Titus
Dr. C. F. Eikenbury	Dr. J. B. Munley	Dr. W. Webb
Dr. A. Fisher	Dr. H. P. Marshall	Dr. J. D. Wendall
Dr. E. Flehme	Dr. C. K. McDowell	Dr. F. P. Witter
Dr. W. S. Frost	Dr. H. H. McCarthy	Dr. C. H. Weisman
Dr. B. R. Freeman	Dr. P. D. McCormack	Dr. Lorenzo Walter
Vouchsafe, O Lord, for Thy Name's sake to reward with eternal life		

all those who do us good.

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Retired

Dr. T. L. Catterson Dr. George Downs Dr. M. B. Grieve

Dr. R. J. Kearns Dr. W. O. Wisner Absent

Dr. O. T. Batcheller

Dr. J. A. Balsiger

Dr. R. E. Elvins

Dr. P. J. Gallagher

Dr. G. E. Price

Dr. A. E. Stuht





Dr. F. Harvey

Dr. J. H. Schmitt Dr. P. H. Reierson Dr. H. Hinden

Dr. G. Luger

# Interneship

F. I. BURNS, M. D.

N keeping with the standards of progress manifested in the hospitals of the Sisters of Charity of Providence and the regulations for standardization as set by the American College of Surgeons, the Sacred Heart Hospital adopted the system whereby graduates of class "A" medical schools are enabled to complete their fifth year of medicine as internes in an accepted hospital. The first interne to enter Sacred Heart Hospital was Doctor R. E. Elvins who received his appointment July 1, 1917. Called to the service of his country during the World War, as a medical officer, he is at the present time in the service as Flight Surgeon Major, Medical Corps, United States Army. Doctor James W. Mounsey from Creighton University was the next interne to register, completing his work July 1, 1919.

The following year, due to the small number of graduates from medical schools, Sacred Heart did not have internes. July 1, 1920 saw the interne class established with four men from eastern schools, Doctor F. J. Burns, Doctor P. B. Romonek, Doctor McGrath, and Doctor Armin Fischer. At present five internes are completing their medical education, with all the facilities of a three-hundred-bed hospital.

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HONORABLE JUDGE JAMES M. GERAGHTY

Justice of the State Supreme Court

Legal Advisor

From the days of his first appearance at the State Legislature in 1897, an event incident to his first meeting the Sisters of Charity of Providence, Judge James M. Geraghty has been their most loyal and interested friend.

The material progress of Sacred Heart Hospital is in no small measure due to the keenness of his judgment and the wisdom of his counsels. For services of inestimable value rendered by Judge Geraghty to the Sacred Heart Hospital, the management here expresses a lasting debt of gratitude.

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## The Chapel

HILE the chapel of the Sacred Heart Hospital cannot boast of spacious architectural beauty, nevertheless this modest House of God has been the scene of several noteworthy church festivals, and has all the appearance of a church in the number of the inmates of the institution who regularly assist at the daily celebration of Holy Mass by the resident chaplain.

One of the outstanding events in the annals of the hospital is the Ordination to Holy Priesthood of the Reverend P. H. Moffatt, now parish priest of Tekoa, Washington. Because of the grave illness of his aged mother, who was an inmate of the hospital and who would otherwise have been unable to attend the ordination, His Excellency, Most Reverend A. F. Schinner, then Bishop of Spokane, graciously consented to perform the ceremony of ordination in the chapel of Sacred Heart, where Mrs. Mary Moffatt with her three daughters, members of the Holy Names Order, could witness the imposing services. Young men from the Jesuit House of Studies at Mount Saint Michael's furnished the music, adding splendor to the occasion, while seventeen priests were present to assist His Excellency.

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The chapel was the scene of another unusual event when Reverend Pietro Fumasoni Biondi, Apostolic Delegate to the United States, accompanied by His Excellency, Most Reverend Charles D. White, and the Reverend Celestine Daly, O. P., secretary to the Delegate, assisted at Benediction of the Blessed Sacrament. His Excellency, the Apostolic Delegate was then escorted to the assembly room where he met the Sisters and expressed his great interest in the hospital work carried on by the Religious of Charity of Providence in all the large cities of the Pacific Northwest.

The consecration of the Cathedral of Our Lady of Lourdes in 1930 was co-incident with the fiftieth anniversary of the first Holy Mass celebrated in the city of Spokane. On that occasion it was the privilege of Sacred Heart Hospital to receive the following distinguished guests: Most Reverend Edward J. Hanna, Archbishop of San Francisco; Most Reverend Edward D. Howard, Archbishop of Portland, Oregon; Most Reverend Robert J. Armstrong, Bishop of Sacramento, Consecrator of the Cathedral; Most Reverend Edwin V. O'Hara, Bishop of Great Falls; the late Most Reverend George J. Finnegan, Bishop of Helena; and the Most Reverend Charles D. White, Bishop of Spokane.

All of these prelates in their respective dioceses had had close connections with the Sisters of Charity of Providence. The gracious friendliness of these dignitaries of Holy Church and the honor of having them offer the Holy Sacrifice of the Mass in our modest chapel was a signal consideration for the institution and the memory will linger long in the hearts of the religious.

In conclusion fond memory leads our thoughts to the familiar forms of our dear departed sisters who seem to hover in our midst as when they trod this land of their adoption. We think of them as pleading, even more potently than when they worshipped on Columbia's shore, for the continued prosperity of their beloved institute. It was their happy privilege to mould the shape and character of the works of Mother Gamelin as they are found in this year of grace on the slopes of the mighty Rockies.

The spirit of those who have gone before has left its imprint on the activities of the present; their fortitude bids their successors to keep hearts high amid the waves of sin and calamity that surround this mortal life. Their great abiding faith today finds expression in the spirit of service which permeates the lives of their successors in the cause of Christ and the neighbor. With these virtues of fortitude and faith as foundation stones, there is built a structure of wisdom, compassion, and love, roofed over with peace which cannot be shaken, for it is the peace of the Kingdom of God.

By the grace of God, Sacred Heart Hospital stands today as a gleaming jewel in the valley of sunshine, its illuminated cross radiating the mercy and kindness of the Saviour, dispelling the gloom of anguished hearts, relieving physical pain, spreading the beneficence of God's grace and healing. Within the walls of Sacred Heart Hospital dwell other generations of Daughters of Charity, determined to carry on with God's blessing, the work of their predecessors unto the century mark.

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Right Reverend Monsignor A. Verhagen

EVEREND A. VERHAGEN, newly ordained, was assigned duty in Spokane, in 1892, as assistant to Reverend Emile Kauten, then pastor of Our Lady of Lourdes Church, which at that time occupied a site on Main Street near the old hospital. Father Verhagen had rooms at the hospital and acted as chaplain during the seven years following. In this position he endeared himself to all, especially to those patients who needed spiritual comfort. His departure in 1899 to become pastor of St. Patrick's Church, Colfax, Washington, was felt keenly at the hospital as well as in the city where he had many devoted friends. Of his charities to the poor he kept no record. They are written in the Book of Life.

The return of Father Verhagen to Spokane in 1901 was hailed by all classes. His thirty-nine long years of residence in Spokane found him ever interested in Sacred Heart Hospital, where he faithfully visited the patients of his parish and the personnel. Of especial interest to him were the poor receiving hospitality.

When Father Verhagen, pastor and builder of Our Lady of Lourdes Cathedral, became the recipient of papal distinction, April 28, 1931, in the appointment of domestic prelate in the papal household, with the title of Monsignor, the news gave joy to none more than the old friends at Sacred Heart Hospital. Monsignor Verhagen is the most widely known and the most beloved priest in the Diocese of Spokane. Of modest and retiring nature, indefatigable, and generous to a fault, he has brought distinction not only to himself but to the city of Spokane in which he labored for the best part of his life. Monsignor Verhagen has followed the progress of Sacred Heart Hospital since 1892 and is worthy of a tribute in this Book of Memories.

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## Sacred Heart Hospital Alumnae Association

Officers for 1936

President

Mrs. Mae Zahn, R.N., '14 Vice-President Miss Clara Trapp, R.N., '31

Secretary

Treasurer

MISS NICOLINE GEORGER, R.N., '34

Miss Dorothy Daigle, R.N., B.S., '30

Board of Directors

MISS MADELINE BARRY, R.N., '30, Chairman

MISS ALDEAN DEMPSEY, R.N., '27

Miss Katherine Schaller, R.N., '34 Miss Mary Sullivan, R.N., '20

Time of Meeting: 8:00 p. m. third Tuesday of each month.

Place of Meeting: Nurses' Reception Room, Sacred Heart School of Nursing.

Adjustment Committee

Miss Aldean Dempsey, R.N., '27 Miss Patricia Barry, R.N., '35 Miss Leah Fitzgerald, R.N., '21

Social Committee

Miss Dorothy Hanson, R.N., '34 Miss Mary Sullivan, R.N., '20 Miss Dorothy Daigle, R.N., B.S., '30

Visiting Sick Committee

MISS JULIA ROONEY, R.N., '34

MISS MONSENE HOLDERSON, R.N., '21

MISS MARY O'BRIEN, R.N., '30



HE Sacred Heart Hospital Alumnae Association was organized in 1907 — nine years after the opening of the School of Nursing. Twenty-four of the then thirty-two graduates became members with Miss Ella Sullivan (1900) as the first president.

From its inception, the Alumnae Association held as its objectives the furthering of all means to promote the professional and educational advancement of nursing, to increase the proficiency of its members, and to keep them in contact with the work of the student body.

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At first the united strength of the small group of graduates did much to encourage the individual nurse to overcome the many obstacles in her pioneer work and to help her maintain the standards and ideals set by her school. As the organization grew with the years, these ideals have met expression in many ways. They have helped the association keep pace with the constant advancement in the field of nursing and nursing education; they have stimulated alumnae members to fill many positions of responsibility faithfully and successfully.

With the break of the World War, many members of the alumnae answered the call of the Red Cross and distinguished themselves in the service of their country.

We are justly proud of those who joined the hospital units overseas and courageously devoted themselves to duty there. Especially deserving of mention is Miss Norene Royer (1916) who made the greatest sacrifice any country could ask of its subjects—that of offering her life in the service of her flag. Among the others whose faithful services reflect the greatest glory upon the nursing profession of America and especially upon their school are:

Mary Conyard, '07; Mazella Davis, '13; Rose Eilman, '15; Mary Everett, '15; Johanna Endres, '15; Ruth Fry, '14; Minnie Goetchell, '13; Myrtle Goetchins, '13; Louise Gravelle, '12; Lillian Gray, '14; Lucille Huetter, '15; Marjorie Ide, '14; Myrtle Johnson, '14; Theresa Langer, '16; Lillian Lemke, '05; Helen Lester, '06; Leslie Lettrick, '15; Mary MacCosham, '17; Bernardine Moran, '16; Eva Morrison, '14; Eleanor Murphy, '17; Bess Petty, '16; Hazel Rein, '12; Martha Rockwell, '13; Norene Royer, '16; Mary E. Russell, '17; Olive St. Cyr, '17; Fay Storer, '14; Bertha Thayer, '17; Bertha Thurlon, '14. Special recognition should be given to Miss Thurlon who was the only graduate nurse from this district to serve for twenty-two consecutive months in hospital units overseas.

