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Milwaukee Hospital, 100th anniversary, 1963

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MILWAUKEE

HOSPITAL

100TH ANNIVERSARY



MILWAUKEE HOSPITAL
2200 WEST KILBOURN AVENUE
MILWAUKEE 3, WISCONSIN

Foreword

Almost twenty centuries ago an inspired man asked this searching question, "What does it profit, my brethren, if a man says he has faith but has not works?" (Epistle of James 2:14, R.S.V.) Under the compulsion of this question, that faith seeks its expression in deeds, Milwaukee Hospital was founded a century ago, under the leadership of the Reverend William A. Passavant, D.D.

The observance of a centennial of this kind makes us look back, not just to trace origins and beginnings and history, but also to recall that the founders drank from well-springs of faith and courage that were not of human making. Therefore, the centennial of Milwaukee Hospital should gladly lead our eyes back across the decades to recall the man under whose leadership the Hospital came into being.

Dr. Passavant, a Lutheran clergyman from Pittsburgh, had established a hospital in his own town before bringing his concern for the sick and injured to Milwaukee. At the price of much inconvenience and sacrifice to himself, and in the face of opposition from those who misunderstood the purpose of a hospital, he set to work to establish in Milwaukee a place where the physical ills of men could find relief.

As soon as we recall Dr. Passavant we also realize that he did not stand alone in his efforts to express his Christian faith in works. He brought with him the Lutheran deaconesses, the one continuous group that has given Milwaukee Hospital a century of uninterrupted, dedicated, selfless service. Under their leadership and example, uncounted thousands of people—doctors, nurses, administrative personnel, and a host of others—came to work in the hospital, joining hands with them to serve the sick and injured.

A Century of Service . . .



For all of these people who have served, and still are serving, we want to praise God in this centennial year. But our praises to Him reach beyond the memory of this circle. We recall with thanksgiving the friends of the hospital, the community, and the patients whose interest and efforts have helped make Milwaukee Hospital what it is today, an institution recognized far and wide for its service to those who suffer illness.

A centennial, however, is not a time to rest on former laurels. A hospital is for sick and injured people. The need for the care of such people will never diminish. A hospital is also served by people—doctors and all other personnel—therefore, the need for people willing to express their faith in works will continue to grow, also in Milwaukee Hospital.

We are dramatically involved with life and death in a hospital, with the mystery of life, in the struggle to maintain life, and with the effort to alleviate its sufferings. On the human level we reflect what God did for us in sending us His Son Jesus Christ. Inspired by Him, we also seek to give ourselves, however imperfectly, into the service of suffering humanity. This faith is never satisfied with looking backward over the past, or standing still in the present. It looks for new areas of human need and concerns itself with taking the measures that will meet those needs.

Therefore, in this centennial year we would look forward, as well as backward, with the determination that the faith and confidence in God that inspired our forerunners shall also be evident in us. Only in this way can we assure the friends of Milwaukee Hospital and ourselves that we are resolved to go forward into new frontiers of service to the ill and injured, scale new heights of medical progress, and plumb new depths of human compassion.

Henry C. Flecken
Pastor and Director, Lutheran Deaconess Congregation
and Lutheran Deaconess Motherhouse at Milwaukee



Office of the Mayor

CITY OF MILWAUKEE



Proclamation



Whereas: The year 1963 marks the centennial of the founding of Milwaukee Hospital, and

WHEREAS, This hospital has pioneered many advances in the care of the sick and injured and has established and maintained a school of nursing to prepare young men and women for careers in medicine, surgery, and allied skills, and

WHEREAS, The Board of Directors of Milwaukee Hospital has designated the year 1963 as a special time for observing this centennial of service, now

THEREFORE, I, HENRY W. MAIER, as Mayor of the City of Milwaukee, do commend this record of exemplary service to the Milwaukee community and do proclaim 1963 as Milwaukee Hospital Centennial Year, and I urge my fellow citizens to rejoice with the hospital by expressing their gratitude for the past century of medical, surgical, and health services it has provided, and by extending to the hospital felicitations and best wishes for its future development.

Henry W. Maier
HENRY W. MAIER
Mayor

October 19, 1962



“ in reliance upon Providence, we proceed without longer delay, to open a small hospital for the care of the sick, in Milwaukee.”

Thus the resolution by the Institution of Protestant Deaconesses in Pittsburgh, Pa. began a new era in medical history for Milwaukee and for Wisconsin.

There was a need; there had been a call; there was a vision of service; there were a few dedicated men and women; the gold dollar toward a Lutheran hospital contributed to the Rev. John Muehlhaeuser, Grace Lutheran Church, in 1859 had another dollar added to it in 1863.

The Rev. Wm. A. Passavant, D.D., Lutheran Pastor, who had founded the first Protestant hospital in the United States in Pittsburgh in 1849, as Director of the I.P.D., purchased ten acres of property upon which Milwaukee Hospital stands today. With \$1,000 of borrowed money he made the initial payment on the \$12,000 investment.

City and Nation

The city of Milwaukee had a population of 28,000 and the house to become a hospital was at its western border, without paved street, sidewalk, running water or electricity.

The country was torn in its fighting the Civil War; this was the year of the Battle of Gettysburg; Abraham Lincoln was President of the divided United States; the Confederate States had set up their own government in opposition to the Union.

On August 3, 1863 the first patient, a Norwegian sailor suffering from tuberculosis, was admitted to the 20 bed hospital. That afternoon, with hymns and prayers, the building and its use were dedicated to God as manifested in Christ Jesus.

Medical

Then as now, the sick are ever among us, and sooner or later we are one of them. The need for hospital buildings and facilities under capable and honest administration continues in this new century. The responsibility for diagnosis and cure of disease is that of physicians and much of the reputation and success of a hospital depends upon the skill, the devotion, and the integrity of its Medical Staff. The hospital's first staff was four doctors: J. K. Bartlett who soon became “physician in charge,” H. Harpke, H. Naumann, and E. B. Wolcott. The doctors treated the hospital patients without charge; the hospital sought gifts and donations from the city's wealthier citizens in order to give shelter and nursing care to its sick. Only the homeless, the indigent, and the victim of contagious diseases received the care of the hospital and its charity a century ago.

It was Dr. Nicholas Senn who laid the foundation for Milwaukee Hospital's long history of successful surgery. Chief of Staff from 1874 to 1891, he remained a consulting surgeon until his death in 1908. Meanwhile he became Professor of Surgery in Rush Medical College, Chicago, a traveler, a writer, and an internationally famous surgeon. A wing of Milwaukee Hospital, built in 1952, is named in his memory.



Milwaukee Hospital, 1863-1885



Rev. Wm. A. Passavant, D.D.

100 Anniversary

Nursing . . .



Sister Barbara Kaag

Sister Barbara Kaag became the Directing Sister to take charge of the nursing and the household affairs at the new hospital. She was a Lutheran Deaconess and a member of the Institution of Protestant Deaconesses of Pennsylvania, owners of the new venture in Milwaukee. Trained by Sister Elizabeth Huppers, a Deaconess from Kaiserswerth, Germany, Sister Barbara received the identical training Florence Nightingale received when she went to Kaiserswerth to learn the art and skills of nursing. Through the decades, the nurses of Milwaukee Hospital have had held before them the challenge and the dedication of the true Christian nurse.

Patients cared for in 1863 were 28

Patients cared for in 1873 were 118



Nicholas Senn, M.D.

Link with Today . . .

Another name repeatedly mentioned in the history of the institutions founded by the Rev. Passavant is that of the Rev. Henry W. Roth, D.D., LL.D. He served as a Board member forty-eight years, being Secretary much of that time. Having worked closely with both the senior and the junior Passavants, after their deaths he was able to bring much valuable assistance to the Rev. H. L. Fritschel, D.D. who was Executive Director of Milwaukee Hospital from 1902 to 1943. Pastor Roth for a time was Professor at a Lutheran Seminary in Chicago; then he traveled regularly to Milwaukee to teach the young women who volunteered to become deaconesses. His true home was in Greenville, Pa. where for years he was President of Thiel College, also founded by Dr. Passavant. As an ordained and licensed pastor in Greenville, he forged one more link to the present and in his relationship to Milwaukee Hospital. He performed the marriage ceremony uniting the maternal grandparents of Milwaukee Hospital's present Executive Director, Mr. Stanley W. Martin.

If the first score of years indicate little change of pace for the small 20 bed hospital, the second twenty year period was full of action.

1883

New Building

In 1883 construction began on an imposing 70 bed hospital with a Chapel at the north end. This was built immediately west of the old house which had faced State Street. It was planned that the Chapel proper be on the second floor and the hospital office on the first. Therefore, for about a dozen years the main entrance to the hospital was the east Chapel door.

Many people still felt a hospital was little more than a pest house, a place for those suffering with contagious diseases. When the new building was nearly completed, much of the inside was destroyed by arson and the interior work had to be redone. Therefore, it was not until 1885 that the new hospital could begin to serve the community.

<i>Patients in 1883</i>	<i>137</i>
<i>Patients in 1893</i>	<i>410</i>

Deaconess Leadership

After twenty-two years of service Sister Barbara resigned, ready for retirement, and Sister Martha Gensike became Directing Sister from 1885 to 1911. Since the Director lived in the East and was occupied with many other institutions, Sister Martha virtually became the Administrator of the hospital for seventeen years, 1885 to 1902. She had much leadership ability, being a woman of conviction and courage as well as faith.



Milwaukee Hospital, 1885-1912

Deaconess Congregation and Motherhouse

In 1893 the Board of Managers of the Institution of Protestant Deaconesses accepted the fact that the young women they expected to come to Pittsburgh to join Sister Elizabeth in the diaconate never arrived, while a nucleus of young Sisters had gathered in Milwaukee. Therefore, the Board appointed the Rev. J. F. Ohl, D.D. as Assistant Director of Milwaukee Hospital with instructions to organize a Deaconess Congregation and a Motherhouse. There were eight women desirous of belonging to such a Protestant religious order; one of them, Sister Ida Buck, lives today at the age of 96 years. Pastor Ohl worked with his little congregation for five years, assisting also in administration and in chaplaincy service.



Therefore, in 1963 the Lutheran Sisterhood in Milwaukee observes seventy years as a congregation and as a Motherhouse in addition to a century of deaconess service on this campus.

The Motherhouse is not a building; originally it meant the "Mother of institutions," later it came to mean the association of member deaconesses into a religious, social and economic unit for health and welfare service. In 1893 this was still within the Pennsylvania Corporation of the Institution of Protestant Deaconesses.

Chapel



The Chapel built in 1883 was not completely furnished until 1895; but services begun by Pastor Ohl in 1893 have been continuous to the present time with a Sunday 10:30 a.m. worship service and daily Vespers at 6:30 p.m. The Pastor and Director of the Lutheran Deaconess Congregation and Motherhouse, the Rev. Henry A. Flessner, regularly conducts the services which are always open to patients, visitors, and personnel of the hospital.

As beautiful today as in 1885 are the stained glass windows over the altar showing the works of mercy as described by our Lord. They were donated by Mr. and Mrs. Alexander Mitchell in memory of two infant sons. The white marble altar from which the Holy Lord's Supper is administered was a gift from Judge and Mrs. James G. Jenkins. Miss Elizabeth Plankinton, from another pioneer family in Milwaukee, gave the brass pulpit, eagle lectern, and altar railing. From the Chapel service and its influence, by the Grace of God, the spirit of Christian service has continued to live in Milwaukee Hospital.



Milwaukee Hospital Sisters and Nurses, 1891

Medical Staff

In 1897 the hospital was remodeled, "modernized," and the one operating room augmented by a second one.

The Medical Staff also grew and in 1890 the first resident doctor, G. A. Bading, came to the hospital. He

was in residence five years. George A. White, 1895-1896, was named the first intern. This began a long and illustrious history of medical education at Milwaukee Hospital. For the next sixty seven years members of the Medical Staff on a volunteer basis guided the education of 343 interns. In the fall of 1962 the hospital engaged a Medical Education Director to give more attention to its medical education program.

Wm. Mackie, M.D., Chief of Staff 1891-1908



Three Directing Sisters:
Sister Caroline Ochse,
Passavant Hospital, Jacksonville, Ill.
Sister Martha Gensike,
Milwaukee Hospital
Sister Katherine Foerster,
Passavant Hospital, Pittsburgh, Pa.

With more physicians on the Staff and an educational program started, the doctors felt a need for more formal organization. The minutes of their meetings are recorded in long hand.

The Medical Staff of the Milwaukee Hospital met at 5:00 p.m. Friday, February 5, 1895. In the absence of the Chief of Staff, Dr. Mackie, Dr. Ogden acted as Chairman, pro-tem. Dr. Kaumheimer was elected Secretary. "The meeting was then addressed by the Rev. W. A. Passavant, Jr. who read the rules governing the hospital." Evidently eight doctors comprised the Staff, four surgeons and four medical men: Drs. Mackie, Lang, Nolte, Batchelor, Kovats, Kaumheimer, Ogden, and Spring.

On 12/20/95 the minutes state the needs of the hospital to be presented to hospital authorities:

"A second operating room; dressing rooms on each floor; a room for pathological work; the removal of the sewerage system to a semi detached annex; and the provision of movable bath tubs for the treatment of typhoid fever."

"Physicians not members of the Staff, who wish to send private patients to the Hospital, will make their arrangements with the Directing Sister."

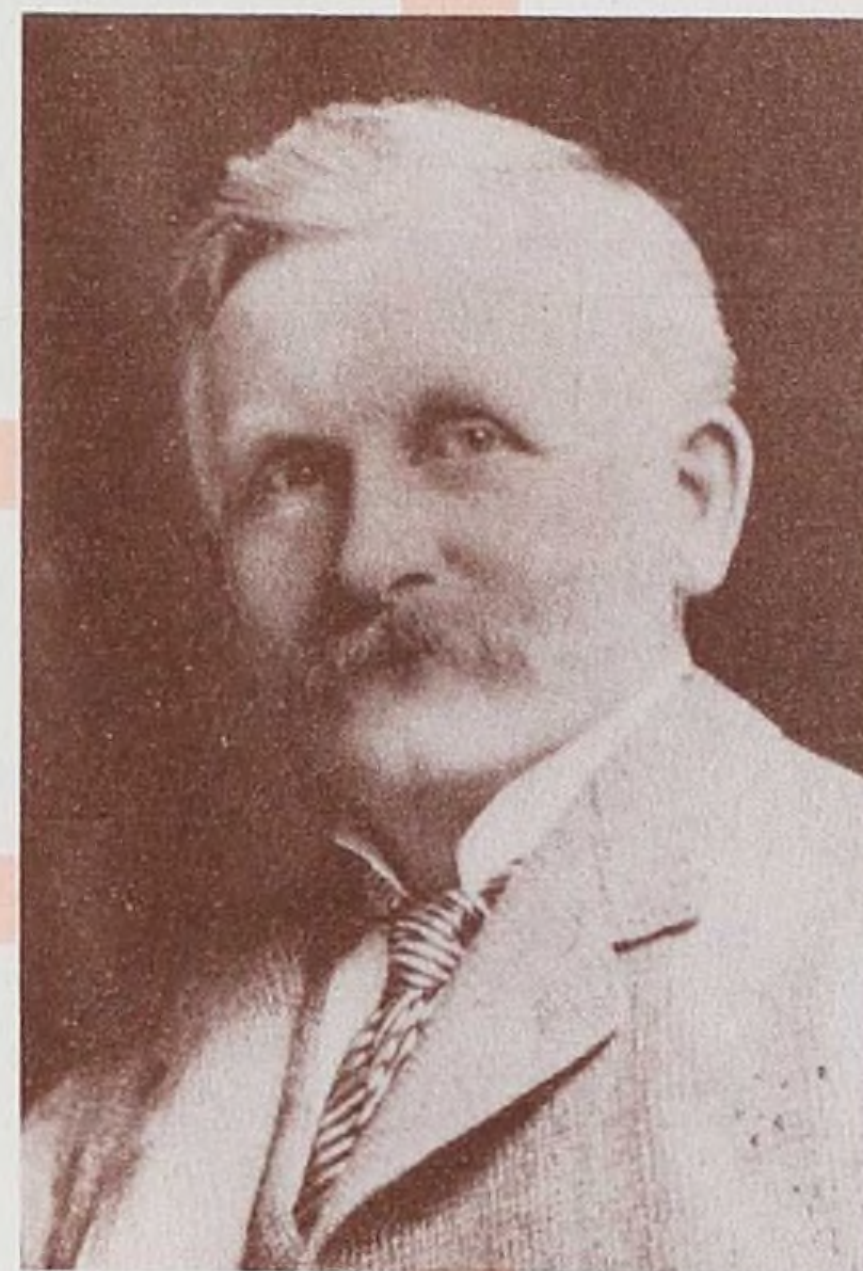
"All anaesthetics must be administered by a physician."

It was in 1895 that births were recorded for the first time at Milwaukee Hospital. There were four babies born, one of them by Caesarean section.

Change of Administration

The Rev. Wm. A. Passavant, D.D. died in 1894 and his son, the Rev. Wm. A. Passavant, Jr. succeeded him as Director until his sudden death in 1901.

The Rev. Herman L. Fritschel was named Executive Director of the Institution of Protestant Deaconesses of Pennsylvania including Milwaukee Hospital and the Lutheran Deaconess Motherhouse in 1902.



Sister Mary Both, Director of Dietary,
Milwaukee Hospital, 1891-1934



Standing: Youthful Sister Emma Lerch,
Operating Room Supervisor, 1901

1903 . . .

Early picture of Dr. Fritschel



Medical Progress . . .

The turn of the century brought with it marked advances in medical science. Hans Hefke, M.D. who was Chief of Radiology 1930-1955, and Chief of Staff 1956-1960, at Milwaukee Hospital has written:

"When in 1895 the papers announced the discovery of a new kind of a ray called x-ray by a German professor with the name of Roentgen, there was in Milwaukee a young druggist, Jacob Janssen, who immediately became interested in the possibilities of the use of this new invention for medical purposes.

"With some of the doctors who came into his drug store, he bought a vacuum tube (Crook's tube) and the necessary apparatus to get high voltage electricity to activate it. So it came about that only a few months after the discovery of x-rays, the first roentgenogram was produced in Milwaukee."

In 1902 Mr. Janssen began the x-ray work in Milwaukee Hospital in one small room.

In like vein Edward A. Birge, M.D., Chief Pathologist at the hospital since 1947 says:

"At Milwaukee Hospital the laboratory had its beginnings in 1900 with the donation of one microscope. Doctors used this according to need, ability, and the efficiency of the instrument. In 1907 Dr. John Beffel who was professor of pathology at Physicians and Surgeons College, a forerunner of Marquette Medical School, became also a member of the Milwaukee Hospital staff, and was assigned to laboratory service."

Average length of stay in voluntary hospitals:

1900	29 days
1929	15 days
1952	8 days



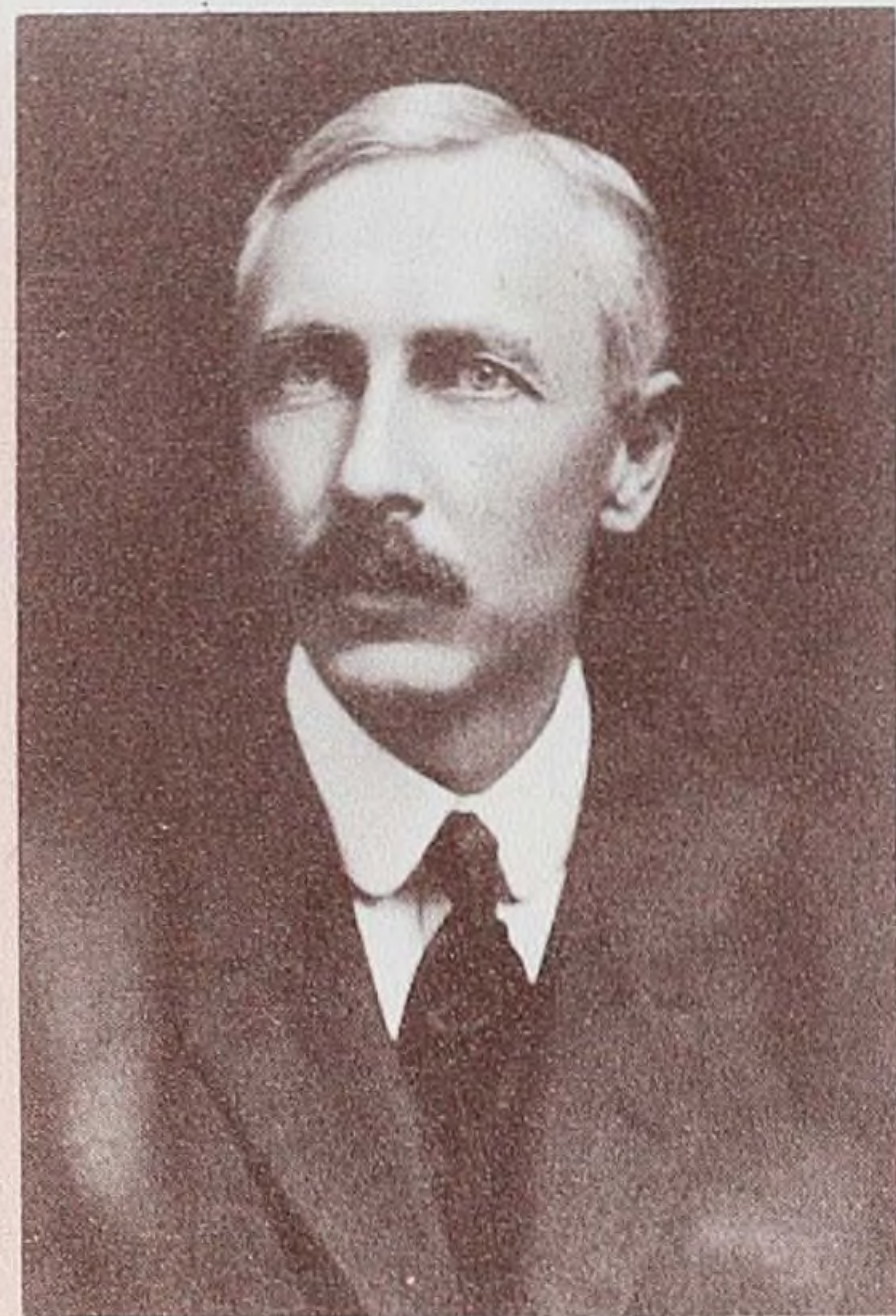
Sister Agnes Reck, Supervisor of Surgery, 1902-1940

Sister Marie Kern, Directing Sister of Layton Home, 1911-1932

From the beginning the Medical Staff was comprised of outstanding men and specialization was early and clearly defined. In 1910 there were two consultants, four surgeons, four physicians, two oculists, one otologist, one dermatologist, one pathologist, a roentgenologist (not a doctor) and three interns.

One of the surgeons was Dr. Harry A. Sifton of whom has been written, "He was recognized as the leading surgeon in the state—of highest ethical and professional principles, he inculcated the interns of the hospital."

Milwaukee Hospital was completely lighted with electricity for the first time in 1903.



