

Years of Service to the Community of Spokane

1886 196



TREASURED MESSAGES OF OUR SEVENTY-FIFTH YEAR

HIS HOLINESS POPE JOHN XXIII



Nº 9717/60
THIS NO. SHOULD BE PREFIXED TO THE ANSWER



3339 Massachusetts Svenue Washington 8, G. C.

May 9, 1961

Reverend and dear Mother:

I am pleased to inform you that on the joyous occasion of the 75th Anniversary of the Sacred Heart Hospital, our Most Holy Father, Pope John XXIII, has graciously deigned to impart his Apostolic Benediction upon you, the Sisters and the Staff of this Hospital.

Fervent prayers of thanksgiving for the graces and favors of the past are offered by all associated with this merciful work; as this Anniversary begins a new chapter in the history of Sacred Heart Hospital, humble prayers rise up to heaven through Our Lady, Help of the Sick, to beg Almighty God His continued care and protection in the years that lie ahead. May God continue in the years to come to bless and prosper your zealous and self-sacrificing efforts in the care of the sick.

To this Blessing of the Sovereign Pontiff, I wish to add my personal congratulations and good wishes. With sentiments of esteem and renewed felicitations, I remain

Sincerely yours in Christ,

Apostolic Delegate

Reverend Mother Superior Sisters of Charity Sacred Heart Hospital Spokane, Washington THE MOST REVEREND BERNARD J. TOPEL BISHOP OF SPOKANE





DIOCESE OF SPOKANE

8. 317 HOWARD STREET
SPOKANE 4. WASHINGTON

January 20, 1961

Sister Mary Bede, Superior Sacred Heart Hospital West 101 Fighth Avenue Spokane, Washington

Dear Sister Mary Bede:

It gives me great pleasure to note the Diamond Jubilee Observance of Sacred Heart Hospital. Certainly it is notable for a hospital to care for the sick for 75 years. It is the more notable when this is done for the love of Christ, as is the case in a Catholic hospital. It sacred Heart Hospital.

There is no question Sacred Heart is a hospital of much more than usual reputation. As such, it has been a blessing to the city, the state and the Church. The Catholic Church is proud and grateful for the presence of Sacred Heart Hospital in Spokane.

May God continue to bless its work for the sick out of love for Christ; may He make it ever more outstanding.

Devotedly yours in the service of our Lady,

Hernard J. Topel

Bishop of Spokane

bjt/thm

MOTHER PHILIPPE OF CESAREE



J.M.J.

Providence Mother House

Montreal 24, Que.
2311 East St. Catherine Street
January 21, 1961

Sister Mary Bede, Superior Sacred Heart Hospital Spokane, Washington

Dear Sister Superior,

In the year 1886 a small group of Sisters of Providence treaded their way up the hill commanding the extensive Spokane Valley, having in mind the erection of an institution for the care of the sick. With the scanty means at their disposition, the pioneer sisters undertook their God-given task under the auspices of the Sacred Heart. In those days facilities were limited, equipment crude and clumsy, yet ever since the facilities were limited, equipment crude and clumsy, yet ever since the facilities were longeration of competent physicians, zealous priests, devoted nurses, willing employees, and generous benefactors who have shared their labors and helped them bear the burden and heat of busy days in the service of Christ in His suffering members.

Today, as we reminisce over the gradual development of the jubilarian institution, we cannot help recalling the devotedness, generosity, and selflessness of all those who have contributed to the achievements that meet our gaze in this modern, well-equipped hospital. However, toil and labor would have availed little had the guiding light of the Sacred Heart not presided over these activities and inspired so great a number to cooperate with the Sisters of Providence in the pursuit of their work of mercy in favor of suffering humanity.

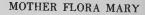
As we extend our heartfelt thanks to all collaborators of by-gone days, we raise our voice in prayer that praise and glory be given to God our Father for the multiple works of mercy and charity performed in Sacred Heart Hospital during the past seventy-five years of its existence. Then turning our eyes toward present-day contributors to the spiritual and material welfare of Sacred Heart Hospital, we fondly greet them and thank them for the share they take in the growth and success of the institution upon which we implore Christ's evermore abundant blessings for His greater glory and the sanctification of souls.

May this 75th anniversary you are preparing to commemorate inspire many young women to devote themselves to the noble cause of tending the sick for Christ's sake in the ranks of the Sisters of Providence.

With all good wishes to you and your collaborators,

Yours very sincerely in Jesus, Mary, and Joseph,

Mother Philippe de Cesaree, F.C.S.P.
Superior General





J.M.J.

Sistens of Chanity of Providence

Provincial Administration
Riverside 7.8993

East 9 Ninth Avenue

Spokane 3, Washington

February 24, 1961

Sister Mary Bede, Superior Sacred Heart Hospital Spokane, Washington

Dear Sister Superior:

The Sisters of Charity of Providence of St. Ignatius Province wish to take this opportunity of congratulating Sacred Heart Hospital on the occasion of its 75th Anniversary.

Devotion to the cause of patient care has burned like a Nightingale torch across the years. From humble beginnings, Sacred Heart Hospital has developed community and regional leadership.

It is the pledge of the members of the Sisters of Charity of Providence that the fervor and tenacity demonstrated in the past will continue across the years ahead, guarding the Spokane community in sickness and in health.

May God bless each one who enters within the portals of Sacred Heart Hospital.

Devotedly in our Lady,

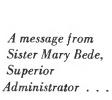
Mother Flora Mary, F.C.S.P. Provincial Superior St. Ignatius Province

spital.

SISTERS OF CHARITY OF PROVIDENCE SACRED HEART HOSPITAL COMMUNITY



Sister Mary Bede, Superior





Providence Convent

oncern for the health of the Spokane Community has been the mission of the Sisters of Charity of Providence for seventy-five years. Since Sacred Heart Hospital opened its doors in 1886, care of the sick and of the aged has continued day and night, year in and year out, without interruption. While caring for patients, the Sisters also have prayed for them, asking health of soul as well as body. In addition, the hospital plant has continued to grow. The hospital has championed a scientific approach to medical problems. This summarizes our history. An insight into the philosophy guiding Sacred Heart's future may be gained by a study of its past.

Sister Mary Bede

Sacred Heart Chapel



Caritas Christi Urget Ros

THE CHARITY OF CHRIST URGES US



Sr. Rose of Providence



SR. MARY FRANCINE



Sr. Barbara Ann



Sr. Anna Maria



Sr. Marie Eugenie



SR. MILDRED DOLORES



SR. MARY URSULA



Sr. Donna



Sr. Frances Maureen



SR. ELIZABETH OF PROVIDENCE



SR. EMMANUEL



Sr. Mary Raymond



Sr. Marie Emmeline



Sr. Annette



Sr. Fredrick Marie



SR. LOUIS MARCEL



SR. MIRIAM



Sr. Tarcisius



SR. MARY MECHTILDE



Sr. Mary Alodia

FORMER ADMINISTRATORS OF SACRED HEART HOSPITAL

1886-1889	Sister Joseph of Arimathea (Foundress)
1889-1891	Sister Mary of Mercy
1891-1892	Sister James Kisai
1892-1892	Sister Blandine of the Angels
1892-1898	Sister Columban
1898-1902	Sister Peter of Alcantara
1902-1908	Sister Vincent Ferrier
1908-1910	Sister Mary Melanie
1910-1916	Sister Mederic
1916-1922	Sister Gaudentia
1922-1926	Sister Petronilla
1926-1932	Sister Mary Alice
1932-1938	Sister Blasius
1938-1944	Sister Henrietta
1944-1950	Sister Agnes of the Sacred Heart
1950-1956	Sister Theodula

Sister Mary Bede

1956-

THE HOSPITAL CHAPLAIN





e might think of the Chaplain's quarters, high atop the hospital building, as a spiritual first-aid station. The Chaplain is a permanent resident in the hospital building where he can be reached, night or day, when there is need of his services. Spiritual first-aid through pastoral counseling can be soothing to a disturbed mind; spiritual medicine in the form of the Sacraments is the only effective treatment for soul-sickness, the only restorative for an ebbing spiritual life.

The Chaplain's basic responsibility is to provide spiritual help for the sick and infirm, who have a real need of such succor precisely because they are afflicted. The Chaplain attempts to realize the full meaning of Christ's invitation to fulfill the corporal work of mercy of assisting in the care of the sick. Total patient care must put an adequate focus on the state of his soul. Spiritual help in its various forms has been demonstrated to be of real value in effecting a cure of the "whole" person; so the administration at Sacred Heart provides the services of a resident senior chaplain. In co-operation with the Jesuit Fathers at Manresa Hall, Port Townsend, Washington, the Administration is able to engage the talent of two Jesuit Tertian Fathers, who come in teams of two, to spend a four-week period among the patients. These chaplains come to us from a Jesuit institute known as the Tertianship, a school or seminary that deals primarily with priestly asceticism. Chief among the practical courses given in this institute is the one dealing with Pastoral Medicine or the pastoral care of souls.

Invariably, the assistant chaplains — Jesuit Tertian Fathers — are dedicated young priests who perform their merciful duties in a calm and professional manner, showing the training of long study and fruitful meditation; they evince a genuine kindly interest in the welfare and comfort of all patients. They bring to their task all the freshness and enthusiasm of the newly annointed priest. They are quite qualified to be full-

fledged members of the therapeutic team that operates so efficiently in Spokane's Sacred Heart Hospital.

To possess and augment the gift of religious faith, which gives one eyes to see Christ suffering in even the "least" of all patients; to be a perfect Father and spiritual medic of all patients; to constantly strive to be like Christ — an alter Christus — to practice patience, charity, and zeal; to soothe the aching heart; to be always vigilant for the roaming sheep and to extricate it from the entangling brambles of temptation — these, in part, represent the sun-bright star to which the hospital chaplain attaches the chariot of his dreams, hopes, and aspirations. Often enough the Chaplain is conscious that he has been a success in attaining some of these goals. His triumphs are mostly known to himself alone, unsung among his fellows, but not in the love of the Sacred Heart of Jesus - the absolute and final end of his toil.

To give patient-care — both physical and spiritual — is the "sufficient reason" why Sacred Heart Hospital stands here on Spokane's South Hill with doors that are never closed to suffering humanity. The Chaplain knows that his duty is to bring "soul-care" to the flow of patients who daily cross the friendly threshold of Sacred Heart. He recognizes that all men have a spiritual status, and, if they be of the Catholic Faith, enjoy a title to the Sacramental helps of the Catholic Relig-

ion, consequently, the generous administration of the Sacraments, the daily distribution of Holy Communion among patients. And if our patients have some other cherished belief, the chaplain, acting in the role of counselor, makes himself available to all patients who may choose to want him. Visiting the lonely sick is always of value; it is rarely without some psychological benefit.