Membership is granted to any graduate of the Sacred Heart School of Nursing who is in good standing. Meetings are held regularly each month. During the past few years a definite effort has been made to feature educational meetings. Lectures by members of the staff and outside speakers, and demonstrations of the newer nursing techniques proved to be very profitable, not only in promoting interest educationally but also socially. One of the activities of the alumnae each year is to send delegates to the state and national conventions. Reports of the proceedings are submitted at the next meeting. The association holds an annual reception tea for the graduating class at which time members are officially installed.

The rapid growth and keen interest shown in the activities of the Alumnae during the first twenty-nine years of its life have proved to be of invaluable benefit to its members—hence to the profession in general. May the future years find continued growth, added interest, and increased achievement for the Alumnae Association of the Sacred Heart Hospital.

ANN ZALESKY, R.N., B.S.

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(Above)-Library

(Below)—Lounge Room

SCHOOL OF NURSING
Room (Above)—Tea Room

(Below)-Tennis Court

#### Nurses

I want to say a little prayer
For all the nurses everywhere;
For her who gently pressed my hand,
And tried so hard to understand
The burning heartache, and the pain,
And somehow made me smile again.

For her who came in dead of night, When torturous dreams possessed my sight, When I cried out for rest, for peace, For help, for comfort, and release. Then from that dream of black despair I woke to find her standing there.

For her who roundly scolded me,
Made my rebellious spirit see
That I must do the things I should,
Obey the orders and be good:
No place of mine to quarrel with fate,
My job to only lie and wait.

For her who did so patiently
Those tiresome, endless tasks for me,
Those little things that irk and bore:
The things I never thanked her for;
And as she did them, to the end
She made me feel she was my friend.

For all the nurses everywhere, With men and women in their care: For stalwart spirits, tireless feet, Arms that are strong, smiles that are sweet; For everyone I say a prayer: "Oh God, be with them everywhere!"

—FLORENCE VAN GILDER, St. Helens, Oregon.

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# Sacred Heart School of Nursing

"For God and Humanity" SISTER MARY, R.N., B.S.

ORTH from the old, constantly emerges the new, steadily on, new growth built on the time-tried old, keeping fast the good, adding the better, trying this, experimenting with that, onward steadily moves true and real progress. Thus have grown the honored institutions of civilization. Thus grows anything that is to have permanent worth and stability.

Opened in 1898 the Sacred Heart School of Nursing was indirectly the response to a need made sharply felt by the Spanish-American War. War came suddenly, and also, suddenly, epidemic typhoid and yellow-fever raged among the troops in camp at home and in Cuba. Mobilization of the graduate nurses of the country showed the pitifully inadequate number, but those who served proved conclusively the value of the graduate nurse. Concurrently with this national need, the local need for nursing service was becoming acute. The Sisters of Sacred Heart Hospital, encouraged and even urged by Mother Mary Antoinette, then superior general of the Sisters of Charity of Providence, began to associate with themselves, young women in the care of the sick. Thus began the first school of nursing in the State of Washington. In the beginning the course was but two years; so we find the first class graduating at the turn of the century. The course was increased to three years for the second class; thus, almost immediately we see evidence of that policy which has led Sacred Heart School of Nursing forward throughout the years, the policy which adds here, prunes there, always in the effort to strengthen.

So on through quiet years, from the old hospital by the river into the new one on the hill, came this changing group of nurses, young women hearing the Master's voice, "Inasmuch as ye did it unto one of these my least brethren ye did it unto Me," asking to be taught to care for the sick. Then constantly were they further enlightened and admonished as to how the Master wanted His work done: "Love thy neighbor as thyself for love of Me;" "Suppose that patient were your Father or Mother;" "The poor are God's own;" "To be a good nurse one must first of all be a good woman;" "Everything done in the presence of the Master;" "The medicine must be given on time;" "Wash your hands between each service you perform;" and thus, on and on through the hours at the bedside and in the classroom until after three years, those who had amply demonstrated integrity, devotion, fortitude, and courage coupled with intelligence and good judgment, were granted a medal and a diploma testifying that they were graduate nurses.

This period of quiet growth coincided with the early part of what has been called the second era in nursing education in the United States. The first era was that period from the founding of the first schools of nursing in this country in 1873 until about twenty years later. Due to too rapid expansion there was a slump in standards in

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A Group of Student Nurses

some of these older schools about 1893. However, at the same time nurses themselves were becoming aware of the danger and were already organizing to carry on more effectively the crusade for higher standards. Sacred Heart School of Nursing, organized in 1898, thus came into being at a most auspicious time, just when this crusade had gotten under way and could best help the younger school to avoid pitfalls; and the school itself has not been laggard but has always kept well to the forefront in the struggle for higher standards.

So on through these quiet years to another war, the World War, and the nation again mobilizes its nurses. Sacred Heart sends forth a goodly band, thirty in all, and stretches its resources to the utmost in the effort to prepare more to send and to replace, for the local need, those who have left. Many of those who left did not return. One, Norene Royer, class of '16, was the only nurse from the State of Washington who died overseas. Some remained in government service and some engaged in the welfare work which had become so poignant a need, especially for the children, in the war-swept nations of Europe after the tide of battle was over.

The war brought many changes in its wake. The exodus it started continued. Before the war, the graduates were very conservative and disposed to stay closely by

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A Group of Student Nurses

the home hospital; they were contented to engage in private or sometimes in general duty. There seemed after the war to be an urge to take post-graduate courses preparatory to entering institutional or public health work which was rapidly growing in its scope with an ever-increasing demand for the well-prepared nurse. This movement has continued, until today we find comparatively very few of our graduates engaged in private-duty nursing. Some, of course, marry, but the great majority of living Sacred Heart graduates are scattered over the face of the earth and are found in every field open to the modern professional nurse. From the accounts we hear of them they everywhere bring honor to their Alma Mater, for they are everywhere faithful and loyal to their traditions, devoted and staunch in upholding the ideals and standards planted in their youthful hearts.

What does the future hold for Sacred Heart School of Nursing in this changing chaotic era? We know not and neither are we to know except that, as long as she exists, she will continue to do as she has done in the past. To the best of her ability, making use of every means available, she will continue to educate young women to happy useful lives as professional nurses, building the arc and the newer science of nursing on the firm foundation of the true spirit of nursing, that spirit ever old and ever new, that spirit of service, "For God and Humanity."

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# Graduates of Sacred Heart School of Nursing

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Class of 1900

Miss Ella Sullivan, R.N. Miss Annie Arnold, R.N.

Class of 1901

Miss Anna Deems, R.N.
Miss Rose Darcy, R.N.
Miss Alice Brown, R.N.

Class of 1902

Miss Frances Butler, R.N.
Miss Mary Keating, R.N.
Miss Mamie White, R.N.

Class of 1903

Miss Nellie Raney, R.N.
Miss Katherine O'Reilly, R.N.
Miss Azeal Davidson, R.N.
Miss Azeal Davidson, R.N.

Class of 1904

Miss Grace Honey, R.N. Miss Minnie Getchell, R.N.

Class of 1905

Miss Elizabeth Marsh, R.N.
Miss Lily Lemcke, R.N.
Miss Janette Guy, R.N.

Class of 1906

Miss Nora Daly, R.N.Mrs. May Reinohl, R.N.Miss Helen Lester, R.N.Miss Mary Russett, R.N.Miss Clara Pellanda, R.N.Miss Margaret Wallace, R.N.

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#### Class of 1907

Sister Vincent Ferrier, R.N.
Sister Raymond Nonatus, R.N.
Sister Rosula of the Bl. Sac., R.N.
Sister Gaudentia, R.N.
Sister Crescent, R.N.
Sister Louis Alphonse, R.N.

Sister Ethelbert, R.N.
Sister Alfrida, R.N.
Miss Hildegard Freidman, R.N.
Miss Alice Hennessey, R.N.
Miss Mary Conyard, R.N.

Miss Minnie Harrison, R.N. Miss Margaret Boyd, R.N.

Sister Joseph Anselm, R.N.

#### Class of 1908

Miss Theresa Murphy, R.N. Miss Noreen McAstocker, R.N.

Sister Methodius, R.N.

Miss Margaret McDevitt, R.N. Miss Anna McGuire, R.N.

Miss Delphine Baima, R.N.

#### Class of 1909

Miss Nellie Costella, R.N. Miss Elizabeth Rien, R.N. Miss Ann Walsh, R.N. Miss Myrtle Fouts, R.N.

Miss Margaret Torkelson, R.N.

### Class of 1910

Sister Pancratius, R.N. Miss Lena Kroiss, R.N. Miss Caroline Becker, R.N. Miss Florence Mockett, R.N. Miss Georgianna McKenzie, R.N. Miss Genevieve Lynch, R.N.

### Class of 1911

Miss Anna Schmitz, R.N. Miss Elsie Parks, R.N. Miss Mary Hennesy, R.N. Miss Bertha Block, R.N. Miss Iola Scott, R.N. Miss Mary Cline, R.N.

#### Class of 1912

Miss Hazel Rien, R.N. Miss Louise Gravelle, R.N. Miss Agnes Fallon, R.N. Miss Marie Nethaway, R.N. Miss Josephine Pellanda, R.N. Miss Mae Fonder, R.N.

Miss Maude Davis, R.N.

#### Class of 1913

Miss Laura Cochrane, R.N. Miss Alice Benway, R.N. Miss Emelia Fransen, R.N. Miss Christiana Ashton, R.N. Miss Barbara Lautwein, R.N. Miss Martha Rothwell, R.N. Mrs. Martha Willis, R.N. Miss Agnes Harwood, R.N. Miss Mazel Davis, R.N.
Miss Elizabeth Chambers, R.N.
Miss Sophia Wickstrom, R.N.
Miss Evangline MacGreevey, R.N.
Miss Eleanor Clear, R.N.
Miss Rosamond Lekevitz, R.N.
Miss Gabriella Delipine, R.N.

Miss Myrtle Goetchis, R.N.

Miss Agnes Wilson, R.N.

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#### Class of 1914

Sister Servule of Rome, R.N.
Sister Mary John the Baptist, R.N.
Sister Frances Arthur, R.N.
Sister Mary Fides, R.N.
Miss Lillian Gray, R.N.
Miss Grace MacDougall, R.N.
Miss Bertha Thulon, R.N.
Miss Winifred Byrne, R.N.
Miss Marjorie Ide, R.N.
Miss Lottie Mae Whitworth, R.N.
Mrs. Eva Peight, R.N.
Miss Bertha Macklin, R.N.
Miss Ruth Jackman, R.N.