Harry A. Sifton, M.D., Chief of Staff, 1909-1928



School of Nursing

The death of the Passavants, father and son, brought about a marked change in the management of Milwaukee Hospital. The Board with far sighted vision determined that long distance administration could no longer be beneficial to the sick in Milwaukee and that in accordance with true Deaconess Motherhouse policy, the Milwaukee institution should have a male head in residence as well as a directing sister.

The Rev. Herman L. Fritschel was called as Director of the Institution of Protestant Deaconesses and became Director of Milwaukee Hospital and Director and Pastor of the Lutheran Deaconess Motherhouse in 1902. He immediately launched a program of public speaking in Lutheran Churches throughout the midwest in an effort to locate young women candidates for deaconess service. But he and Sister Martha agreed it was time also to establish a training school for women other than those interested in the religious life of the diaconate, and to extend the one year of nursing education established in 1893 to the three year program which was no more than about a dozen years old in the United States. Only one state in the country required registration of nurses at this time. The class begun in 1903 graduated six young women in 1906. Registration of nurses in Wisconsin began in 1911.

Finances . . .

For the year 1909 the receipts were \$40,243.86; expenditures were \$40,152.19, leaving a cash balance on hand of \$91.67. Nearly \$6,000 was drawn out of income and set aside in a "Building and Improvement Fund." Two significant conclusions are drawn from the year-end balance sheet. Reserves must be set aside for future development and expansion, and after bills are paid there must be a cash balance. Of the numerous essentials to remaining in service for a century, this is one of them.

Patients in 1903 numbered 810 including 21 babies born.

First graduating class of nurses, 1906



Milwaukee Hospital Auxiliary

Since Dr. Passavant was a leader in founding many churches, schools, children's homes, aged homes as well as four hospitals, he could spend little time at any one place. He held the position of Director of the institutions he founded, but in every city he sought a group of civic, social, and philanthropic minded men who willingly formed a Board of Visitors. It was their function to know the work, interpret it to the public including newspapers, and help solicit funds for buildings, equipment, and for charity service. For Milwaukee Hospital a Board of Visitors was formed in 1864. The change in management following Dr. Passavant's death, the growth of science, staff, patients, brought a change to the Visitors' group as well. In 1895 they incorporated to form the Milwaukee Hospital Auxiliary for the purpose of receiving gifts, grants and legacies to be invested in trust, proceeds to be used for the hospital according to the wishes and wills of the donors. Some of Milwaukee's most prominent industrialists and professional leaders have been members of this Auxiliary. The Auxiliary functions today and some members are third generation descendents of early pioneers. The community owes much to these men who worked to improve the health and the hospital facilities of Milwaukee.

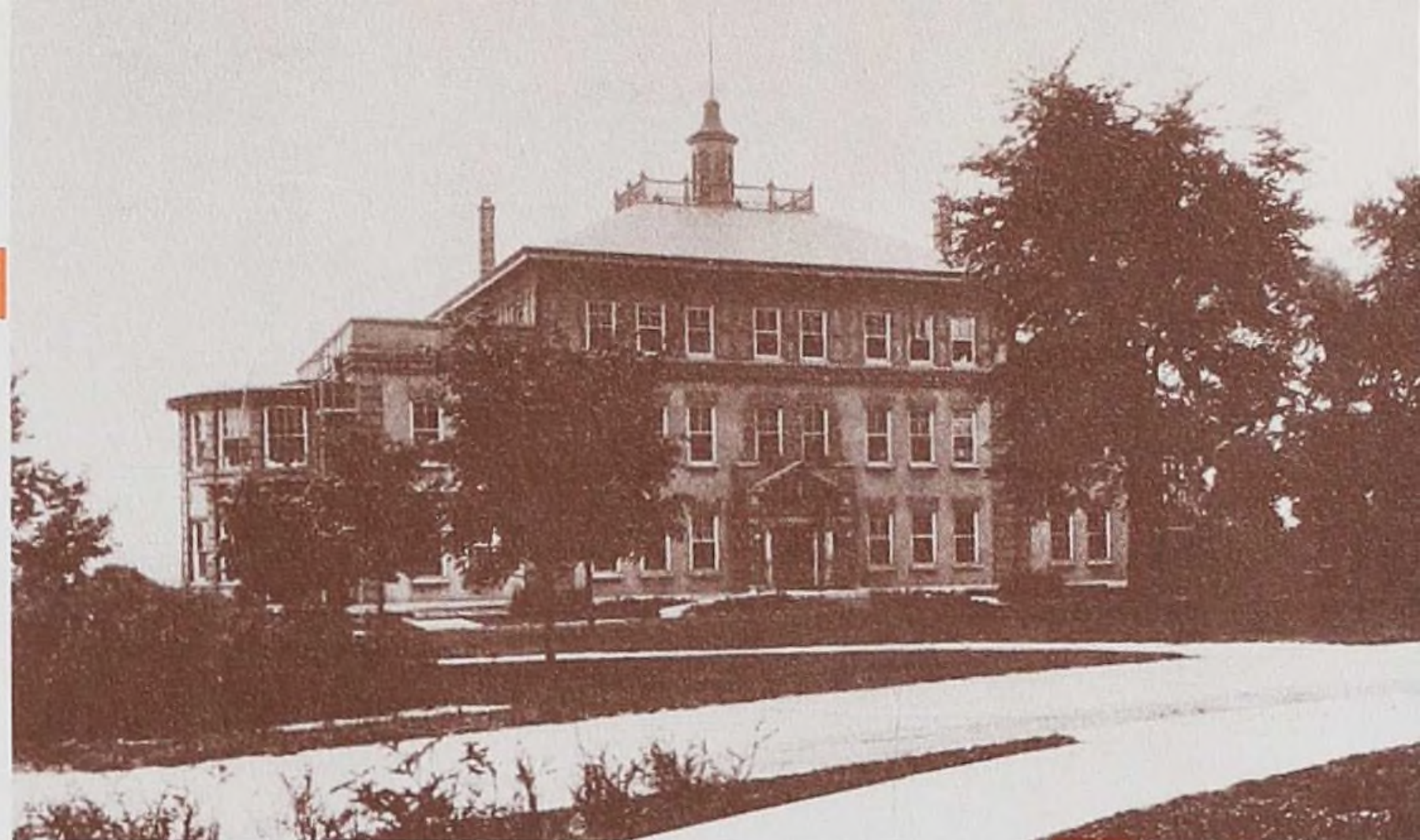
The Board of Visitors and Milwaukee Hospital Auxiliary, 1864-1963

Alexander Mitchell	Angus Smith	James G. Jenkins	Gustav Reuss
Eliphalet Cramer	C. F. Bradley	Frank C. Bigelow	George F. Brumder
John H. Van Dyke	John Plankinton	John H. Frank	Robert Uihlein
John H. Inbusch	Guido Pfister	John Thorsen	Frederick Pritzlaff
Greenleaf D. Norris	John Pritzlaff	John C. Koch	Fred J. Schroeder
John Nazro	Charles Kieckhoefer	William Lindsay	Henry P. Andrae
Charles F. Ilsley	William E. Black	George W. Strohmeyer	Herbert Lindsay
Lester Sexton	Frederick Layton	Wm. Woods Plankinton	Louis Lecher
Joseph T. Bradford	James Spencer	Horace A. J. Upham	Charles P. Vogel
Charles Eisfeldt	William Plankinton	James K. Ilsley	Frederick Walker
Gideon P. Hewitt	Frederick Vogel, Jr.	August Uihlein	Rex Reeder
Frederick Kuetemeyer	John L. Mitchell	Alfred Dawson	Wm. D. Van Dyke
John Thomssen	George Brumder	Emmanuel Philipp	John C. Pritzlaff
W. M. Sinclair	Ferdinand Kieckhefer	George D. Van Dyke	

Present Members

Charles F. Ilsley	Willis G. Scholl	Robert A. Uihlein, Jr.
Cyrus L. Philipp	John E. Schroeder	Edward J. Brumder
Stanley L. Rewey	Walter Schroeder	Edward Pritzlaff
Arthur A. Mueller	Lloyd B. Smith	
Philip Ryan	Victor M. Stamm	

Layton Home



Layton Home . . .

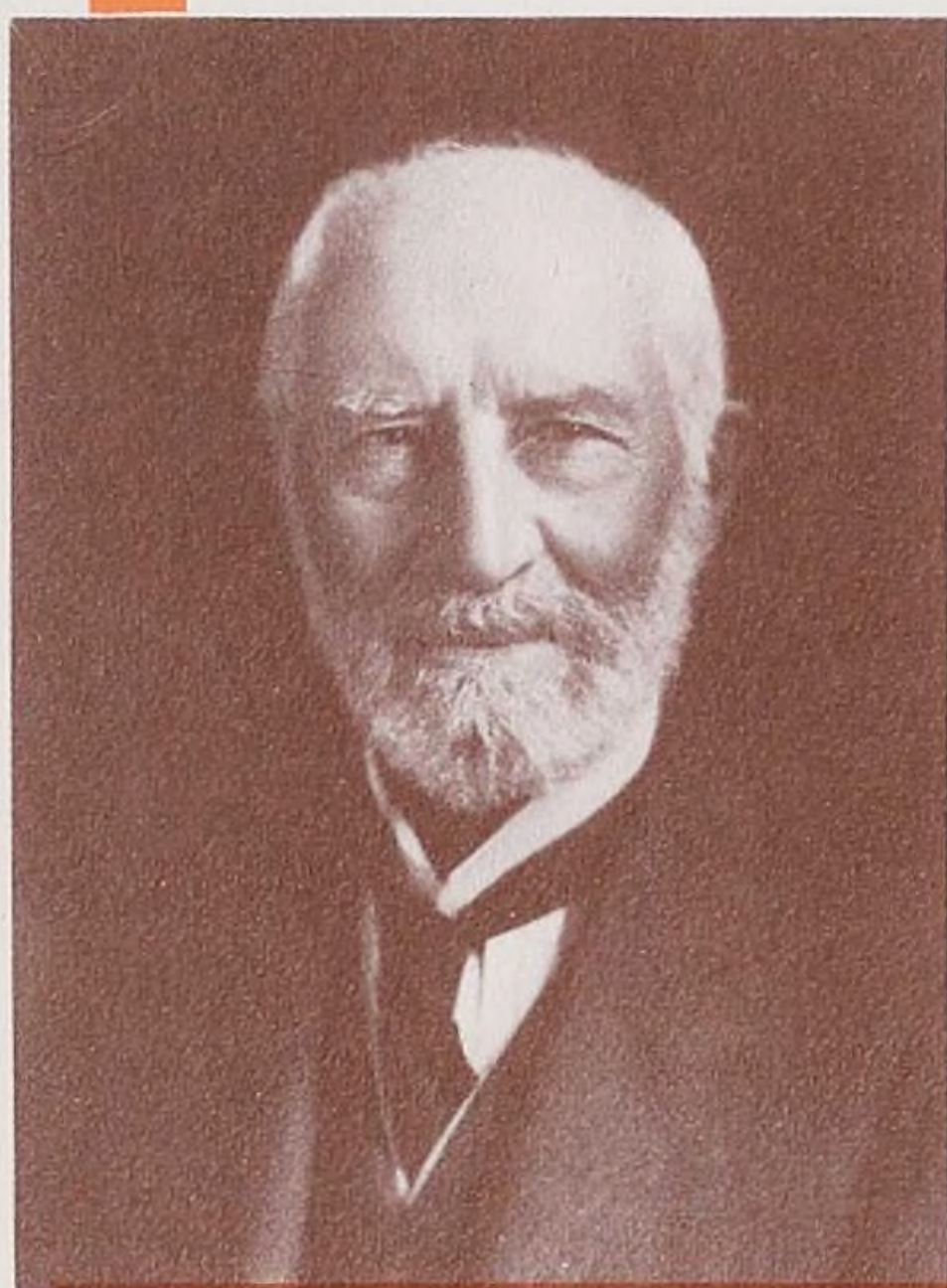
Frederick Layton and his wife are names and personalities never to be forgotten in Milwaukee Hospital's history. Mr. Layton was a member of the Auxiliary and bore a deep love for the hospital, its personnel and its service. In 1903 he paid for the landscaping of the "hospital park." Many of the trees today giving shade, beauty, and the conviction of the endurance of life are of his planting.

Then in 1908 the Laytons gave to Milwaukee Hospital a 45 bed unit for the care of the long time invalid. This became Layton Home and has been in constant service for fifty-five years.

Personnel Reorganization

This decade brought a change in the service of the deaconesses. Sister Martha Gensike, after twenty-six years as directing sister in the hospital, resigned to pursue less strenuous duties and her position was divided. Sister Catharine Dentzer became the Directing Sister of the Sisterhood and since all hospital departments were headed by deaconesses she became, in a sense, director of personnel. She had been previously in charge of the office of the hospital. She assumed responsibility for the purchasing and, along with the Director, became a member of the Board of Directors of the Institution of Protestant Deaconesses in Pennsylvania. As young Sisters proved their sincerity they were consecrated as deaconesses and elected to the I.P.D. Corporation.

The responsibility of nursing, both service and education, passed to the shoulders of Sister Emma Lerch where it remained until 1949.



Frederick Layton

1913 . . .

The Annex . . .



Milwaukee Hospital, 1912-1926

Milwaukee Hospital is fifty years old! The dedication of a new wing was part of the 50th anniversary celebration. Built the year before, it was called the Surgical Annex. Years later it became known as Center and today it is part of the West floors. The new wing faced Kilbourn Avenue where the main entrance had been established, and was described in the following quote—

“The new building is of fireproof construction. . . . The walls of the ground floor are of massive stone. . . . The entire fourth floor is set aside for the operating department, and is probably not surpassed by any in the state. There are three spacious operating rooms, with ceramic tile floors, and opal glass wainscoting. Wide windows, extending to ceiling and over the operating tables, insure complete light under all conditions. . . . A special room is equipped for the x-ray work. . . . On this floor is also the well-equipped laboratory. For ward patients recovery rooms are provided.”

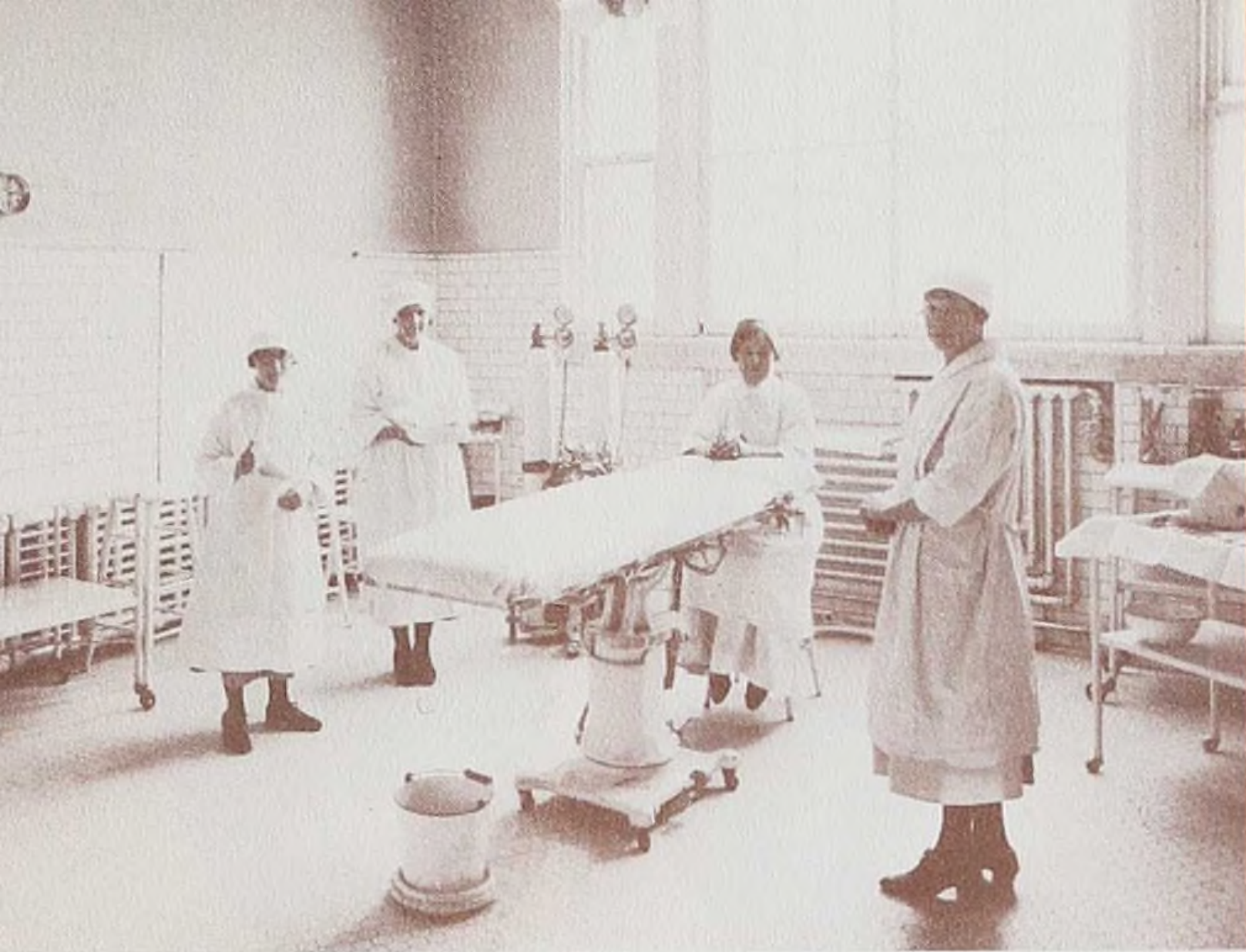
The family names of Uihlein, Van Dyke and Andrae were prominent among the donors for the new wing; many other friends contributed according to their interest and ability.

Patients in 1913 numbered 2,915 including 62 newborn babies.

Lutheran Sisters

At the half century, a souvenir booklet was published and special mention was made of “the little army of Sisters” adding, “the supervision of the nursing, the training of helpers, management of the household affairs, care of the various floors and special departments, and much of the office work is in the hands of our Sisters.” This truth continued for another thirty years.





World War I

During World War I forty-eight graduate nurses entered the war service. Twelve of them joined the Base Hospital No. 22 which was organized by staff physicians of Milwaukee Hospital. Dr. C. A. Evans was commander in Chief. His entire nursing unit received its special training in the hospital.

Milwaukee Hospital assumed responsibility for giving special training in care of the sick and wounded to a large number of soldiers of this Base Hospital. One of the retired Deaconesses relates she taught nursing to the men in the wards, "and every morning Sister Agnes taught them in surgery."

A brief course in elementary nursing was provided by the hospital for Red Cross volunteers.

Twice the hospital was filled to overflowing when flu epidemics raged during 1917 and 1918.

Since war has always resulted in great numbers of grossly wounded men, this is also a time when medical science develops some of its outstanding treatments. So during World War I the Carrel-Dakin solution came into use. It was used in open war wounds and later was made available in the hospitals. It was a cleansing agent and tended to minimize infection.



Medical Staff of 1913



H. A. Sifton, M. D., Chief



W. A. Batchelor, M. D.



A. G. White, M. D.



R. G. Sayle, M. D.



G. J. Kaumheimer, M. D., Sec'y.



A. J. Patek, M. D.



J. M. Beffel, M. D.



J. D. Madison, M. D.



Chas. Zimmermann, M. D.



H. B. Hitz, M. D.



G. E. Seaman, M. D.



G. D. Ruhland, M. D.



O. Foerster, M. D.



J. S. Janssen



R. T. Gilchrist, M. D.

Accidents

At this time in the social history of our country there was little protection for the men in industry or on the railroads; accidents were frequent and severe. In 1916 the hospital cared for 2,613 patients; 410 of these were accident patients.

Milwaukee Hospital School of Nursing Alumnae Association

In the early years of this decade, a group of the hospital's graduate nurses joined together to form an Alumnae Association. They have good reason to be proud of their school of nursing and of their schoolmates. Several of the school's graduates have become the administrators of hospitals, more have become directors of nursing. The local Visiting Nurse Association, Public Health Nursing, and Red Cross Office of Volunteers for the Far East have all had Directors who were the school's graduates.

Milwaukee Hospital nurses serve all over the world; there are always some in Christian mission work; they are in every state of the union. In 1962 their total number was 1741. By far the majority marry and raise children; frequently they also follow their profession of nursing at least on a part time basis.

The Alumnae Association has continued through the years and in 1962 had 360 paid memberships. Local nurses hold monthly meetings. Their President is Mrs. Lucile W. Moore.

The Alumnae gives contributions to various projects in Milwaukee Hospital including student nurse education and activities, especially an Alumnae Library. Each spring they give the graduating seniors a banquet dinner and in the fall they hold class reunions and an Annual Homecoming. The School of Nursing and its Alumnae are celebrating a birthday of sixty years in 1963.

School of Nursing

The School begun in 1903 had from four to seven graduates each year for ten years. In 1914 there were forty students in its three classes. This was also the year the School received state accreditation. In the twenty years from 1903 to 1923 physicians on the staff regularly taught prescribed courses to student nurses, as did several deaconesses who were registered nurses.



Sister Emma Lerch with graduating nurses, 1914

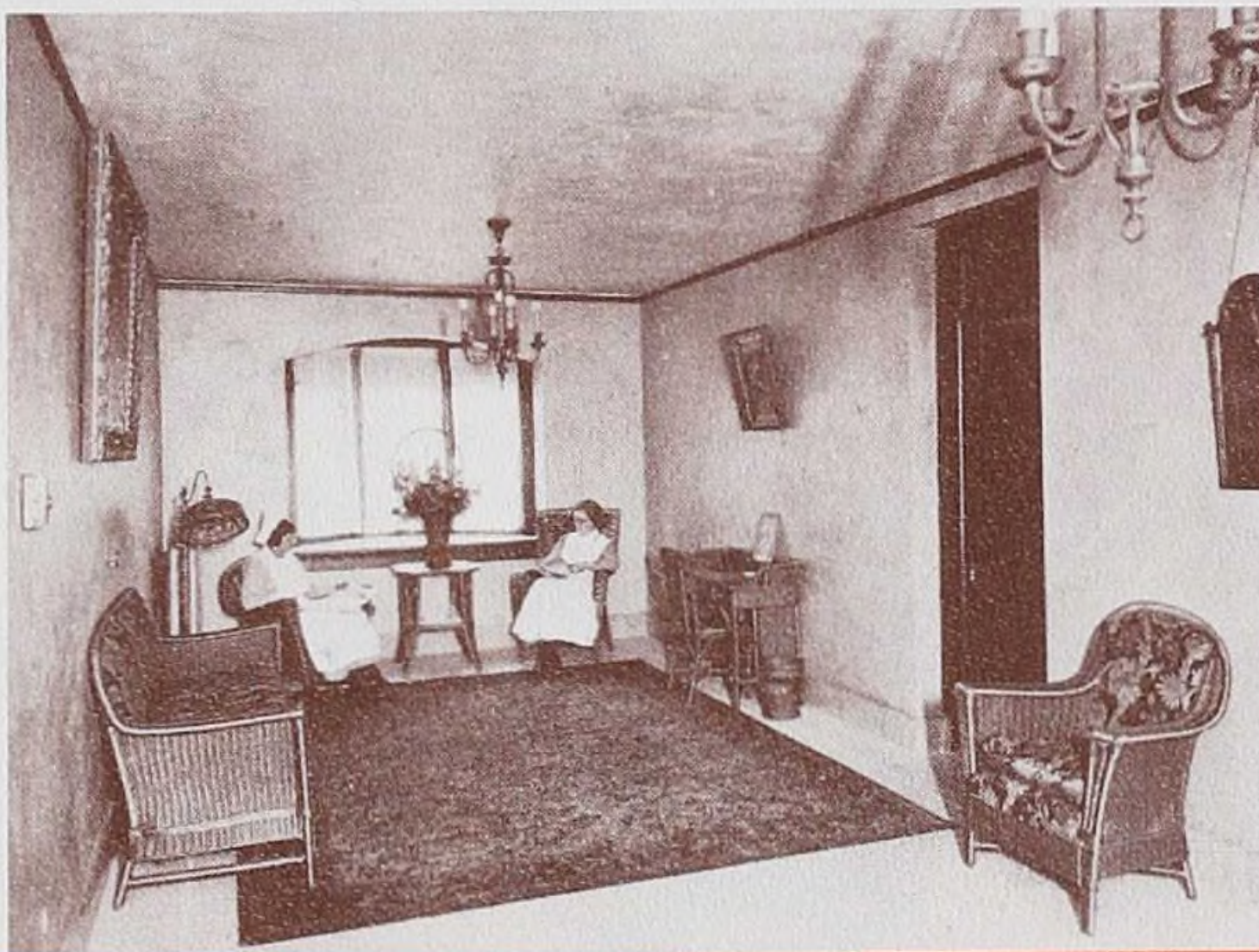
1923 . . .