PRESENT COMPLEMENTS PAST

landmark passed. A new main entrance was ushered in. This was the principal physical accomplishment of January, 1961, as Sacred Heart Hospital began its seventy-fifth year. For a half century, the hospital's north side, looking toward Spokane, presented an entrance of massive stone steps and cut stone facades, bearing the hospital's name. The front was a relic of the Victorian Age. Since summer 1960, a \$150,000 project has been under way bringing the portal abreast of the "motor car age."

One portion of the entrance remains, however. The much photographed statue of the Sacred Heart, which has cast a provident shadow toward the City Center across the years, holds a continued position of importance. A niche at third-floor level was created where the splendor of the statue is projected through the aura of a blue, stained glass background.

The statue is symbolic of the hospital's attitude toward patient care. The new entrance which moves traffic through two broad lanes corresponds with modernization programs in every department from housekeeping to pathology. The one thing remaining constant is the determination of Sacred Heart to see something of Christ in each patient.

The new entrance is protected by a canopy supported by a red marble front. The surface of the drive is radiant heated for all weather motor protection. Electrically controlled doors open for persons stepping from cars and entering the lobby.



Sister Vincent Ferrier who became superior in 1902, acquired the valuable plot of two city blocks on Eighth and Browne streets.

Hospital construction took place from 1905 to 1910. Trees on the ground were not so tall at the time of this photo in 1936.

1910 / 1936

Comfort and beauty are features of the new admitting area where registration may be accomplished without standing or waiting.

Admission procedure necessarily will be cut to a minimum of effort. Since 36,000 persons were admitted to the hospital or treated by the emergency department in 1960, the development of a modern,

up-to-date entrance, lobby and admissions area was a necessity.

One hundred admissions a day! What a transition from the horse-and-buggy era in which Sacred Heart was born. What a contrast from the days when physicians arrived by trolley to make hospital calls.



The New Entrance

HISTORICAL HIGHLIGHTS

here was a brief moment in history when Sacred Heart Hospital was without a name. True, the hospital has operated day and night for 75 years without once closing its doors, or turning out all of the lights. But there was a nameless moment.

On 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 which they were to select for Spokane's first hospital.

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 \$2,000. The plans of the new hospital were drafted and contracts awarded. On July 2, 1886, Feast of the Sacred Heart, the building was sufficiently advanced for the laying of the cornerstone, and the event was scheduled for that date which coincided with the visit of the Rt. Rev. Aegidius Junger, Bishop of Nisqually.

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 Rev. James J. Rebmann, S.J., pastor of Our Lady of Lourdes, a new church, and other Jesuit fathers, performed the ceremony amid a throng of people assembled 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, the Rev. Aloysius Ragaru, S.J., turned to the bishop and said with decision, "Sacred Heart Hospital."

FIRST HOSPITAL STAFF

The first hospital staff was organized in 1888 with the following members: Doctors George Allison, N. Fred Essig, A. S. Campbell, G. W. Libby, Dr. Lockhart and Dr. Parmlee. These were joined later by Dr. Patrick S. Byrne, and Dr. T. L. Catterson. As other physicians came to Spokane to try their fortunes 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 they manifest toward the hospital.

THE BIG FIRE

Joy and sorrow, improvement and disaster characterized the early days of Spokane and Sacred Heart Hospital. There was joy in 1888 when growing Spokane demanded more hospital beds. At once Sister Joseph gained permission to add a west wing to the building at Trent and Browne. It supplied two surgeries and doubled the bed capacity.

In 1889 joy turned to sorrow when the greatest fire in the city's history destroyed more than forty acres of business area. Many injured persons and the ill driven from their homes found shelter at Sacred Heart. Sister Joseph sought the needy, the penniless, the sick, dispensing charity among the fire sufferers.

SACRED HEART HOSPITAL



The Sacred Heart Hospital was founded April 30, 1886, and since that period there have been admitted to the institution 27,000 patients. The original building comprised thirty-one rooms and was conducted by six Sisters, Sister Joseph Arimethea being the first Superioress. It was soon found necessary to increase the size of the building, and in 1888 the west wing was added. The demands upon the institution continued with the increase in population of the city, and in 1901 the building was enlarged to its present proportions by the addition of the east wing. The work at the hospital today requires the duty of twenty-five Sisters, twenty nurses and ten attendants. Sister M. Melanie is the present

The location is central, and the grounds spacious. The four-story building is some distance from the street, and is practically free from noise. There are two surgeries, forty private rooms, twelve wards, with accomand trained nurses the student nurses of the training school conducted by the hospital assist in the care of patients. Personal attention is given to each individual case by the Sisters in charge of nursing, and everything known to science is carefully done to aid in recovery.

During the year of 1908 2,000 patients received

treatment, a large percentage of whom were cured. The success attained in the various operations and treatment of diseases has been due in a large degree to the skill of attending surgeons and physicians, aided by careful nursing, and the advanced improvements in hospital equipment. In the surgical scope most every operation known to the science was performed, and the diseases treated covered a wide range.

The accommodations have long since been insufficient for the increasing number of patients seeking care at the hospital, and work on the new building is being prosecuted as rapidly as possible, so that the institution



VIEW OF THE PRESENT SAURED BEART HOSPITAL

modations for 130 patients. Besides there are offices, reception rooms, dispensary, chapel, dormitory rooms, community rooms for the Sisters, employees' quarters, dining ar 'rulinary departments.

As surgery and medicine advances, the institution

equipped with approved facilities for caring for the ick and injured, comparing in this regard with those ound in institutions in larger cities. The surgeries are modern in every respect. They occupy the southeast corner of the second floor of the building, and are well ighted and commodious. Adjoining are sterilizing rooms, and an X-Ray room. There is also a room for the dressing of patients.

The culinary department is equipped with every modern convenience for the preparation of delicate and nourishing food. Particular care is given to the diet of patients, physicians' instructions being scrupulously tollowed.

The nursing staff is adequate. Besides the Sisters

may be of greater service to the public. It is hoped that the building will be ready for occupancy early in

The Sisters desire to thank the visiting staff, and the friends of the institution for their kind interest in the hospital, and to express their gratitude to all members of the profession in the city and surrounding country for the confidence they have shown in sending their patients to the hospital. The profession in general may be assured that in the future the same skill and painstaking care will be accorded their patients as has been in

Private rooms range in prices from \$15.00 to \$28.00 per week. Accommodations in wards, from \$8.00 to \$12.00 per week. These rates include nursing.

The visiting hours are from 9 a. m. to 11 and 1 p. m. to 4 p. m. and from 7 p. m. to 8 p. m on all days except Sundays. On Sundays the visiting hours are from 1 p. m. to 5 p. m., and 7 p. m. to 8 p. m.

Reprint Sacred Heart Hospital Bulletin (1908-1909)

First Hospital at Trent and Browne

A BUILDING IS BORN



NEW SACRED HEART HOSPITAL



Imposing in architecture, massive in construction advanced in its interior arrangement is the new Sacred Heart Hospital, ensconsed amid the healthgiving pines on Manito Hill, one of the beautiful residence districts of Spokane, where it commands an unbroken vista of fertile valleys, timbered foothills and mountains—a monument to the Siaters of Charity of the House of Providence, and a compliment to the Great Northwest, with the upbuilding of which the Order has been identified since 1856.

The illuminated erross, which is to rise twenty feet about the highest point of the center wing of the magnificent structure, visible for miles in every direction, will be a beacon to the afflicted, as within the enclosure the tender ministrations of Sisters and nurses, and the latest approved medical and surgical treatment will be given. No expense or energy will have been spared to prepare this institution for its mission—to benefit unfortunate humanity.

achievements of man, its besy marts, factories, mills, street cars, offices and homes unfold like a huge panorama.

The beautiful porticoed entrance with colonnade, on Eighth Avenue, will be approached by granite steps, which will lead to the reception hall on the second floor. A number of other entrances will give access to the hospital, and besides heightening the outside effect, they will be features of convenience. The port cochere at the main entrance, and at the two side entrances will permit physicians to remove their patients from carriages direct to the inside of the hospital without expos-

The building is six stories, 300 feet in length, and constructed of red pressed brick solidified by steel, concrete and grantie foundation, and embellished with cut stone. The roofing will be tile. The east wing is 160 by 41 feet, the west wing 60 by 41, and the center wing 41 by 35 feet, while the chapel is two stories, 86 by



VIEW OF THE NEW SACRED HEART HOSPITAL FROM BROWNE STREET Photo by C. R. Lev

Every detail entering into the construction of the hospital nas been carefully studied by the Sisters, some of whom made trips to New York and other Eastern points to acquaint themselves with the latest hospital conveniences and accessories, and as a result Spokane will have an institution which will meet every exaction of the entirent, and without an equal west of the Rocky Moonains. In the decorations, furnishings and equipment of the hospital the comfort as well as safety of patients will be conserved, the most scrupulous regard

will he given to perfect sanitation of each room.

The hospital building occupies a commanding site.

To the south are beautiful residences and majestic pines, typical of the Evergreen state, while in front is the hill-side, which stretches to the levels forming the banks of Spokane river, a half mile northward, where the waters "break into laughing ripples." From the windows and porticoed verandas and the solarium at one end of the immense roof garden which will cover the entire structure, convalescing patients may gaze upon inspiring works of nature, and see the city with its interering

45. The west wing is eventually to be enlarged to the proportions of the east wing, and the chapel section carried up to the sixth story. Three spacious stairways and two electric elevators will ascend from the first floor to the floors above. Fire proof balconies eight feet in width will extend across the entire south side of the building at each story, with fire proof stairways to the sixth floor. The corridors and entrances will be laid in tile, while the flooring of the rooms will be of hardwood.

There will be 240 rooms in the hospital, and of these 100 will be private rooms for patients. Besides these accommodations there will be 24 wards with a capacity of 200 beds. The walls and floors will be as near sound-proof as possible. The electric light ammirciator system will be installed, and the rooms and wards will be connected with indicators on each floor. Bath rooms, two chart rooms, two diet kitchens, public and private telephones will be on every floor. All of the rooms will be heated by steam, and in a number of rooms there will be electric heaters. The hospital will be lighted throughout by gas and electricity. The institution will have its sown electric lighting plant,

Reprint Sacred Heart Hospital Bulletin (1908-1909)

NO TRAFFIC PROBLEM HERE



When streetcars were taxis

Parking hasn't always been a problem of the Sacred Heart Hospital administration. In fact, when the "new" hospital was conceived at Eighth and Browne, Henry Ford was still attempting to perfect his version of the horseless carriage. Patients came in buggies, wagons and streetcars — if not on their own two feet. Physicians did likewise!

