ST. VINCENT—OREGON'S OLDEST HOSPITAL. In 1856, five Sisters of Charity of Providence from Montreal, Canada, came to the Northwest to teach and to care for the sick and injured in Vancouver, Washington. The following year they established St. Joseph Hospital, Vancouver, the second hospital founded west of the Mississippi River.

In 1874, the pioneering Sisters were given a tract of land on N. W. 12th and Marshall Street and a $1000 cash grant by the Society of St. Vincent de Paul of Portland, Oregon, to establish a much needed hospital in the city. One year later, on July 19, 1875, St. Vincent Hospital was dedicated. It was the first permanent hospital in Oregon and had a bed capacity of 75.

Those Sisters who came from Montreal during those early years had only rudimentary nurse's training. In 1880, Miss Theresa Cox of Bellevue Hospital, New York, was employed to teach classes for the Sisters in nursing procedures. At the end of that year the first student nurse, Mrs. Rose Philpots, was graduated from St. Vincent School of Nursing.

The entire staff of most hospitals in 1880 was not as large as today's health care team involved in caring for one patient who has open heart surgery.

The continued growth of the West quickly filled the small hospital and in 1888, additional property was purchased. The new hospital, with a bed capacity of 275, was built at the present location and dedicated in 1895.

At this time less than 10 percent of physicians in American hospitals had graduated from medical schools. Only 20 percent had ever attended medical school lectures. There were no laboratory tests or X-rays to use as a guide in diagnosis. Few people sought hospital care. Those who came were either seriously ill or incurable.

In 1910, addition of the "annex" (south wing) brought the total beds to 300, plus 49 bassinets. By this time people had become more confident and entered hospitals willingly. There was more hope of cure. Surgical techniques and asepsis had improved. X-ray had been discovered and some laboratory tests developed.

By 1935, new patterns of patient care emerged. About one in every fifteen Americans was being admitted yearly to a hospital.
In keeping with the tradition of maintaining St. Vincent as one of the most modern hospitals in the Northwest, the Sisters of Charity of Providence began an extensive modernization and expansion program in 1950. By 1957, a new addition increased the bed capacity to 420. Later some deletions were made to provide space for special-procedure units.

Demand for hospital care kept growing. From 1935 to 1965 the nation’s hospital population had more than tripled. Where formerly one in every fifteen Americans were admitted to hospitals annually, the number had increased to one in every seven. St. Vincent continued to expand its patient services as new skills and new equipment became available.

A few years ago it became obvious that a feasibility study must be undertaken at the hospital to chart its course for the future. Should costly repairs and remodeling continue at the existing building, or should a completely new hospital be constructed? The major recommendation of the study was that it would be more feasible to construct St. Vincent Hospital on a new site.

In 1965, the Sisters of Charity of Providence took the first step in the hospital’s long range master plan by purchasing 35 acres in Beaverton. In April 1967, plans for construction of a new $13.5 million St. Vincent Hospital and Medical Center were announced to the public.

For almost a century St. Vincent Hospital has served the community with full-scale, 24-hour-a-day medical care for persons of all races and creeds.

"We may liken the progress of man to that of a centenarian who dawdles through kindergarten for 85 years, takes 10 years to go through the primary grades, then rushes with lightning rapidity through grammar school, high school, university, and graduate college."

—Robert H. Lowie, Anthropologist
In 93 years of service to the community, St. Vincent Hospital has made great progress and is continually moving across new horizons. Once a place of custodial care, it has become a short-term institution—a center of comprehensive patient services for specialized diagnosis and treatment. The average patient now stays only about a week. St. Vincent's growth and development into one of the largest private voluntary nonprofit medical institutions in the Northwest has matched the growth and development of the community it serves.

Within a single generation people everywhere have become highly health conscious. Today the average person sees his doctor five times each year instead of twice as he did in the 30's. Within ten years the number of patients seeking hospital care has jumped 50 percent.

What has happened?

Today people are going to the hospital for more reasons than ever before.

Today there are also more people—and especially more older people requiring care. Medical developments of the past century have lengthened man's life by one-third. Not only is our total population increasing at the rate of 4.5 million annually, but our population age 65 and older now numbers 12 million more people than it did in 1900.

To keep pace with this growth, to provide the increasingly complex equipment and skilled personnel that is essential for modern care and yet control costs, is the challenge facing hospital administration and physicians.

A YEAR OF IMPROVEMENTS

Concern for the needs and dignity of each individual patient always has gone hand-in-hand with St. Vincent's prime objective—excellence in quality of patient care. To this end many improvements were planned and implemented during 1967-68.
Administration embarked on a sophisticated cost control program affecting all expenditures and a completely new financial reporting system for all departments.