Mrs. Belva Sullivan, R.N.
Miss Ruth Fry, R.N.
Miss Lillian Thayer, R.N.
Miss Lillian Davis, R.N.
Miss Helen Clifford, R.N.
Miss Edith Bailey, R.N.
Miss Florence Dahl, R.N.
Miss Myrtle Johnson, R.N.
Mrs. Evangeline Morrison, R.N.
Miss Anna Holzer, R.N.
Miss Katherine Holzer, R.N.
Miss Clara Lohrenz, R.N.
Miss Fay Stores, R.N.

### Class of 1915

Miss Lucy Hueter, R.N. Miss Beatrice Bailey, R.N. Miss Mary Everitt, R.N. Mrs. Martha Bushnell, R.N. Miss Gertrude Farrell, R.N. Miss Anna Davis, R.N. Miss Rose Eilman, R.N. Miss Leslie Lettrick, R.N. Mrs. Jennie Caldwell, R.N. Miss Johanna Endres, R.N. Miss Hilda Jackson, R.N. Miss Jeannette Veia, R.N.

Miss Lena Kleidosty, R.N.

#### Class of 1916

Sister Theodula, R.N.
Sister Philip Aquila, R.N.
Miss Gladys Peters, R.N.
Miss Emma Seleen, R.N.
Miss Catherine Freimuth, R.N.
Miss Edith Peterson, R.N.
Miss Theresa Langer, R.N.
Miss Kathleen Ronayne, R.N.
Miss Vivian Baihley, R.N.
Miss Mary Brophy, R.N.

Miss Helen Bird, R.N.
Miss Agnes Welsch, R.N.
Miss Bernadine Moran, R.N.
Miss Mary Divine, R.N.
Miss Robina White, R.N.
Miss Bess Petty, R.N.
Miss Agnes Hillscamp, R.N.
Miss Norene Royer, R.N.
Miss Eileen Miller, R.N.
Miss Iva Templeton, R.N.

## Class of 1917

Sister Berenice, R.N.
Miss Mary Russell, R.N.
Miss Helen Martin, R.N.
Miss Louise Donovan, R.N.
Miss Olive St. Cyr, R.N.
Miss Helene Roman, R.N.
Miss Mary Leonard, R.N.
Miss Eleanor Murphy, R.N.

Miss Edna Kurth, R.N.
Miss Winifred Kurth, R.N.
Miss Mildred Missall, R.N.
Mrs. Alice DeWolfe, R.N.
Miss Bertha Thayer, R.N.
Miss Anna McKenna, R.N.
Miss Marie Weil, R.N.
Miss Anna Anderson, R.N.

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# == fifty Golden years =

#### Class of 1917—(Continued)

Miss Marie Davis, R.N. Miss Katheleen Dodd, R.N. Miss Edla Culp, R.N. Mrs. Eva Coursolle, R.N.

Miss Mary MacCasham, R.N.

#### Class of 1918

Sister Antonio, R.N.
Miss Florence Cooper, R.N.
Miss Frances Lackaff, R.N.
Miss Agnes Fitzgerald, R.N.
Miss Lulu Evans, R.N.
Miss Helen Harper, R.N.
Miss Mary Winser, R.N.
Miss Rose Paschich, R.N.
Miss Mary Ernst, R.N.

Mrs. Gertrude Lyden, R.N.
Miss Florence Smith, R.N.
Miss Elenore Morin, R.N.
Miss Helen Conway, R.N.
Miss Ermeth McConville, R.N.
Miss Rose Lavigne, R.N.
Miss Madge Stephenson, R.N.
Miss Mildred Ruth, R.N.
Miss Mary Donald, R.N.

#### Class of 1919

Miss Louise Dedrickson, R.N.
Miss Ida O'Neil, R.N.
Miss Margaret Clark, R.N.
Miss Gertrude Pelton, R.N.
Miss Lillian Morin, R.N.
Miss Rose Moylan, R.N.
Miss Sarah Samson, R.N.
Miss Margaret DeClark, R.N.
Miss Grace Locke, R.N.
Miss Marie Yeaman, R.N.
Miss Alice Johnson, R.N.
Miss Marion King, R.N.

Miss Lillian Scott, R.N.
Miss Adeline Matz, R.N.
Miss Charlotte O'Neil, R.N.
Miss Louise Donnelly, R.N.
Miss Lola Vitus, R.N.
Miss Agnes Magee, R.N.
Miss Ada Donley, R.N.
Miss Jennie Grant, R.N.
Miss Melba A. Laurent, R.N.
Miss Esther Martell, R.N.
Miss Elsie Zark, R.N.
Miss Edith Rimillard, R.N.

#### Class of 1920

Sister John of the Eucharist, R.N. Miss Emma Tuschhoff, R.N. Miss Amanda Wendt, R.N. Miss Mae Deveney, R.N. Miss Rozetta Larreau, R.N. Miss Mary Sullivan, R.N. Miss Frances Brebner, R.N. Miss Esther Spencer, R.N. Miss Catherine Taucher, R.N. Miss Marie Stitz, R.N.

Miss Loretta Jones, R.N.

#### Class of 1921

Sister Vincent de Foligno, R.N. Miss Frances Gunther, R.N. Miss Jeannette Simons, R.N. Miss Monsine Holderson, R.N. Miss Estell Roselle, R.N. Miss Ruth Nelson, R.N. Miss Elizabeth Quirk, R.N.

Miss Ethel Baines, R.N.
Miss Caroline Podszus, R.N.
Miss Rose O'Connell, R.N.
Miss Inrene Lindgren, R.N.
Miss Marguerite Ferguson, R.N.
Miss Marie Ferguson, R.N.
Miss Mary Bresnahan, R.N.

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#### Class of 1921—(Continued)

Miss Alice Graham, R.N. Miss Leah Fitzgerald, R.N. Miss Cline Mentzel, R.N. Miss Mary Baldwin, R.N. Miss Ina Buchanan, R.N. Miss Elizabeth Hanscom, R.N.

Miss Myrtle Morrisson, R.N.

#### Class of 1922

Sister Bertrande, R.N.
Sister Immaculata, R.N.
Sister Jules Armand, R.N.
Miss Marie Nichelson, R.N.
Miss Elsie Kaufman, R.N.
Miss Alice Carbery, R.N.
Miss Hannah Gregory, R.N.
Miss Ellen Spence, R.N.
Miss Martha Mustert, R.N.
Miss Leona Cook, R.N.

Miss Agatha Bohnert, R.N.
Miss Ruth Murphy, R.N.
Miss Cyndrene Matz, R.N.
Miss Elsie Gross, R.N.
Miss Rose Hummel, R.N.
Miss Helen Edwards, R.N.
Miss Helen Larkin, R.N.
Miss Merle Rude, R.N.
Miss Iva Boggs, R.N.
Miss Florence McLaughlin, R.N.

Class of 1923

Sister Bonoza, R.N.
Miss Agnes Kunz, R.N.
Miss Hazel Smith, R.N.
Miss Gertrude Lee, R.N.
Miss Maude Shaw, R.N.
Miss Myrtle Seagrand, R.N.

Miss Mary Busse, R.N.
Miss Norma Frank, R.N.
Miss Viola Kneal, R.N.
Miss Loretta Connor, R.N.
Miss Marian McGovern, R.N.
Miss Dorothy Arnold, R.N.
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#### Class of 1924

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Miss Agnes McPeake, R.N Miss Leota Yarno, R.N. Miss Grace Casgriff, R.N. Miss Hazel Lindell, R.N. Miss Capitola Caswell, R.N. Miss Sophia Olsen, R.N. Miss Violet Schmid, R.N. Miss Henrietta Meyer, R.N. Miss Helen Boyle, R.N.

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Miss Golda Cuddy, R.N.
Miss Florence Pegelow, R.N.
Miss Ruth Griebe, R.N.
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Miss Lauretta McDonald, R.N.
Miss Mary Wilks, R.N.
Miss Cora Brophy, R.N.
Miss Emma Rose, R.N.

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#### Class of 1926

Sister Vincent of the Eucharist, R.N.
Sister Pius Augustine, R.N.
Sister Thomas Mary, R.N.
Miss Thelma Fitzpatrick, R.N.
Miss Josephine Bonu, R.N.
Miss Elizabeth Horsman, R.N.
Miss Ida Thomas, R.N.
Miss Marie Storms, R.N.
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Miss Grace Delap, R.N.
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Miss Effie Abraham, R.N.
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Miss Bertha Kubillus, R.N.
Miss Kathryn McGowan, R.N.
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Miss Elizabeth Eklow, R.N.
Miss Ruth Fink, R.N.
Miss Catherine Flaherty, R.N.
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Miss Pearl McCuaig, R.N.
Miss Edna McDonald, R.N.
Miss Bernice Pelham, R.N.
Miss Margaret Reilly, R.N.
Miss Kathleen Smith, R.N.
Miss Helen Sexton, R.N.
Miss Wanda Standley, R.N.
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Miss Katherine Walters, R.N.
Miss Lorraine Weber, R.N.

Miss Martha Larsen, R.N.

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#### Class of 1929—(Continued)

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Miss Mary Malott, R.N.

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Miss Hilda Hageman, R.N.
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Miss Florence Stafford, R.N.
Miss Gertrude Suter, R.N.

Miss Vera McDevitt, R.N.

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#### Class of 1931—(Continued)

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Miss Veronica Janostak, R.N. Miss Ann Jenny, R.N. Miss Lorena Kembel, R.N.

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Miss Genevieve Mason, R.N.
Miss Catherine McDonell, R.N.
Miss Jessie Oman, R.N.
Miss Gladyce Putnam, R.N.
Miss Elizabeth Peterson, R.N.
Miss Kathryn Pittman, R.N.
Miss Sylvia Romane, R.N.
Miss Joy Sickafoose, R.N.
Miss Mamie Skok, R.N.
Miss Irene Schudar, R.N.
Miss Elizabeth Walters, R.N.

Miss Effie Weller, R.N. Miss Ann Zalesky, R.N.

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Sister Frances Maureen, R.N. Miss Margaret Allen, R.N. Miss Mary Bell, R.N. Miss Anna Byrne, R.N.

Miss Mildred Childs, R.N. Miss Irene Cormier, R.N.

Miss Mary Clemmer, R.N. Miss Irene Dunnigan, R.N. Miss Lucille Decker, R.N.

Miss Selma Dawson, R.N. Miss Agnes Duffy, R.N.

Miss Alice DePorter, R.N. Miss Josephine Iten, R.N. Miss Beryl Jackson, R.N. Miss Ida Lindsay, R.N.
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Miss Alice McCammon, R.N.
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Miss Evelyn Sanger, R.N.
Miss Alice Sellars, R.N.
Miss Opal Smith, R.N.
Miss Clarice Streeter, R.N.
Miss Claire VanSlate, R.N.
Miss Lucy Wilson, R.N.