A streetcar may be noted in the above reprint, as it moved west on Eighth street. Sacred Heart Hospital and the human body have much in common. Each constantly undergoes change only to remain the same. The newest change to Sacred Heart is the Eighth street entrance, revamped to meet the needs of the motor-car age.

TREES DIE PROUDLY

Landscaping of the Sacred Heart Hospital grounds is a matter of much pride. Symbolic of the importance of each tree is a slab from a flowering tree which once stood in the drive between the hospital and the laundry. Sister John Eudes

fought to retain the tree. But traffic demanded its removal. In perpetuation of the tree's memory, a slab was cut from it, forming the "canvas" for a painting by Walter Kerkiehn. The work, illustrating the relationship of the tree to the grounds, hangs in the laundry.



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NURSING PIONEERS

ot only has the uniform changed since the "Sacred Heart Hospital Training School" was established in 1898 but training covers a somewhat different field. A considerable part of the instruction in the "good old days" had to do with the making of poultices and application of fomentations, cups and leeches and bandaging; the dressing of wounds and blisters and "sores of all kinds."

History indicates Sacred Heart's school for training nurses was the first in Spokane, the school being inaugurated by Mother M. Antoinette, Superior General. Sister Emerita, graduate nurse of St. Vincent Hospital, Portland, and registered pharmacist, was the first director. In 1901, according to annals, improvements consisting of electric bells and lights were installed and classes increased rapidly.

An early catalogue of the school said the Training School "has maintained a reputation, not only for imparting a thorough, practical and scientific knowledge



Waists were slender and skirts were full and sweeping. Nurses pose on the front steps of school at Trent and Browne, about time Jim Hill bought property for his railroad.

of the art of caring for the afflicted, but for excellent character training. The prescribed course in 1909 was three years.

The Sacred Heart Bulletin of 1909 read: "During the three-year course of training the young women reside at Sacred Heart Hospital, which provides them with living accommodations, a reasonable amount of laundry and five dollars a month. This amount is not intended as compensation, the instructions given by the staff and Sisters being regarded as an ample equivalent for their services. In case of sickness during the course the student will receive gratuitous care, but the time lost by the illness must be made up at the end of the term. Unless in an emergency, each student is given an afternoon each week."

SISTERS OF CHARITY OF THE HOUSE OF PROVIDENCE

The first hospital in the Pacific Northwest was established in 1858 at Fort Vancouver, Territory of Washington through the effort of people in the outpost community. The Fort, founded in 1825 by Hudson's Bay Company as a fur trading post, had its homeless, sick, aged and orphans, a few hundred whites and countless Indians. This was the setting, when five Catholic nuns, Sisters of Charity of Providence, arrived December 8, 1856.



The little group of hospital pioneers were far from home. They had traveled on the high seas for five weeks and were 6,000 miles from the mother house in Montreal.

In addition to conducting a school, the Sisters visited the sick in their homes, cared for two orphans left on their doorstep and performed other works of charity. On April 6, 1858, the Vancouver Ladies of Charity, a group of women of all faiths, met to discuss hospital plans. The women turned to Mother Joseph of the Sacred Heart, the Superior of the group, and asked if she could provide a building suitable for use as a hospital.

This remarkable woman, daughter of a Quebec farmer and carriage maker, had learned as a girl to use the carpenter tools of her father. Soon Washington's first hospital was brought into being. This paved the way for most of the state's early hospital building for Mother Joseph not only drew plans but worked along side of the builders.

Thirty years later it was Sister Joseph of the Sacred Heart who drew plans for Spokane's first hospital which was named for her.



Mother Joseph of the Sacred Heart

The book, "The Bell and the River," relates: "Every evening after the workers went home, Mother Joseph made a meticulous inspection of the day's work, climbing ladders to test the beams or prying under flooring to check the foundation."

At the time St. Joseph Hospital opened its doors in 1858, care of the sick was looked upon as a work of mercy. There was little help from medical science or drugs. For taking care of the mentally deranged, The Territory of Washington granted \$8 a week per person, this to cover care, food and lodging.

Across the years the order grew in strength. Schools and hospitals and homes for the aged are operated throughout the West and Alaska.

SACRED HEART HOSPITAL 1936

D epression held the nation in its grip. Dark clouds of war were fomenting in Europe and Asia. It was little realized at the time, that 1936 marked the close of an era. The horse-and-buggy age was about to pass forever. Forces were at work which would change men and their jobs, factories and plants - medicine and hospitalization.

The world never will be the same again as it was in 1936, the year Sacred Heart Hospital was observing "Fifty Golden Years." The impact of space, speed, automation and science had not made an impression. The practice of medicine and the administration of hospital care were much the same as in the so-called Roaring Twenties.

The seeds of great scientific advancement in patient care had been planted. The plant has been a quarter century in flowering.

The late Dr. R. L. Rotchford, who was president of the medical staff in 1936, wrote: "Yearly progress has taken place and Spokane may well be proud of 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 complete cooperation of the management, and the efficiency of the nursing personnel."

Many of Sacred Heart's departments were established but they functioned at a fraction of the current pace. Dr. Rotchford mentioned that the staff numbered seventyfour doctors. Current enrollment is more than 300. Pharmacy, for instance, employed two. Now a dozen registered pharmacists and helpers administer drugs on an 18-hour basis. Records show that the total number of infants born in Sacred Heart from 1886 to 1936, were 13,359. From 1936 to 1961 the figure has expanded to 70.000.

Though the 30's represent an era of depressed economic conditions, Sacred Heart Hospital under the direction of Sister Blasius, made strides. For years she had served as supervisor of schools of nursing in St. Vincent's Hospital, Portland; St. Joseph's Hospital, Vancouver, and Providence Hospital, Oakland, California, Patient census continued to increase at Sacred Heart under her direction even though the line of unemployed grew longer at the kitchen door where food was distributed daily.



A SPOKANE INSTITUTION FOR FIFTY YEARS...SACRED HEART HOSPITAL AS IT APPEARED IN 1936



Above — A section of the x-ray Department





Nursery



Pediatric Ward

Below — An Operating Room

Laboratory

Private Room



THE HOSPITAL NOW

cience and the trend toward centralization of patient care has had impact on Sacred Heart Hospital. Since the close of World War II, a community of medical arts buildings and clinics has developed in the neighborhood of Eighth and Grand Boulevard. The hospital often referred to in the early days as "The Rock" is known by cabbies and surgeons as "The Heart."

Sacred Heart is the influence around which a fine medical reputation has developed for Spokane and the Pacific Northwest. Students in the School of Nursing come in numbers from a thousand miles away. Patients from Canada and Alaska are referred to Sacred Heart because of its modern hospital facilities. Physicians and surgeons casting around the nation for a locality in which to exercise skills have been attracted to Spokane because of the city's reputation as a medical center.

"Creating a climate conducive to the growth of medical science and patient care, is one of the philosophies of our institution," said Sister Mary Bede, administrator.

Sacred Heart during 1960, its seventy-fourth year, cared for 36,000 patients of which 24,000 were admitted, while 12,000 either were treated as emergency cases or received out-patient care.

The Sacred Heart Hospital of 1961 is a highly complex and specialized institution. Employees of the early hospital performed many duties, ranging from maintenance to patient care. The hospital today is operated by specialists. Nursing service, for instance, no longer performs such tasks as making beds or preparing rooms for patients. A "maid service" utilizing trained housekeepers relieves hard-pressed nursing service for such functions.

Administration formulates policy. Meetings with department heads are held at frequent intervals. Regular meetings are held by administration and medical staff. Communication is not left to chance. Not only are policies given vertical dissemination through memorandum and department meetings but a hospital newspaper is published for the purpose of knitting the various departments within the "hospital city" into one purposeful unit. Employees are encouraged to make suggestions for institution betterment and through strong personnel department direction a cordial camaraderie has developed between department heads and their charges.

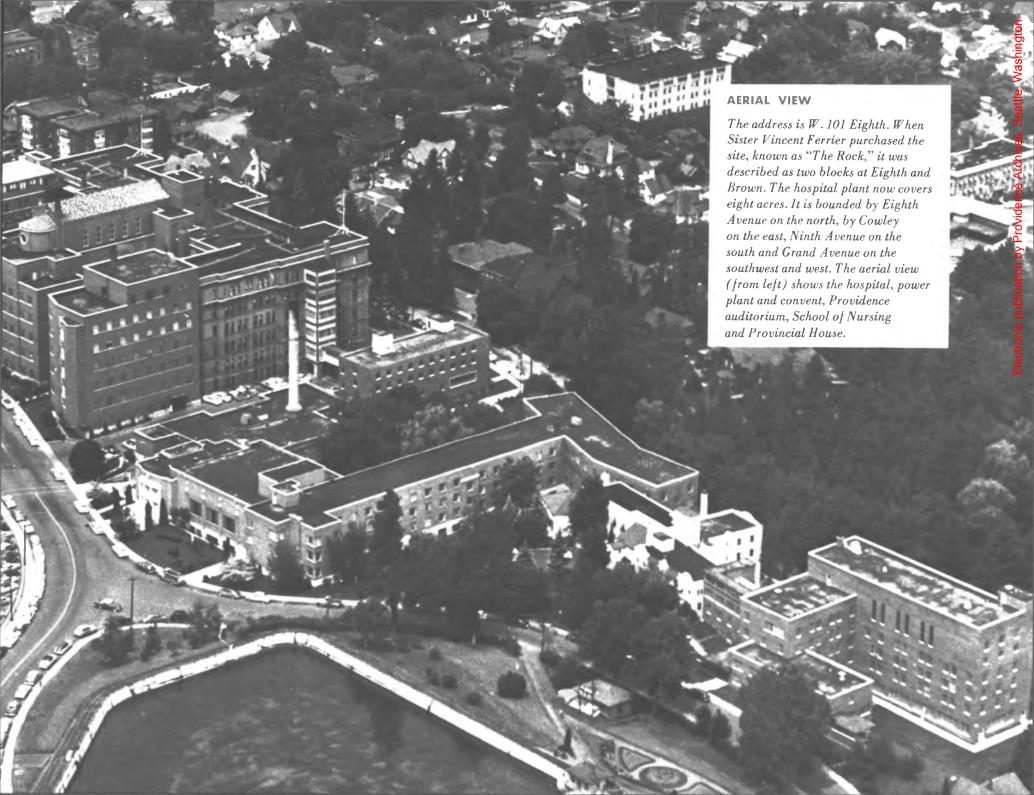
Sacred Heart is the largest employer within the city limits of Spokane and the third largest in Spokane county. It has 1,100 on payroll. Annual wages total \$3,500,000. It is said to be the largest user of paper toweling and tissue in the Pacific Northwest. Purchasing deals with 500 local and out-of-town suppliers. It has the longest shopping list in Spokane. Items range from golf tees, ping-pong balls and chill chasers to fish thermometers and electronic machines.