West Wing

Expansion

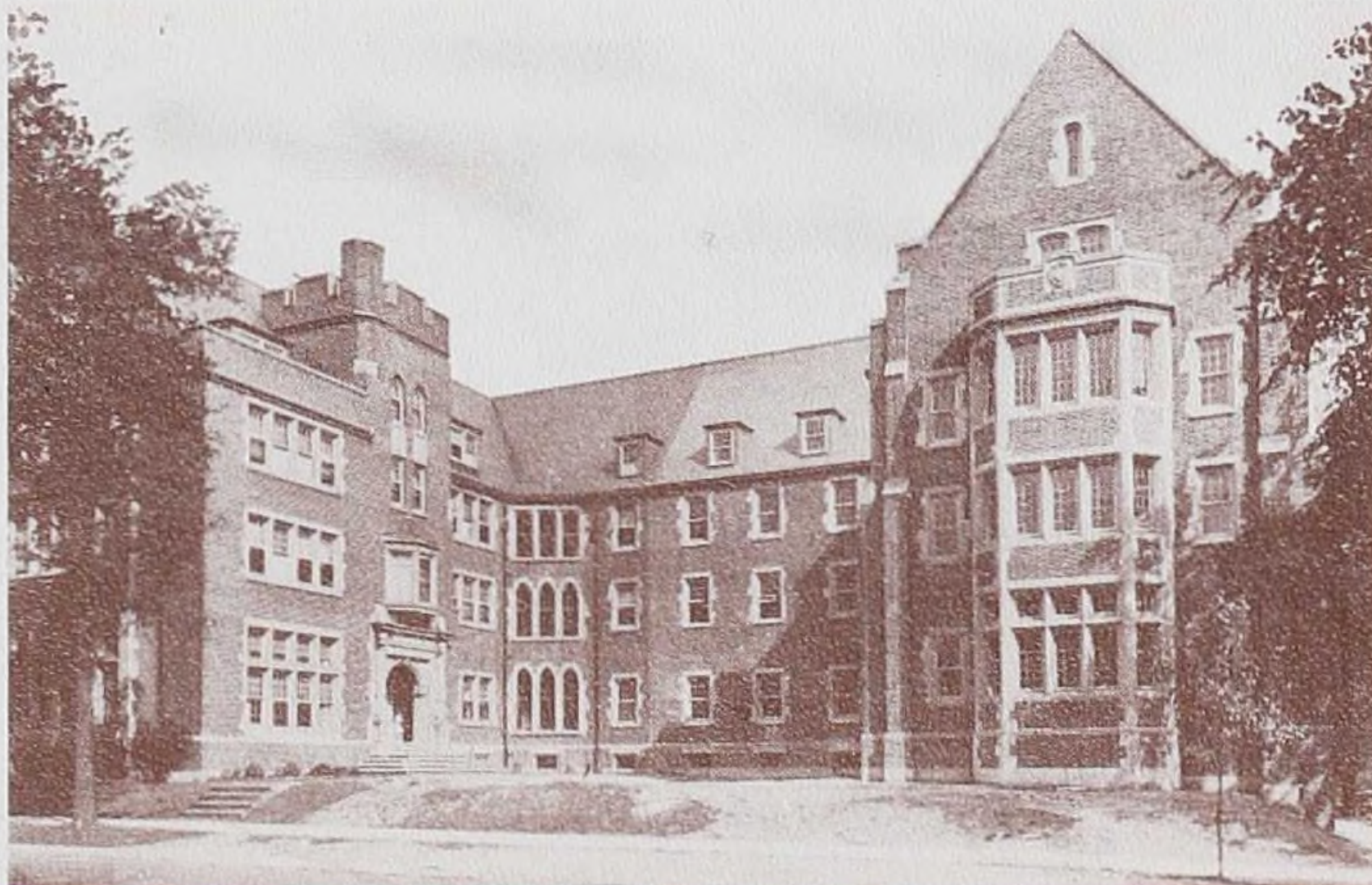
At the age of sixty years, Milwaukee Hospital launched its biggest construction program to that date and not to be equalled for another thirty-five years. There was a public campaign for funds by many volunteer workers of which Mr. Fred J. Schroeder was chairman. A sum of \$466,000 was raised. The addition of a new west wing including considerable space for a growing x-ray department, a maternity section, a new kitchen with student nurse dining room on second floor, a new laundry and power plant were built in rapid succession. Funds accumulated for building were quickly exhausted.



Inside of Student Nurse Residence

School of Nursing

Property west of the hospital grounds, across 23rd St., was purchased and on it a student nurses' residence erected. Miss Elizabeth Plankinton gave so generously for this dormitory, the residence is named in her honor. The class of six students of 1903 had now expanded to one hundred thirty-six. The school immediately became a part of the Central Nursing Education Program at Vocational School when this began in 1923. Almost thirty years later this city program became part of the Milwaukee Institute of Technology. The citizens of Milwaukee have been commendably progressive in assuming some responsibility for the education of nurses.



Student Nurse Residence

Patients receiving care in 1923 numbered 3,414 including 274 newborn babies.

Medical

The advances in medical science coupled with relative prosperity in the twenties resulted in hospital construction all over the country. This was true of every other kind of construction: theaters, club houses, insurance buildings, factories, post offices, residences. Physical therapy appeared as a new medium of treatment in Milwaukee Hospital in 1928 and two years later the electrocardiogram equipment was installed. At this time the medical residency began with Harry Ausman, M.D. the first resident. Preceptorship was granted to O. R. Lillie, M.D. and Carl W. Eberbach, M.D. Each of these physicians at later dates became Chief of Staff.

The early medical residencies were usually of one year duration giving general experience with emphasis upon surgery and obstetrics. The three or four year education in the various medical specialties did not begin until after World War II. This is a post-graduate education; the hospital is accredited for it; physicians following this study plan to take examinations leading to recognition of their special ability within a specified field of medicine.

The education of physicians is a vital factor in the health of a nation. Early in its history, Milwaukee Hospital together with its medical staff became a center for special medical education. In 1962 another advance was made when the hospital engaged a Director for the medical education program which previously was supervised on a voluntary basis.

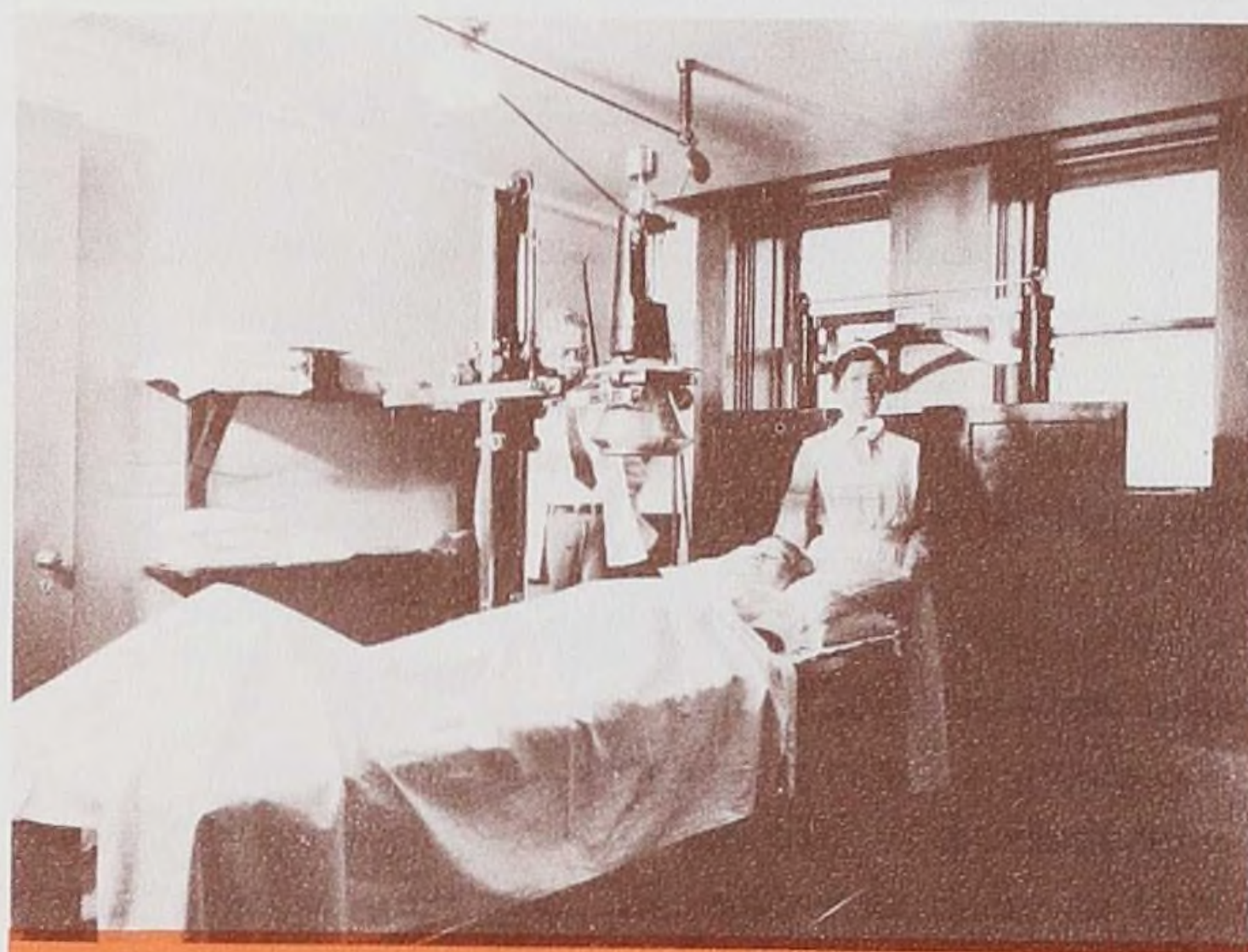
The Board of Managers had appointed more physicians to the Medical Staff; the Staff had reorganized. Staff meetings were held in the Deaconess Home and minutes were written in long hand. A quotation from March 30, 1920 reads, "Dr. Evans spoke on the advantages of gas anesthesia and it was decided to procure an apparatus, and to have someone trained in its use."

Corporation Reorganization

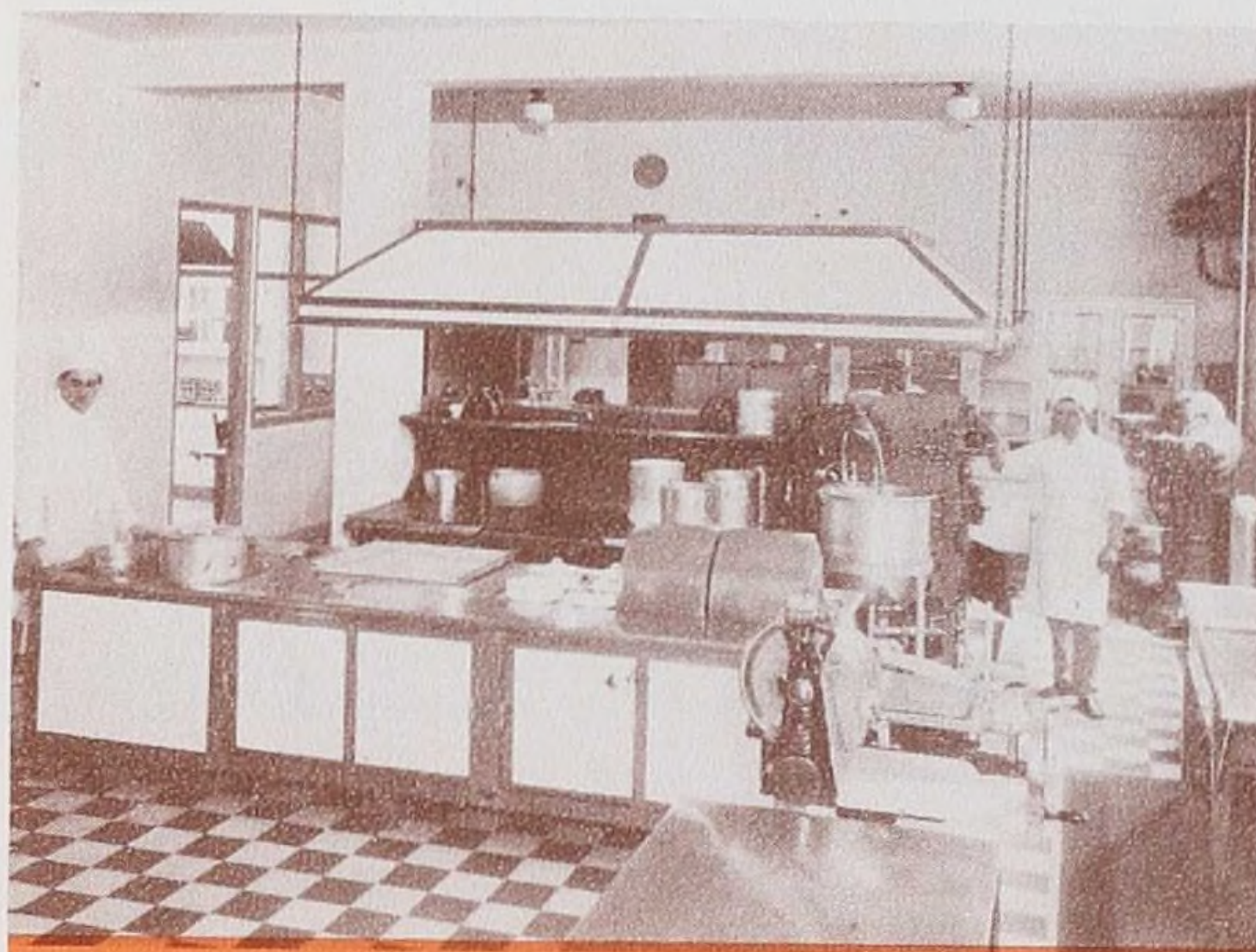
Little noticed by the populace or even by the people within the hospital, far reaching changes were made in the management of Milwaukee Hospital during this decade. Director Fritschel, burdened with a growing personnel, a larger staff, more patients, and plans for physical construction which would change the entire hos-



Medical Staff



X-Ray — Mr. Janssen & Sr. Matilda



Kitchen

pital, resigned from his position as Pastor and Director of the Lutheran Deaconesses in 1921. For the next ten years two or three different Pastors served the Sisterhood while serving also as chaplain for hospital patients. With no such intent, the Motherhouse program was neglected. The Sisters serving in the hospital and elsewhere were in their prime; nursing outside of religious orders had reached popularity and much stress was laid upon professionalism rather than vocation or religious motivation.

The hospital in Milwaukee, as it is generally referred to in the I.P.D. minutes, had outgrown its mother in the east; from 1927 to 1929 the Deaconesses resigned from the Pennsylvania Corporation and applied for a Wisconsin charter in the name of The Lutheran Deaconess Motherhouse at Milwaukee. From 1849 to 1927 the Board of Managers which governed Milwaukee Hospital had no more than a total of twenty-one members, both pastors and business men, all in Pennsylvania with the exception of the Director and the Directing Sister of Milwaukee Hospital. The new Board of Directors for the Lutheran Deaconess Motherhouse all came from the midwest, and included again the Director and Directing Sister. However, out-of-city Board Members, most of them strangers to the hospital, and a new generation of Milwaukee citizens giving gifts to a hospital without legal status soon proved cumbersome, and in 1931 Milwaukee Hospital for the first time became a legal entity with a Wisconsin charter of incorporation. Again the Deaconesses formed the membership but included their Motherhouse Board members and provided also that later Hospital Board members be elected to the hospital corporation. With Director Fritschel as chairman and the new Pastor of the Motherhouse, the Rev. August Baetke, five deaconesses

made up the new Board of Directors for Milwaukee Hospital until 1940. Realizing the need for community participation, the corporation then elected two local business men, Mr. Fred J. Schroeder and Mr. Rudolf Hokanson, to Board membership. In 1946 the Board was augmented by two members and the composition was three pastors, three business men, and three deaconesses. In 1949 Mr. John C. Pritzlaff became the first Board and Corporation Chairman who was not a pastor and who was not Director of the institution. Today fourteen members form the Board of Directors; this number of six business men, four pastors, and four deaconesses dates from 1952.



Curtis A. Evans, M.D.,
Chief of Staff, 1928-1941



Medical Staff

100 Years of Service

President of the Board of Managers

Institution of Protestant Deaconesses of Pa. which founded Milwaukee Hospital in 1863

Rev. Wm. A. Passavant, D.D., 1849-1894

Rev. Wm. A. Passavant, Jr., 1894-1901

Rev. Herman L. Fritschel, 1902-1929

President of the Board of Directors

Lutheran Deaconess Motherhouse at Milwaukee which succeeded the I.P.D.

Rev. Herman L. Fritschel, D.D., 1927-1931

Milwaukee Hospital incorporated in 1931

Rev. Herman L. Fritschel, D.D., 1931-1949

John C. Pritzlaff, Sr., 1949-1956

Edward J. Brumder, 1956-1959

August K. Paeschke, 1959-

The reorganization of these years kept Milwaukee Hospital within the Sisterhood; it is the only institution of Passavant's work which continues according to his original plan. On the other hand it freed the Deaconesses from the full and sole responsibility of managing the hospital; at the same time the Motherhouse became free to carry on other religious and welfare work under its own Board of Directors and its own Executives.

Sr. Clara Mueller,
Laundry Manager, 1912-1954



Sr. Lena Rasch,
Dietary Director, 1934-1945



1933 . . .



Hospital in 1933



Rebuilding

The construction of new buildings and wings begun in 1923 culminated with the dedication of a new east wing in 1932 to replace the hospital built in 1883. Fifty years had brought the fire proof structure into being with demands for more private rooms for patients and much more plumbing. The new wing included the beautiful dignified lobby which is the main entrance at Milwaukee Hospital today. Beds available numbered 250, but the financial crash in 1929 and the depression of the 1930's brought new problems to the hospital. One of the floors remained unoccupied as people felt unable to pay for medical attention, and the building debt of the hospital made expansion of charity work a hazardous undertaking. The free work in 1937 amounted to \$45,000. When the average cost per day was approximately \$4.50 this was a very sizeable sum. Strict economy in the early 30's including reduction in salaries, was followed in order that current expenses be met and operating debt be avoided.

	1873	178
<i>Hospitals in the United States.</i>	1900	3,000
	1940	6,219
	1961	6,923

Associated Hospital Service . . . Blue Cross

The continued growth of medical knowledge, and the satisfactory recovery of hospital patients gradually increased the usage of hospitals to include people who would not have considered leaving their homes during illness twenty years earlier. To be prepared to meet the expense of hospitalization the American people began to consider prepayment of hospital bills.

Milwaukee Hospital with Director Fritschel's signature was one of the five hospitals to sign the application for the Charter from the State of Wisconsin for Blue Cross in 1939. Director Fritschel was a member of Blue Cross Board of Directors from 1939 to 1944 and his successor, the Rev. Wm. G. Sodt, was a member of the Board from 1944 to 1952. Health insurance has become a way of life in our country. It is one of the essentials for a sense of security or peace of mind to individuals and families. It is probably the only way in which a voluntary hospital can continue to serve those who desire a personal physician and the care which a private hospital gives.



Medical Advances

The plague of cholera in Milwaukee in the 1840's and 1850's was forgotten. The cottage at Milwaukee Hospital for those suffering from small-pox during the years 1866 to 1877 was a thing of the past. A typhoid case was a rare occurrence. Cancer was discussed more and more frequently by members of the Medical Staff.

Surgery became increasingly more safe and more frequent. Surgery was moved from the top floor of Center to the top floor of the new East Wing and the three rooms increased to seven.

On the first floor of the new east wing a few rooms were set aside for physical therapy. In 1934 patients receiving treatment in the department were 126. In 1943 this number had increased to 450. Currently 3,600 patients receive 15,000 treatments each year. Dreams for an outpatient department became a reality on this same floor with a small waiting room and two treatment rooms.

A part-time pharmacist had come into the hospital from his private business to compound some medications and give guidance to Sister Magdalene Krebs who otherwise carried the responsibility of this service in addition to her nursing



Sr. Magdalene in pharmacy



Physical Therapy



Drs. group with child and nurse in new outpatient.

education and service work. In 1940 Sister Gladys Robinson became the first full time registered pharmacist in the hospital. The sulfa drugs came into use; in fact, this was the beginning of twenty years of chemical revolution. From 1956 to 1960 alone there was to be an increase of 42% in drug usage for a comparable number of patients. Regardless of bed occupancy, the drugs used each month is on an increase. In 1956 drugs dispensed were 117,809; by 1961 the number was 171,398.

The use of radium cancer treatment gained momentum. Blood plasma began to be used rather than transfusion of whole blood. Later the war experiences accelerated this practice and at its close the Milwaukee Blood Center began its service to hospitals.

Patients in 1933 numbered 4,552 including 586 newborn babies.

Radiology was steadily improving bringing greater demands, first for diagnostic purposes but later also for treatment. Early in the 1940's the training of x-ray technicians began in Milwaukee Hospital. Sister Matilda Hertlein was the first registered x-ray technician, working in the department from 1921 to 1951. From 1943 through 1962 seventy women studied the science and skill of x-ray successfully passing their examinations for registration.