Miss Dorothy Wagoner, R.N.

### Class of 1934

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Miss Margaret Maguire, R.N.
Miss Opal Martin, R.N.
Miss Violet McLeod, R.N.
Miss Elsie Mullin, R.N.
Miss Catherine Murphy, R.N.
Miss Beverly Newman, R.N.

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Miss LaVeta Holland, R.N.
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Miss Mary Koester, R.N.
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Miss Marie Nieman, R.N.
Miss Thaya Olson, R.N.
Miss Julia Rooney, R.N.
Miss Katherine Schaller, R.N.
Miss Ursula Trunkey, R.N.
Miss Reeta Watson, R.N.
Miss Helen Weber, R.N.
Miss Mary Webster, R.N.
Miss Carolyn Werner, R.N.

### Class of 1935

Miss Patricia Barry, R.N. Miss Dorothy Bessett, R.N. Miss Anna Bodeen, R.N. Miss Marie Correll, R.N. Miss Melda Denoo, R.N. Miss Vivian DeWitt, R.N. Miss Mathilda Estey, R.N. Miss Jane Fay, R.N. Miss Rosalie Green, R.N. Miss Georgia Helphrey, R.N. Miss Elva Hiler, R.N. Miss Orilla Janni, R.N. Miss Rosalie Jewett, R.N. Miss Mildred Kelley, R.N. Miss Ethel Kessel, R.N. Miss Marlys Kessey, R.N. Miss Evelyn Kilburg, R.N. Miss Ruth Lea, R.N. Miss Helen Morrison, R.N. Miss Marie Murcar, R.N. Miss Elizabeth McLean, R.N. Miss Bernice Oakes, R.N. Miss Marguerite Olsen, R.N.

Miss Virginia Cartier, R.N. Miss Irene Casebeer, R.N. Miss Margaret Connell, R.N. Miss Bessie Peterson, R.N. Miss Ruth Peterson, R.N. Miss Elvina Petow, R.N. Miss Kathleen Portch, R.N. Miss Genevieve Ramsey, R.N. Miss Leona Rickenbach, R.N. Miss Mildred Rondeau, R.N. Mrs. Velma Sala, R.N. Miss Esther Sellars, R.N. Miss Ethel Selonka, R.N. Miss Catherine Shepperd, R.N. Miss Marie Staab, R.N. Miss Dorothy Trautman, R.N. Miss Alice Vorba, R.N. Miss Elsie Waage, R.N. Miss Louise Waltner, R.N. Miss Velma Welman, R.N. Miss Alice Wetter, R.N. Miss Electa Willmott, R.N. Miss Helen Zeimantz, R.N.

Miss Ida Pellican, R.N.

#### Class of 1936

Miss Geraldean Anderson, R.N.
Miss Frances Cameron, R.N.
Miss Virginia Carrigan, R.N.
Miss Dorothy Davidson, R.N.
Miss Frances Domitrovich, R.N.
Miss Beryl Fisher, R.N.
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Miss Vera Gore, R.N.
Miss Rose Harman, R.N.
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Miss Teresa Lowney, R.N.
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Miss Louise O'Connor, R.N.
Miss Caroline Peschka, R.N.
Miss Clara Powers, R.N.
Miss Golden Records, R.N.
Miss Lenore Salter, R.N.
Miss DeVota Shaw, R.N.

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Mrs. Lelia Johnson, R.N. Miss Marie LeMert, R.N. Miss Mary Lindsay, R.N. Miss Dorothy Lockett, R.N. Miss Kathryn Lowney, R.N. Miss Ruth Shepperd, R.N. Miss Winifred Skahan, R.N. Miss Sara Summers, R.N. Miss Edith Teade, R.N. Miss Kathleen Weller, R.N.



## Dedication

I dedicate myself to Thee, O Lord, my God! This work I undertake In Thy great name, and for Thy sake. In ministering to suffering I would learn The sympathy that in Thy Heart did burn. Take, then, mine eyes, and teach them to perceive The ablest way each sick one to relieve. Guide Thou my hands, that e'en their touch may prove The gentleness and aptness born of Love. Bless Thou my feet, and while they softly tread May faces smile on many a sufferer's bed. Touch Thou my lips, guide Thou my tongue, Give me a work in season for each one. Clothe me with patient strength all tasks to bear, Crown me with hope and love, which know no fear, And faith, that coming face to face with death Shall e'en inspire with joy the dying breath. All through the arduous day my actions guide, And through the lonely night watch by my side. So shall I wake refreshed, with strength to pray: Work in me, through me, with me, Lord, this day!

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# The Surgery

ROB'T L. ROTCHFORD, A.B., M.D., F.A.C.S.

HE Surgery, that department of the Sacred Heart Hospital set aside and equipped for the operative treatment of patients, is located on the sixth floor on the east wing and "T" approach to that wing. In this department is to be found all necessary apparatus for the complete handling of surgical cases. To facilitate the work of the surgeons, the pathology department for examination of tissues and the X-ray department for its assistance where indicated, are located in the "T" approach of the surgery proper. Likewise in the surgery, there are instrument, dressing and sterilization rooms. For the convenience of the doctors, there is a dressing room equipped with lavatory, showers, and lockers. In connection with this, we find the "scrub up" room where the surgeon thoroughly cleanses and as nearly as possible sterilizes his hands and forearms by the use of the usual soaps, brushes, antiseptics, and hot and cold water, in preparation for the operation. Necessary scrub-up rooms for nurses assisting in the surgeries are in this department. Adjoining, we have a branch of our main record office supervised by Miss Carrol, who is not only a librarian but a graduate nurse. Her duty is to take dictation for the case records and to see that all preoperative diagnoses are written on operative charts and properly signed before operations are begun. She likewise has charge of the reference library in this same branch record office.

In the surgery division, there are in all nine surgeries; i.e., rooms fully equipped for individual operative treatments. This means that nine operations could be performed at the same time and none of the nine operating surgeons be lacking essential equipment. Of these nine surgeries five are for major operations and four for minor. Three are used for eye, ear, nose, and throat operations; one, for fracture surgery; one, for urological cases; and four, for any of the above types of cases plus general surgery.

Each major surgery is equipped with an operating table containing all accessory attachments for kidney, gall bladder, thyreoid, pelvic, and brain cases. Each has hot and cold sterile water. Water suctions are conveniently placed in each surgery for use when desired. Two of these surgeries have scialytic lights and two have the operay multibeam. In addition to these lights, these major surgeries have the Castle and scialytic spot lights. Overhead and outside wall non-glare windows add to lighting effects of each surgery to render the operative field more acutely visible to the surgeon and his assistants.

The eye, ear, nose and throat rooms are constructed in such a manner that they may be used as a dark or light room as desired by the operating surgeon. Each has an operating table that is adjustable for either general or local anesthetic cases. Both electric and water suctions are present in each. A giant, electric magnet for use in extracting metallic foreign bodies is part of the equipment.

The urological room has in addition to the proper lighting and suction connections, a special x-ray unit cystoscopic table, the latest model and most up-to-date of

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## Fifty Golden years =

its kind. To be used particularly in this room and as individual cases demand in the other surgeries, the department possesses a Westinghouse endotherm and Cameron's cauterodyne machines.

The fracture surgery is equipped with a Hawley table and all of its appliances. A large collection of splints which include DePuys, Thomas, Russell, Bohler, and Roger Anderson lines are ready for use in this surgery.

Full sets of operative instruments are kept in the surgical department for the use of the surgeon who, by reason of his staff connections at another hospital, does not operate daily at the Sacred Heart. Thus it is unnecessary for the surgeon to transport his instruments from one hospital to another. This is but one of the many conveniences to be found in the surgical department of Sacred Heart Hospital.

For the giving of anesthetics, there are four Heidbrink Kinet-o-meter gas-oxygenether machines, three Gwathney and one Junior Heidbrink. These are the very latest and up-to-date apparatus for such usage.

Last but not the least in the efficiency of the surgical division of the Sacred Heart Hospital is its personnel. Sister Agnes of the Sacred Heart, a graduate nurse, is supervisor of the department. She is assisted by Sister Francis of the Sacred Heart, anesthetist. Our graduate nurse anesthetists give all general and supplementary anesthetics. At the present time, Miss Roberts, Miss Trapp, Miss Cookson, and Mrs. Butler form this staff and efficiently handle its responsibilities. Seven graduate and nine student nurses complete the surgical nursing staff in the operative department as such. To keep the surgeries continuously in readiness for use, two janitors or stewards are kept busy throughout the day.

Besides caring for routine cases, the staff under Miss June Roberts operates as a school for anesthetists. Twenty nurses have completed the course here and are registered members of the National Association of Nurse Anesthetists.

With such a well equipped department operated by a well organized nursing unit, it may be expected that a large amount of surgical work can be done. So it is that three thousand two hundred sixty-seven cases were operated upon during the season of 1935. This is but an average year. Several more than this number passed through the department during 1934.

We of the staff have reason to be proud of the surgical division of the Sacred Heart Hospital, and those few surgeons who operate but occasionally in this hospital will do well to acquaint themselves with the many advantages afforded here and make their visits more frequent. They may know that they are not only invited to take advantage of the conveniences of the surgery but are welcome at all times.

As time courses on, new and better surgical equipment will be devised and come into use. When such is the case, Sacred Heart Hospital will be first to install these improvements, thus keeping the surgery pacing the leaders as it is now so successfully doing.

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# Department of Radiology

MELVIN ASPRAY, M. D.

N 1919 the x-ray department was located in the southwest corner of the surgery and space was confined to a single room with a small adjoining darkroom. At this time Dr. Joseph Aspray became associated with the hospital after specialization in x-ray in the army during the war. The fluoroscopic and radiographic work were both carried on with the same equipment and in the same room. The apparatus was distinctly not shock-proof, and at times the normal tempo of the department was disturbed by the crash of an ether can thrown by a slightly shocked anesthetist.

Improvements were soon to come and in 1924 the department assumed an appearance of spaciousness due to a change in location. We were fortunate in getting space to the west of the surgery which was formerly part of the nurses' residence. The equipment was modernized and many improvements were made. A separate room with a motor-driven tilt table was obtained with a separate Englen unit for fluoroscopic work. After several years, an Englen mechanically rectified diagnostic machine was purchased. A standard high voltage therapy machine was installed which gave a maximum of 200,000 volts for deep therapy. A large darkroom was also made available. With the increase in fracture work under the control of the fluoroscope and the need of fluoroscopic observation for certain bronchoscopic examinations it was not long before the necessity for increased space in the fluoroscopic department was realized. In 1931 a larger room was obtained and a new table was devised for fracture and bronchoscopic work which greatly facilitated fracture manipulation and control.

During the period of the latter changes Sister Blasius was in charge of the x-ray department. She was followed by Sister Didier, who also handles the physio-therapy department, assisted by Miss Mary Hennessey, technician.