Sacred Heart is a 520-bed hospital. It conducts a School of Nursing, a School of Anesthesia and a School of Medical Technology. It has 14 surgical units where an average of forty-four surgeries are performed daily. Total surgeries in 1960 were 12,500.

The physical plant has expanded dramatically since the institution observed its golden anniversary in 1936. In 1944, under the direction of Sister Agnes of the Sacred Heart, Superior, the construction of a new home for nurses was started. The school and auditorium was completed at a cost of \$841,889. At the close of World War II, in 1947, all expenses of the nurses' residence had been paid, but there was a great need for hospital beds. To meet this emergency, the east and south center wings and a new chapel were added. Equipment was provided in part through a Hill-Burton grant-in-aid.

Recent years have noted the development of the scientific approach to medicine within the hospital plant. Startling changes have taken place in pathology, x-ray and surgery since the new approach to diagnosis and patient care includes minute study of the inner man as well as observation of external symptoms.

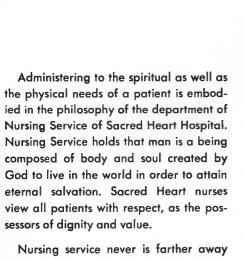




NURSING SERVICE AND PATIENT



Providing maximum patient care is responsibility of Director of Nursing Service.



Nursing service never is farther away from a patient than the light over the door. Likewise, spiritual counsel is available always. Sacred Heart nurses attempt to understand their patients. They are aware that effective interpersonal relationships and positive communications are dependent upon a knowledge and understanding of human behavior.

sessors of dignity and value.





ne half of the 1,100 employees of Sacred Heart Hospital are connected with the various divisions and units of the Nursing Service department. From sixth-floor surgery and the post-operative recovery rooms, to the realities of the emergency room on the first floor, the women and men of Nursing Service direct their efforts toward recovery of the individual patient.

Nursing Service is responsible for meeting the needs of each patient. It cooperates with members of the medical profession and allied health fields in providing quality care. Nurses are required to develop skills and are urged to develop and demonstrate qualities of leadership.

Sacred Heart nurses are resourceful. They must be exact. While the patient is cognizant of such nursing functions as administering injections or taking temperatures, a duty carried on behind the scenes is the keeping of records. Medical men have been attracted to the hospital staff because they can place trust in the charts kept by nursing service.

Nursing Service is ever ready. It provides quality personnel at 3 o'clock in the morning as well as at high noon. Literally it has served the Spokane community, day and night, for three quarters of a century.

To insure a supply of well trained nurses, Sacred Heart Hospital conducts a school of nursing which supplies graduate nurses for hospitals throughout the Northwest. No phase of duty is left unexplained. The professional qualifications of all nursing personnel are under constant scrutiny. A patient care survey reveals that the public feels Sacred Heart is doing a top job of providing quality nursing.

The department recognizes that the functions of nursing are constantly changing. Though accepting the fact that research in medicine, nursing and allied fields is contributing additional responsibilities, the nurse never is allowed to forget that her approach to the profession must be patient-centered.

13







EMERGENCY



A City Grows . . . its traffic restless day and night . . . guardian of the injured is EMERGENCY . . .



light of the wonderful age of the motor car is the everincreasing rate of injuries suffered on the streets and highways . . .

Never a day, never a night without pain, injury, disfigurement and mental anguish caused by accidents.

Standing in readiness at Sacred Heart emergency rooms are resident physicians and members of the nursing staff who have been trained in the techniques of their professions and steeled psychologically for the suffering which they must attempt to relieve in others.

Emergency began functioning as a full-time department in October 1950. Its first suite consisted of three rooms. For a time this space was adequate. In October, 1957, a new area was provided far superior to the original suite and serviced by a ramp for ambulances, police cars and other vehicles on missions of mercy.

A poison center was established at this time and stands in readiness to administer antidotes and give treatment under the direction of trained technicians.

The census of the emergency room has increased from 3,470 in 1951 to over 12,000 in 1960. The treatment area is fully equipped to take care of any type of emergency—accidental, medical or surgical. Oxygen is piped in with an outlet at each patient treatment position. A positive pressure machine is available at all times. Wall suction is provided in the two main rooms but may be used throughout the department by means of tubing. Medications and intravenous solutions are available at all times for treatment of patients in shock.

The emergency room staff has grown. In the beginning one registered nurse was provided for each shift. As the work load increased students were rotated through the department, then came more R.N.'s, nurse aides, ward clerks and orderlies.

Short wave radio receiving equipment, provided by Civil Defense, assists emergency in maintaining a vigil over community health.

SURGERY









he operating room suite of rooms is located on the sixth floor.

The electric eye doors at its entrance provide easy flow of patient transportation. It frees the hands of the medical staff and nursing staff for care of the patients, even as they are taken to and from the operating rooms.

On entering the operating room suite, the patients are checked in at the main desk and assigned to their special operating room. The nursing team is awaiting the patient's arrival in the assigned room. Upon the arrival, the surgeon and his assistants are notified and come to the room to greet the patient before anesthesia is started.

Prior to the patient's arrival, all equipment necessary has been sterilized and assembled for each type of surgical procedure. The executone intercommunication systems help in the carrying out of teamwork, saving steps and making direction of service much safer and more quickly executed.

All activity of Sacred Heart operating room is carried out for the benefit of the most important person in the hospital — the patient.

Each day there is an average of forty-four elective procedures completed by mid-afternoon. Emergencies are taken care of as they occur and usually these total eight to twelve daily, bringing the total cases cared for in one day to between fifty-five and sixty.

The surgical staff performs all types of surgery. On the staff are general surgeons, eye, ear, nose and throat specialists, urologists, neurosurgeons, orthopedic surgeons, vascular teams, thoracic surgeons, plastic and reconstructive surgeons, cancer surgeons and open heart surgeons.

For all these types of surgical procedures the best equipment is available. The electrical coagulation units, the suctions, the x-ray equipment, the electric drills and saws, the special tables for each type of operation, the magnets, the Rhu locators, the VonPetz clamps, the operating microscope, the defibrillator, EKG machine, the Sanborn panel and the bypass pump and oxygenator.

The x-ray department and laboratories are adjacent to the operating room suite and are available to each patient in the operating room 60 seconds after the surgeon decides such services are necessary.

There are fourteen operating rooms in the hospital suite and there is always a patient in each operating room from 8 A.M. until 3 P.M. unless, of course, it is during the holiday season when patients desire to await until after the holiday. Some of these operations may be of thirty minute duration, some two hours, some four and some even eight to ten hours in length.

All personnel are trained for a particular job. Nurses have specialties and are assigned to the operating team where they can serve the patient.

MATERNITY



Loving care is given each little bundle from Heaven by nurses and Nuns trained in techniques of modern maternity

SEVENTY THOUSAND MAY TRACE START TO HOSPITAL MATERNITY

istory indicates that a baby was not born in Sacred Heart Hospital during the first seven years of its existence, the first birth being recorded on November 21, 1893. During the twenty-four year occupancy of the first Sacred Heart Hospital on the Spokane River front, only 165 babies were brought into the world within its walls.

But the old order changeth. The maternity department is a most important part of Sacred Heart Hospital and has contributed to the population of Spokane by bringing approximately 70,000 persons into the world in the last 75 years.

In 1919 the first obstetrical committee was named and definite rules adopted for the conduct of the maternity department. In 1923, the O.B. committee, having established itself, asked for \$2,000 worth of equipment and an enlarged nursing staff. In 1929 Sister Agnes of the Sacred Heart brought the department forward. Records indicated that up to July 1, 1936, the department delivered 13,359 infants.

In 1949 the maternity section was transferred from the west end of the building to its present location on fifth floor east, with the delivery rooms in the new addition on fifth floor southeast and the nurseries in the new south center addition of the floor.

There are four large, completely equipped, air conditioned delivery rooms with x-ray viewing boxes, wall suctions, autoclaves in adjaining work rooms, and heated bassinets for the reception of the newborn infant. One room is especially equipped and

used for Cesarean section operations, which are done only in this department under the direction of well qualified physicians and trained personnel. Three resident physicians and an intern are available at all times under a nationally approved obstetrical residency program.

Fourteen labor beds are in close proximity to the delivery room. Fifty-three maternity beds are available to new mothers in private, semi-private, three to five-bed wards. An attractive feature for the new mothers is a beautiful pink ceramic tile shower room refreshing to both body and spirit!

The large attractive nursery will accommodate 75 babies in small nurseries of six to twelve bassinets which are used on a rotating basis. Seventeen of this number are included in the special premature nursery for smaller infants (under 5½ pounds).

Included in the "premie nursery" are two special incubators of the latest design called Isolettes for the tiniest of infants. A 1 pound 13 ounce girl was successfully "reared" here. There are nine of the common type of incubator needed to supply additional heat and oxygen if necessary.

Prenatal classes conducted along Red Cross approved lines are offered the year 'round to expectant mothers and fathers.

Sacred Heart Hospital maternity meets all of the requirements of the American Academy of Pediatrics.

Now there are three ... going home is one of parenthood's proudest moments.

It marks the start of a new phase of family life.



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PEDIATRICS





FROM THE GREEK

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.

he mission of the pediatrics unit is to provide effective care to children in an environment where consideration is given to the needs of individual children and their families. Pediatrics provides care for youngsters up to twelve years of age.

Bed sizes include bassinets, incubators, cribs and youth beds; facilities include equipment for the care of medical, surgical and orthopedic patients.

In assigning children to rooms, consideration is given to their age, sex, diagnosis and condition. Painful or unsightly procedures are carried out in a special treatment room.

There are window walls between rooms so the children can see and be seen; steel and glass partitions are used in each room between patients' units. A waiting room for visitors and an office for interviewing parents are at the entrance to the department. One room is set aside as a recovery room for adults and children who have had open cardiac surgery.

Piped in oxygen in each room and equipment for administering oxygen alone or with increased humidity is kept ready for use as are oxygen tanks, carbon tanks and suction machines.

Traction apparatus for use on cribs is provided for treatment of fractures, dislocations and congenital anomalies. Narcotic, sedatives, and emergency drugs in dosages suitable for infants and children are available.

Feeding equipment and food for infant diets are kept in an adjacent kitchen. An adequate supply of childrens' clothing, including colored, figured gowns and baby blankets are provided.

Varied toys, record player and television set are used to help meet the recreational needs of patients.

Since 1930, when pediatrics was established with a bed capacity of twenty-five, the unit has been one of the most important in the hospital. Several thousand children are admitted each year to Sacred Heart because of the general "know-how" demonstrated across the years.