Maternity Service

As this decade drew to a close plans for a new and separated maternity wing were being made. A public campaign for building funds in 1940, again under the chairmanship of Mr. Fred Schroeder, brought gifts of over \$208,000. Coupled with this campaign was the request for funds to provide adequate living quarters for the deaconesses who lived in five different buildings on the campus; they received \$30,000 which began their building fund. The Maternity Pavilion with equipment and furnishings cost \$260,000. A bequest of Wm. G. Hansen of \$100,000 made possible this new unit without further building debt. It was dedicated in 1942.



Maternity Pavilion



Srs. Magdalene and Emma with Dr. Fritschel with a group of nursing alumnae

Among the great advances in the United States in medicine and the care given in hospitals should be mentioned the startling and gratifying drop in maternal and infant deaths. As late as 1930 maternal deaths were sixty-seven in 10,000 live births; by 1949 this was reduced to nine deaths; and in 1957 it was 4.1 per 10,000 live births. At this same time in Milwaukee Hospital there were only four maternal deaths in over 29,000 live births.

Infant mortality, defined as death before the age of one year, also shows a marked decline. In 1930 the death rate was 64.6 per 1,000 live births. By 1955 this had dropped to 26.1. For hospital born babies there is a separate computation when death occurs before discharge of the infant. At Milwaukee Hospital this is a low of 1.6 per 1,000 live born.

Better education of doctor, nurse, mother, use of blood, chemotherapy and antibiotics, attention to nutrition, prenatal and postnatal care all contribute to these lowered mortality figures.

This decade closed in 1942 when a testimonial dinner was given for the Rev. Dr. Fritschel, Milwaukee Hospital Executive Director for forty years. The world was again at war.



Testimonial Dinner
for
Rev. H.L. Fritschel D.
Hotel Pfister Sept. 28, 1942

1942 banquet.

1943 . . .



The War Years

The ninth decade in the life of Milwaukee Hospital began in the middle of a great war, World War II, a reminder that the hospital was born in the midst of the conflict of the Civil War. Approximately one-half of the graduate nursing staff left for the armed forces. In 1945 personnel from the hospital in military service numbered 201. When there were 304 employees, only sixty-six were registered nurses.

Volunteers came to the hospital to help give care to the sick of the community. Red Cross, Gray Ladies, and Vachs responded to the need for personnel. The first person without nurse training was hired in the nursing department in these difficult years; she was called a nurse aide.

Nowhere was there enough. A report regarding rationing of food said, "There just isn't enough to go 'round." From 1944 to 1946 one of the floors had to be closed. Those who worked, worked harder and longer hours. This was especially true of the Sisters and of the older, experienced members of the hospital family.

The Director wrote "How important that all of us make special efforts to promote the true Christian spirit of love, brotherhood, and sympathetic understanding when there is so much hate, bitterness, and grief in the world."

Increased Costs

Industry sent out calls for workers and paid far higher salaries than anyone had heard of. Cost of living soared; taxes for the war effort had to come from those who earned. As the war came to a close, traditional long working hours in hospitals gradually gave way from fifty-four to forty-eight, then forty-four, and finally to the forty hour week. As people returned to civilian life they demanded

Patients in 1943 numbered 10,755 including 1,773 babies born.



Senn Wing



Ground breaking for Senn Wing

more money and shorter hours. This was promptly reflected in the need for more personnel and correspondingly higher costs.

In 1946 there were over 400 persons on the payroll. Costs in 1944 were \$2,000 daily. In 1950 it cost \$4,000 per day to operate. Wars always bring rapid and drastic advances in medical care; these are correspondingly costly. In 1951 a change in law brought Social Security tax and benefits to hospital employees.

This decade began with a building debt of nearly \$325,000. In this same year was settled the estate of Grace Levings in which she willed approximately that same amount to the hospital. Among names of donors one reads many of the familiar old family names of Milwaukee plus a generous number of new ones.

Building after the War

A growing population, and the swift advances in medicine which saved lives and prolonged them, brought demands for more hospital beds. In 1950 Milwaukee Hospital broke ground for an addition to run parallel to West Wing. The problems of construction were so great it was nearly two years before the Dr. Nicholas Senn Memorial Wing could be put into service.

This meant a new entrance for outpatients at 940 North 23rd Street, a very adequate outpatient department, much enlarged and modern x-ray and physical therapy departments. Space was provided for the Dr. Evans Memorial Medical Library and for medical records. Bed capacity increased by one floor of private and semi-private rooms.



Dr. Evans Memorial Library

People and Positions...

In the middle of the difficult War years Milwaukee Hospital experienced a change in Administration. For forty-one years Director Fritschel had guided Milwaukee Hospital with a firm hand, a courageous heart, a brilliant mind that was aggressive at times, progressive always. And with this he combined a sincere concern for the welfare of others; he was a Christian who manifested his faith in difficult days as well as successful ones.

He and Directing Sister Catharine Dentzer had both lived their three score years and ten. When his retirement ended their partnership of over thirty years, there came to an end also the position of Directing Sister as Associate Director in the hospital. His description of her was of a "cultured, devout, influential personality." When Sister Catharine died in 1947 the new Directing Sister Nanca Schoen was elected to the Board of Directors, but she held no position in the hospital during her term of five years.

From 1943 to 1952 the Rev. Dr. Wm. G. Sodt was Administrator. These were the difficult war and post war years. In his broken health and early death not only the hospital, but also the American Lutheran Church of which he was vice-president, lost a most beloved man whose personality and spiritual stature equalled his physical height which towered over others.

Sister Emma Lerch likewise at the age of seventy years in 1949 retired from her position as Director of Nursing after fifty-one years of nursing in Milwaukee Hospital. Those who knew her never forgot her. An editorial in a city newspaper said, "Sister Emma Lerch can retire in the knowledge that three generations of patients and nearly two scores of nurse training classes will remember her with respect and affection."

"No history of Milwaukee hospitals or of Milwaukee nursing will be even remotely complete without frequent references to the contributions of this devoted Lutheran deaconess to the better care of the sick in the community."

Sister Magdalene Krebs, R.N., Ph.B., who had been Assistant Director since 1918, became Director of Nursing from 1949 to 1957.

During the first half of 1952 the hospital was without an administrator. The physical plant needed both expansion and renovation. Replacement of outmoded and outworn facilities and equipment was fast becoming imperative. The retirement of key personnel made reorganization of departments equally as necessary. This was further aggravated by the need for more personnel to do the work of an accelerated medical program, more patients in the hospital for shorter periods of



Rev. Dr. H. L. Fritschel



Rev. Dr. Wm. G. Sodt



Sr. Catharine Dentzer



Sr. Emma Lerch, R.N., LL.D.



O. R. Lillie, M.D.



C. W. Eberbach, M.D.



Mr. John C. Pritzlaff, Sr.

time, and the need to operate 168 hours per week on a forty hour work week basis.

Mr. John C. Pritzlaff, Sr. who was Board Chairman from 1949 to 1956 carried heavy responsibilities, especially in the early 1950's. Several other Board members including deaconesses shared these years with him and feel a debt of gratitude to him and his memory.

Medical

Another serious and painful loss to the hospital was that of Dr. O. R. Lillie who died in the prime of a brilliant surgical career, a relatively young man.

The Medical Staff had set a limit of five years of service for future Chiefs. The hospital was blessed to have as its new medical head Dr. Carl W. Eberbach, one of the foremost surgeons of the midwest, a leader of other men, humane, understanding, generous, and always teaching. His good influence remained another ten years after his term of Chief of Medical Staff.

In 1944 we find a "new preparation called penicillin, only available to armed forces," and a little later the statement "now Milwaukee Hospital has been designated as one of the penicillin supply depots for this area."

The importance of keeping more complete medical records was a growing issue. A Medical Records department was organized with a registered medical record librarian in charge.

Laboratories were becoming more important to physicians and their patients for both diagnosis and treatment of disease. The pathologist needed assistance and the answer was found in the laboratory technologist. At least two years of college education with emphasis upon the sciences of biology, chemistry and bacteriology is needed as an educational background. There follows a year of clinical training or internship in the hospital. From 1946 to 1962 ninety young women have received this education and experience at Milwaukee Hospital.

The American ideal of high standards for hospitals and physicians finds expression in accreditation. This began with the American College of Surgeons doing a study of the hospital, its plant and equipment, but especially of its Medical Staff. Members of the Staff at Milwaukee Hospital had always been appointed by the Board of Directors and in 1943 there were forty-one active and eighty-seven courtesy physicians. Frequently non-staff members were given courtesy privileges. Accreditation of the hospital set more stringent rules. It became necessary, after recommendation from a committee of physicians, for the Board of Directors annually to appoint or reappoint each individual doctor to the hospital's staff.

The larger responsibility of Board members led to the increase in number in 1952 and to a more active participation in hospital affairs.

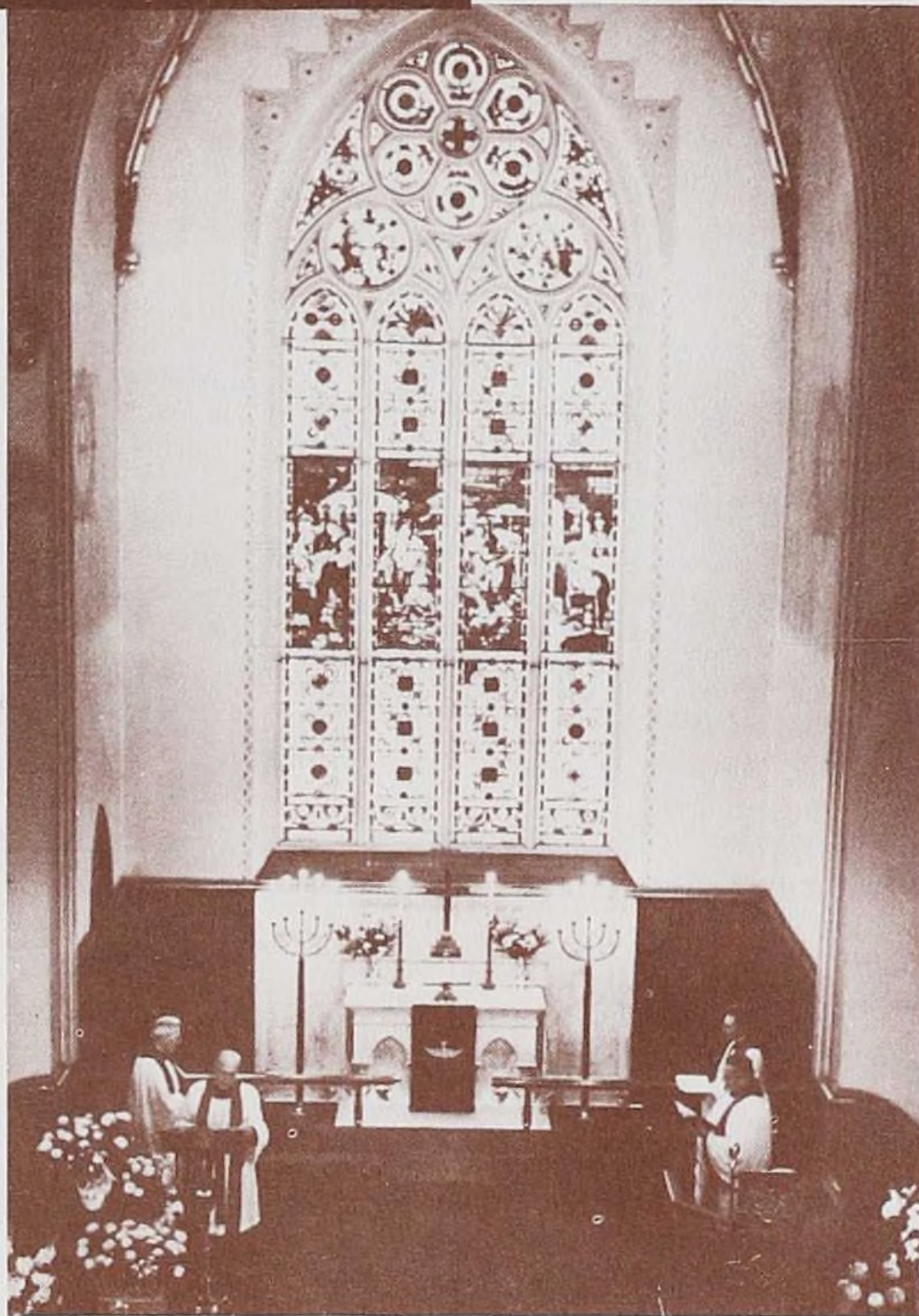
Orville R. Lillie, M.D., Chief of Staff, 1941-1945

Carl W. Eberbach, M.D., Chief of Staff, 1946-1951

Attending Medical Staff, 1947



1953 . . .



90th Anniversary Worship Service in Chapel

The last decade at Milwaukee Hospital has been a repetition as well as a continuation of past progress. There have been major administrative changes, new building and rebuilding, continued strides in medical science, increased difficulty in securing qualified personnel, and increased costs.

Most important has been the continued service to the thousands of inpatients and outpatients who have come to the hospital through the years.

In 1953 there were 13,734 patients served, including 2,992 newborn babies.



90th Anniversary Banquet

Administrative Changes

When Mr. Alvin Langehaug became Milwaukee Hospital's Administrator in 1952, it was the first time the hospital had an executive who was not a minister of the church. He was not elected a member of the Board, nor did he hold office or membership in the Motherhouse diaconate. He was an experienced hospital administrator and soon demonstrated that one of the greatest needs of Milwaukee Hospital was a personnel department. Mr. Stanley W. Martin was employed in 1953 as assistant administrator and was assigned the task of organizing such a department.

At the recommendation of auditors, the accounting system was modernized, including a record of costs by departments. Purchasing and stores were placed under proper control. Multiple procedures for patients and the need to have specific data to control inventories and costs, as well as growth leading to a greater volume of work made desirable the electronic accounting which the hospital adopted a few years later. Milwaukee Hospital, along with other large urban hospitals, was moving into a new era.

Physical Plant Investment

By the time Mr. Martin was appointed Administrator of Milwaukee Hospital in the fall of 1955, following the resignation of Mr. Langehaug, broad building plans had been laid for a new wing and the complete rebuilding of much of the existing plant.

In 1957 the deaconesses moved into a new home of their own, on the same corner of the campus where Sisters had been living for about seventy years.

Built and equipped during the same period were a completely new hospital kitchen and cafeteria. They were put into service early in 1957. In 1958 Institutions Magazine, which conducts an Annual Food Service Contest, bestowed a First Award for superlative achievement in food service and sanitation upon Milwaukee Hospital. Basic layout, operating efficiency, work flow, equipment, and economic soundness were the major factors upon which awards were based. The patients' food service was centralized. In order to give greater patient satisfaction, a selective menu was made available to all patients on a general diet.



Facts and Figures by Electronics



Lutheran Deaconess Home

Living quarters for the Medical House Staff were enlarged. A Central Supply unit was consolidated in enlarged and efficiently arranged quarters to furnish surgery, maternity, and nursing floors with all manner of supplies including much sterilized goods and equipment. Five elevators were replaced in the main building. Direct electric current which had been generated at the hospital was replaced with purchased alternating current. In the four years from 1958 to 1962 a new wing to the east was built and the older wings of the hospital were completely renovated so that at the eve of its 100th birthday, Milwaukee Hospital was again a new hospital.

Edward J. Brumder,
President of Milwaukee Hospital,
1956-1959





Hennekemper Wing

Executive Directors . . .

Milwaukee Hospital

Rev. Wm. A. Passavant, D.D., 1863-1894

Rev. Wm. A. Passavant, Jr., 1894-1901

Rev. Herman L. Fritschel, D.D., 1902-1943

Rev. Wm. G. Sodt, D.D., 1943-1952

Mr. Alvin Langehaug, F.A.C.H.A., 1952-1955

Mr. Stanley W. Martin, B.S., M.H.A., F.A.C.H.A., 1955-

During this building and renovation period approximately four million dollars were invested in the physical plant. Since the hospital was in debt \$400,000 in 1952 after building Senn Wing, these many projects were serious undertakings. On the other hand, much of the older hospital was sorely in need of new plumbing, new flooring, and new wiring. Modern building methods combined with science brought piped in oxygen, nurse-patient intercommunication systems and new ventilating and air-conditioning systems.

To help nursing personnel achieve greater efficiency, one nursing unit was set up wherever there had been two before, and service rooms were provided in most strategic spots.

Furnishings which had given service to thousands of people for thirty-five or more years were replaced with Hi-Lo electrically operated beds and other correspondingly modern and comfortable furniture.

Community Gifts and Legacies

A voluntary hospital such as Milwaukee Hospital must pay its employees and its suppliers out of income from patient service. For the most part, building and equipment is paid out of gifts and legacies. Milwaukee Hospital begins its second century free of debt largely because old friends and new ones have entrusted funds to the hospital in order that its facilities can keep abreast of community needs. One must assume that this is in recognition of a Century of Service which has been human and warm as well as scientific and successful in the healing arts.

The proper use of funds entrusted by individuals of the community for providing for its health needs is one of the major responsibilities of the Board of Directors and the Administration of the hospital. Every gift is accepted with thanksgiving and is gratefully acknowledged. All

Central Supply



gifts are publicly recorded in the hospital's quarterly bulletin. However, a number of gifts and legacies received in the past decade deserve mention here.

The Senn Estate amounted to nearly \$200,000; the Kate S. Fletcher legacy was \$180,000. The Anna Krehl annuity which helped build the radiology department was \$300,000. The United Hospital Fund allocated \$775,000 to Milwaukee Hospital. The Anna L. Johnson legacy amounted to \$106,000. The deaconesses raised over half the necessary funds for their home. This hospital's share of the Ford Foundation grant was \$187,500. The legacy of \$810,000 from Nellie Hennekemper was such a substantial sum received while the new east addition was being built that it was named in her memory. Funds placed in the trust of the Milwaukee Hospital Auxiliary have yielded regular returns. In the past ten years the Women's Auxiliary has given generous gifts for both building and equipment.

Gifts to the hospital are gifts to the entire community, for a hospital is a service agency; its Board members serve voluntarily without salary; there are no dividends for investors. Gifts to the hospital provide health dividends for the patient. One out of every eight persons is hospitalized during the year.

Charity Today

In most hospitals throughout the country indigent patients are given care and public funds reimburse the hospital for at least the major share of the bill. In Milwaukee County, public funds are not available for general private hospitals. Instead, the county has made ample provision to give care to those unable to pay for it in the County General Hospital. This plan makes unnecessary the old type of charity service which a private hospital once gave in this community.

On the other hand, new opportunities as well as a continuation of some of the old ways of performing philanthropic acts, have come to modern society.

Each year the Board of Directors of Milwaukee Hospital allocates nearly \$65,000 for free care. Some of this is for specific and planned charity work. By far the majority of it is tied in with the education of the medical house staff.

Another phase of free service, also linked with the house staff, is in cooperation with the Salvation Army.

Milwaukee Hospital works with individual philanthropists who wish to help people of low income who want service in the private hospital but cannot pay their full bill.

Dear to the heart of many people of the hospital is the service rendered in the Layton Home for the chronically ill. Mr. Layton, through the Milwaukee Hospital (Men's) Auxiliary, provided a sum of money for this long time care, but as the cost of care has risen, the provision has met fewer of the needs. A relatively small charity fund has recently been set aside and will increase as interested people contribute to it. This will supplement the payment of those patients who have private income, but not enough to meet the demands made by a long term illness.

Women's Auxiliary of Milwaukee Hospital

Late in 1952 under the leadership of Mrs. John C. Pritzlaff, Sr., who became the first president, and Mrs. Roland S. Cron, a Women's Auxiliary was organized.

The purpose of the Women's Auxiliary as stated in its Constitution, is "to promote and to advance the welfare of the Milwaukee Hospital through ways approved by the Board of Directors." This purpose is accomplished in three ways.

First, there is the interpretation of the hospital to the community by well-informed Auxiliary members.

Secondly, there are several plans for fund raising most important of which are the gift shop, the coffee shop and the sale for nurses. In ten years over \$100,000 has been raised and given to the hospital for use in various departments; examples are nursing scholarships, an isotopic laboratory, a Special Care Unit, a nurse-patient intercommunication system and radio channels with pillow speakers.

The third method of advancing the welfare of the hospital is volunteer service within the hospital, such as escorting new patients to their rooms and later to x-ray and therapy, feeding eye patients, and assisting in many departments. The volunteer has the time to give that extra helpful act and smile to relax and soothe the patient. Auxilians man a book cart, a gift cart, a coffee cart, deliver flowers and mail, and underwrite a beauty service. The Auxiliary Shops are not only fund raising efforts but they also provide a service for the patients, their families and friends, for medical staff members and employees of the hospital. There have been many rewarding hours with the long term patients at Layton Home. More than 275,000 hours have been given to the hospital by Auxilians in the past ten years.



Sr. Magdalene Krebs, R.N.,
Director of Nursing, 1949-1957
Mrs. John C. Pritzlaff, Sr.,
1st President of the Women's Auxiliary

Pastoral Care

In the stated objectives of Milwaukee Hospital it is pointed out that the relieving of human suffering is to be done "in the name of Him Who loves mankind with an everlasting love." Hospitals had their beginning in the concern of people motivated by Christian love. For this reason the services of the hospital include also chaplaincy, recognizing the right of every patient to receive the ministry of a chaplain or pastor of his own faith.

A Lutheran Pastor has always been on call or in service part of the time in Milwaukee Hospital. For many years a Chaplain from Lutheran Welfare Services of Wisconsin has performed this service and for the past couple of years has given supervision to a full time intern chaplain from Wartburg Seminary.

In recent years a summer educational program for seminary students and pastors has been carried out in the hospital in conjunction with Lutheran Welfare Services and Luther and Wartburg Theological Seminaries.

An Episcopalian Chaplain and a Roman Catholic Priest make weekly visits to the hospital, while Pastors of any denomination are welcome to visit members of their own parish.

Medical Progress

In the years when the science of surgery was steadily improving through aseptic methods, more effective anesthesia, and more skillful techniques, including the use of blood transfusion, intravenous solution, and the often termed miracle drugs, Milwaukee Hospital, its Staff and personnel were in the forefront, having an early history of progressive surgery as a basis for all future work. As the use of drug and chemotherapy advanced in the past decade, recognition was given of this, and specific beds were set aside for the patients in need of medical as well as those in need of surgical care. In the main or general building, approximately 126 beds are for medical use and 159 for surgical care.

Early in 1954 a Recovery Room was opened for surgical patients. When the new Hennekemper addition was built five operating rooms were added and the older ones were completely renovated making a total of ten available for surgery. The temporary recovery room was moved to new quarters which were included as part of the surgical suite.