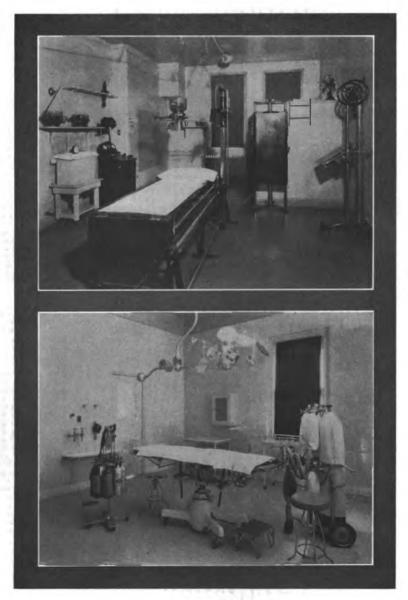
The x-ray office was small and proved to be inadequate in size. In 1933 we were able to obtain an additional room across the hall. This commands an exceptional view of the city and provides a large well equipped office. The location of the department as a whole is advantageous in that it lends ready access to the surgical and pathological departments.

In 1936 a General Electric portable unit was installed. This is completely shock-proof and increases the efficiency and scope of the department. It can be used for portable fluoroscopy and radiography as well as for bi-plane fluoroscopy in the fluoroscopic room.

A small Acme unit has been placed in the surgery so that pyelography can be carried out with the minimum of discomfort and trauma to the patient.

The x-ray department has handled 32,500 cases in the past 16 years. The average number of cases each month is over 180. Thus we have seen during the past

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(Above)—A Section of the X-Ray Department (Below)—An Operating Room

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16 years a tremendous enlargement of the department with greatly increased scope of activity. The insight and cooperation of the sisters in charge have been the essential factor in this development.

The physio-therapy department is unusually well equipped and has available a short wave diathermy, water cooled ultra-violet, several air cooled ultra-violet units, a long wave diathermy, infra-red and polysine. With the gradual increase of the patient census and the realization of what can be accomplished in physio-therapy the department should become more and more essential and valuable in the future.

Sacred Heart Hospital may well be proud of the work accomplished thus far in the department of radiology and physio-therapy. In the acquisition of improved equipment, and the development of the latest technique it has kept pace with the work of other standardized hospitals throughout the country.

## A Healing Touch

To give new hope, when hope is nearly gone; To give new strength, the strength to carry on; To give new-born the precious gift of breath; To save the dying from the Reaper Death; This is the calling, human yet divine, "He walks within my steps, and he is mine," The Great Physician said. A kingly gift The healing touch, to bless and to uplift.

By ELIZABETH DAVIS RICHARDS

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## Reminiscences of the Obstetrical Department

H. E. RHODEHAMEL, M. D.

IFTY years ago when the Sisters of Charity of Providence opened their hospital on Front Avenue (now Trent Avenue) in Spokane it was the pride of the citizens of this growing western city as well as those of the surrounding territory whom it also served.

Although it was a modern hospital of that time there was no special provision made for the care of maternity cases and it was not until seven years later that an obstetrical patient was admitted. On November 21, 1893, the first infant was delivered in the Sacred Heart Hospital. During the twenty-four year occupancy of that building only one hundred sixty-five babies were brought into the world within its friendly confines.

As the population of the city increased, the need for hospital expansion became a serious problem. At that time the hospital found itself standing in the way of general business progress and civic development, as the Great Northern Railroad, making its way to the coast, required that particular piece of land on which the hospital stood. Thus through the sale of the hospital site and buildings a new, larger, and more upto-date hospital was made possible. Naturally the medical profession in general and those particularly interested in the practice of obstetrics used their best efforts to have special provision made in the new building for a thoroughly modern scientific lying-in department. The anxiety of the sisters for such improvements, together with public demand, resulted in this department of the hospital service having a worthy home.

On March 25, 1910, the new hospital was opened and the east end of the second floor was set aside for an obstetrical department. It was equipped with the most modern furnishings for private rooms, wards, preparation and delivery rooms, and, most appreciated of all, greatly needed conveniences for the attending physicians. Sister Oswald was placed in charge of the new department. The hospital, patients, and doctors were indeed fortunate in having such a capable supervisor, equal to handling the many problems and situations which naturally arose. Previously each attending physician had been a law unto himself and made deliveries when and as he saw fit, but Sister Oswald, by using a diplomacy all her own of scolding and coaxing, worked out a system which was the foundation of our present obstetrical rules. Sister Oswald remained in charge until 1918 when Sister Catherine of Sienna took over the work. It was during her regime that the Sacred Heart Hospital accepted and put into force the regulations required for standardization by the American College of Surgeons.

In 1919 the first obstetrical committee was named and definite rules were adopted for the conduct of the maternity department and the procedure of the attending physicians. As a result of this innovation storms of protest arose from some of the older physicians who seemed to think they were being told how to practice obstetrics. These arguments were still rife when Sister Waltrude took charge of maternity. In

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her mild and even way she always sympathized with the affronted physician, and then saw to it that even more drastic rules were instituted. Soon a semblance of harmony came out of the unnecessary discord.

Under the standardization rules both mother and infant mortality and morbidity were reduced to such an extent that the thinking public came to realize the advantages of hospitalization in maternity cases over the dangers of home deliveries, and it became the rule instead of the exception to go to the hospital for obstetrical care. The public has finally recognized the fact that although childbirth is a natural event it necessitates the best of care and the most scientific protection, since two lives, and occasionally more, are at stake, as compared with medical and surgical cases which concern but one life.

This awakening of public sentiment with advancing science made larger quarters for the obstetrical department necessary, and as the west annex was being built, five west and five annex were set aside for a thoroughly modern lying in department isolated from the other parts of the hospital. The isolation provided greater quiet and protection for the mothers and infants as well. The new quarters included a nursery as up-to-date as any in the country, with full time supervisors in charge. The glassed-in nursery protected the new-born from contamination by contact with interested relatives and friends. For the protection of the normal infants provision was made for rooms for the isolation of infants when required, whether for observation or treatment. In connection with the nursery an examination room was installed where the attending physician examined his cases without entering the nursery or coming into contact with any of the other infants.

Sister Joseph Anselm was largely responsible for the adequacy of this new wing, for with her builder's vision and pride she had planned not only for the present but for the future. It has been and continues to be a matter of pride with all concerned with the obstetrical service that here, rich and poor alike can avail themselves of the best scientific care at a cost within their reach.

A period of great changes followed the enlargement of the department. The obstetrical committee, through the sisters, formulated rules, without action by the staff. A consulting committee was appointed to act for the hospital in all cases where surgical procedure was indicated and, although some physicians objected to this, the mortality and morbidity rates showed such marked improvement that they ceased arguing and accepted the rules.

In 1923 the obstetrical committee, having met with more or less success regarding the rules, decided to ask for certain improvements, including new delivery tables, more instruments and appliances, an enlarged nursing staff, etc. They asked for about \$2,000 worth of equipment and improvements hoping to obtain at least half that amount, but imagine their surprise when all they requested was granted and in addition another supervisor.

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### **= fifty Golden years =**

In 1929 Sister Agnes was placed in command and, although she does not remember the old hospital, she was well informed as to the progress and success of the maternity department and carried on the work. She remained in charge until January, 1934. All during her service the department improved and advanced as it was her ambition for the Sacred Heart to have the best obstetrical department in the Northwest. In 1934 Sister Gonzalve was placed in temporary charge for ten months maintaining the same high level of efficiency as the physicians and patients now find in her third floor service. In November of that year Sister Aglae came to assume charge of the lying-in department. The constantly increasing admissions to maternity prove the efficiency of its service and its present high standards under her supervision.

A history of the obstetrical department would not be complete without the mention of one more contributing influence. Sister Lucian, who is seldom seen or heard by the obstetrical patients, holds nevertheless a vital position in this department as well as in all other parts of the hospital. The attending physicians feel a sense of security in prescribing needed medicines, for they know that since the early days of the old hospital Sister Lucian has maintained the highest standards in her model pharmacy, supplying only the best quality of drugs.

Few people stop to consider the importance of the obstetrical department, but the records show that about one tenth of all hospital admissions are obstetrical and if both the mother and the new-born are counted the percentage would of course be doubled. From 1910, when our present hospital was occupied, up to July 1, 1936, this department shows a record of 13,359 infants delivered, and the number is increasing each year.

I am sure I express the sentiment of the physicians who have regularly or occasionally for many years brought their expectant mothers to the Sacred Heart Hospital when I say we appreciate the service given our patients and the courtesies extended to us as physicians by the sisters in authority as they have come and gone. Those of us who have worked faithfully and loyally along with them in an effort to make the Sacred Heart one of the highest ranking hospitals in America naturally feel a sense of pride in having had a part in this fifty years of health service to humanity. Our congratulations to the present hospital management and to those who serve with them, our tribute to the ones who labored in the past, and our earnest hope for another half century of progress.

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## **Obstetrical Nursing**

MARY M. LARKIN, R.N., Supervisor

Post-graduate of Western Reserve Maternity Hospital, Cleveland, Ohio

HE word obstetrics is believed to have been derived from the Latin words ob and stare meaning to stand before, to protect; it should be easy, therefore, for one to understand what modern obstetrical nursing implies.

A certain amount of scientific knowledge is necessary to give the nurse an intelligent background; she is therefore trained and educated in all the special branches of nursing, so that she can be of the greatest possible service to the patient and to the doctor.

Since obstetrical nursing is one of the special branches, the student usually begins her work in this department after she has completed her surgical training, has had twenty classroom hours, and has attended a course of regular lectures on obstetrics from one of the staff doctors.

The general principles which are absolutely indispensible to a good obstetrical nurse and which are daily stressed in our maternity ward are listed by Miss Caroline B. Van Blarcom, author of a text on obstetrical nursing, as follows:

- Cleanliness—under all conditions, to protect both mother and baby from infection.
- 2. Watchfulness—for early symptoms of complications in either mother or baby.
- 3. Adaptability—to the patient, the doctor, and the surroundings.
- 4. Understanding—for every mental and physical stress which the patient may suffer.

If the nurse realizes the importance of these requirements and is exacting with herself in her interpretation of them, the maternity patient cannot but be nursed well.

Today the maternity ward of Sacred Heart Hospital has a capacity of forty beds and forty bassinets. For the past two years the department has served a daily average of twenty-eight mothers. This increase over previous years is due, no doubt, in a great measure to the fact that the public has become educated to the importance and value of the modern hospital with its trained staff and well equipped departments.

The staff in the obstetrical ward includes a sister supervisor, a head nurse, a nursing supervisor, a night supervisor, and the many student nurses who are receiving their training in this special branch of nursing.

This department endeavors to give to each doctor skillful assistance, to each patient special and considerate care, and to each young mother the knowledge requisite to fit her for the absorbing duties of motherhood.