PATHOLOGY and RESEARCH



Protein Fractionator used in Cancer Research





gist and an associate, a supervisor of tech Biochemists work in a jungle of apparatus

reminiscent of a Hollywood production

athologists of Sacred Heart not only service patients within the walls of the hospital, but act also as a consulting laboratory to many areas of the Inland Empire.

The pathology department has expanded tremendously in recent years. In 1951 it was an organization performing forty separate types of analysis. Now it is a complex scientific department performing 260 separate types of tests. Not only has the number of types of tests expanded, but also the volume. In addition, an active research program is being carried on through support of numerous agencies including the Spokane County Cancer Association and United Crusade; the Washington State Heart Association; Northeast Washington Heart Association; Damon Runyan Fund; Mead-Johnson Pharmaceutical Co.; National Science Foundation and the United States Public Health Service.

In 1919, the American College of Surgeons recommended that recognized hospitals should conform to certain requirements for standardization. Sacred Heart Hospital adopted the suggestion. An area in the surgical department was equipped and a parttime pathologist employed.

It was soon found that quarters were inadequate for the amount of work being done. In 1925 the "lab" was expanded for the first time. In 1936, on the occasion of the hospital's golden anniversary, the personnel was comprised of a full-time pathologist and an associate, a supervisor of technicians, a registered technician and two students. In 1935 this group made 23,693 examinations. The laboratory was recognized by the American Society of Clinical Pathologists as a teaching institution for technicians and was registered by the State Board of Health of Washington.

The laboratory of 1961 performs 220,000 tests a year and is staffed by fifty-two persons, including four doctors of medicine, one Ph.D. in biochemistry, twenty-two college educated technologists, including Master Degree levels in microbiology and Bachelor Degrees in chemistry and microbiology. The department is staffed seven days and nights a week, including holidays. It also operates a school of Medical Technology, affiliated with Gonzaga University and other colleges of the Inland Empire.

In area, the laboratory compares quite favorable with a medium size super market, embracing 6,000 square feet of space on the sixth floor, and offering virtually as many items of service. Spotless in appearance, the "lab" with its maze of apparatus is not unlike motion picture versions of test tube truth.

Thousands of dollars are represented in the equipment, some of the principal items being fifteen binocular microscopes; two rotary and one freezing microtomes; six ovens and incubators; five spectre-photometers; five large centrifuges, one high-speed and refrigerated, and other centrifuges of the clinical variety, including the microhematocrit.

Laboratory Bacteriologists examine thousands of specimens in spotless surroundings



RADIOLOGY/X-RAY



Five diagnostic X-Ray Units of Modern design, respond to the Technician's Touch and aid Medical Men



X-RAY CONTINUES TO KEEP ABREAST OF A SCIENTIFIC AGE

he department of radiology in Sacred Heart Hospital consists of facilities for x-ray diagnosis, x-ray treatment, radium treatment, diagnosis with isotopes and treatment with isotopes. By far the largest volume of work is concerned with x-ray diagnostic procedures and during the diamond jubilee year, the addition of another modern diagnostic machine, brings to five such units currently in

X-rays were discovered in Germany by Professor William Konrad Roentgen in 1895 and in 1919 an x-ray department was started in Sacred Heart Hospital with the volume of work gradually increasing at first and then rapidly increasing as the importance of x-ray diagnosis became more and more apparent. In the first sixteen years of operation, the x-ray department handled 32,500 cases, this being only 10,000 more than now handled in a single year.

Whereas the early machines were a jungle of wires and tubing, today's equipment offers complete

shock-proof protection and elimination of danger to the skilled physician and technician. In spite of the high cost of x-ray equipment, the x-ray department is keeping pace with the rapid advances in medicine and surgery and even now while a new diagnostic machine is being installed, plans are being made for the future installation of equipment to take x-ray moving pictures and equipment for the automatic processing of x-ray films.

The x-ray department is near surgery and occupies approximately one-third of the sixth floor of the hospital. This location between the operating rooms and the pathology laboratories proves to be very convenient for physicians on the hospital staff. The x-ray department is under the direction of a full time radiologist in association with four other certified x-ray specialists so that patients having x-ray examinations or treatments are assured of high quality professional care.

ISOTOPE DEPARTMENT AIDS DIAGNOSIS AND TREATMENT OF CASES

Chemicals developed in an "atomic oven" are used in the isotope department as an aid in the diagnosis of disorders of the thyroid gland as well as some disorders of the blood and gastrointestinal tract. Radioactive iodine and phosphorous are the most commonly used substances. In larger amounts, radioactive iodine and radioactive gold are used for the treatment of certain malignancies. In addition to the services of the medical x-ray specialists, the

department also has the services of a professor of physics from Gonzaga University.

In recent years, the x-ray department has been approved for training of young doctors, following completion of their internship with a three-year program leading to national certification as an x-ray specialist. To date several doctors have finished this training program and are now practicing their specialty in various portions of the United States.

A technician measures isotopes for a thyroid test



Want a thrill? The Diagnostic X-ray unit often gets better results when tilted



PHARMACY

To the modern day hospital, the pharmacy is becoming one of the most important areas of service. The principal function is the compounding and dispensing of drugs and medicines prescribed by the medical staff for the diagnosis and treatment of patients.

The Sisters of Charity of Providence, from the beginning of their operations in Spokane, recognized the need for trained pharmacists and a supply of drugs under the hospital roof. An early history of the hospital reads: "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. Worn out by long years of devotedness among the Indians as well as among the white settlers of Montana, Idaho and Washington, she expired November 25, 1897."

In 1935, the hospital pharmacy was managed entirely by two registered pharmacists, both members of the religious order. Sacred Heart today employs thirteen in pharmacy, of which seven are registered pharmacists. It keeps personnel on duty until midnight.

The pharmacy maintains a complete library for ready reference of drugs both old and new. A hospital pharmacist is in constant demand to furnish professional information to the physicians and nurses regarding uses, dosage, administration and contraindications of drugs.

In 1960, two new work rooms and an office were added to pharmacy and new fixtures were installed. Total number of prescriptions filled in 1960 for patients and hospital employees was 115,302. Prescription refills numbered 28,624. The drug inventory was approximately \$50,000. The different drugs carried number 5,000.

CENTRAL SUPPLY

Some of the strategy used by the military finds application in the conduct of a hospital. Getting to the scene of action with the most men and best weapons has been the dream of generals for centuries. Hospitals, too, have found that logistics play an important role in salvaging lives from the infirmities of mankind.

Central dressing room, often referred to as CDR, or central supply, is the "fire department" of hospital logistics. In a single 24-hour day, central supply dispenses 143 dozen thermometers for use in the treatment of Sacred Heart patients. Other equipment is proferred on a comparable scale.

Central Supply is a complex of small items representing a vast investment in equipment of importance to the "patient care" picture.

Eighty articles are stored, dispensed and serviced by central supply. There are instruments, syringes, solutions of all types, compresses, dressings, forty-seven kinds of Levine and suction machines, catheter trays, spinal sets, perineal irrigation sets, eye irrigation, underwater seal, Miller-Abbott, gastric analysis, tracheaotomy, proctotomy, and cut-down sets, to mention only a few.

In a single day CDR dispenses 425 pairs of gloves, 282 compresses, 91 preparations for surgery, seven to ten Levines, 32 catheterization trays, 145 sets of instruments, 45 suction machines, 253 pans of 12 syringes. The room is open around the clock making scheduled distributions at 4 and 9 a.m., and at 1 and 5 p.m.

The I.V. Booth is operated in conjunction with CDR. Here instruments for intravenous infusions are dispensed. In a single year, the I.V. Booth provides material for 14,230 infusions, or 39 for an average 24-hour day.

To administer the services of CDR and the I.V. Booth, a force of twenty-seven is required.











DIETARY/KITCHEN



patient survey currently in progress reveals that just about everyone is satisfied with the planned menus and the food which is served as a combined effort of the kitchen and dietary departments.

The centralized dietary department is a large, wellequipped stainless steel unit, where attractive, appetizing and nutritionally adequate meals are prepared and served. Patients on general, soft, and liquid diets are able to choose foods desired from selective menus sent to them daily.

Six dietitians plan the therapeutic diets prescribed by the physician. Approximately a third of the patients during their stay in the hospital have some modification of a regular house diet. Frequent visitations of patients by dietitians determine the food necessary for their well being. The Manual of Diets used at Sacred Heart was prepared by dietitians of the three major hospitals in this area and approved by a diet committee of each medical staff. Dietitians also instruct the patients when leaving the hospital if the continuation of a therapeutic diet is needed.

The dietary department specializes in birthday and holiday trays. On these occasions, special food, tray mats, napkins, cards and favors adorn the trays. This feature acts as a tonic to patients.

The trays are served from a long electric convexor belt. Each minute, five trays are prepared and loaded on hot steamers and taken to the floors. Two elevators in the department are used exclusively for this purpose. Nursing Service personnel distribute trays to patients. After meals, the trays are taken from the rooms, loaded on open carts and brought to the large dish-washing area to be thoroughly washed in 150-degree temperature spray, and

then rinsed in a 190-degree temperature tank. A dispenser on the rinse tank contains a powder which dries the dishes immediately after leaving the machine.

The principal changes made in the kitchen and dietary departments occurred after the hospital was 63 years old. In 1948, all wood cupboards and tables were replaced by beautiful stainless steel fixtures and utensils. The only kettle kept in service was a wrought iron 30-gallon vessel in which pot roasts are prepared.

Food is big business at Sacred Heart. Each week the grocery list includes 120 gallons of ice cream, 300 dozens of eggs, 1,500 pounds of meat, 15 sacks of potatoes, 130 pounds of coffee, 30 gallons of cream, 560 gallons of milk, 150 pounds of butter. Each year 400 grain-fed, locally produced turkeys are dressed and frozen.

The freezing department is a room 60 by 120 feet, kept at a minus 10 degree temperature where all frozen meats, vegetables and fruits are stored.

The bakery is equipped with a large oven in which 125 loaves of bread can be baked at one time. All the bakery goods are made here, such as 80 dozen of rolls a week.

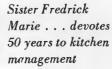
THE COFFEE SHOP

The present coffee shop came into being in 1950 after being moved from a basement area. The shop serves prepared meals to employees and patrons of the hospital. Throughout the morning, afternoon and evening it is a popular spot for a coffee break.

The shop started with eleven full-time employees. It has a staff now of twenty-one. Since 1947, coffee shop traffic has more than doubled. It serves 1,400 people a day. Coffee is consumed at the rate of 5,500 cups a week.



Six graduate dietitians plan therapeutic diets







PHYSICAL THERAPY OCCUPATIONAL THERAPY







ew realize the full potential of God given strength or talent! Often it is after an illness or injury that some develop skills in fields remote from former endeavors.