Chiefs of Staff

Roland S. Cron, M.D., 1951-1956

Hans Hefke, M.D., 1956-1960

Irwin Schulz, M.D., 1960-





Special Care Unit

A Special Care Unit for fourteen patients was opened in 1960 designed and equipped to offer specialized and intensive nursing care to critically ill patients. It was the first of its kind in Milwaukee and has drawn medical and nursing visitors from many other places. An air conditioned area, it is equipped with emergency and life-abetting aids such as individual piped in oxygen and suction, individual blood pressure cuffs, a supply of emergency drugs including heart stimu-

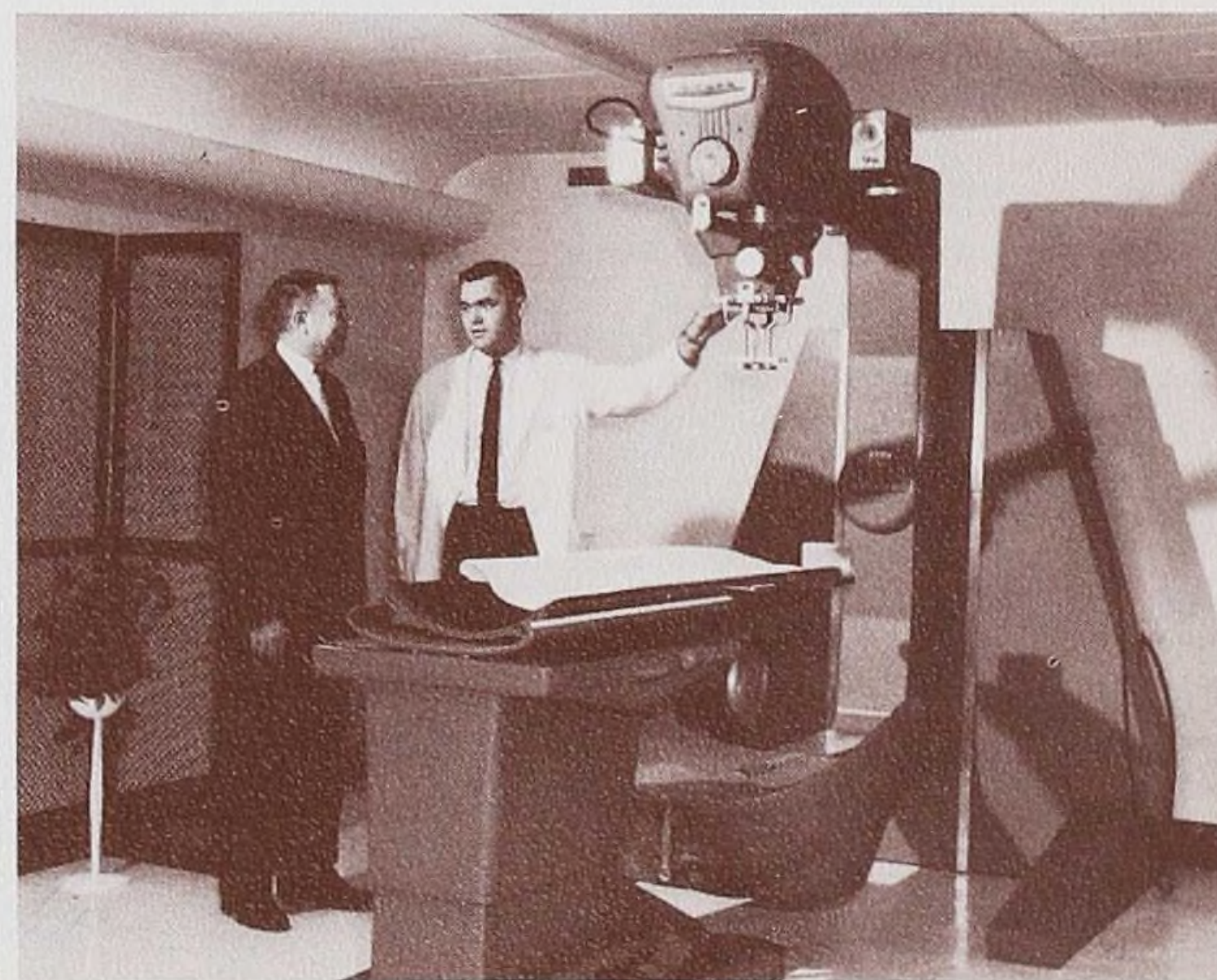
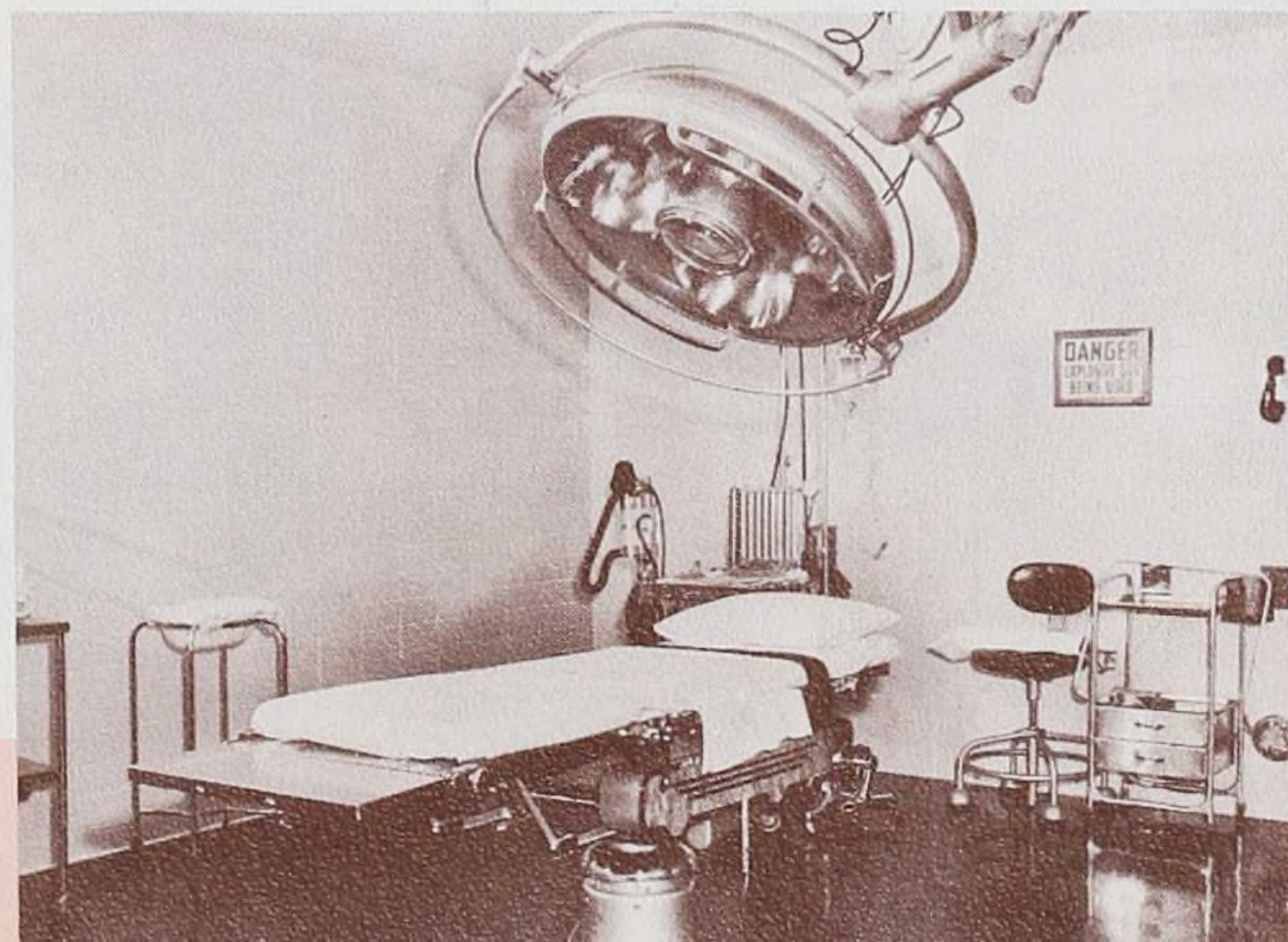
lants and anti-coagulants, as well as blood plasma and glucose. Special equipment for respiratory difficulties, a defibrillator, cardiac pacemaker, and a portable electrocardiograph are immediately available to the doctor and nurse. It is service of the highest quality in a dramatically progressive medical age.

The laboratories at Milwaukee Hospital were a part of the 1961 renovation program and were equipped to meet all the diagnostic and therapeutic demands placed upon it by the medical staff. Automation joined medical science and equipment such as the flame photometer, the autotechnicon and the auto-analyzer are in daily use.

A radio-active isotope laboratory was added. The simple, single microscope of 1900 was multiplied by six, plus a complex, delicate Leitz Ortholux equipped for fluorescence microscopy, to be used for screening tests for cancer and unusual and bacterial diseases.

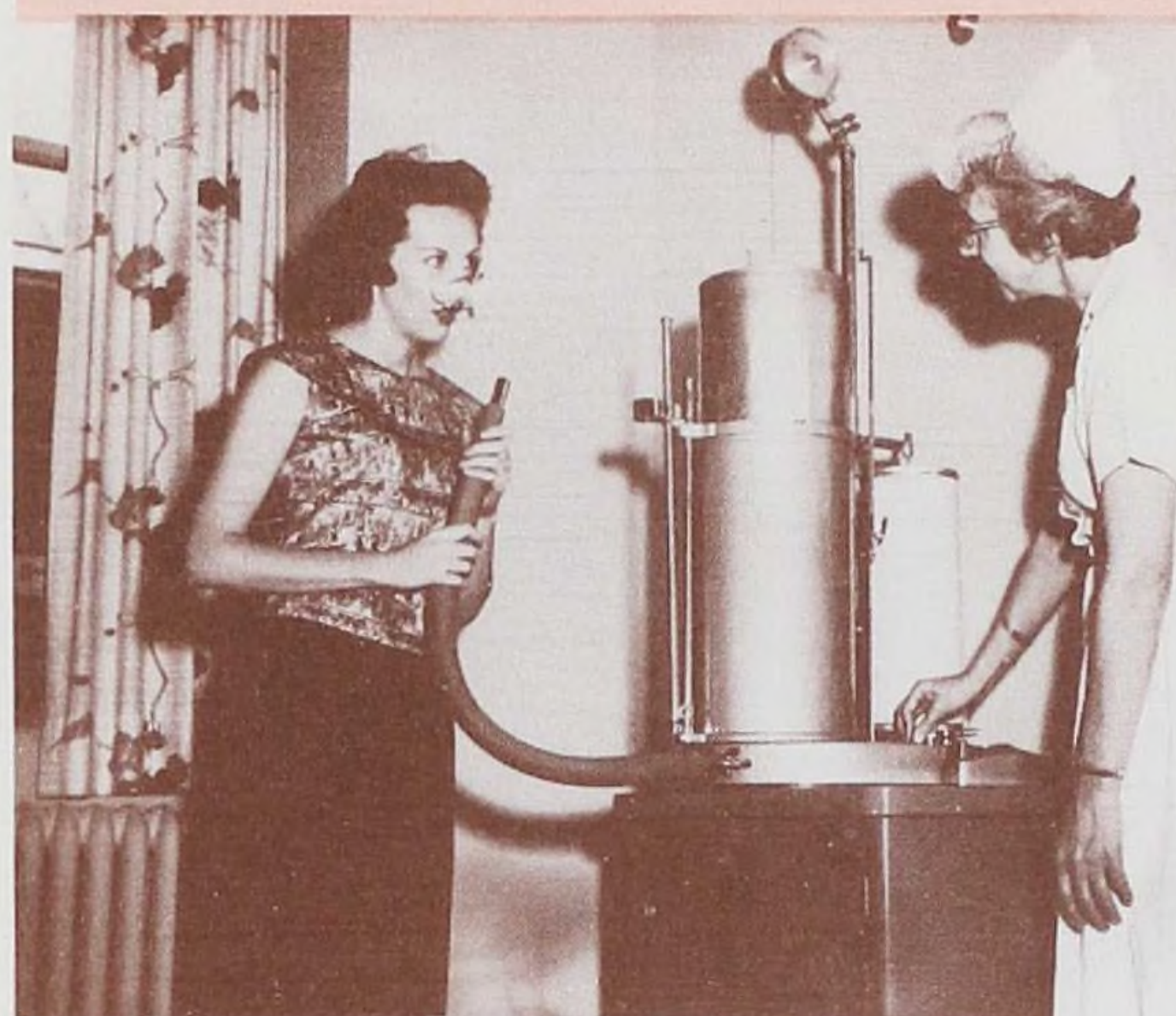
In the radiology department a cobalt unit is in use. This is the last addition to a department equipped for all manner of diagnostic and therapeutic x-ray procedures and electrocardiogram and electroencephalogram tests.

One of Ten Operating Rooms



Cobalt Unit

Early in this decade inhalation therapy became an adjunct to the treatment of medical and surgical patients in Milwaukee Hospital. This is the administration of medication or other therapeutic treatment via the respiratory tract. Preceding therapy are pulmonary function tests to determine the performance of the lungs. Both tests and therapy require a variety of mechanical equipment with trained personnel to operate in addition to the diagnosis and treatment which is a physicians service.



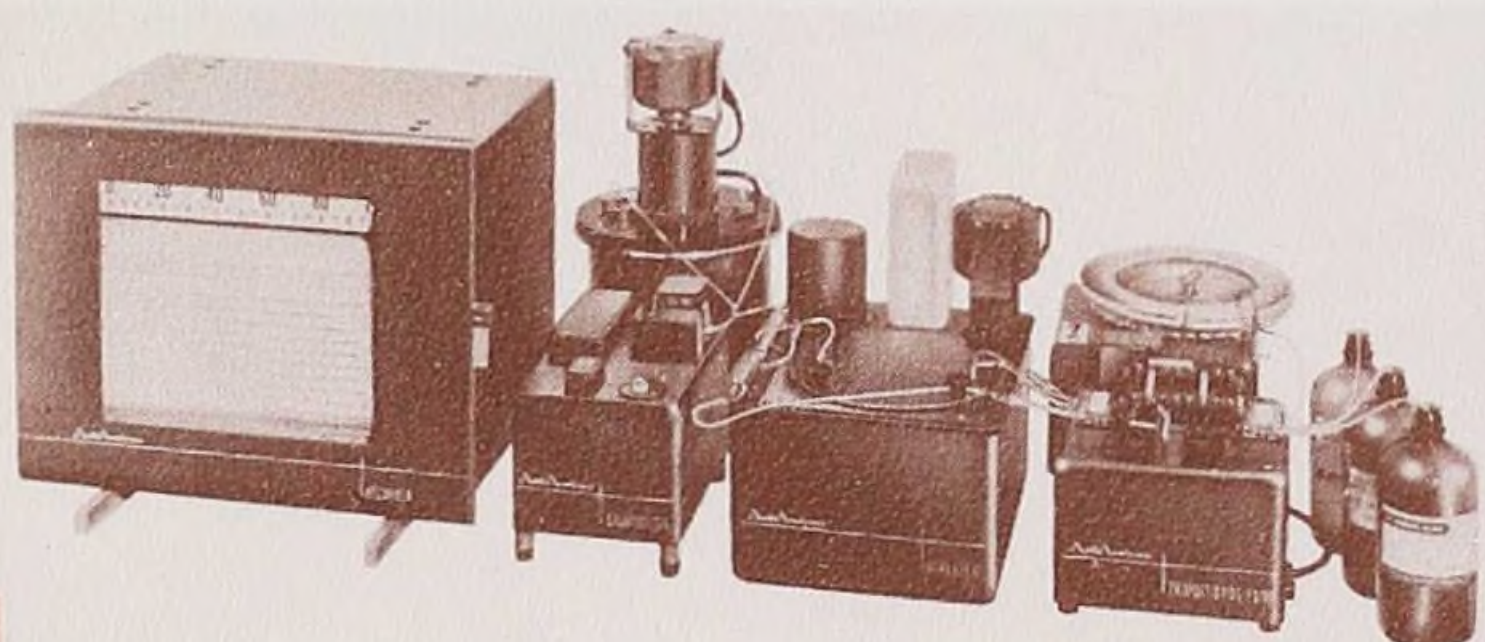
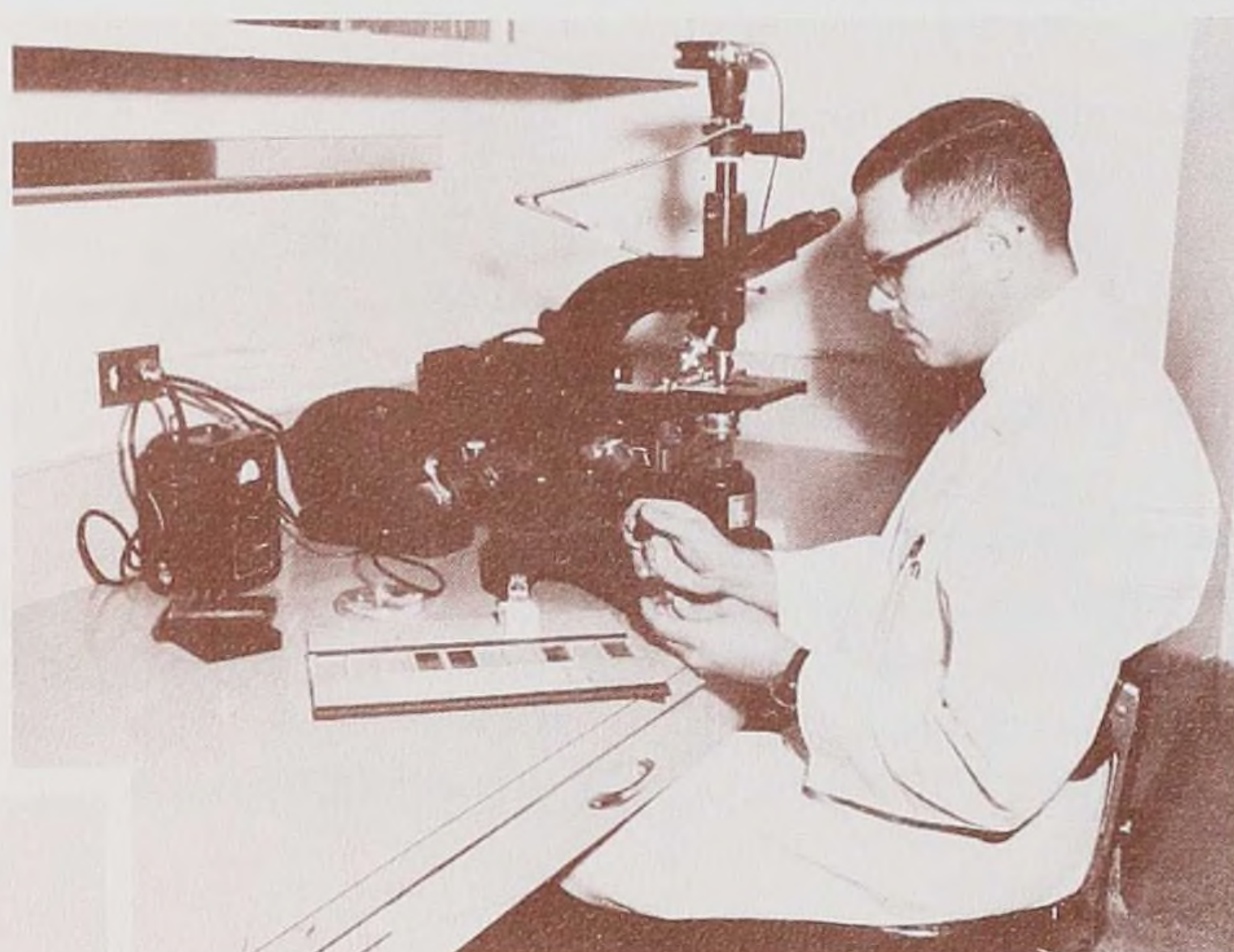
Personnel

In this modern, complex, machine equipped environment the hospital has its own peculiar problems. One of them is finding educated, personable people to fill the many positions which require special skills. The public is familiar with the doctor and his high degree of knowledge; yes, it is generally recognized that the nurse requires time and effort to learn her service. This extends to many others in the hospital, the laboratory technologist, the pharmacist, dietitian, record librarian, x-ray technician, medical secretary, engineer. There are over 150 job possibilities half of which require higher education.

The problem is compounded by two other factors. One is the demand for these same people by public agencies, industry, clinics and offices. The other is the need to operate the hospital 168 hours per week. To contemplate for a moment this place of healing which has been dispensing service every



Auto-analyzer in Laboratories





Seven minutes for a finished x-ray film with the X-Omat

hour in a century of time is a sobering though heartening thought. Following the social and economic pattern of the day, hospital employees work a forty hour work week. This necessitates a good number of part time people.

In 1962 the hospital had 784 people on the payroll; on a forty hour work week basis, the number was 615. The modern hospital requires two and one-quarter employees to serve each patient for twenty-four hours. Approximately two-thirds of hospital costs are in the payroll.

The Public and the Hospital in Summary

The American people by their active use of hospitals demonstrate that they regard good health as their right, and as part of their security and productivity. In summary what do they receive?

Diseases common 100 years ago have been practically eliminated by modern medical science. Rarely do we hear of smallpox, malaria, typhoid fever, or cholera—all deadly pestilences only a few generations ago. Tuberculosis and scarlet fever have come under control of medicine. Pneumonia, a dread disease only twenty-five years ago, and fairly common today is now quickly and successfully treated with medications.

With 95% of our Country's babies born in hospitals the death rate both for mothers and newborn is the lowest in history.

The continued discovery and development of anesthesia along with the use of oxygen, blood, antibiotics and a variety of delicate instruments to measure physical reactions has made surgery a marvelous and miraculous experience for all age groups. The specialized nursing in the Recovery Room and the Special Care Unit has added further to the comfort and rapid recovery of surgical patients.

The average stay now for a patient in Milwaukee Hospital is eight days. Thirty years ago it was twice that length of time; at the turn of the century it was nearly four times as long. Patients are home quickly and back at work for productive living in this new era of medicine and hospital care.

The continuous advances in diagnosis and treatment are most



Mrs. Edward J. Brumder,
President,
Women's Auxiliary

often experienced by patients in the increased use of laboratory and x-ray facilities. Hospitals provide for more, and for more complex diagnosis and treatment. The relatively short stay in the hospital means a continuous turn over of patients with heightened number of procedures or repeated additional service. This generation has another benefit in opportunities for prepaid hospital insurance. More complex business operations including a vast variety of prepaid hospital insurance plans must be processed by hospital personnel.

Hospital employees work forty hours per week which means two and one-quarter employees are required per patient. The shorter work week is one reason for the nurse shortage. Another reason is the increase all over the country of new hospitals which have not established schools of nursing.

Hospitals carry on educational programs for doctors, nurses, and technicians, for nowhere else can the lessons be learned.

Salaries have increased everywhere, and in few places more than in hospitals, for at one time hospital employees were grossly underpaid. Today's salaries are more in line with other work. Only since 1951 have hospital employees come under Social Security—this taxation along with raises and pension plans are reflected in patients' bills. Today hospital employees receive paid holidays and sick leaves as well as generous vacations.

We are living in a day of inflation; all costs are up, so are all incomes.

In 1955 the cost of operating Milwaukee Hospital was \$7,000 per day; in 1962 the cost had increased to \$11,000.