A St. Vincent surgeon with an engineering background, Dr. Ugo Raglione, was appointed in June to serve as building coordinator for the new hospital.

On January 1, Mrs. Ruth Wiens became Director of the Department of Nursing. Mrs. Wiens came from University of Oregon School of Nursing in Portland, where she had been assistant professor of nursing.

In June 1967, St. Vincent Hospital adopted an improved system of modern patient accounting. All billings, accounts receivable and payroll applications are automated through a computer system shared with Providence Hospital, Portland.

In 1967, the Emergency Department, staffed by doctors who are emergency service specialists, provided care around-the-clock for 7,610 sick or injured patients. Use of this department as "the family doctor" continued to increase. Scheduled here regularly are minor surgical cases and application of casts—two non-emergency functions.

In the Operating Room, a new cryosurgery unit employs the principle of application of extreme cold to a limited area of tissue with precise regulation of rapid freezing. It provides safer, more effective eye surgery.

More comprehensive pulmonary-function testing was made possible when several new pieces of equipment were added in the Inhalation Therapy Department.

A new electro-diagnostic testing machine for diagnosis and prognosis of muscle weakness caused by nerve lesions is now in use in the Physical Therapy Department.

Services of a full-time Public Health Nurse Coordinator now assists patients in making plans to bridge the gap between home and hospital when they need continued nursing care.

A Patient Service Phone offers patients who have any unanswered questions regarding their hospital stay, the opportunity to speak directly with a member of the administrative staff.

First registration was opened to children of St. Vincent employees and physicians in the Montessori Nursery School that was started in St. Vincent Hall in September.

These are highlights of the ways in which the tradition of excellence continued at St. Vincent Hospital this year.
ST. VINCENT—PEOPLE WHO CARE—Hospital costs reflect the sharp rise in cost of practically everything involved in providing the constantly improving medical care of today.

The major factor in the rise of hospital expense throughout the United States is the cost of payroll. Compared with the usual business it must be remembered that hospitals staff for 168 hours weekly, not 40 hours, so common in industry. The hospital payroll accounts for almost two thirds of all operating expenses.

For a hospital the size of St. Vincent to offer the best medical care that modern science can provide, it takes a 355-member medical staff; 891 employees, more than 2 per patient; hundreds of students; and the supporting services of 80 volunteer workers. Three out of every four people are professionals or technicians.

All work with the same objective—restoring health and prolonging life. They represent over 150 job classifications serving both at the bedside and behind the scenes.

Many of our employees are outstanding leaders in their respective fields. Two recent appointments were: Director of Finance Al Camosso as president of Oregon Chapter of the American Association of Hospital Accountants; and Chief Pharmacist Conrad McConnell to the Oregon State Board of Health by Governor Tom McCall. Mr. McConnell also serves as president of the Oregon Society of Hospital Pharmacists.

To attract and maintain competent personnel St. Vincent Hospital must keep pace with industry. Much time and effort went into implementing a new wage and salary program. Based on merit, it provides a more adequate means of remuneration to the employee. On the job training is offered in many departments. An orientation program now welcomes all new employees.

Recognizing the important contribution of all employees to St. Vincent Hospital, the Sisters of Charity of Providence provide benefits that include a voluntary group insurance plan, a retire-
ment plan, tax-deferred annuity program, paid vacation, cafeteria meals at minimum cost, sick leave, inservice education programs, a Blue Cross hospitalization program, Employee Health Service, six paid holidays, credit union and free parking. An active Employee Communications Council continued to provide programs for improvement of communications between employees and administration. In September, the council composed of representatives of all nonsupervisory employee groups sponsored a gala Employee Fair featuring hobby show, games and entertainment. Proceeds from the event will go towards furnishing an employees' room in the new hospital.

**ST. VINCENT—A TEACHING HOSPITAL.** St. Vincent continued to expand its existing educational programs and instituted new ones during the past year. These include residencies and internships for physicians; a School of Medical Technology; a School of Radiologic Technology; cooperative programs with three colleges in nursing education; and inservice education for all nursing personnel, as well as classes in inhalation therapy, physical therapy, and open house programs.

**MEDICAL EDUCATION** at St. Vincent Hospital provides excellence in learning opportunities for young physicians. Through constant association of attending and house physicians in bedside and conference teaching the hospital is constantly improving its medical care.