[FAGE SEVENTY-SIX]

# = fifty Golden years ===



(Above)—Nursery

(Below)—Laboratory

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### Neurologiral Surgery

J. W. LYNCH, M.D.

HE rapid strides made in medical progress since 1900 have been shared by surgery of the nervous system. As recently as 1904 the first recorded operation for tumor of the brain was performed by the master brain surgeon, Harvey Cushing. At that time the operative approach to the cranial cavity was considered only with great trepidation. The operative mortality was very high, virtually rendering hopeless any attempt at surgical relief, and when the diagnosis was made it came so late that the patient was permanently crippled even if the operation was successfully performed. Prior to 1900 a few attempts to remove brain tumors had been made by various general surgeons of European countries; among those were Victor Horsley, the famous English neurologist and surgeon, whose fame was world-wide in the latter part of the last century.

Like the pioneer work in any branch of human endeavor neurosurgery has struggled on in the face of nearly insurmountable obstacles. Prior to the war, there were few men courageous enough to undertake operations resulting in such tremendously high mortality rate, but during this time Cushing, Frazier, Dandy, and others continued on, learning by their own mistakes. They were accumulating knowledge that has stood as the structure. This structure has in the period of their life time grown to a position of eminence along side of other great developments in medical science. Then came the war and with it new knowledge in the management of severe head injuries. In 1919 Dandy published an account of his experiences and his technique which he named encephalography. This consists in replacing the spinal fluid with equal amounts of air, thereby filling the ventricles of the brain with a media that would cast a shadow on an x-ray film. Two years later he published his technique of ventriculography whereby the ventricles were filled with air by direct puncture after trephining the skull.

These two contributions of Dandy's were not at first appreciated nor accepted by other neurosurgeons, because of the hazards attached to them. It was not until 1925 when the experiences of other neurosurgeons began appearing in the literature that the great benefits derived from the use of these two procedures became known. A rather large portion of the brain is considered a part of a silent area, namely that area in which a lesion might exist without giving unmistakable signs of its presence, such as the frontal lobes, the right temporal lobe, etc. A tumor arising from any portion of the silent area might grow until it finally encroached on the motor area of the brain, then in all probability little could be done toward its successful removal. So with encephalography and ventriculography, lesions of the brain may now be diagnosed at a stage in their development which will allow an attempt at surgical removal without leaving the patient hopelessly and incurably paralyzed. With this diagnostic aid patients were coming to operation sooner, and gradually the operative and case mortality began its downward trend. In 1928 came the advent of the electrosurgical

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## = fifty Golden years =

unit which solved the problem of hemostasis in these long tedious brain operations. Heretofore, these operations required hours to perform, and repeated blood transfusions were necessary to sustain the patient, but today these same brain operations can be completed in two or three hours.

In 1932, Cushing published a series of 360 pituitary operations with a mortality rate of 6%, and an operative mortality of about 10% in all types of brain tumors operated since 1928. What is true of the mortality in surgery of brain tumors is also true of the mortality in skull fractures and brain abscesses.

From mortality of 48% in 1928 the improved methods in the management of skull fractures has achieved a reduction to a rate somewhere between 20 and 25% in all types of head injuries. This marvelous accomplishment has been due to an increase in the knowledge of the physiology and hydronamics of the cerebral spinal fluid. The treatment and management of brain abscess has likewise undergone a complete metamorphosis. The mortality rate from this desperate condition is now about 40% but until recently it was between 70 and 80%. The past 35 years have been marvelous in the development of surgery's newest field. Extensive as the progress is, there yet remain frontiers of this branch of surgery, frontiers which are being constantly pushed back by the unceasing efforts of those who have dedicated their life to the relief of human suffering.

# The Caboratory

M. M. PATTON, M. D. Pathologist

N 1919, the American College of Surgeons recommended that recognized hospitals should conform to certain requirements for standardization. The Sacred Heart Hospital adopted this suggestion with enthusiasm being one of the first to conform to the plan. A small laboratory in the surgical department was equipped and Dr. M. M. Patton was employed as part time pathologist.

It was soon found that the space assigned was insufficient for the amount of work being done, and in 1925 new quarters were prepared and additional equipment was installed. With the steady increase of work, new equipment is being added from time to time, so that any of the new laboratory procedures can be performed at the hospital. At this time the personnel includes Dr. M. M. Patton as full time pathologist, Dr. F. R. Patton as associate pathologist, Sister Leon Alphonse, who is not only a registered technician, but also has the classification of medical technologist, as supervisor of technicians, Miss Mary Levi, a registered technician, and two students.

The laboratory is recognized by the American Society of Clinical Pathologists as a teaching institution for technicians and is registered by the State Board of Health of Washington.

Patients entering the hospital receive routine blood examinations and urinalysis. Patients for tonsilectomy have a coagulation and bleeding time done before operation.

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# = fifty Golden years:

Major surgical cases have a routine gross and miscroscopic examination of tissues removed.

The laboratory, conveniently located on the sixth floor of the hospital, is readily accessible to the surgery and is equipped to do any laboratory tests including the Wasserman reaction and animal experimentation.

All reports are typewritten and placed on the charts by the stenographer as soon as tests are completed. A carefully indexed file of all work done is maintained in the laboratory. More than 23,693 examinations were made during 1935. Fourteen technicians have received training, and student nurses also acquire a certain amount of experience in this department.

The laboratory contains practically all the modern appliances required for conducting necessary tests, and the personnel makes every effort to serve both patients and doctors in the most satisfactory manner.

# The Pediatric Department

MARIE S. FEINLER, R.N., Pediatric Nurse
Post-graduate of Western Reserve University, Cleveland, Ohio

N keeping with the general trend to improve in the medical profession, we have as the most recently organized unit in our hospital, the pediatric department. The term pediatrics is derived from the Greek words, pais meaning the child and iatrike meaning the care of, hence the art or science of caring for the child.

In this department, somewhat away from the main building to avoid disturbance to adults, is maintained the specialized nursing care of children in all illnesses excepting contagious diseases. The student nurses receive special theoretical as well as practical instruction by qualified instructors in the care of prematures, feeding regulation, medical, surgical, and orthopedic cases.

From a bed capacity of twenty-five, in 1930, the department has gradually increased to its present capacity of thirty-five beds. The annual census the first year was five hundred, and has also gradually increased, totalling one thousand two hundred sixty-one during 1935.

During this time several essential appliances to aid in emergency and adequate care have been added to our equipment. Modern science has perfected many such devices which are continually being improved upon making it possible for the medical profession to lower the death rate yearly among adults and children alike.

The most recent addition to the pediatric department is a milk laboratory, where all milk feedings for the obstetrical and pediatric departments are prepared by a specially instructed nurse under the most aseptic technique. These feedings are prescribed by the physicians to suit the nutritional requirements of each individual infant in our hospital. All student nurses receive this special training and experience for three weeks in this department.

It is the aim of the staff to assure kind and gentle care to all children placed here for treatment.

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(Above)-Pediatric Ward

(Below)-Private Room

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### Grthopedic Surgery

WILLIAM E. GRIEVE, M. D.

R. C. F. EIKENBARY came to Spokane in 1907. Although he was well trained in orthopedic surgery, he did not confine his practice to that specialty until 1910. At that time, orthopedic surgery was a young specialty, but it advanced along with other branches of surgery.

The improvement in x-ray equipment and technique was a great aid in the advancement of the knowledge of disease, injury, and abnormality of bones. The World War brought further progress in orthopedic surgery and the treatment of fractures.

Spokane was without an orthopedic surgeon for two years, but when Dr. Eikenbary returned from the army he brought Dr. Mitchell Langworthy with him.

Doctors Eikenbary and Langworthy contributed to the literature of orthopedic surgery and were recognized throughout the world for their contributions of surgical technique and mechanical equipment.

Dr. Eikenbary left Spokane for Seattle in 1926. Dr. Langworthy died in 1929. Orthopedic surgery is by nature quite mechanical and considerable apparatus is necessary for the treatment of fractures and deformities. Dr. Langworthy owned most of the apparatus that he used.

During the past six years, Sacred Heart Hospital has acquired many new splints. Frames for Russell traction have been made by the hospital carpenter which are very convenient. The hospital has purchased an adjustable hyperextension frame that is extremely useful in treating spinal injuries and diseases.

A drill with a guide for placing Kirschner wire for skeletal traction and a fracture reduction apparatus to incorporate pins or wires in a cast, is quite necessary for the modern treatment of fractures.

A new portable shock-proof x-ray machine which makes lateral fluoroscopy possible as well as anterior posterior fluoroscopy is a valuable aid to treatment of fractures with the fracture reduction apparatus.

The new portable x-ray machine with a hand fluoroscope, that can be used in the wards, should improve the results of treatment of fractures with traction in bed, as well as reduce the cost to the patient.

An excellent physiotherapy department contributes a great deal to the treatment of many orthopedic cases in the Sacred Heart Hospital.

There are now three well trained orthopedic surgeons on the Sacred Heart Hospital staff. These men will keep up with the progress of orthopedic surgery and the hospital will keep up its equipment in the future as it has in the past.

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### Bronchoscopy and Esophagoscopy

A. N. CODD, M.D., Specialist

RONCHOSCOPY and esophagoscopy have become an integral part of the scientific work of Sacred Heart Hospital. During the past twelve years it has been placed upon a firm basis. The development of bronchoscopy and esophagoscopy is due to the demand of the general progress of medical science. "Look and see" is the order of the day. In every accessible region of the body, the aid of direct vision is called upon to contribute to diagnosis and treatment. It is no longer considered justifiable to treat the esophagus without looking into it. Just as the internist can tap, look, and listen on the outside of the chest; and the roentgenologist can, in a sense, look through the patient, the bronchoscopist can look into the tracheobronchial tree or esophagus.

Foreign bodies lodged in the air and food passages may be removed by this procedure. Specimens of tissue or secretions can be removed for diagnosis. Chronic lung conditions and lung abscesses are drained. Early and positive diagnosis of malignancy of the larynx, tracheobronchial tree, or esophagus can thus be made. Strictures in the air and food passages, as well as functional disturbances, are treated.

The facilities at Sacred Heart Hospital are excellent, Patients from the Northwest states and Canadian provinces, numbering in the hundreds, have come to Sacred Heart Hospital for treatment in this branch of medicine. Among them have been patients with all conceivable types of foreign bodies, including tacks, open safety-pins, bones, coins, disks, buttons, shells, staples, paper clips, nails, screws, toy ornaments, whistles, and hairpins. These come under the heading of opaque foreign bodies and are easily diagnosed by x-ray. Other foreign bodies, such as peanut kernels, beans, seeds, and popcorn, are non-opaque to x-ray. They are diagnosed by the symptom complex which their presence produces. This is, however, only one part of the work. Patients with lye strictures of the esophagus have come in literally starving to death. This type of case often takes as long as eighteen months of weekly treatments, both direct and retrograde, to restore them to normal. The larynx, or voice box, has been reconstructed and put back into service after a period of two years. This work requires the utmost patience on the part of the patient, hospital attendants, and nurses.