Yes, we pay more as we receive more. To determine hospital cost, one must divide a week's cost by 168 hours. The hospital service week is twenty-four hours per day, seven days per week. The hourly rate is astonishingly low.

The Past Becomes the Present

One hundred years have passed; a Century of Service has been accomplished. Through these ten decades have marched all manner of problems, medical, financial, administrative, social, and spiritual. Many thousands of people have been involved, most of whom were sick or injured and came to the hospital for help and healing. By far the majority were served to that end and in renewed health they enjoyed their families, performed their work, and served their contemporaries.

Untold hundreds contributed to this healing. The physicians lead this group, but they would be the first to acknowledge their dependence upon the hospital, its facilities, and its personnel. These, in turn, will credit the donors and the "paying guests," or the patients.

Together, the people of Milwaukee have witnessed incredible changes in every aspect of life. Some of the greatest changes have been in medical science and in the hospitals where medical people practice their art and skill.

Through the decades Milwaukee Hospital has grown, progressed, made changes, moved into new areas of healing and teaching. Its life truly has been a Century of Service.

We are ready to look at Milwaukee Hospital today, 1963. It makes us pause, for today is almost immediately tomorrow.

The Future

Only two things about the future are sure. One is that there will be change. The other is that there will be human need of some kind. The people of Milwaukee Hospital have met these two challenges during the past century. Awareness, determination and dedication are present now to meet the future.

The Board of Directors at the close of 1962 created a Department of Chaplaincy Services and established a Master Planning Committee comprised of Board, Administration, and Medical Staff members. To serve people's minds and hearts as well as their bodies will be a part of tomorrow's work. The "well-springs of faith and courage that are not of human making" must be called upon to meet a new age, and a larger population.

With confidence in God and in people, Milwaukee Hospital enters upon its Second Century of Service.

1963 - Milwaukee Hospital Today

The President's Message . . .

It has been my privilege to be a member of the Board of Directors of Milwaukee Hospital for eleven years. The last four of these years I have been honored by being selected Chairman of the Board and President of the Milwaukee Hospital Corporation.

As an officer of the Board of Directors I feel that it has been a privilege to participate and assist in the formulation of the plans of Milwaukee Hospital, an organization which has played such an important part in the medical history of Milwaukee beginning a century ago. The responsibilities of Boards of Directors for community hospitals are of considerable magnitude since it is their responsibility to see that the assets of the community are best utilized and all personnel, employed by or connected with the hospital, perform their duties and conduct their affairs in such a manner that the community receives the highest type of service from the hospital organization. In addition to the functional problems of the present, the Board must encourage and assist in planning for the future.

Milwaukee Hospital is now celebrating its 100th anniversary. The fact that the hospital, starting with a most humble beginning, has grown and developed through the past century is proof that the past Boards of Directors met their obligations well.

We take this opportunity to honor all those who preceded us in the Milwaukee Hospital growth and give our assurance to the community that the present and future Boards of Directors will endeavor to meet their obligations in as creditable manner as did those of the past.

August K. Paeschke



MILWAUKEE HOSPITAL CORPORATION

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Mr. Arthur W. Riemer, Vice-President
Sr. Gladys Robinson, Secretary
Sr. Elizabeth Krebs, Treasurer

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Sr. Lydia Becker
Rev. Jule F. Berndt
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Rev. Ervin Seidel
Sr. Anna Seinwill
Rev. E. Helmuth Stolz
Rev. Amos G. Streich, D.D.

MILWAUKEE HOSPITAL BOARD OF DIRECTORS

(left to right)

* Sister Gladys Robinson,
Secretary

* Mr. August K. Paeschke,
Chairman

Sister Elizabeth Krebs,
Treasurer

* Mr. Arthur W. Riemer,
Vice-Chairman

The Rev. John H. Baumgaertner

Mr. Edward J. Brumder

* Mr. Elvin R. Danielson

Mr. Arthur H. Davidson

* Sr. Elinor E. Falk

* The Rev. Henry A. Flessner

The Rev. Hoover T. Grimsby

Sr. Magdalene Krebs

* Mr. Walter C. Mayer

The Rev. Amos G. Streich, D.D.

* Executive Committee



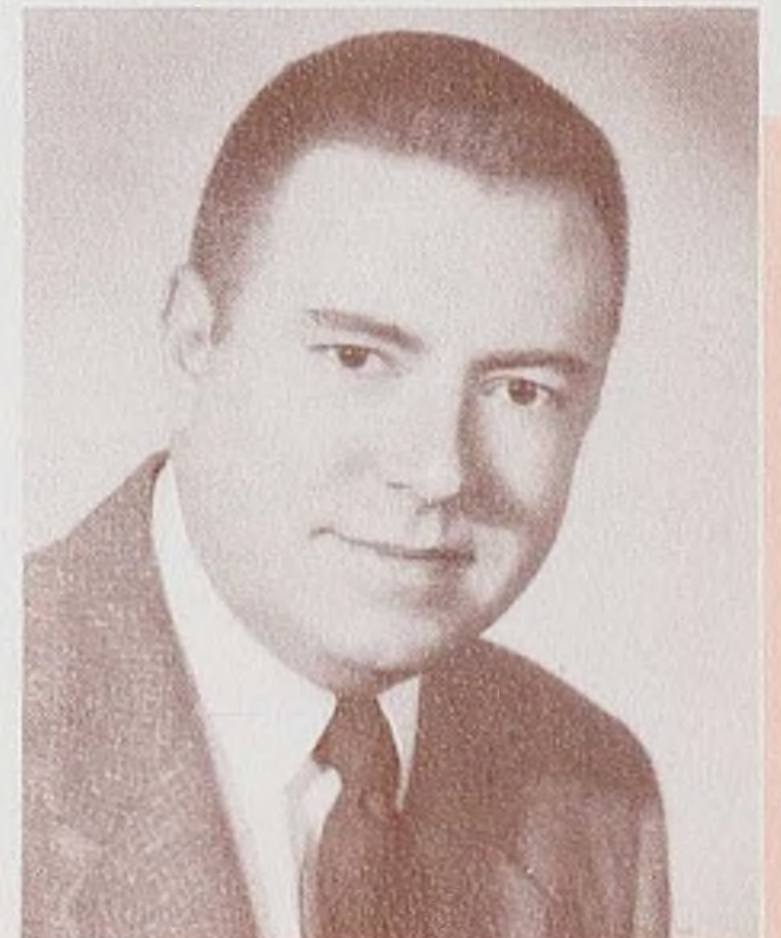
The Executive Director's Message . . .

The opportunity of commemorating ten decades of service to a community is a privilege that has not come to many hospitals in the United States. August of 1963 will mark the end of such a period of service to the city of Milwaukee by Milwaukee Hospital.

In 1863, in a converted farm house, the hospital began functioning in order to provide a much needed facility for the small town of Milwaukee. As time passed and the town became a city the hospital also grew and the farm house was replaced with planned hospital buildings large enough to accommodate many more patients. Not only did the size of the hospital increase but also the scope of the medical activities, so that more and more could be done to restore health and preserve life. Eventually the need for more trained personnel led to the establishment of a variety of educational programs. These programs, of course, were designed to produce more doctors and health workers for the community. The hospital buildings do not mean much without the people who serve in them and those who provide the leadership. The tangible success of Milwaukee Hospital as it reaches the end of its first Century of Service is proof of the efforts of all those who served in their respective capacities.

It has been my privilege to be associated with Milwaukee Hospital for the last ten years of its Century of Service. We have been conscious of continuing to build on the solid foundations laid and added to by all our predecessors. It is my objective to see that, as a second century of service begins, all of us concerned with Milwaukee Hospital's future will continue to operate a hospital that meets the changing health needs of an expanding community.

Stanley W. Martin



The Message of the Chief of the Medical Staff

The Medical Staff offers congratulations to the Sisters on this Centennial Celebration of their hospital. The century of development and growth of Milwaukee Hospital, an institution organized and dedicated under God to the service of man, is an excellent example of the orderly continuity of life and purpose. Our predecessors have left their *mark* in the traditions, the personality, and the living spirit of the hospital as it exists today.

In review, one is amazed at the changes during the short one hundred years, from the original concept that a hospital was a place to go to die to the present one, a place where people go to stay alive. Consider some of the milestones in medicine which Milwaukee Hospital and its people have seen: the antiseptic surgery of Lister (I have heard Dr. Gustave Kaumheimer describe the days when the operating room was a fog of carbolic acid spray); the later knowledge of bacteriology and immunology and the related development of aseptic surgery with its scrubbing, the sterilization of linens, steam sterilization of instruments, the healing of wounds by "primary intention"; the Roentgen ray (our own "Jake" Janssen who pioneered in this community in the application of x-ray to diagnosis and treatment). Many of us have seen the development of intravenous fluids, insulin, blood transfusion, endotracheal anesthesia, and more recently, the vaccines, the sulfas, the antibiotics, and the many potent drugs.

Until recent years, there were relatively few drugs and procedures available to the practicing physician which could be used to actually save lives or shorten disease. The most potent drug was the doctor *himself*. He had the time, the interest, and dedication to sit with the mother having her baby, with a patient going through the crisis of lobar pneumonia, with the child choking from diphtheria, with a dying patient, offering support to the family. By giving of himself, he gained the love, the respect, and affection of those whom he treated.

Now we have marvelous tools for diagnosis and remarkable weapons against disease, more potent than anything our forebears had, and, in some respects, more dangerous. These require greater knowledge, longer specialized training, and greater judgment in their use. We have these tools; we are just as dedicated I believe, but we have less time to "sit with the patient." Today we are pioneers for the next century of service of our hospital to the community. We shall leave our *mark* by the quality of our medical care, by



the quality of our teaching, by the example we set for others to follow. Will we be able to pass on the traditions, the living spirit, the high moral values which we inherited? Will we be able to inspire the next generation of doctors to remain dedicated and prepare them to advance the profession's service to mankind? We must impress those coming after us in the necessity of maintaining a balance between the multiple responsibilities of the physician: his responsibility to his patient, to society, to his hospital, to his profession, to God, and to himself.

The facilities, the knowledge, the procedures we possess and use today will be surpassed in coming years. The future of medicine suggests a greater use of preventive medicine, earlier diagnosis of disease, better control of present diseases, the development of new diseases. We will deal with a more sophisticated patient. However, if present trends continue, he will need emotional support more than ever. In this day of extremely rapid and almost limitless advance in scientific medical knowledge, the physician must strive to preserve the art of medicine and continue to see patients as sensitive people needing support in addition to treatment of their disease, and not see them primarily as a disease problem to be solved, perhaps by an IBM machine. We must do our part to keep the hospital basically a medical and human institution.

Marvin Schulz

Milwaukee Hospital Medical Staff

Irwin Schulz, M.D., Chief of Staff

DEPARTMENT OF MEDICINE

Lamont R. Schweiger, M.D., Chairman

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John Huston	Donald M. Ruch
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Clarence W. Jordahl, Jr.	Raymond P. Schowalter
Charles L. Junkerman	Lamont R. Schweiger
Robert A. Kebbekus	Kenneth J. Winters
R. Parks LeTellier	

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Raymond M. Stark
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Merlyn C. F. Lindert

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Arthur A. Holbrook
Josef A. Kindwall
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Frederick W. Madison
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John C. Peterson
Paul S. Pierson
Anthony V. Pisciotta
Rex Rupp
Abraham B. Schwartz
Lillian Thomas
Ronald K. Wells

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Arthur C. Hansen
John S. Hirschboeck
William S. Middleton

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John O'D McCabe	Lyle W. Swartz
Owen E. Miller	Wilson Weisel

Consulting Staff

Edwin H. Ellison	Earl W. Martens
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Milwaukee Hospital, Main Building



DEPARTMENT OF OBSTETRICS AND GYNECOLOGY

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Lionel T. Servis	

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Emil J. Drvaric	Walter R. Schwartz
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Richard T. Flynn, Jr.	Chase W. Wolfe
Howard I. Gass	Serenus H. Wolter
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Consulting Staff

Richard F. Mattingly

DEPARTMENT OF SPECIAL SERVICES

Hans W. Hefke, M.D., Chairman

Attending Staff

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Donald P. Babbitt	David J. Carlson
John M. Beffel	Hans W. Hefke
Edward A. Birge	

Associate Staff

Sherwood W. Gorens	Theodore F. Meves
David J. La Fond	

1962

Inpatients 10,848

Surgical procedures 6,690

Outpatients 44,470

(includes laboratories, x-ray, physical therapy, inhalation therapy, and outpatient dept.)

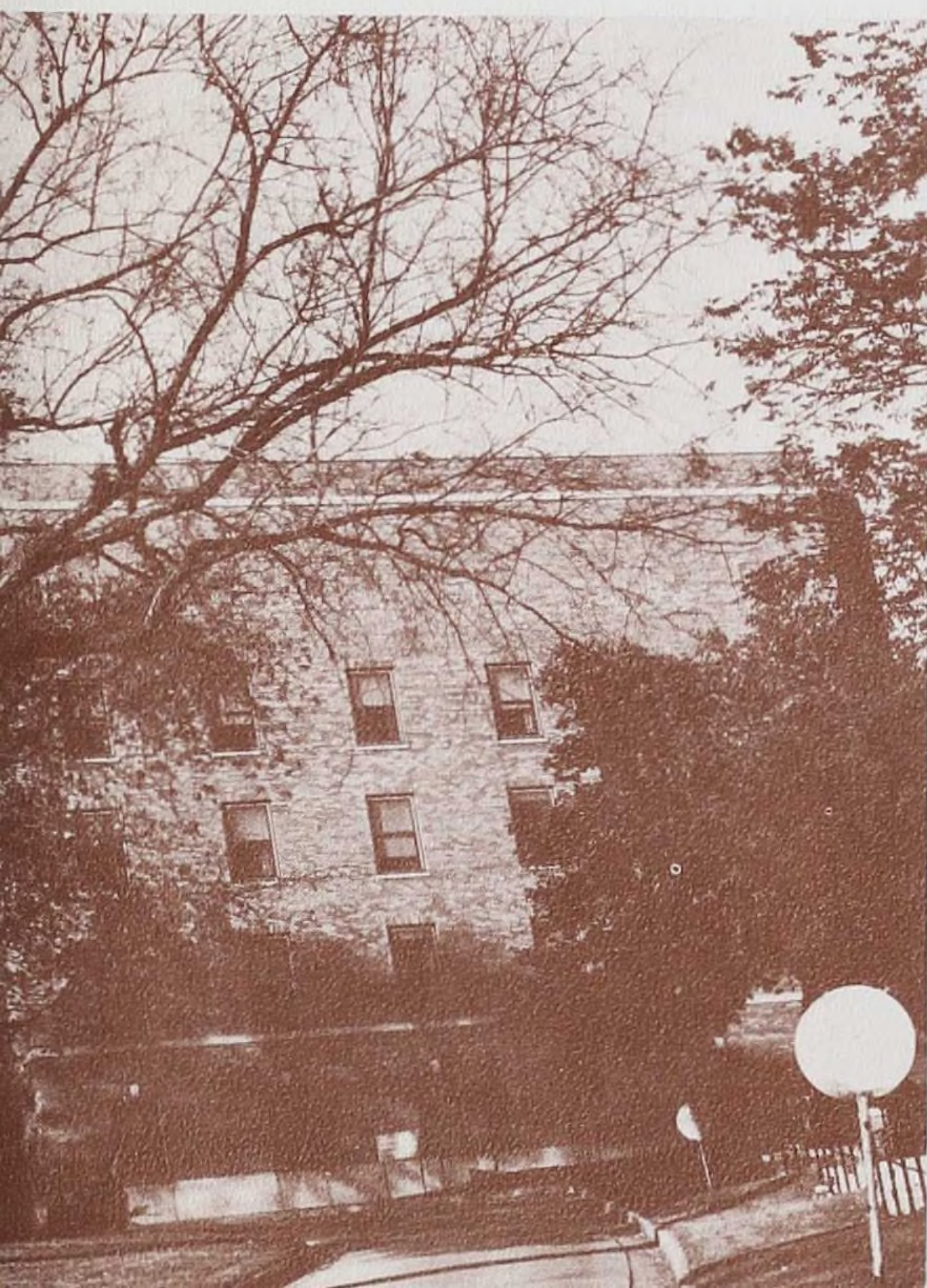


Maternity Pavilion
1962 Babies born 1,625



Layton Home

Student Nurses' Residence





DEPARTMENTS OF > > > >

DEPARTMENT OF ANESTHESIOLOGY

James W. Bookhamer, M.D., Director

The finest facilities and the most advanced technical equipment are available in this department to aid the nurse anesthetist, the surgeon, and the anesthesiologist in providing the very safest anesthesia for the patient during his or her surgery.

A staff of five anesthesiologists, doctors of the hospital's medical staff who have made a specialty of anesthesiology, and seven nurse anesthetists administered the anesthesia for the 4479 surgical procedures and 1574 deliveries performed during the year of 1962. During the same year, surgeons administered 1831 local anesthetics.

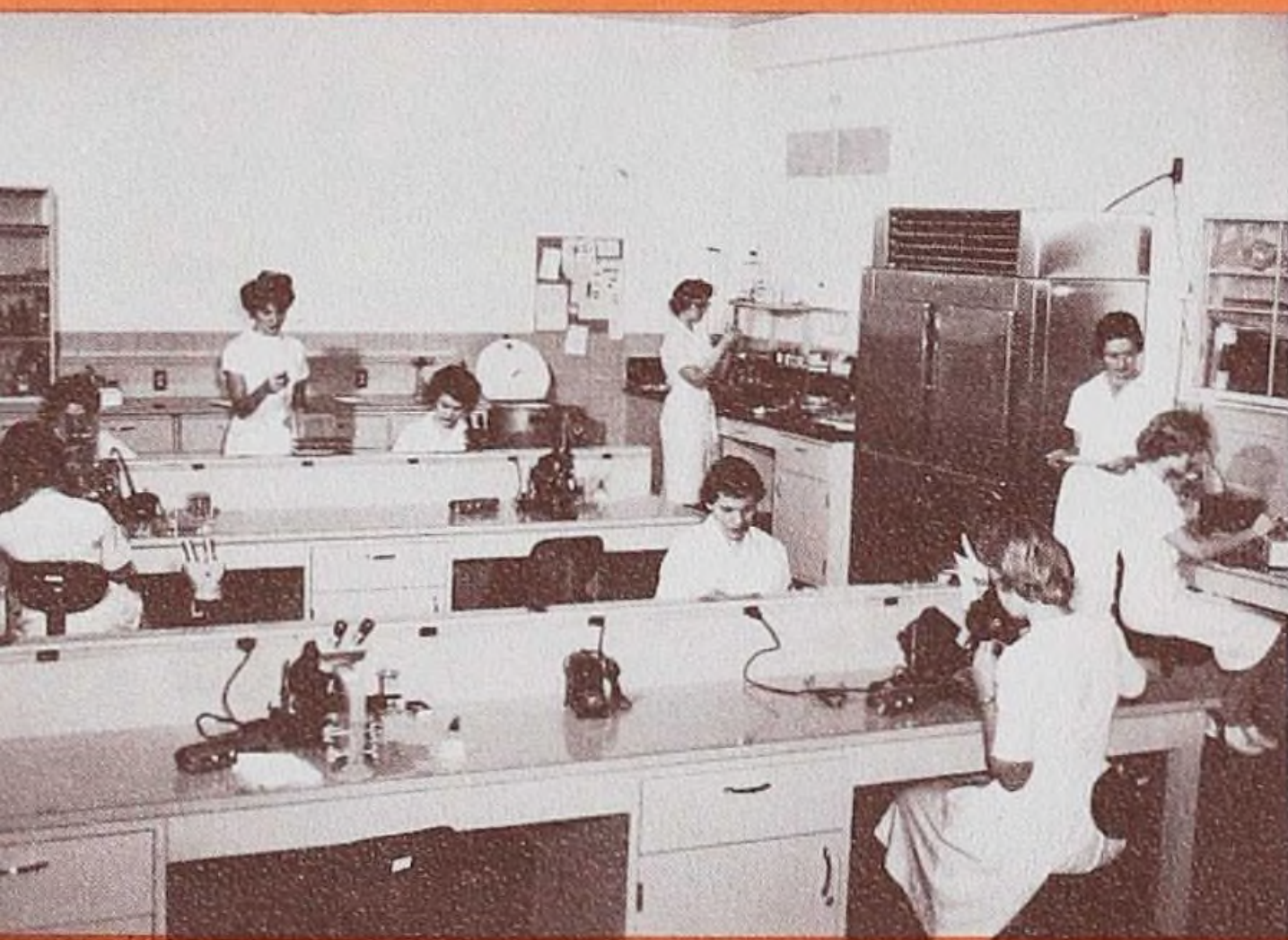


CHAPLAINCY SERVICES

Rev. G. Lokensgard, Lutheran Welfare Services, Supervisor
Mr. George Doebller, Intern Chaplain

The chaplain's assignment is to minister to the patient in Word and Sacrament and through prayer, helping to put the patient in a frame of mind so that his body functions can be most effective in the healing process. The assurance of the presence of Christ in Holy Communion brings an inner strength that shows up also physically. In 1962 chaplaincy visits totalled 14,344.

A three month's program of clinical training for seminary students and pastors is a yearly event.