Programs approved by the Council on Medical Education and Hospitals of the American Medical Association include four-year residencies in pathology and surgery; two-year residencies in general practice; and approved in 1968, a straight surgical, internship program.
THE DEPARTMENT OF NURSING. Affiliation with the Pediatric Unit of student nurses from Walla Walla College marks a historic first for the hospital—St. Vincent is newly accredited by the Washington State Board of Nursing for clinical nursing experience.

Since 1934, St. Vincent has offered clinical experience in a cooperative program with the University of Portland College of Nursing. Students in the new two-year Associate Arts Degree program at Portland Community College receive clinical experience at St. Vincent Hospital in medical-surgical nursing. Portland Community College Practical Nursing Students receive experience in the St. Vincent Maternity Department.

A nine-month post-graduate program in Clinical Specialization in the Operating Room, emphasizing Open Heart Surgery, was completed in June, 1967, by nine registered nurses.

At the end of January, 1968, St. Vincent was one of five Portland hospitals providing facilities and instructors for a two-week clinical workshop in acute coronary care nursing. The program helped prepare nurses to become more effective in caring for patients with heart attacks.

HOSPITAL HEALTH CAREERS. Jefferson High School seniors earn credit toward graduation in an 18-week on-the-job training program in various St. Vincent departments.

SCHOOL OF MEDICAL TECHNOLOGY. St. Vincent School of Medical Technology, founded in 1944, offers a one-year internship in medical technology that is fully approved by the Council on Medical Education and Hospitals of the American Medical Association and the American Society of Clinical Pathologists. The school maintains contractual affiliations with Marylhurst College and the University of Portland.

SCHOOL OF RADIOLOGIC TECHNOLOGY. A two-year program is offered at St. Vincent Hospital that is fully approved by the American College of Radiology and conducted in full compliance with the requirements of the American Society of Radiologic Technologists. The school is approved for fourteen students, seven in each year of the program.
NEW SKILLS FOR HEALING THROUGH RESEARCH. Research activities at St. Vincent continued to enhance practical contributions to medical knowledge in 1967-1968. The Frank R. Menne Research Fund, for specialized research projects, and the Oregon Heart Association support these programs. Established in 1962, the Menne Fund has received many private donations from St. Vincent friends.

In January 1968, the St. Vincent laboratory requested accreditation from the College of American Pathologists, a commendation that had been granted previously to only one other laboratory in a private hospital in Oregon. On April 19, 1968, following a rigorous inspection by a pathologist representing the Commission on Laboratory Inspection and Accreditation of the College of American Pathologists, the laboratory received notification that it had passed the inspection and had been accredited.

Clinical heart research continued in the Cardiac Telemetry Station under the direction of volunteer investigator Dr. Herbert J. Semler. A new phase was started recently involving electronic instrumentation recording human physiological measurements without attaching or implanting electrodes. Recordings, made without mental or physical trauma to the subject, provide new information in the cardiovascular examination in the hope of detecting heart disease early so that preventive measures can be instituted.

A $3460 grant was received from the Oregon Heart Association in 1967 for Dr. Semler's research in vectorcardiography.

Another research project now being conducted by Dr. Stanley Welborn, Dr. Arch Diack, and Mr. Melvin Holznagel is the development of an automatic resuscitator intended for use in cases of cardiac arrest or ventricular fibrillation. The project is supported by the Frank R. Menne Research Fund with major contributions by Portland General Electric Company, Pacific Power and Light Company, and Tektronix, Inc.

Drs. Paul E. Zuelke, Donald T. Manion, and Albert A. Oyama are conducting a study of the effects of plasmapheresis in the antibody titers of expectant mothers. The project is supported by the Frank R. Menne Research Fund.
THE ST. VINCENT LAY BOARD endeavors to generate mutual understanding between the hospital and the community and assists hospital administration in planning and policy making in areas of: new hospital planning, medical education, nursing and paramedical personnel education, labor relations, governmental relations, and financing of hospital functions.

Members of the board are:
Mr. Moe M. Tonkon, president; Attorney-at-Law
Mr. Howard Vollum, vice president; President, Tektronix, Inc.
Mr. Joseph J. Adams, secretary; Assistant Dean, University of Oregon Medical School
Mr. Dan Davis, President, Dan Davis Corporation
Mr. Joseph J. DuLong, Vice President, Merrill, Lynch, Pierce Fenner & Smith
Mr. Gerald Frank, Personal Investments
Mr. C. Howard Lane, President, Mt. Hood Radio and Television Broadcasting Corporation.
Mr. Michael Park, Vice President, Tektronix, Inc.
Mr. Robert J. Rickett, President, Graphic Arts Center
Mr. George Rives, Attorney-at-Law
Dr. Arthur L. Rogers, St. Vincent Medical Staff and Portland Clinic
Mr. LeRoy B. Staver, President, United States National Bank of Oregon
Mr. Cyrus T. Walker, President, Pope & Talbot, Inc.