# The Urological Department

DONALD G. CORBETT, M.D.

HE urological department of Sacred Heart Hospital is exceptionally well equipped for carrying on the work coming under this classification; viz., the diagnosis and treatment of diseases of the urinary tract.

The work of the department can be divided into three principal divisions:

- (a) The diagnostic division.
- (b) The surgical division.
- (c) The hospitalization and nursing care division.

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### fifty Golden years =

Every facility for the making of a correct diagnosis is offered. The cystoscopy room is large and well ventilated. It is equipped with a Hugh Young cystoscopy table with a flat Bucky diaphragm. An Acme x-ray unit is installed in the same room enabling a complete urological study with pyelography or other roentgenographic studies to be completed in the same room, and on the same table, with a minimum of discomfort to the patient. The hospital laboratories, of course, cooperate in diagnostic procedures requiring their services.

Urological surgery is done in the general surgeries of the hospital. However, special equipment is available. Westinghouse and General Electric spark-gap cutting and coagulating units and a Cameron tube cutting and coagulating unit are available for prostatic resection, electro-coagulation of tumors, and other electro-surgical procedures.

A trained and experienced supervisor is in charge of both the diagnostic and surgical rooms and equipment, adding much to the efficiency of these departments.

Segregation in hospitalization of urological patients is carried out as far as possible. There is a ward reserved for prostatic cases only and private rooms and ward beds in the general medical and surgical floors are available for all types of cases. Male stewards are available at all times for the care of the male cases requiring their services. Instruction in nursing care and procedures for urological cases is given in the nursing school enabling the nurses to perform their duties more intelligently in respect to these cases.

The hospital management is most cooperative in its efforts to assure the members of the staff engaged in this work, the best obtainable in equipment and service.



#### After the Reaper

SISTER GERARD OF PROVIDENCE

Weary they went as they scattered the grain; The soil was rocky and scorched the plain; But hope sang ever its glad refrain.

And many a sower of that far day
With meek hands folded o'er heart of clay
Is at rest in the place of peace for aye.

Joyful they come with the golden sheaf,
All forgotten the toil and grief,
Like a troubled dream with its anguish brief.

Christ the Harvester, take the gain,
Winnow and chaff and garner the grain
The dross forget and the gold retain.

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### Department of Records

DR. S. E. ROSENTHAL, M.D., F.A.C.S.

HOSPITAL record of a patient consists of his medical history up to the time of admittance, a description of his present disability, procedures, medical and surgical, carried out in the hospital, the physical findings on the patient, his condition from day to day and at the time of discharge from the hospital. One should be able, after studying a properly prepared record, to form an accurate and detailed mental picture of the patient's physical condition before, during, and at the termination of his hospitalization.

These records are of importance to the hospital for statistical purposes, to check the work done at the hospital, and to protect it should any misunderstandings arise.

They are important to the patient because they can always be referred to and, should the patient leave the care of his doctor, the record of what was done and what was found is always available to the future medical attendant.

They are important to the doctor in that he can always check back and refresh his memory in future dealings with the patient. He may use them in group study of specific medical and surgical conditions—as to procedure, progress, and results. They furnish the most important evidence to protect the doctor against charges of malpractice.

The American College of Surgeons, in its hospital standardization program, properly places marked emphasis on the importance of case records. Nurses should be taught to be accurate and conscientious in their charting, and doctors should set the good example.

## History of Records

MARGARET CARROLL, R.N., Record Librarian

HE hospital case record of today is the result of a gradual evolution. The keeping of case records by hospitals is not a new departure; there are among the older institutions of the country some which can show records dating back many years. These early records were, of course, very simple and fragmentary, as compared with those of the present time. Hospital work in general, however, has only recently achieved its present high standards of efficiency. The campaign for the standardization of hospital service and hospital records was inaugurated by the American College of Surgeons at the close of the World War.

The earliest known medical records date back to 4500 B. C. These show that men, women, and children of Egypt gathered strange materials accompanied by incantations. These records written on stone, clay, and parchment described the disease, prescribed the treatment, and recorded the results.

One of the most complete of the early records of medicine was written in 1552 B. C. It was found near Thebes in 1872. Written on paper prepared from papyrus plant, on a sheet twelve inches wide and one hundred feet long, it mentions tonics,

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# = fifty Golden years =

remedies for diseases of the stomach and heart, baldness, cancer, toothache, etc. This record showed careful observation of diseases and application of remedies.

The earliest reference to a "Record Room," however, comes in about 620 B. C., at which time the King of Assyria gathered together some 30,000 tablets for a library, near the site of the ancient city of Nineveh. About eight hundred of these clay tablets were clinical records referring to illness, methods of treatment, and so on.

Carefully prepared records as far back as 437 B. C. referred to the hospitals in Ceylon, and inscriptions of 226 B. C. on rocks in India mentioned the creation of hospitals. Later rather extensive patients' records were discovered on the site of an ancient temple on the Tiber River. They show that superstition largely influenced the treatment of this period.

One of the writings of Galen, who lived about 130 A. D., is illustrated with a miniature showing a history being written at the patient's bedside.

The first hospital in the United States was the Pennsylvania Hospital established in 1750. But it was not until 1803 that the manager ordered that a detailed record be kept of all interesting cases.

Modern interest in the record room and the development of better records had its origin in the establishment of the American College of Surgeons in 1913. Their aim was to improve the practice of surgery and put it on a higher plane. They required that a candidate submit one hundred case records of patients upon whom he had operated, as evidence of his judgment and ability. Since, at that time, the majority of the hospitals in the United States and Canada failed to keep records providing adequate data, few candidates could comply with this requirement. At the end of two years the college formulated the "Minimum Standard" with which we are all familiar, and included in this a detailed statement concerning what was expected of a hospital with regard to its records. It requires that "accurate and complete records be written for all patients and filed in an accessible manner in the hospital," going on to specify the minimum requirements for an acceptable record. The Minimum Standard was put into effect and the first annual survey was made in 1918.

In September of 1919, the Sacred Heart Hospital Record Office was established. A record committee of three doctors was appointed by the staff, and a graduate nurse and a stenographer were employed. The stenographer took the histories and the nurse assembled the charts which had to be accepted by the record committee before being filed alphabetically in the unit system. Sister Lewis, R. N. was the first record keeper.

These complete records on all cases have been of inestimable value to the doctor, the hospital, and the patient: to the doctor for research and statistical purposes; to the hospital in that it gives the administrators an index of the efficiency of the services rendered and suggests methods by which the service can be improved; and to the patient, who benefits because the writing of clinical records tends to improve diagnosis and to elevate the standard of the practice of medicine.

In 1928 the North American Association of Record Librarians was organized and works in conjunction with the American College of Surgeons to improve record library systems throughout the country.

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### Fifty Golden years =

#### Social Service Department

HROUGHOUT the years, the social service department, begun by Sister Joseph of Arimathea in 1886, has been vigorously maintained. Her successor, Sister Mary Odile, carried on this work in a very efficient manner for twenty years. During this period clothing and food were collected and rummage sales were organized to obtain funds to supply fuel and rent for destitute families. One hundred five infants were placed in good homes or legally adopted. Provision was made for the education of young people in boarding schools, for the placing of old persons in homes for the aged, and for the hospitalization of hundreds of worthy poor. The fostering of religious vocations has been an important part of the spiritual program of advice and encouragement which found its source in the great heart of Sister Mary Odile who would gladly have relieved all the ills of humanity.

In 1912, at the instigation of Reverend A. Verhagen, pastor of Our Lady of Lourdes Cathedral, the eight city parishes united to organize the Catholic Social Betterment League. The first location of the association was in the Granite Block where office space was donated by the late James Monaghan, first president.

The league carried on works of mercy which had been initiated by the Sisters of Charity of Providence many years before. As the city expanded, the parish workers faced a continually enlarging field of operations which gradually absorbed the work of the Sacred Heart center. The present objectives of the league include assistance to the impoverished sick, spiritual and material rehabilitation, care of the delinquent, neglected, and homeless children, and provision for unmarried mothers and the aged.

In 1931, at the suggestion of the late Reverend John Cronin, president of the league, the St. Joseph clinic was started at the Sacred Heart Hospital to care for the tonsils and teeth of children in the parish schools who would otherwise be unable to have this necessary work done. Sister Mary Alice, then superior, very heartily cooperated in this praiseworthy charity. Besides giving a reduced rate for the care of all tonsil cases which the school nurse, Miss Emma Anderson, saw fit to hospitalize, Sister Superior assigned two cheerful rooms for the dental clinic, while Mr. and Mrs. Joseph Skerrett donated a dental chair and cabinets as a memorial of their deceased daughter, Evelyn Skerrett.

Since the opening of the clinic two hundred six tonsil cases have been treated by the following physicians who cheerfully give their services to the cause of charity: Dr. R. L. Rotchford, Dr. R. T. Flaherty, Dr. F. W. O'Neill, Dr. C. W. Countryman, Dr. F. W. Hall, Dr. J. W. Lynch, Dr. J. R. Condon, Dr. E. P. Condon, Dr. W. E. Newman, Dr. C. J. Abrams, Dr. E. S. Jennings, Dr. Peter Reed.

Dental care has been donated to one hundred eighty-seven children by the following dentists: Dr. E. J. Keilty, Dr. J. C. McBride, Dr. O. E. Broderson, Dr. T. D. Schimke, Dr. E. J. Peterson.

The Catholic Social Betterment League maintains a rummage store known as the St. Vincent de Paul store to assist in the payment of hospitalization charges for the clinic patients. Miss Emma Anderson, R. N., school nurse, has been the inspiration of the clinic since its inception, and her services are always at the command of the doctors in this worthy cause.

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### Che Human Side

By SMITHMORE MYERS, B. A., Gonzaga '36

ROFESSIONAL humorists find a fertile field for their wit in an account of their experiences in a hospital. To their vision, the whole of hospital life seems one unending round of hilarity. Their fun always begins when the doctor (his eyes gleaming fiercely and triumphantly) decides that an immediate operation is necessary. From that point the story never varies. The ambulance driver amuses the humorist by trying to run down pedestrians, and by turning away from the wheel while doing seventy miles an hour to compare symptoms with his passenger. Fourteen internes descend on him when he reaches the hospital, and their dour discussion of his case and inevitable prediction that he hasn't a chance never fail as a source of hilarity. The operation itself and the process of coming out from under the ether are always good for several laughs. Then there is the orderly who persistently slams doors, to the irritation of the funnyman and the delight of his readers; and the beautiful nurse, with whom the patient falls in love and who is promptly discharged by the patient's wife. It is a familiar pattern, developed by almost every leading humorist, and from it the public has gained its conception of the humorous side of hospital life.

Those whose contact with hospital life has been at all extensive, have an entirely different viewpoint. They know that everything connected with a hospital is primarily intensely serious. There is no levity about the saving of human lives—it is a somber affair tinged with tragedy or the quiet gladness of convalescence. When spontaneous humor does appear, it serves only as a contrast to the general theme, and is itself affected by that fundamental seriousness.