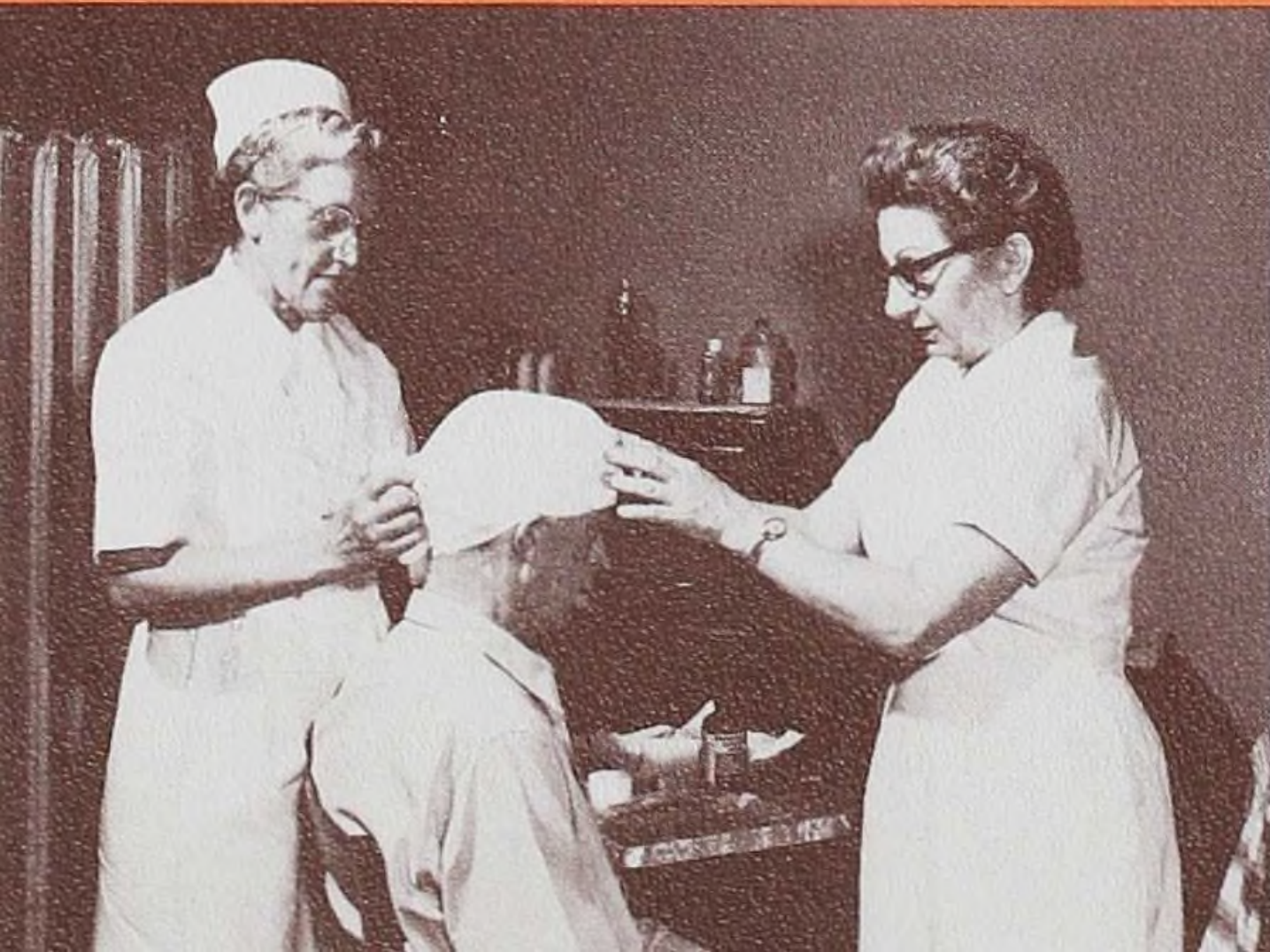
DEPARTMENT OF LABORATORIES

Edward A. Birge, M.D., Pathologist and Director
David J. Carlson, M.D., and
David J. LaFond, M.D., Pathologists
Miss Marie Heinen, B.S., M.T., (A.S.C.P.) Chief Technologist

The most familiar function of the laboratory is the diagnosis of disease. In daily use are the disciplines of pathologic anatomy and histology, hematology, bacteriology, cytology, biochemistry, and physics. However, also the control of therapy frequently becomes an important aspect of laboratory work following a diagnosis and initial treatment.

The laboratory is responsible for the education of the interns and residents in the proper use and methods of modern laboratory diagnosis. It is responsible for the instruction of medical technologists who spend a fourth year of clinical instruction in this approved hospital.

Laboratory procedures in 1962 numbered 222,173.



LAYTON HOME FOR INVALIDS

Sister Maria Reuss, R.N., B.S., Director

For fifty-five years this unit of Milwaukee Hospital which was a gift from Mr. & Mrs. Frederick Layton has given service to the invalid in need of long time care. Over six hundred persons have known the ministrations of the sisters and their faithful helpers. Today there are forty-six beds available. Twenty-three employees give care to the patients, many of whom move from the main or general hospital to the Home. Far more intensive nursing care is given today than formerly.

Partial or full recovery in some instances of fracture or stroke cases has made it possible for several patients to return to their own homes.

> MILWAUKEE HOSPITAL, 1963

Mr. Stanley W. Martin, B.S., M.H.A., F.A.C.H.A., Executive Director



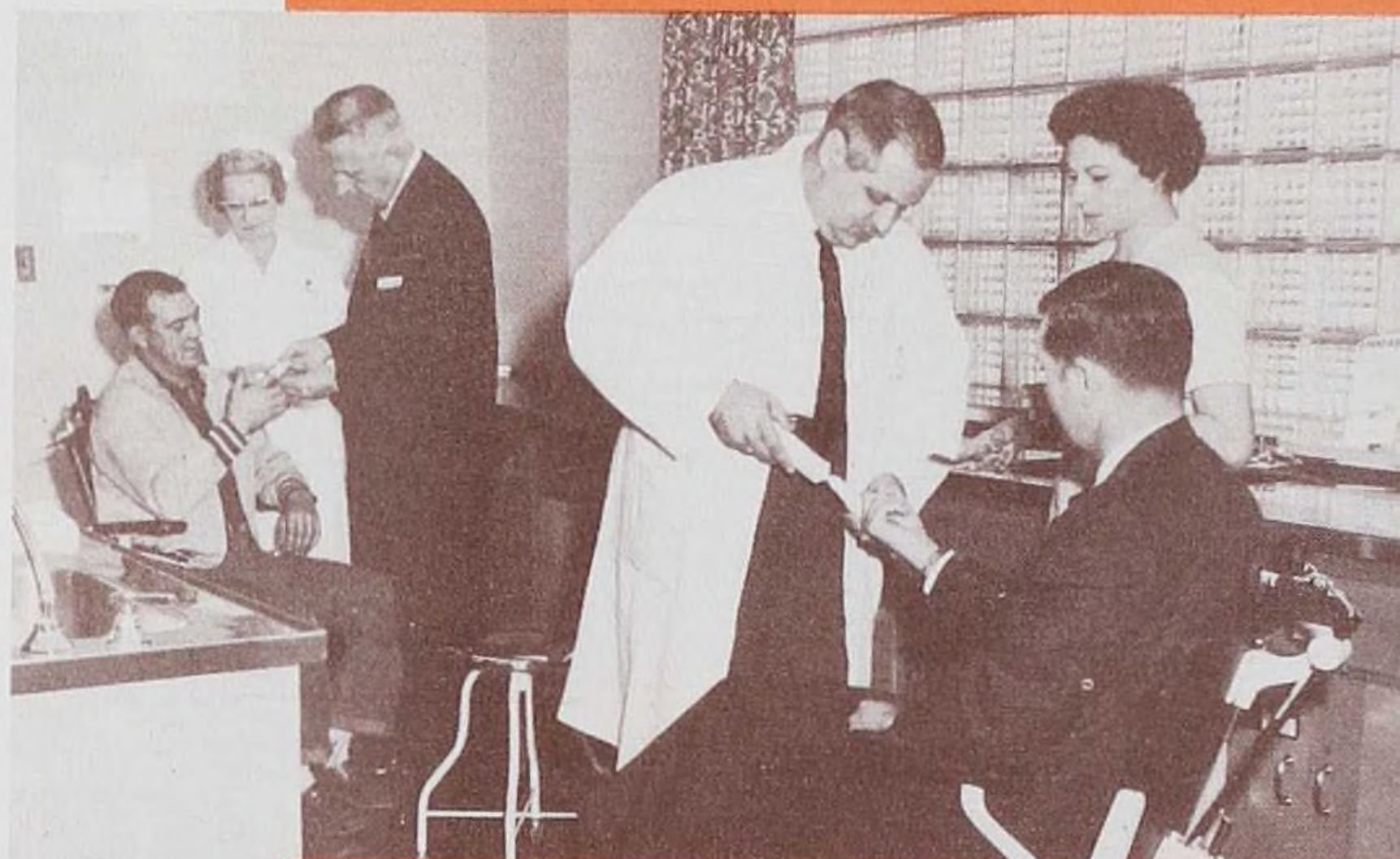
DEPARTMENT OF NURSING SERVICES AND EDUCATION

Mrs. Wealthy Lawton, R.N., B.S., M.S., Director

With the exception of one or two persons, the director of nursing is responsible for the largest number of people, the most complex and most beneficent service in the hospital. She, with the assistance of her supervisors assigns, directs, supervises, guides all nursing service personnel. This is the 168 hour per week operation with over 330 personnel.

Nursing in a hospital is a service devoted to meeting the needs of sick and injured through the application of knowledge and skills, so that in cooperation with other professional people the physical, psychological, social, and spiritual nature of the individual patient will be met, by caring for and rehabilitating him and by promoting good health.

*Bed patients in 1962 were 12,473 including 1,625 newborn
Total patient days were 96,293
Average length of stay was 7.7 days*



Outpatient

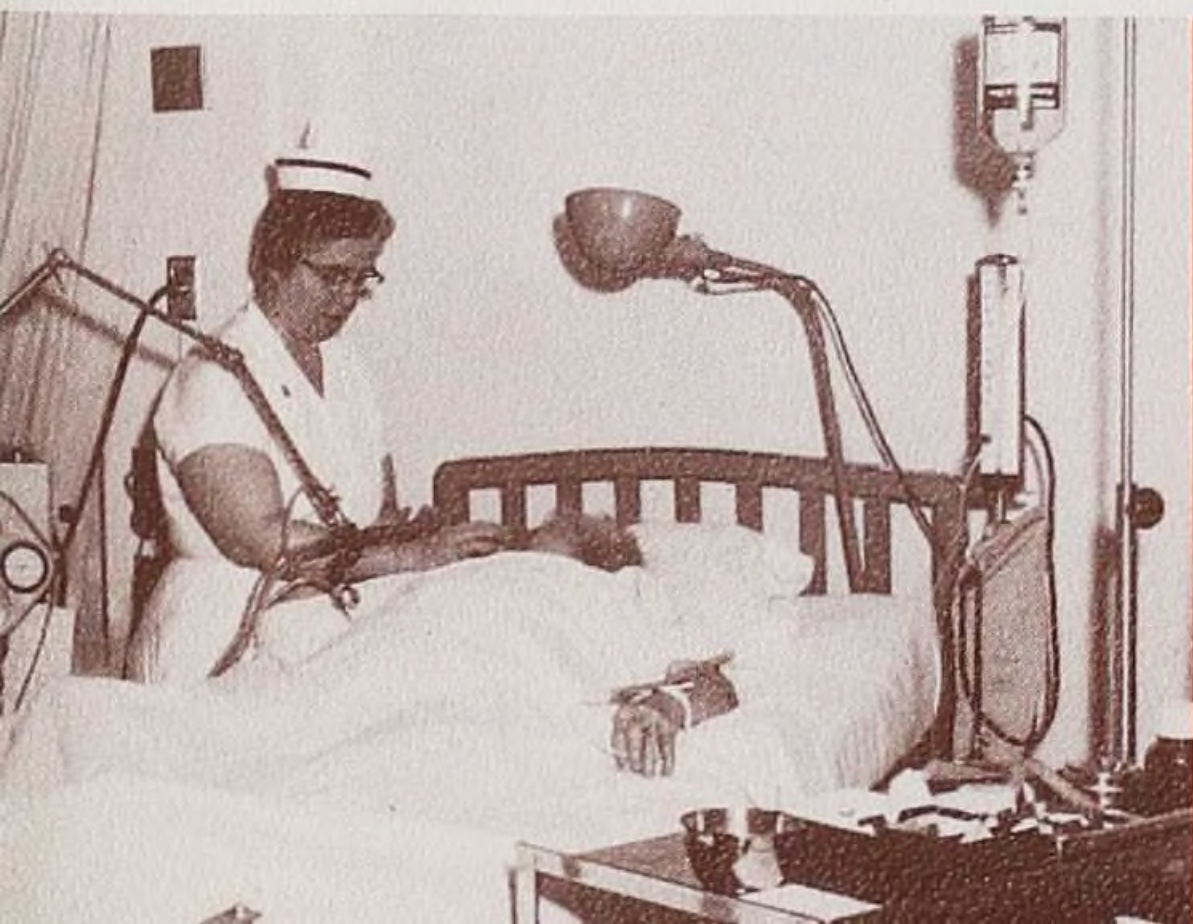


Nursing Station

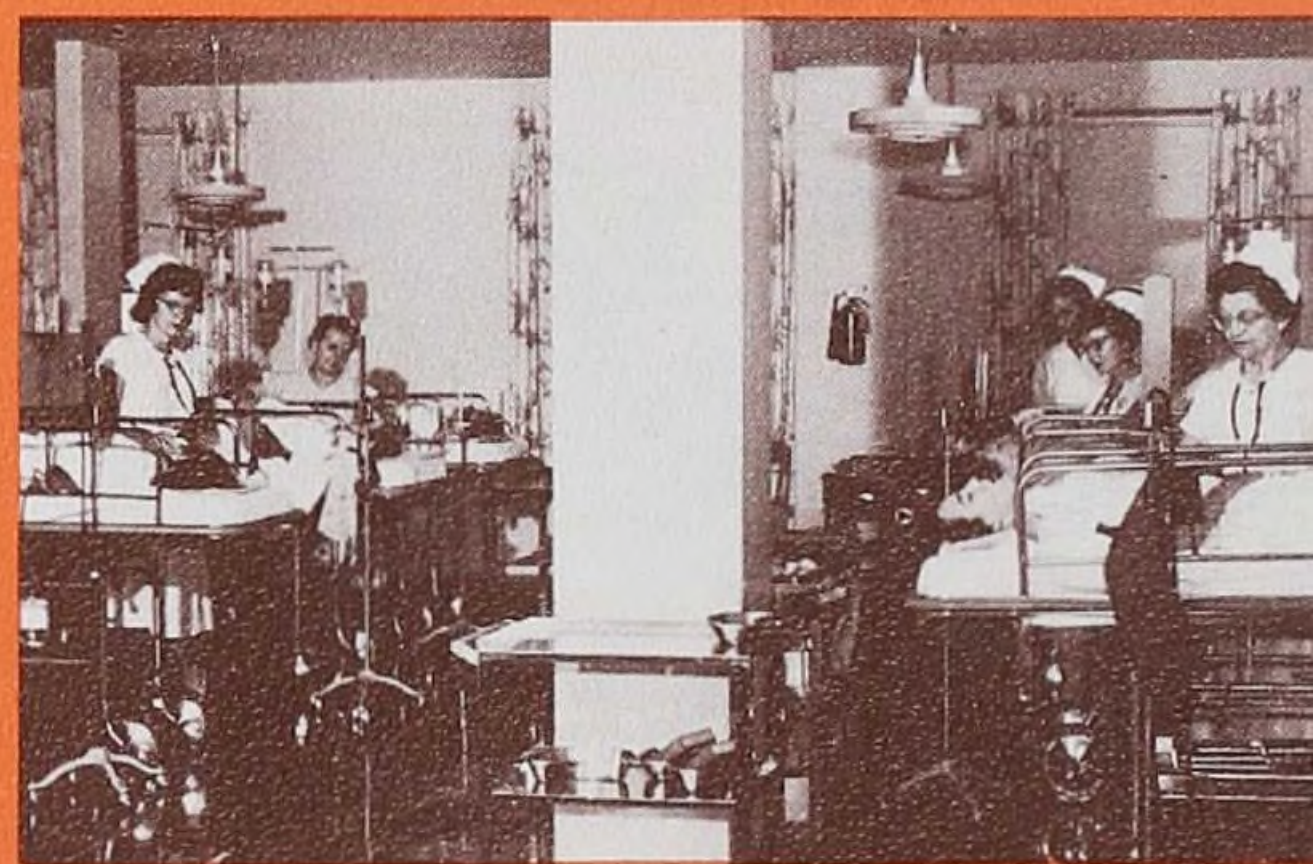


OB

Special Care



Surgery



Recovery



DEPARTMENT OF MEDICAL EDUCATION

Clarence W. Jordahl, Jr., M.D., Director

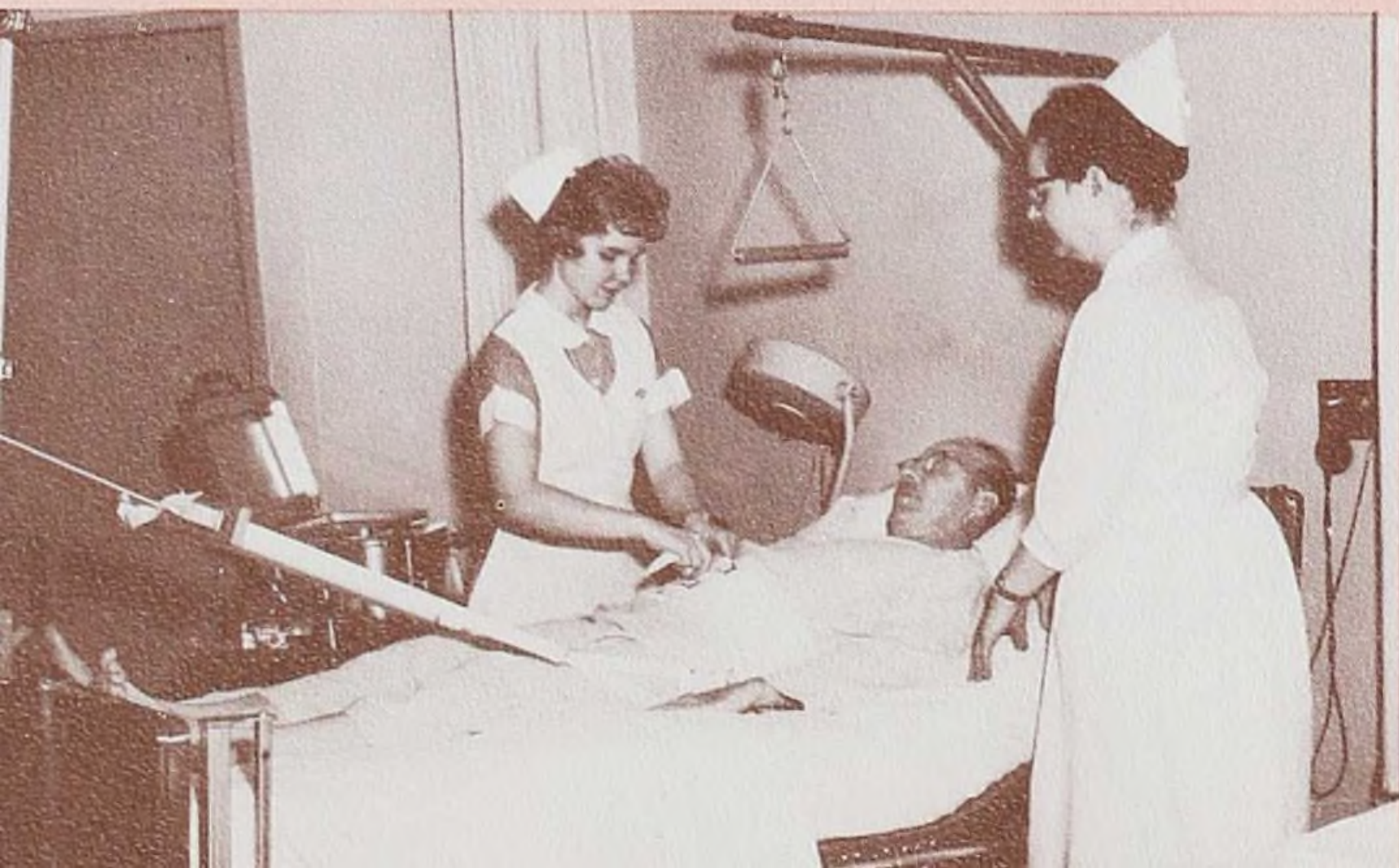
The majority of time and effort now spent in medical education in the hospital is devoted to post-graduate experience. The recognized need for continued development of the house staff training program has led to the establishment of a position for a Director of Medical Education. In meeting current demands for training programs, we must constantly endeavor toward academic excellence. The initial years of our hospital's second centennium must and will witness this achievement.



NURSING EDUCATION

Mrs. Ellen Weller, R.N., B.S., M.S., Associate Director

The three year diploma School of Nursing of Milwaukee Hospital which began in 1903 has graduated 1741 students to become registered nurses. It is now a co-educational school including male as well as female students. Present enrollment is 115. "Enter to learn; go out to serve" has been the school's constant motto.



DEPARTMENT OF PHARMACY SERVICES

Sister Gladys Robinson, B.S., R.Ph., Director

The pharmacy's basic reason for existence in the hospital is to supply the patient with medicines and other related agents needed for the diagnosis, treatment, cure, and prevention of disease. Prescriptions are filled in accordance with physicians' orders.

Those concerned with the treatment of the patient often have immediate need for specific and detailed information about drugs. Pharmacy staff members are qualified and equipped to furnish pharmacological and pharmaceutical information to the medical staff, the nursing staff, and other para medical personnel.

The pharmacy department is also education oriented and pharmacy internships are almost always in progress at Milwaukee Hospital.

With increasing medical discoveries and with the great chemical research that is going on it is anticipated that the work volume and the responsibilities of the department will continue to increase.

Drugs dispensed in 1962 totalled 183,510.



DEPARTMENT OF PUBLIC RELATIONS

Sister Elinor E. Falk, M.A.S.A., Director

The aim of this department is to interpret Milwaukee Hospital and its program of policy, service, education, and future service to the public including its medical staff, hospital employees, patients, students, and general public through a variety of communication skills including letters, brochures, pictures, addresses, and displays, in cooperation with all the other hospital departments.

This Centennial book has been edited by the Director of Public Relations, who has been the Directing Sister of the Lutheran Deaconess Motherhouse at Milwaukee since 1952.



DEPARTMENT OF RADIOLOGY

John L. Armbruster, M.D., Radiologist and Director

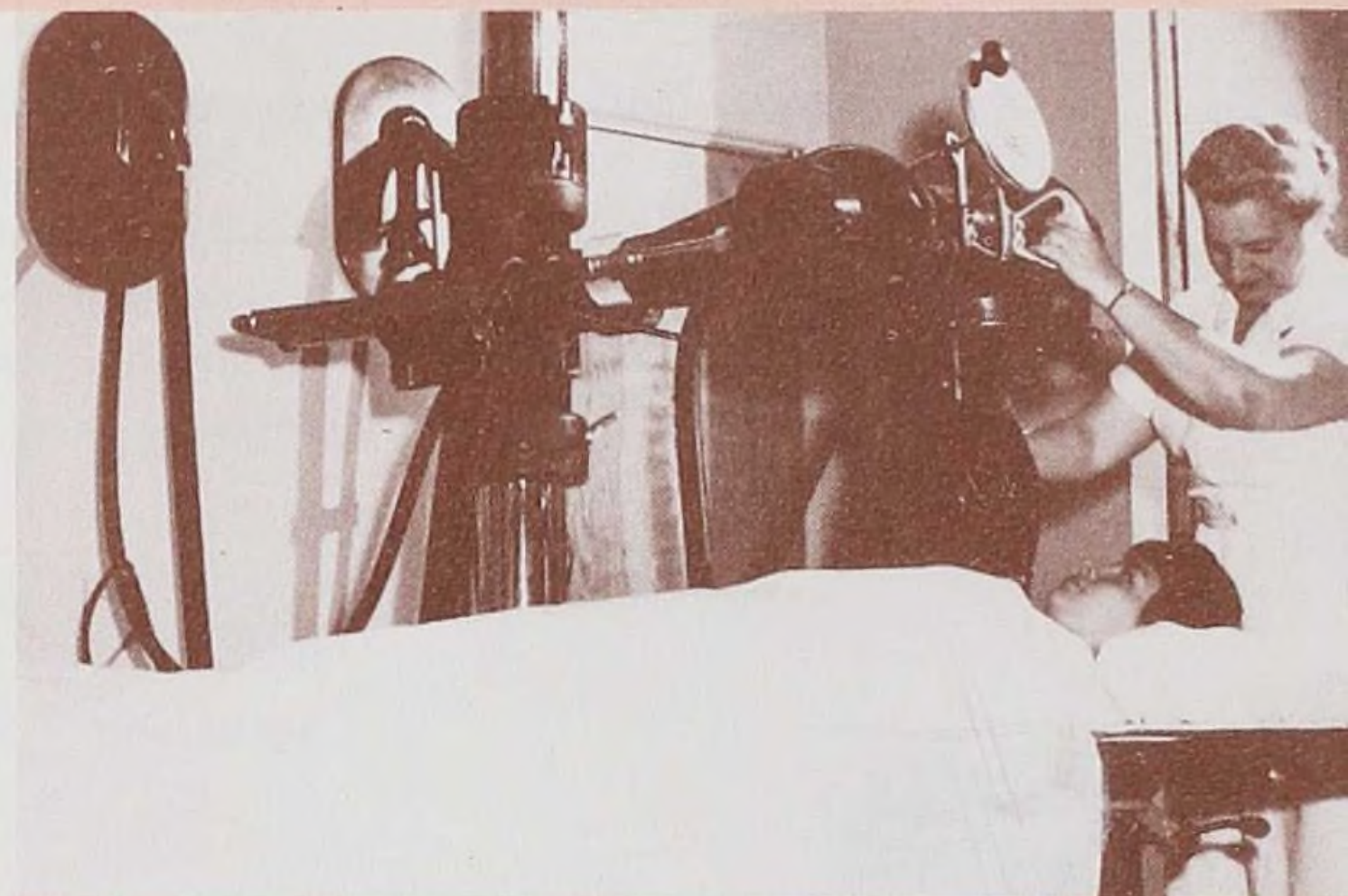
Hans W. Hefke, M.D., Radiologist

Donald P. Babbitt, M.D., Radiologist

Mrs. Esther DeMartini, R.T., Chief Technician

This completely modern department's newest equipment is a Cobalt therapy unit with which radiologists began treatment in 1962. Earlier equipment includes deep x-ray therapy machines, fluoroscopic, radiographic, urological and dental units as well as radium and radio-active isotopes; and electroencephalogram and electrocardiogram equipment.