THE MEDICAL STAFF. St. Vincent is proud of its distinguished 355-member Medical Staff who represent 21 divisions of medicine. Over 70 percent of St. Vincent Medical Staff members also serve on the faculty at the University of Oregon Medical School. Many staff members have achieved national recognition in both clinical and research capacities.

MEDICAL ADVISORY BOARD. The Administrator's Medical Advisory Board, appointed in 1965 by Sister Mary Laureen, has functioned regularly through both full board and subcommittee meetings. Its deliberations have to do with the medical aspects of administrative problems, and for the year past its greatest concern has been centered around the new St. Vincent Hospital planning. It is composed of 26 staff physicians. Under the chairmanship of Dr. Arch Diack, the board is divided into several committees to study medical needs of the hospital.
HOW THE HOSPITAL DOLLAR WAS SPENT

DIRECT PATIENT SERVICES
Nursing service and daily care, intensive care, coronary care, operating rooms, recovery rooms, central supply, I.V., emergency department.

PROFESSIONAL PATIENT SERVICES
Laboratory, EKG and EEG, radiology, pharmacy, inhalation therapy, physical therapy, medical records.

MEDICAL EDUCATION AND RESEARCH PROGRAMS
Dietary and cafeteria, operation of plant and maintenance, housekeeping, laundry and linen.

OTHER PATIENT SERVICES
Dental,pharmacy, medical records.

OTHER GENERAL SERVICES
Accounting and business office, admitting, telephone switchboard, data processing, administration including personnel, public information, purchasing and printing, employee benefits and payroll taxes.

DEPRECIATION AND INTEREST

PER DAY COST COMPARISONS

GIFTS AND BEQUESTS

Oregon Division, American Cancer Society
Tumor Clinic and Cancer Program .......... $ 5,600

Atlas Chemical—Heart Research .................. 11,250

Samuel Bergman Estate .......................... 14,583

Henry Failing Fund—Building and Equipment ........ 5,750

Adrienne Fulop Memorial Fund
Coronary Care Unit ...................................... 4,000

Sara Sabin Memorial Fund ...................... 25,000

St. Vincent Hospital Guild ........................ 9,201

Swindells Foundation .......................... 1,000

Union Pacific Railroad Foundation ............. 5,000

Other miscellaneous ......................... 8,417

To the Frank R. Menne Research Fund:
Oregon Heart Association ....................... 3,460

Others ........................................ 1,911

To the Richard S. Frank Memorial Fund:
Cancer Laboratory .................................. 860

Total Gifts and Bequests ......................... $96,032

* Source—A.H.A. Guide Issue, 8-1-67; not for profit with medical education affiliation, 1966 reporting year.
** Source—A.H.A. Guide Issue, 8-1-67; not for profit hospitals in the state.
ST. VINCENT HOSPITAL GUILD 1967-1968—
ELECTIVE OFFICERS.

Honorary President and Guild Advisor. .. Sister Mary Laureen
President ......................... Mrs. Henry T. Allison
Vice President ..................... Mrs. George C. Perkins
Recording Secretary ................ Mrs. F. G. Bradshaw
Corresponding Secretary .......... Mrs. Henry P. Tervooren
Treasurer .......................... Mrs. Roger V. Wagner
Historian .......................... Mrs. John T. Kern
Past President ..................... Mrs. L. S. Caspersen

Twelve thousand hours of service were volunteered by members of the St. Vincent Guild. Assistance was given with recreational therapy, taking of baby pictures, the coffee cart and gift cart. Guild members arrange donated flowers for patients who do not receive any during their stay in the hospital. Members assist in the operating room, recovery room and outpatient clinic. They also staff an attractive gift shop at the lobby entrance where fresh flowers, a wide selection of attractive gifts, candies and magazines are available for sale.

With monies raised during 1967, the Guild presented St. Vincent Radiology Department with an echoencephalograph. The equipment employs ultrasonic technique and is used in diagnosis of brain tumors and cerebral hemorrhages.
THE NEW ST. VINCENT HOSPITAL AND MEDICAL CENTER.
Ground-breaking ceremonies Sunday, March 31, 1968, marked the beginning of construction of the new $18.5 million St. Vincent Hospital and Medical Center.