Physical therapy and occupational therapy operate on the theory that man has great capacity for rehabilitation. A person suffers a stroke. It causes complete paralysis of the right arm and hand. A few weeks of assistance from skilled therapists and the afflicted person regains full use of the arm. Sometimes he is an improved individual, for during the recovery period, he has discovered hidden talent.

This is not fiction. Each week the therapists at Sacred Heart Hospital note the recovery of disabled persons. What an opportunity for mankind! What an advantage to be living in the Twentieth Century!

Recognizing the trend toward development of a comprehensive rehabilitation program, Sacred Heart Hospital, in recent years has enlarged and improved the physical therapy facilities and has added to the total physical medicine program by developing an occupational therapy department. Under the direction and supervision of the physician in charge of each case, these departments strive to relieve symptoms and speed up recovery as well as to reduce the patient's handicap and teach him to live with the disability suffered.

Physical therapy includes the employment of therapeutic exercise and massage and the utilization of effective properties of light, heat, cold, water and electricity as well as the administration of tests and measurements.

Occupational therapy concentrates on helping the patient help himself through encouraging and directing participation in graded activities and actual work processes. Activities, such as wood working, weaving, typing, contribute toward reducing the patient's handicap while teaching him to live with the disability.

Furthermore, both physical therapy and occupational therapy, have an important contribution to make in the acute and convalescent treatment of many other patients besides those with physical disability. Great benefits are obtained through the use of the therapies as a positive health measure in the prevention of deformities and physiological reconditioning from prolonged bed rest.

Sacred Heart Hospital offers rehabilitation programs geared to individual needs.
Under the direction of physicians, many receive courses enabling them to enjoy life more fully





MEDICAL EDUCATION



atient care second to none! This is the desire of the Sacred Heart Hospital administration. To develop this point of view, the office of Director of Medical Education was established in 1960 under the leadership of a full-time internist who is a Diplomate of the American Board of Internal Medicine and a Fellow of the Americal College of Physicians.

Sacred Heart in 1960 sponsored a staff of twenty resident and intern physicians. Under the Director of Medical Education, a closer unity was achieved between the interns and residents and the chiefs of the various services in the hospital, such as surgery, medicine, pediatrics, emergency, orthopedics, radiology, pathology.

The intern-resident takes part in formal lecture courses in the specialties and subspecialties such as electrocardiography, hematology, general medicine.

The clinical aspect of training is maintained under a preceptor-type of teaching with major emphasis on bedside type of clinical instruction and close attention to the patients' medical well-being.

Sacred Heart feels that its medical education, in addition to providing top quality patient care, is contributing to the future health of the community by turning out men better prepared to administer to the ills of mankind.



SACRED HEART SCHOOL OF NURSING



acred Heart School of Nursing is distinguished as the oldest school of nursing in the State of Washington. In 1898, in response to the great need for nurses occasioned by the Spanish-American War and the epidemics of Typhoid and Yellow Fever raging among the troops, the Sisters of Charity of Providence established a two-year training program for nurses. After the first graduation of two students, the program was extended to three years. In the sixty-one consecutive graduations, the school has awarded its diploma of graduate nurse to 2,073 persons.

The constant major purpose of the school program has been the education of nurses who are prepared to give understanding and skillful nursing care to the sick and who are motivated by the ideals of professional service and Christian charity.

Sensitive to the needs of the community for professional nursing care, the Sisters and faculty of the school dedicated themselves to the progressive development of the educational program to meet these needs. Cooperating teaching relationships were established with Gonzaga University in 1930, to provide instruction in the natural and social sciences, theology and ethics. This relationship has been maintained uninterruptedly to the present time. Through contractual agreements with Veterans' Hospital at American Lake, instruction and experience in psychiatric nursing are provided for students. In addition to the twelve instructors in these two agencies,

Five thousand volumes on professional and non-professional topics are provided in the library of the School of Nursing. An atmosphere conducive to sound study habits is maintained the school employs twenty-four full-time faculty members to plan and implement the curriculum, and to instruct and guide the 220 currently enrolled students.

Nursing students at Sacred Heart enjoy excellent educational facilities in the classrooms, science laboratories, nursing laboratory and the library with its collection of 5,000 professional and nonprofessional volumes. The extensive clinical resources of the hospital provide a learning environment of diversified experiences in which the student learns the art and the science of nursing. Counseling, health, and activities programs, the student organization, the modern four-story residence erected in 1940, spiritual and religious activities, the outdoor swimming pool and other recreational facilities are essential components in the school's educational program to assist the student in her personal and professional development.

The continual growth and program of the school of nursing as an educational unit of Sacred Heart Hospital was demonstrated in 1954, when the school achieved full national accreditation from the National League for Nursing. The National League for Nursing in January of this year again awarded a full six years of accreditation to the Sacred Heart School after having thoroughly examined its philosophy and objectives, faculty, students and curriculum. The commitment to high standards of achievement is the heritage derived from the pioneer Sisters of Charity; the Jubilee Year bequeaths it as the legacy for the future.

Laboratory time in the school's chemistry and biology departments is anticipated by student nurses since spotless cleanliness is maintained in an area where experiment is the keynote





All of the tools necessary to encourage mental, physical and spiritual calisthenics are provided student nurses

An outstanding recreational feature is the swimming pool located in a landscaped area

Maximum accreditation awarded again in 1961 for Sacred Heart School of Nursing

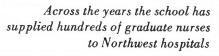
















HOOL OF ANESTHESIA HOOL OF MEDICAL TECHNOLOGY

New agents and techniques in the field of anesthesiology have opened new horizons of study in the department and School of Anesthesia at Sacred Heart Hospital.

Surgical techniques have been made possible in part because anesthesia has progressed. In order to keep abreast of the latest, students continually are alternating between the classroom and the laboratory, between theory



lrama of a busy and modern ital affords students pportunity of application ell as theory

and practice, instruction and application. At least 300 hours of study, observation and practice are required of the average student during the 18-month course. During the first month of enrollment, the student receives 120 hours of classroom instruction where he learns terminology, technique and applied psychology. A long period of observation follows, after which he begins administering anesthesia with the counsel of a graduate.

Sacred Heart Hospital with its heartlung machine schedules an average of two open-heart operations a week. Students are afforded an opportunity to gain knowledge and skill in anesthesia as it relates to vascular surgery.

Considerable emphasis is placed on anesthesia in obstetrics for there is an increasing need for competent personnel in

this field. Here the anesthetist has two to think of, the mother and the new arrival. Relaxation during childbirth must not be purchased at the price of post operative damage or depression in either mother or child. Experience, observation and study are important adjuncts of the good anesthetist.

Sacred Heart Hospital is unique in having the only non-military school of anesthesiology in the West. This school trains both men and women in the arts and science of anesthetic management. The school has maintained full approval of the American Association of Nurse Anesthetists since its origin. Upon completion of the course each graduate is eligible to participate in a national examination which is offered twice yearly by the AANA.

The school employs about twelve graduate nurse anesthetists and an equal number of students, providing 'round the clock opportunities for elective and routine as well as off hour and emergency type patient care.





SCHOOL OF MEDICAL TECHNOLOGY

The School of Medical Technology is associated with the clinical laboratories and is approved by the American Medical Association and the American Society of Clinical Pathologists. The course is devised to meet the requirements of the Registry of Medical Technologists of the American Society of Clinical Pathologists. Graduates are universally sought for employment upon successfully completing the one year of clinical experience comparable to an internship.

Coeducational in its make-up, entrance requirements are basically two years of college work, with the major subjects in sciences, biology and chemistry. Most of the students are on the degree course and come to the school after three years of college work instead of the minimum requirement of two. The school is directly affiliated with Gonzaga University, department of biology.

The student is sent to the Spokane County Community Blood Bank for blood banking techniques and to the Spokane City Laboratories for public health technology. These affiliations occupy three weeks of the student's time.

While in the laboratory the student rotates through the various sections, hematology, biochemistry, bacteriology, histology, serology and immunology, urinalysis, parasitology, research and cytology.

MEDICAL

MEDICAL RECORDS / LIBRARY







t all started back about 25,000 B.C. when the operations per-

formed were depicted by drawings on cave walls. No doubt, there are still things to be learned from the earliest records. Medical men learn each day from the records kept in hospital files and are guided in the treatment of patients.

Medical records became a requirement in 1918 when the American College of Surgeons established a standardized program for hospitals. The department is required now by the Joint Commission on Accreditation of Hospitals because "medical records are an important tool in the practice of medicine."

Thousands of medical records occupy several file rooms at Sacred Heart Hospital dating back to the early days. These records are processed through twelve pairs of hands . . . typing, filing, compiling, computing and indexing.

Dictating machines are provided for the convenience of doctors in completing charts. Of special interest is one dictating machine connected to the switchboard so that the physician may dictate into any telephone in or out of the hospital. Indexes are maintained which will produce records with like diagnosis and treatment.

Statistical reports are prepared daily, monthly and annually. Confidential information in the medical records is carefully guarded. A tour of the department impresses the visitor with the hum of productive activity, an often unexpected surprise for the uninitiated.

MEDICAL LIBRARY

An important adjunct to the Medical Record department is the Medical Library which has been in existence at Sacred Heart for many years. In the beginning it was on a modest scale, but over the last few years with the addition of teaching facilities, the shelves have expanded with the growth and demand.

There are, at present, over six hundred editions at the library's disposal and subscriptions to forty-five journals. Recent additions are a number of new books and journals, among which are a few of the better foreign journals and several excerpts from German language journals in the specialty fields. The library's goal is to have the facilities and the information available or obtainable for the interns and residents as well as the attending staff members.



The inter-library loan has been set up to further this program in utilizing the facilities of the University of Washington, University of Oregon, Paulsen Medical-Dental Library, and the National Medical Library in Washington, D.C.

In conjunction with the Medical Library is the Tumor Board, which consists of staff members of both the specialty fields and general practice. The purpose of the board is two-fold: (1) information and discussion relative to pertinent diagnosis, their treatment and follow-up over a given period of time through case presentation; (2) research, with statistics being made available to members of the staff as well as the American Cancer Society.

The Tumor Board began in 1956 under the direction of the Department of Pathology and has grown steadily to be one of the most worthwhile programs in the hospital,

ADMINISTRATION









The solution of problems is not left to chance at Sacred Heart Hospital. At least twice weekly the administrator and assistant administrators assemble in conference the director of nursing service, the comptroller, purchasing agent, director of personnel and community relations director. Policy is examined in light of its application to the day-to-day challenges of operating one of the nation's largest privately owned hospitals. Changing or reshaping employment principles to produce teamwork among the 1,100 employees is a product of the administrative meetings.