Doctors, nurses, and all those connected with hospitals, from the very nature of their duties, have contact with many of the weaknesses of human nature, and it is from the observation of these frailties that they derive most of their humor. They laugh "as the gods laugh," viewing the quirks and eccentricities of man from a detached viewpoint. It is a slightly cynical, yet thoroughly understanding type of humor, a quiet, self-contained enjoyment typical of the healing professions.

Every nurse and doctor is familiar with the "moaner." A moaner is a patient who wants sympathy and insists on getting it, but refuses to waste his time being sick when there is no one around to sympathize. So the moaner lies relaxed, with his eyes turned toward the door. The appearance of a nurse, or even a visitor passing down the hall, is the signal for loud moans, which cease as soon as the prospective sympathizer is out of sight. Probably because of their constant contact with real pain, and sincere sympathy for those suffering, nurses and doctors find real amusement in listening to these psuedo-sufferers.

Another common type of patient is the "politician." The politician, usually a woman, employs strategy in an attempt to gain more than her share of attention from

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hospital attendants. For example, when Miss Jones, her regular nurse, is relieved by Miss Smith, this type of patient is apt to talk endlessly of the merits of Miss Jones, who, it appears, is the dearest and sweetest girl the patient has ever known. The idea is that the relief nurse will tell Miss Jones when she returns to duty, and the latter, overjoyed at her popularity, will see that the patient's slightest wish is immediately carried out. Sometimes this plan works—sometimes.

Hospital visitors are also a source of amusement. Perhaps the most amusing are those who at the time are the most provoking. They are the people who don't believe in signs, who think that a "No Visitors" sign refers to someone else, and an 8:30 closing sign is just an error. They wander amiably down the hall at 10:30 p.m. "to see Joe" and are vaguely surprised and a trifle hurt when they can't see him. They sit calmly back at 8:45 p.m. when asked to terminate their visit, and assure the nurse that they'll go right away, meaning about 10:00 o'clock. And the nurse smiles back and ushers them out, inwardly half-raging and half-laughing at these funny humans.

The delirious patient who, clad only in a beard, a hat, and a suit of long underwear, appears suddenly before a sleepy night switchboard operator, and bids him a dignified and cordial farewell, is apt to be a source of anxiety at the moment, but later he will be among the operator's most amusing recollections.

And another instance—typical of the humorous side of hospital life. The signal light of the switchboard comes on, the operator plugs in, and a cultured feminine voice inquires, "Is John there?" "John who?" queries the puzzled operator. "Why," comes the patient answer, "John—my husband."

Finally the operator succeeds in getting the last name, and looks up the register of patients. There is no patient by that name in the hospital. He tells the wife that John is not there, and she exclaims in a disappointed manner, "That's funny. He left here an hour ago to visit someone in the hospital—I don't know whom. Are you sure you haven't seen him?" The operator's laugh may be hollow, but if he can laugh at all, he understands the humorous side of hospital life.

## Psychiatry

ARTHUR E. LIEN, M. D.

N Spokane County persons charged with insanity are cared for as prescribed by Remington's Revised Statutes of Washington. The statute pertaining to the insane deals with several matters such as the establishment of hospitals for the insane, commitment of patients, treatment of patients, custody and release of the criminally insane. Of particular concern to physicians and residents of Spokane County is the routine of the handling of persons who are, or are suspected of being, mentally deranged. Until about January, 1933, persons for whom insanity warrants had been issued were detained either in the city or county jail, and the hearings were conducted at regular stated intervals at the court house. Effective about January, 1933, this

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procedure was changed by the judges of the Spokane County Superior Court, in order to comply with Chapter 4, Section 6931, of Remington's Revised Statutes of Washington. This section is entitled "Preliminary Commitment and Observation," and reads in part as follows: "Provided that in all counties having no county hospital, the judge of the Superior Court thereof may designate as a detention hospital such other places of detention and treatment as he may deem suitable for the purposes of this act, and shall order the sheriff of that county to forthwith convey all persons charged with insanity before him to the place so designated, upon such terms and under such conditions as said court may determine."

The regular routine for the handling of those who are, or are suspected of being, insane is as follows: Some person, preferably a relative, who desires an examination of a patient as to his sanity, comes to the judge of the Superior Court asking for permission for the issuance of an insanity warrant. When he makes such a request, he should, if possible, bring with him a statement from a physician setting forth that he believes that such a person is insane; if possible, the physician should render a diagnosis. The judge will, upon the presentation of such a statement or other evidence that strongly indicates mental derangement, allow the clerk of the Superior Court to issue an insanity warrant. This warrant is then delivered to the sheriff, who arrests the suspected person and takes him to the designated hospital for observation. In this county the observation period usually consists of several days in order that a good working diagnosis may be had prior to the hearing.

Our hearings are held on Friday afternoons at the hospital. They are conducted by a board consisting of a judge of the Superior Court, at least two reputable physicians designated by the court, and the prosecuting attorney or one of his deputies. At this hearing those who have evidence to give pertaining to the matter are heard, and the essentials of their testimony are recorded on a blank form issued for the purpose. Then the individual who is charged in the warrant with being insane is heard, and what he has to say is also written into the form. From the evidence they have gained during the period of observation of the patient and the testimony given at the hearing, the physicians comprising the board make a diagnosis if possible advising the court as to their findings and stating what they think should be done with the patient. The court then decides whether to commit the patient to a state hospital for the insane, release him, or continue the proceeding at some later date. In the matter of the continuances, the patient may either be detained in the hospital for a longer period, or released to some responsible person, until such a date as the court may set for the final completion of the hearing. The prosecuting attorney's business on this board is essentially to determine the financial status of the patient or his relatives, so that the proper persons may be charged for the expense incident to the hearing and care in the state hospital. Occasionally there is a deviation from the above routine, and some of the suspected insane are temporarily detained in one of the Spokane jails. This variation usually comes about when it is necessary for the policeman or sheriff to

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arrest an individual in order to protect himself or the public. After such an arrest the ordinary routine is carried out.

In Spokane County during the past few years there have been well over three hundred warrants issued annually for insanity suspects. Approximately eighty per cent of these people are committed to a state hospital for the insane. The present manner of caring for these persons charged with insanity is much more satisfactory to everyone concerned than was the older method. The new system also provides a place for the proper care of those who become mentally deranged and who do not come before the court.

The teaching of psychiatry in Sacred Heart School of Nursing is all theoretical. Lectures cover the several types of insanity, mental deficiency states, and other abnormal conditions of the mind. At the close of the course, the students usually spend a day visiting the Eastern State Hospital for the Insane and the State Custodial School at Medical Lake, Washington.

## Special Diet Service

Douris Black, B. S.

Dietitian

HE increasing importance of diet therapy demands a well equipped special diet service in every hospital. Each day new diseases or types of known diseases are being added to the class of disorders which are treated either partially or more completely by diet. Scarcely a medical journal can be picked up that does not contain case histories or summaries of experiments showing the benefits derived either from forcing or restricting certain foods or classes of foods in various diseases.

For this reason Sacred Heart Hospital has had for the past twelve years a graduate dietitian in charge of the special diet kitchen. All types of special diets are served. The most frequent are: nephretic, diabetic, allergic, high caloric, low caloric, bland, smooth, low fat or fat free, Sippy and Lenhartz and their modifications, ketogenic, etc. In addition to these specific diets many special trays are served patients of long residence in the hospital whose individual food habits or likes and dislikes are such that a special diet best suits their wishes.

In addition the special diet kitchen serves as a dietotherapy for student nurses where each nurse spends eight weeks. During this time she learns to calculate, prepare, and serve all types of special diets. This experience is invaluable to nurses both in the practice of their profession and in home-making.

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# Pharmary

F. A. CANTLON

HE professions of pharmacy and medicine are closely related. The members of these professions must understand the composition and chemical properties and possibilities of the whole Materia Medica, both inorganic and organic, in order safely to maintain the important trusts committed to them — trusts involving the continued health and life of their fellow men.

The thorough knowledge of chemistry, Materia Medica, biology, and therapeutics is a fundamental requirement of the pharmacist's education.

Since the dawn of civilization, man has employed drugs and medicines as his most effective weapons against disease. The formularies and pharmacopoeias of ancient peoples have been handed down from generation to generation as their most priceless possessions.

Drugs stand today, as in the past, as man's most formidable weapon with which to fight disease. Rising out of the mists of antiquity, pharmacy has produced men who have contributed in a significant manner to the production of drugs and the enlargement of the boundaries of human knowledge. No one can deny the prominent and far-reaching influence of pharmacy in the past in man's great fight against disease.

Despite the teachings of the therapeutic nihilists, drugs are no less important to-day in the treatment of disease than they were a half century ago. But—the entire approach to the field of medication has changed. This is true not only of the various ingredients which are prescribed together, but may be said also of the wide group of substances used in the treatment of disease. Many of the familiar fluid extracts, tinctures, pills, and elixirs have been either entirely supplanted or are called for less frequently. This condition is specially noticeable in some instances. Twenty-five years ago elixirs were a popular form of medication. There were many of them official in the pharmacopoeia and many more accorded recognition in the national formulary. Many were examples of polypharmacy and possessed no scientifically established therapeutic value. In place of these once-popular pharmaceutical products, we find today the synthetic chemical, the endocrine or glandular principle and the bacterial serum,

Undoubtedly, professional pharmacy has progressed rapidly and unhesitatingly, in step with the practice of medicine. Science never stands still, never repeats itself. Only the unprofessional, the unscientific, the unethical practices persist to persecute those who put them to use and to hinder advancement. Yet, in the light of a century of progress we can echo, with more than a modicum of assurance, that "a race of scientific apothecaries is springing up, and must ere long supersede the mere vendors of medicine."

Finally, it may be said that, like everything else in the country, the profession of pharmacy is on the high road of improvement, and future generations will find estab-

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lished a class of scientific pharmaceutists, qualified to meet the exigencies of society in the most important branch of the social economy.

The Sacred Heart Hospital pharmacy is a striking example of the "modern professional pharmacy," and is managed entirely by two registered pharmacists—Sister Lucien, in the service for more than forty years, and Sister Pius Augustine, graduate pharmacist from the University of Montana.



### A Tribute to Spokane

Spokane, thou city of sunshine Heart of the Golden West,

Thy resources are legion,
With beautiful homes thou art blest.

Tall spires to challenge the mountains Broad fertile valleys below

With orchards of glorious treasures And towering peaks of snow.

There's a welcoming hand for the stranger, With happy home-fires gleaming bright

May prosperity aye be thy portion Spokane, Golden Valley of Light.

-Mrs. Arthur Lewis.

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#### **Patrons**

We congratulate the Sisters of Charity of Providence on the occasion of the Golden Jubilee of Sacred Heart Hospital.

0

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