The Most Reverend Robert J. Dwyer, Archbishop of Portland, officiated at the blessing of the ground. Master of ceremonies was Dr. Arthur L. Rogers, member of the St. Vincent Medical Staff and Lay Board. Sister Mary Laureen, administrator, St. Vincent Hospital, gave the official welcome. On the program were remarks by Mr. Moe M. Tonkon, chairman, St. Vincent Lay Board, and Dr. Joseph W. Nadal, president, St. Vincent Medical Staff, followed by an address from Sister Cecilia Abhold, F.C.S.P., Provincial Superior, Sacred Heart Province. Music was provided by the Beaverton High School Band.

Hoffman Construction Company began work on a $7,214,000 contract for the first phase, a 225-bed section of the ultimate 420-bed facility. Plans are for the second phase to begin later this year with completion scheduled for early 1970.

A change in plans, to build the new hospital in two phases instead of five, will reduce overall cost. This will not only save time in construction but will eliminate erection of temporary structures and any remodeling between stages.

The design concept in the original five-phase construction plan has been largely retained. Patient treatment rooms, business and administrative offices and supporting services will occupy a two-story base. A nine-story tower, rising above this, contains patient rooms of which about 70 percent will be private nursing units.

Two federal Hill-Harris grants of $1,056,691 for the Phase I portion, and $1,213,494 for the Phase II portion of the contract will help greatly in financing of the program.

With the opening of the new St. Vincent Hospital and Medical Center in 1970, the Sisters of Charity of Providence will have provided medical service without interruption for 95 years.

—Tennyson
1968 MEDICAL STAFF ROSTER
CHIEFS OF PROFESSIONAL SERVICES

Anesthesia ......................... James V. Harber, M.D.
Dental .......................... Frank Mihnos, D.D.S.
General Practice ............... Donald T. Manion, M.D.
Medicine ..................... Donald W. Sutherland, M.D.
Neuropsychiatry .......... Wayne M. Pidgeon, M.D.
Neurosurgery ................ Edward K. Kloos, M.D.
Obstetrics-Gynecology ...... J. Oppie McCall, Jr. M.D.
Ophthalmology ............. M. Harvey Johnson, M.D.
Orthopedics ............... Charles A. Fagan, M.D.
Otolaryngology .......... Donald C. Mettler, M.D.
Pediatrics .................... Joseph T. Hart, M.D.
Surgery ......................... Allen M. Boyden, M.D.
Urology ....................... Gerald F. Whitlock, M.D.

Director of Pathology and Clinical Laboratories ........... Joseph E. Nohlgren, M.D.
Director of Radiology ........ James A. Schneider, M.D.
Director of Emergency Service . W. Stanley Welborn, M.D.
Director of Medical Education .... David B. Miller, Jr. M.D.

1968 EXECUTIVE COMMITTEE

President ......................... Joseph W. Nadal, M.D.
President-elect ............... Gerald F. Whitlock, M.D.
Past-President ................. Russell L. Johnsrud, M.D.
Secretary-Treasurer ........... Albert A. Oyama, M.D.
Member, term ends 1968 . Paul E. Zuelke, M.D.
Member, term ends 1969 . Ernest T. Livingstone, M.D.
Member, term ends 1970 . Donald W. Sutherland, M.D.

ADMINISTRATION

Administrator .................. Sister Mary Laureen, R.N., M.S.
Executive Director ........ Ronald J. Davey, M.P.H.
Director of Finance ........... Al M. Camosso, A.A.
Director of Nursing .......... Mrs. Ruth Wiens, R.N., M.S.

CHAPLAIN

Father John Gaffney, S.J.
Father William McClory, O.P., Assistant

St. Vincent is owned and operated by the Sisters of Charity of Providence. It is the oldest hospital in Oregon—established in Portland in 1875. St. Vincent Hospital is fully accredited by the Joint Commission on Accreditation of Hospitals. This commission is comprised of 20 representatives from the American Medical Association, the American College of Surgeons, the American College of Physicians, and the American Hospital Association.

St. Vincent Hospital is a member of: American Hospital Association, Catholic Hospital Association of the United States, Association of Western Hospitals, Oregon Association of Hospitals, Oregon Conference of Catholic Hospitals, Portland Council of Hospitals. It is approved for resident and intern training by the Council on Medical Education and Hospitals of American Medical Association, and for educational programs to train medical technologists and radiologic technologists. The School of Medical Technology is affiliated with Marylhurst College and University of Portland. St. Vincent is licensed by the State Department of Public Health, and cooperates with the University of Portland College of Nursing by providing clinical experience for student nurses.