Nursing service constantly is in search of answers to problems which will insure better and safer care of the patient. To attain this end, administration encourages studies to determine patient satisfaction. While the satisfied patient is the hospital's best advertisement, the hospital offers a strong public relations program for the purpose of fostering a better understanding of the miracles of modern medicine and patient care, of reasons for costs, of the need for a building program designed to keep the establishment abreast of the age of science and of a nation on wheels.

Department heads are encouraged to take part in the various state and national associations related to their work in the hospital. Each year Sacred Heart spends thousands of dollars for institutes and conventions in order to keep personnel abreast of new ideas for performing age-old duties.

ACCOUNTING

The Sacred Heart Hospital accounting department encompasses payroll, accounts receivable, accounts

payable, credit and collections, admitting office and switchboard.

Payroll, as the name implies is responsible for the prompt and accurate payment of wages to all employees. Sacred Heart Hospital is one of the largest employers within the city limits of Spokane and has a \$3,500,000 payroll. The payment of all the hospital expenses and indebtedness is the function of accounts payable. More than \$2,000,000 is paid to other business concerns for equipment and materials utilized and consumed in hospital operations.

PURCHASING

Sacred Heart Hospital has the longest shopping list in town. The purchasing department, under the direction of an agent and six assistants, deals with 500 suppliers of merchandise. The department is in charge of the receiving office and two warehouses. An average of three tons of material is received daily.

PERSONNEL

The Personnel department coordinates the personnel management activities of Sacred Heart Hospital. The department numbers four persons including the Personnel Director and is responsible for the centralized activities of recruitment, screening and selecting of qualified applicants for the more than 216 separate job classifications.

The personnel office centralizes all personnel records, salary and wages, employee services, training, job descriptions and policies.

An analysis reveals that 67 per cent of the hospital dollar goes back into the community as salaries.



PLANT OPERATION AND MAINTENANCE

Uninterrupted power and heat, lights, water, air conditioning and oxygen . . . these are but a few of the "musts" of a plant serving 36,000 patients each year.

Around the clock perfection is one thing. Planning for the future also is a must of the plant superintendent.

Since 1908, when the hospital was built, numerous changes in the power plant have been made in order to effect economies and to serve building additions.

The power plant with its huge boilers is considered a model of efficiency, students often being directed to the area for study.

The plant superintendent, assisted by thirty-five specialists, not only looks after the operation of the power plant and other utilities but supervises gardening and landscaping, parking, and operates a complete carpentry and paint shop.

HOUSEKEEPING

Polished corridors, spotless walls, impeccable restrooms . . . are features of Sacred Heart Hospital meeting the public eye. A patient care survey currently being conducted indicates that people are appreciative of the building's cleanliness as well as the decorum of the ninety men and women engaged in housekeeping.

Keeping spotless nearly one million square feet of floor space in the hospital and the School of Nursing is a result of planning and education.

Late in 1959, Sacred Heart housekeeping was centralized into a single department for the purpose of maintaining the hospital in a clean, healthful and sanitary condition. Centralization of authority also offered administration a more direct means of attaining desired results.

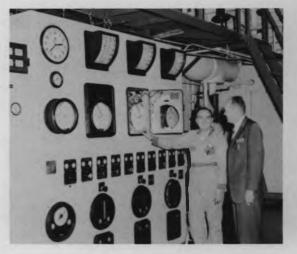
The hospital has been divided into eight areas with supervisors in charge. Instruction and orientation periods are held and outside specialists in the field are brought in to give lectures on the latest word in housekeeping.

A "check-out maid service" program was instituted late in 1960. House-keeping, by assuming a nursing service duty of placing rooms in readiness for patients, released trained nurses for greater concentration on patient care. A night housekeeping service was instituted enabling personnel to accomplish work at night when traffic is at a minimum.

Under housekeeping jurisdiction are the elevator operators.

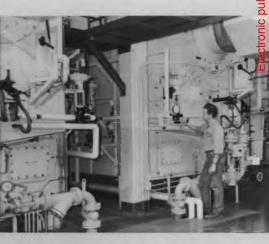
LAUNDRY

Washboard and clothes-line days are gone forever at the Sacred Heart Hospital laundry where machines and man and woman power combine to sort, wash and iron and have ready for delivery 100 tons of linen a month. This mountain of work is done under the direction of a member of the Sisters of Charity of Providence.













STAFF

STAFF OFFICERS FOR THE YEAR 1960 - 1961



Dr. R. P. SAGERSON
President



Dr. J. J. BLACK



DR. R. P. PARKER Secretary-Treasurer Chairman Medical Committee



DR. C. P. SCHLICKE

Chairman

Surgical Committee



DR. J. G. ROTCHFORD

Chairman

Obstetrical- Gynecological



DR. C. L. LYON

Chairman

Pediatrics Committee



DR. C. R. CAVANAGH Chairman Program Committee



DR. J. E. CUNNINGHAM

Chairman

Out. Patient, Emergency
Psysiotherapy Committee



DR. M. M. KALEZ

Chairman

Nursing Education Committee



Dr. W. H. Tousey

Chairman

Credentials Committee



Dr. J. K. Burns Chairman Records Committee



DR. E. W. ABRAMS

Chairman

Resident-Intern

Education



Dr. G. A. WINDLE
Chairman
General Practice Committee



Dr. C. A. STEVENSON

Chairman

Radiology Committee



DR. J. E. HILL Chairman Pathology Committee



DR. OTTO J. PENNA

Immediate
Past President

PRESIDENTS OF SACRED HEART HOSPITAL MEDICAL STAFF

(The Medical Staff was organized under the direction of Sister John Gabriel on September 2, 1919)

1919-1920 Henry B. Luhn, M.D.

1920-1921 D. C. Smith, M.D.

1921-1922 James B. Munley, M.D.

1922-1923 Erich Richter, M.D.

1923-1924 J. G. Cunningham, M.D.

1924-1925 Scott Hopkins, M.D.

1925-1926 T. C. Barnhart, M.D.

1926-1927 John H. O'Shea, M.D.

1927-1928 R. J. Kearns, Sr., M.D.

1928-1929 George A. Downs, M.D.

1929-1930 Frank W. O'Neil, M.D.

1929-1930 Frank W. O'Neil, M.D

1930-1931 M. M. Patton, M.D.

1931-1932 S. S. Oppenheimer, M.D.

1932-1933 Charles M. Doland, M.D.

1933-1934 Carroll Smith, M.D.

1934-1935 Ronald A. Greene, M.D.

1935-1936 A. E. Lein, M.D.

1936-1937 Robert L. Rotchford, M.D.

1937-1938 E. J. Barnett, M.D.

1938-1939 Richard T. Flaherty, M.D.

1939-1940 Donald G. Corbett, M.D.

1940-1941 R. A. Lower, M.D.

1941-1942 Joseph W. Lynch, M.D.

1942-1943 F. W. Fursey, M.D.

1943-1944 James R. Condon, M.D.

1944-1945 J. W. Mounsey, M.D.

1945-1946 William E. Grieve, M.D.

1946-1947 William H. Tousey, M.D.

1947-1948 J. D. Kindschi, M.D.

1948-1949 Marion M. Kalez, M.D.

1949-1950 Howard V. Valentine, M.D.

1950-1951 Milburn H. Querna, M.D.

1951-1952 R. J. Kearns, Jr., M.D.

1952-1953 James E. Cunningham, M.D.

1953-1954 Alfred O. Adams, M.D.

1954-1955 J. K. Burns, M.D.

1955-1956 Robert L. Pohl, M.D.

1956-1957 Carl P. Schlicke, M.D.

TOTAL SEL TIME IN THE

1957-1958 Edward N. Hamacher, M.D.

1958-1959 H. D. Carnahan, M.D.

1959-1960 Otto J. Penna, M.D.

1960-1961 Robert P. Sagerson, M.D.

HONORARY STAFF

Dr. Alfred O. Adams Dr. Francis E. Bertling Dr. John M. Finney

Dr. C. M. MacKenzie Dr. James G. Matthews Dr. James W. Mounsey Dr. Harold T. Pederson

Dr. Harry E. Rhodehamel Dr. Mary M. Rodney

Dr. Carroll Smith

SENIOR ACTIVE STAFF

Dr. Marc Anthony Dr. Melvin Aspray Dr.\Norman R. Brown Dr. John K. Burns Dr. Harold D. Carnahan Dr. Donald G. Corbett Dr. James E. Cunningham Dr. Andrew deRoetth Dr. John W. Epton Dr. Richard T. Flaherty Dr. Philip Greene Dr. William Grieve Dr. Fred C. Harvey

Dr. Joseph C. Hathaway

Dr. Harriet E. Judy Dr. Marion M. Kalez Dr. Jean D. Kindschi Dr. Harry P. Lee Dr. Raymond A. Lower Dr. G. Fletcher Luger Dr. Joseph W. Lynch Dr. Clarence L. Lyon Dr. Fred L. Meeske Dr. Robert L. Pohl Dr. Milburn H. Querna Dr. Thomas D. Thompson Dr. William H. Tousey

ACTIVE MEDICAL STAFF

Dr. Edward W. Abrams Dr. Richard E. Ahlquist, Jr. Dr. Robert J. Albi Dr. R. William Albi

Dr. Dexter R. Amend Dr. William E. Anderson Dr. Wm. E. Baber

Dr. Robert P. Barnett Dr. B. Hood Baxley

Dr. Donald E. Belknap Dr. Ralph Berg, Jr.

Dr. Robert Berghan Dr. Roy C. Biehn Dr. John J. Black

Dr. Carl A. Brakel Dr. Joseph W. Brasch

Dr. Francis Brink Dr. David C. Bunch

Dr. Robert W. Burroughs

Dr. Douglas M. Bush Dr. Charles R. Cavanagh

Dr. John R. Cole Dr. Martin P. Conroy

Dr. H. Gayle Copsey Dr. Everett B. Coulter

Dr. Joseph H. Delaney Dr. William A. Dittman

Dr. Alfred E. Dodson

Dr. Leonard A. Dwinnell Dr. Waverly J. Ellsworth

Dr. Richard Elston

Dr. John C. Ely

Dr. Michael H. Emmick Dr. William H. Frazier

Dr. Howard V. Valentine

Dr. Richard H. Ganz Dr. Charles L. Gates

Dr. George W. Girvin Dr. Alexander Green

Dr. M. Irene Grieve Dr. Cornelius E. Hagan, Jr.

Dr. Edward N. Hamacher Dr. Richard H. Hempstead

Dr. Robert G. Heskett Dr. D. Curran Higgins

Dr. John E. Hill Dr. Robert T. Huddleston

Dr. Robert Hunter Dr. Bert P. Jacobson Dr. Robert E. Jensen

Dr. Edward V. Johnston

Dr. Millard E. Jones Dr. Thomas H. Jones Dr. Hugh C. Keenan Dr. Maxwell F. Kepl

Dr. Alfred R. Kessler Dr. Richard N. Kleaveland

Dr. Arch Logan, Jr. Dr. Duncan V. Luth

Dr. R. Dean Luther Dr. Francis M. Lyle Dr. Robert C. Maher

Dr. Robert W. Maris

Dr. Thomas Marr Dr. Frank McCarry

Dr. Richard J. McCartan Dr. Samuel K. McIlvanie

Dr. Norman A. Meckstroth Dr. Ian Napier

Dr. Shigeo Nishimura Dr. Theodore V. Nowak

Dr. R. McC. O'Brien Dr. Robert P. Parker

Dr. E. Finch Parsons Dr. Otto J. Penna

Dr. Dale D. Popp Dr. John R. Q

Dr. John G. Rotchford, Dr. Raymond Rumberg YEARSDr. Elizabeth M. Welty Dr. Winston J. Rowe

Dr. Peter B. Rudy Dr. Robert P. Sagerson

Dr. Gilman Sanford Dr. Edward B. Saxon Dr. Carl P. Schlicke

Dr. G. Edward Schnug Dr. Samuel E. Shikany Dr. James N. Sledge

Dr. John Sonneland Dr. Richard Steury

Dr. Charles Lewis Stevenson Dr. Clyde A. Stevenson

Dr. Carol L. Sundberg Dr. Jerome L. Sweeny

Dr. Robert W. Van Dorn Dr. S. George Velonis or George T. Wallace

. Jack B. Watkins Albert S. Weiland

Robert F. Welty Dr. Thomas C. Wilder

Dr. David B. Wilsey

Dr. Gordon A. Windle

COURTESY STAFF

Dr. Max Allen Dr. Charles M. Anderson Dr. George H. Anderson

Dr. Harold T. Anderson

Dr. Rudolph G. Andres Dr. Donald E. Babcock

Dr. George W. Baaby Dr. Richard J. Bailey

Dr. A. Bruce Baker Dr. Emory F. Baker Dr. Harold W. Beaty

Dr. Glenn W. Bell

Dr. Richard A. Betts Dr. Edward E. Biever

Dr. John E. Blair Dr. Norman Bolker

Dr. Edward G. Bond Dr. Channing M. Bowen

Dr. Lowell M. Brooks Dr. Frank V. Brown

Dr. Hugh S. Brown Dr. Maurice E. Bryant

Dr. Mary Eileen Calkins Dr. Thomas E. Canning

Dr. Roland Carlill Dr. Edward L. Clanton

Dr. Arthur M. Clark, Jr. Dr. John R. Corkery, Jr.

Dr. Arthur B. Craig Dr. Joan G. Craia

Dr. Verne E. Cressey Dr. Robert J. Davis

Dr. Stuart A. Davis Dr. William J. Davis

Dr. William N. Dire Dr. James P. Dunlap Dr. Milton W. Durham Dr. Bruce A. Evans

Dr. Walter C. Felsenstein Dr. Joseph B. Finney

Dr. Frederick R. Fischer Dr. Wilfrid A. Flaherty Dr. David W. Gaiser

Dr. Augustus F. Galloway Dr. Wilfred A. Gamon

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Dr. Loren A. Gothberg Dr. David C. Groenig Dr. Paul S. Hageman

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Dr. Harry P. Harper Dr. Milo T. Harris Dr. John W. Harrison

Dr. Ralph T. Harsh

Dr. W. E. Hart Dr. Fred R. Hays

Dr. Mariorie E. Heitman Dr. W. Walter Henderson

Dr. James W. Hendrick Dr. Randall W. Henry

Dr. John E. Hershey Dr. LaRue S. Highsmith Dr. Herman Hindin

Dr. S. Fuller Hogsett

Dr. James R. Howlett

Dr. Lawrence F. Jacobs Dr. Robert S. Johnson Dr. V. Delbert Johnson Dr. William E. Jones Dr. Richard D. Jordan Dr. Frederick R. Judy

Dr. Robert J. Kearns, Jr. Dr. James F. Keegan Dr. W. D. Kelsch

Dr. D. Theron Knight Dr. Charles L. Kyle Dr. John M. Lambert

Dr. Howard H. Lander Dr. Henry T. Lang, Jr.

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Dr. Robert G. Lipp Dr. W. Wayne Lockwood

Dr. John J. Lorana Dr. Oliver Lowry

Dr. Paul H. Luft Dr. Raymond A. Lynberg Dr. Alexander R. MacKay

Dr. Charles G. MacNeill Dr. James McAllister Dr. Robertson L. McBride

Dr. David McClellan Dr. Terrence J. McDonald

Dr. D. Wilson McKinlay Dr. C. Don Miller

Dr. Richard C. Miller Dr. Frank J. Morton Dr. John A. Moyer

Dr. William N. Myhre Dr. Michael A. Negretti

Dr. Carrol W. Nellermoe Dr. James M. Nelson

Dr. Paul B. Nutter Dr. Harry H. Olsen Dr. O. Charles Olson

Dr. Clide E. Omstead Dr. William J. Orlob

Dr. Russell C. Parr Dr. Louis A. Parsell Dr. James M. Patton

Dr. Eric R. Paulson Dr. Eldred G. Peacock Dr. Roy T. Pearson

Dr. Thomas O. Pellow Dr. Lawrence C. Pence Dr. Louis D. Pergamit

Dr. Almeron T. Perry Dr. Kermit D. Peterson

Dr. Robert M. Phillips

Dr. John J. Albi

Dr. Edward J. Fredrickson Dr. Francis R. Jurdy

Dr. Robert L. Picken Dr. G. E. Pierce Dr. John B. Plastino Dr. Richard L. Pokorny Dr. Leon E. Pollock Dr. Sherrill L. Pratt Dr. William A. Pratt Dr. Walter E. Puddy Dr. Lawrence W. Quaife Dr. Peter A. Reierson Dr. John P. Reminaton Dr. William C. Richter Dr. Donald W. Robinson Dr. Ausey H. Robnett Dr. H. MacMillan Rodney Dr. James P. Rotchford Dr. Norman L. Rubens Dr. Bernard F. Ryan Dr. Ardin A. Sallauist Dr. Edgar R. Salter Dr. Gilbert F. Schneider Dr. William G. Schoch Dr. Raymond M. Schulte Dr. Robert P, Shanewise Dr. William J. Sinclair Dr. John S. Siverts Dr. Gene Slichter Dr. Delbert F. Small Dr. Willis E. Smick Dr. Clifford Smith Dr. Glen E. Snyder Dr. Robert H. Southcombe Dr. Philip D. Spechko Dr. William L. Spencer Dr. Norman E. Stalev Dr. Richard H. Stevenson Dr. Alton R. Stier Dr. Robert A. Stier Dr. Robert F. E. Stier Dr. Merritt H. Stiles

Dr. Elizabeth White Dr. Robert Wilson Dr. Malcolm N. Wilmes

Dr. Jonathon B. Stone

Dr. Rudolph E. Stuart

Dr. David E. Sullivan

Dr. Alex VanderWilde

Dr. Robert A. Wetzler

Dr. Francis Thiel

Dr. Henry Weitz

Dr. J. Drummond Sweeney

Dr. Charles R. Wolfe Dr. Herbert M. Woodcock

Dr. Robert T. Yamauchi Dr. Harvey L. Young

DENTAL STAFF

Dr. Glen E. Parrish Dr. George M. Witter



RESIDENTS AND INTERNS FOR 1960-1961



FRONT ROW:

Dr. Arvind Nerurkar

Dr. Sesinando Gonzales

Dr. Wayne Parpala

Dr. Edward W. Abrams
Director of Medical Education

Dr. Paquito Chua

Dr. Suphi Gunduz

MIDDLE ROW:

Dr. David Edelman

Dr. Rodger Stanton

Dr. Gordon Moore

Dr. Alan Homay

Dr. Kenneth B. Reed

Dr. Antonius W. Imkamp

Dr. Eugene Mudrony

BACK ROW:

Dr. Faizur R. Chowdhury

Dr. James A. Meyers

Dr. Benjamin Pinto

Dr. Jetse van Vliet

Dr. Lowell Horlacher

Dr. Joseph F. Grismer

Dr. Jae Woong Cha

ADMINISTRATION

DEPARTMENTS

Accounting

Clarence F. Legel, Controller

Hospital and Community Relations
Albert C. Huber, Director

Purchasing

Andrew J. Simonsen, Purchasing Agent

Personnel

James G. Moore, Director

Nursing Service

Miss Betty L. Haspedis, R.N., Director

Nursing Education

Miss Mary E. Kolbeson, R.N., Director

Pharmacy

Miss Margaret F. Thoma, Chief Pharmacist

Medical Records

Miss Patricia J. Pierce, CRL, Chief Medical Record Librarian

Physical Therapy

Jack R. Goodwin, Acting Chief Physical Therapist

Occupational Therapy

Miss Suzanne Helm, OTR, Chief Occupational Therapist

Anesthesia

Dale R. Bartline, Director

Laboratories

John E. Hill, M.D., Director

Radiology

Clyde A. Stevenson, M.D., Director

Dietary

Sister Fredrick Marie, Supervisor, Main Kitchen

Sister Barbara Ann, Chief Dietitian

Housekeeping

Neil D. Reed, Executive Housekeeper

Plant Operation and Maintenance

Robert M. Jones, Plant Superintendent

Laundry

Sister Emmanuel, Manager

SACRED HEART HOSPITAL SERVICE LEAGUE CHARTER MEMBERS

Mrs. Robert P. Parker, President Mrs. Jack G. Neupert, Vice-President Mrs. John E. Hill, Treasurer Mrs. William D. Roberts, Recording Secretary

Mrs. John R. Babcock, Corresponding Secretary

Mrs. L. J. Burrows

Mrs. Jerry W. Camp

Mrs. Charles F. Copeland

Mrs. John N. Gregg

Mrs. John P. Hanson

Mrs. George H. Jackson, Jr.

Mrs. Max Kuney, Jr.

Mrs. Ray H. Lamp

Mrs. Graham D. Lammers

Mrs. H. J. Martinson

Mrs. John McClure, Jr.

Mrs. Richard O'Neill

Mrs. Otto J. Penna

Mrs. Ralph S. Phelps, Jr.

Mrs. William Porter

Mrs. William C. Roberts

Mrs. Ralph M. Rosenberry

Miss Jean M. Thorpe

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Mrs. George T. Wallace

Mrs. Thomas C. Wilder

This publication prepared by Sacred Heart Hospital department administrators, under the direction of the Community Relations Department, Albert C. Huber, director. Edited by Sister Mildred Dolores. Photographs by Dr. Eugene Mudrony and R. T. Lewis.