1962 statistics reveal x-ray examinations, x-ray therapy treatment, electrocardiograms and electroencephalograms totalled 83,535.



DEPARTMENT OF VOLUNTEER SERVICES

Mrs. Marion Hase, B.A., Director

The function of this department is to direct the approximately 190 volunteers from the Women's Auxiliary of Milwaukee Hospital who come into the hospital one-half day each week, in such a manner that the volunteer service is best coordinated into the various departments of the hospital to the best benefit of patients.

During days free from school candy strippers augment adult services.





Mr. Neil Rittershaus, B.B.A.,
Assistant Executive Director



DEPARTMENT OF BUSINESS MANAGEMENT

Robert E. Johnson, Jr., B.B.A., C.P.A., Director

Business functions at Milwaukee Hospital encompass a total of eight areas or, accounting, patient account management, reservations, admitting, information center, communications, mail, printing, and cashiering.

Accounting and the patient account management divisions are primarily charged with the responsibility of conservation of the hospital's assets so that the institution will always be available to serve those who are in need of the services offered. Accounting encompasses the recording of operating transactions, cost accounting, accounts payable, and accounts receivable including computation of insurance benefits whereby the hospital bills the insurance company on behalf of the patient. Reservations is charged with scheduling patients into the hospital. The admitting personnel originate the first of the many records which become a part of the hospitalization and medical history maintained for the benefit of each patient. The information center aids the incoming patient in becoming oriented to the hospital, dispenses visitors' passes and information concerning patients' condition to their relatives and friends.

Communications is handled by the telephone switchboard personnel.

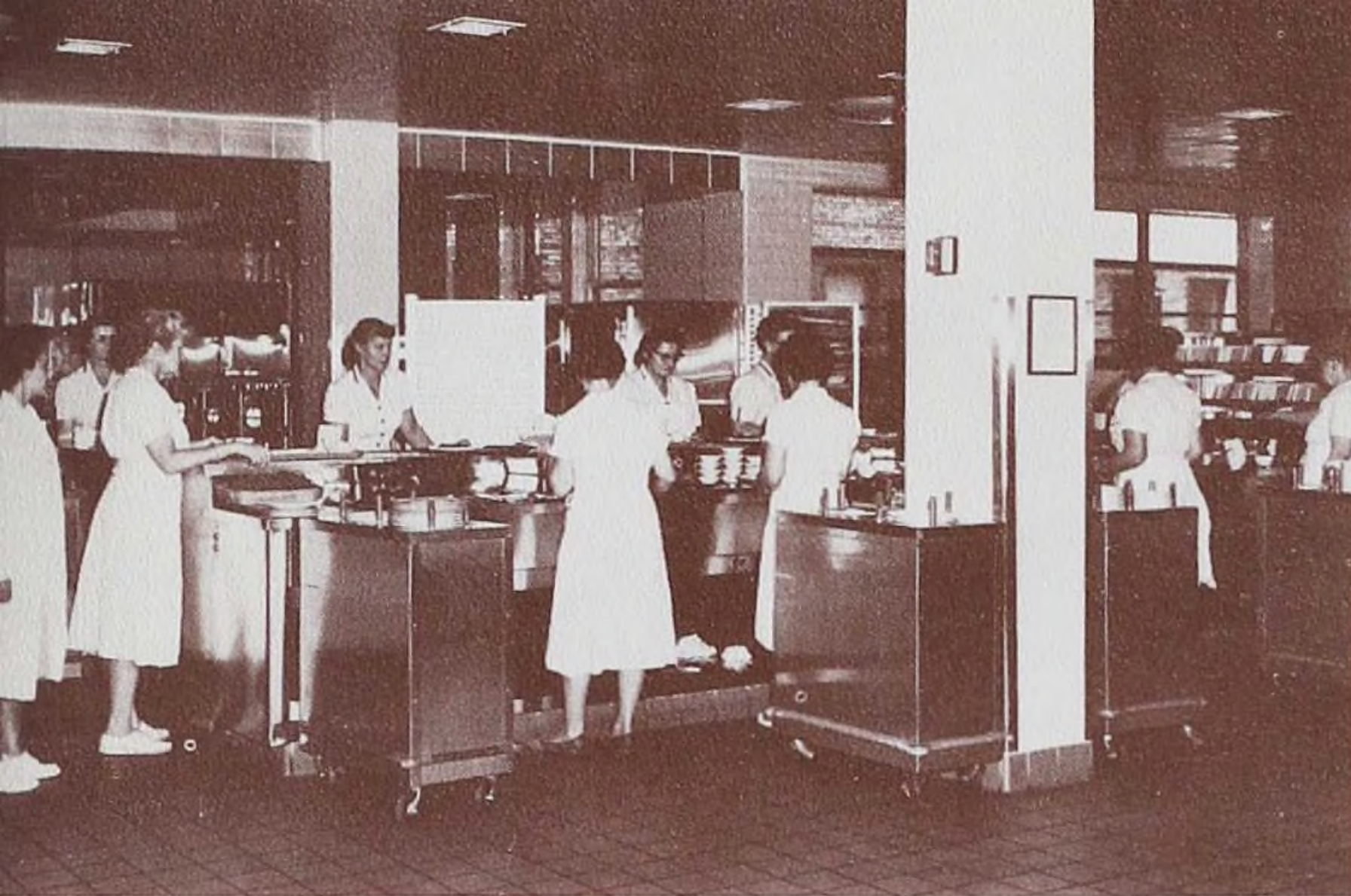
Mail distribution to patients and between the hospital's operating departments is also one of the business functions. This department is equipped to print a large portion of the forms used in the hospital. The final business function is cashiering which is concerned with collecting the hospital's accounts at the time of service in the outpatient department or at time of discharge for an inpatient.

DEPARTMENT OF MEDICAL RECORDS

Mrs. Margaret Binder, R.R.L., Director

The Medical Records Department must keep every individual patient's hospital record as well as total statistics by service and by time. Abstracts of medical records are needed by doctors, hospitals and medical centers; insurance claims are completed and forwarded for payment; records are essential to proof of injury sustained by the patient in legal suits; information contained therein is accepted by Government Agencies in aiding the patient's request for disability benefits and/or social security. Ultimately, the patient will reap the reward of research and study projects for which the medical record is again the source document.





DEPARTMENT OF FOOD SERVICES

Mrs. Margaret Klink, B.S., Manager

The Department of Food Services was one of the first projects to be completed in the past seven years building program. To insure the best quality and best service for all meals to patients and personnel, a completely new kitchen and cafeteria were put into service in 1957.

Purchasing, preparation, and serving of all food is performed by this department. About 1300 meals per day are prepared by fifty-four persons.



DEPARTMENT OF PURCHASING AND STORES

Mr. Martin Nevers, Director

The Purchasing Department and its storeroom with over 2,000 items, function as a service to every department in the hospital. Stock control is by IBM tabulation.

The department relies on over 375 vendors for its supplies and equipment and procures everything for the hospital except fresh foods and pharmaceuticals. Over 5500 purchase orders are issued each year.

Most of the equipment and supplies purchased are bought by quotations. All commodities are purchased with one thought in mind, to buy the specific item desired at the best possible price. In this way patients are best served, for supplies constitute one third of the costs in the hospital.





Mr. Earl A. Schiefelbein, Ph.B.,
Assistant Executive Director



DEPARTMENT OF ENGINEERING AND PLANT MAINTENANCE

Mr. John Miller, Jr., Chief Engineer

This department operates the power plant producing steam for heating, sterilizing, and cooling. It maintains the power plant equipment, the hospital grounds, and buildings which include plumbing equipment, electrical distribution system, air conditioning, heating, and ventilating systems, and nurse call and radio systems. Equipment in the laundry, dietary, surgery, central supply, radiology and laboratory departments and all other departments is serviced and maintained by personnel from Engineering, including the maintenance of the fire alarm and fire fighting equipment. In building and remodeling projects, engineering coordinates the service of architects and contractors.

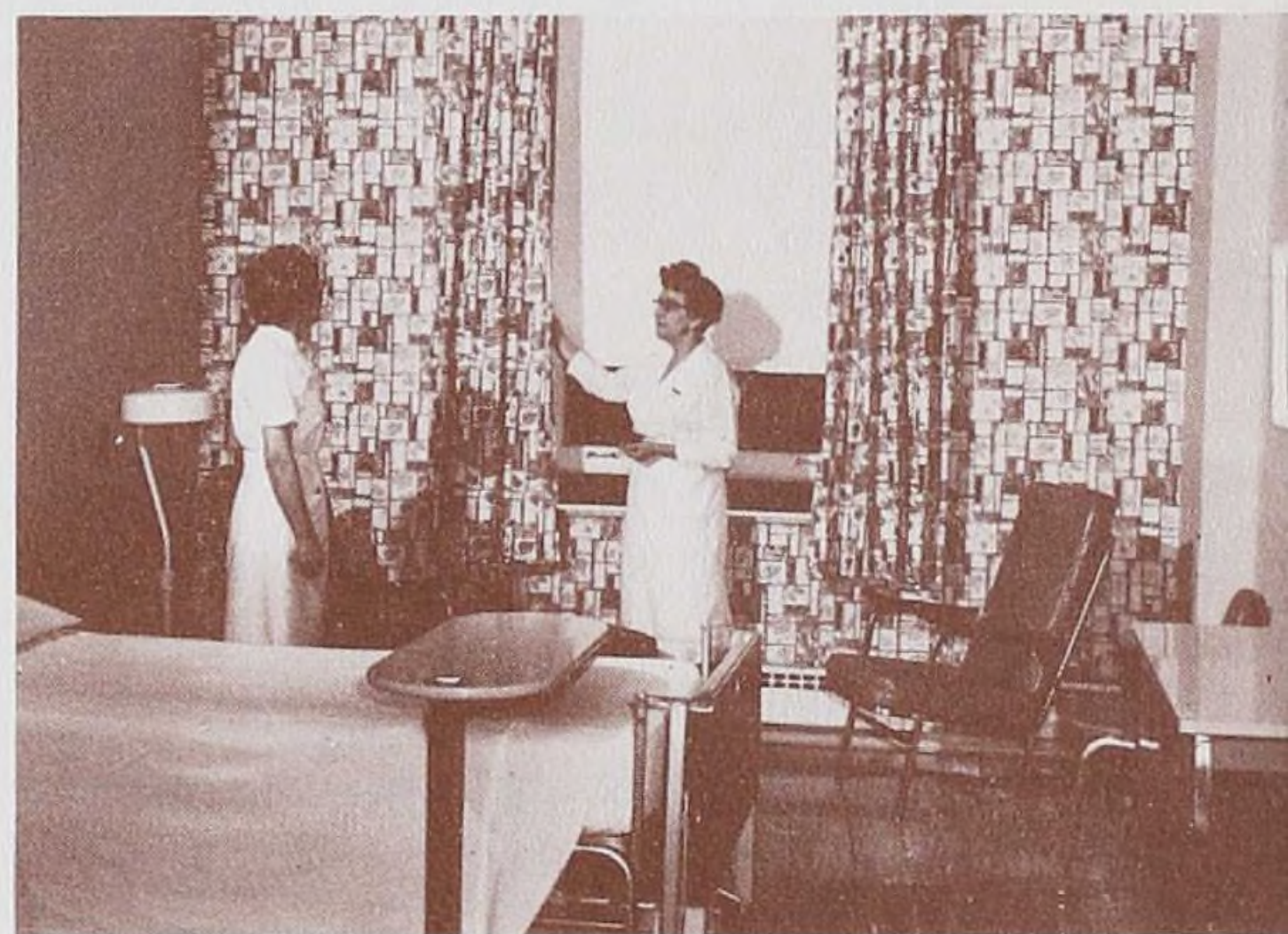
DEPARTMENT OF HOUSEKEEPING

Mrs. Clara Jungck, B.A., Executive Housekeeper

Each day seventy employees in the housekeeping department; aides, porters, painters and wall washers and a seamstress, perform numerous procedures in the cleaning of patient rooms and units, corridors, offices, etc., painting and wall washing and sewing drapes and slipcovers.

Almost every procedure performed is part of a daily, weekly, bi-monthly or monthly schedule.

This department also has the responsibility for the maintenance and replacement of all furnishings, as well as the "decor" of all the hospital's departments and divisions. In keeping with this policy, the housekeeping department helped to renovate almost the entire Main Building during 1961 and 1962.



DEPARTMENT OF LAUNDRY AND LINENS

Mr. Raymond Grable, Manager

Each day about 6,000 pounds of linen is washed, ironed and returned for use in the Main Hospital, Maternity Pavilion and Layton Home. Twenty-four full-time employees perform seventeen different laundry procedures every day.

In 1962 the laundry processed 1,500,000 pounds of linen. About 14½ pounds of linen is used per patient per day. Approximately 400,000 gallons of water a month is used in the washing processes. It takes about four gallons of water to wash one pound of linen.

Linen inventory reveals 63,000 stock items in circulation and approximately 3,500 non-stock items.

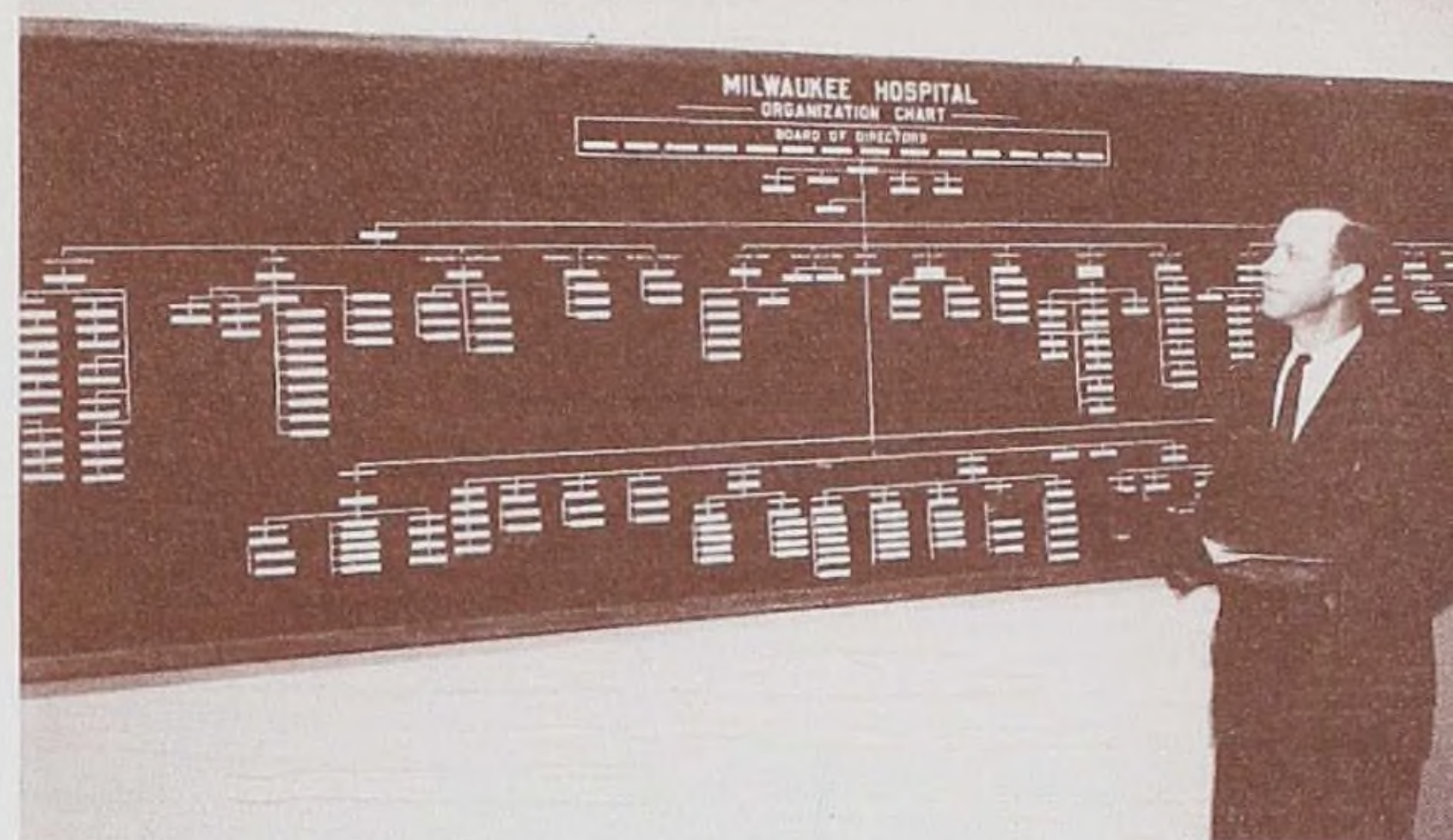
The Sewing Room also plays an important role in maintaining the required circulation of linen items. In 1962 this department manufactured 6,300 linen items. Approximately 8,075 items were patched and 15,134 items were mended.

The modern ironing and folding equipment greatly lightens the laundry task; however, much handling remains and experienced personnel, dedicated to better patient care through clean linen service, is the most important part of the laundering processes.



THE RECOGNITION OF TEN OR MORE YEARS OF SERVICE

	Years of Service	Department		Years of Service	Department
Miss Caroline Striegl	37	Nursing	Mrs. Helen Plinska	14	Nursing
Miss Theresa L. Gabel	36	Nursing	Mr. Edwin Steldt	14	Housekeeping
Mrs. Wealthy Lawton	30	Nursing	Miss Florence L. Weber	14	Laboratory
Miss Dorothy Braeger	29	Nursing	Mrs. Myrtle Beale	13	Nursing Education
Miss Florence Kahn	29	Nursing	Mrs. Lois A. Broetzmann	13	Nursing
Miss Ellen Gustafson	28	Motherhouse	Sr. Esther Deuble	13	Nursing Education
Miss Ruth Kleberg	28	Nursing	Mrs. Jane Hartman	13	Dietary
Sr. Emilie Mayer	26	Nursing	Mrs. Helen Havnen	13	Nursing
Miss Helen L. Bartelme	25	Nursing	Mrs. Mary Lowenthal	13	Nursing
Mrs. Edna Beckstein	23	Nursing	Miss Muriel H. Schmidt	13	Nursing
Mrs. Leona Butcher	23	Nursing	Miss Esther Schneider	13	Nursing Education
Sr. Lena Bosshard	23	Nursing	Miss Eleanor Schwartz	13	Nursing
Sr. Gladys Robinson	23	Pharmacy	Mrs. Lillian Harkins	12	Laundry
Sr. Dorothea Mayer	22	Layton Home	Mrs. Josephine Lingen	12	Housekeeping
Mr. Joseph Seilenbinder	22	Eng. & Maint.	Mr. Arthur Niebergall	12	Housekeeping
Mrs. Irene Duggan	21	Business Office	Miss Audrey Pellmann	12	Nursing
Mr. Raymond Grable	21	Laundry	Sr. Pauline Schmidt	12	Business Office
Mrs. Clara Jungck	21	Housekeeping	Mrs. Dorothy E. Schuepferling	12	Dietary
Mrs. Anna Lenz	21	Laundry	Mr. Karlis Amtmanis	11	Housekeeping
Mrs. Ann Poweleit	21	Housekeeping	Mr. Frank A. Butcher	11	Eng. & Maint.
Miss Esther Seybold	21	Nursing	Miss Dorlice Coleman	11	Nursing
Mrs. Emma Thoms	21	Nursing	Sr. Elinor E. Falk	11	Public Relations
Mrs. Frieda Timlin	21	Housekeeping	Mr. Robert E. Grable	11	Housekeeping
Mrs. Leona Volbrecht	20	Personnel & Payroll	Mrs. Wilma J. Homan	11	Business Office
Mr. Russell G. Weber	20	Anesthesiology	Mr. Lawrence Hood	11	Laundry
Mrs. Anna Volkovitch	19	Housekeeping	Mrs. Margaret Johnston	11	Housekeeping
Mr. Eldred Muldowney	18	Housekeeping	Mrs. Lina Krelis	11	Nursing
Miss Evelyn Fahl	17	Nursing	Mrs. Leona Ottowitz	11	Laundry
Miss Barbara L. Francis	17	Nursing	Mrs. Ella Pellmann	11	Nursing
Mr. William Gaherty	17	Eng. & Maint.	Mr. Charles J. Reamer	11	Housekeeping
Miss Helen Munceski	17	Nursing	Miss Ruth L. Schmidt	11	Nursing
Miss Doris M. Schmidt	17	Nursing	Mrs. Hilda E. Schweda	11	Dietary
Miss Adeline E. Vogt	17	Anesthesiology	Mrs. Irene Avens	10	Nursing
Mrs. Mary Vuglow	17	Dietary	Mr. Edward C. Beyersdorff	10	Eng. & Maint.
Miss Clara Wetzel	17	Nursing	Miss Angeline Brown	10	Housekeeping
Mr. Alex Buday	16	Eng. & Maint.	Miss Elsie Buboltz	10	Business Office
Mr. Byron Connerton	16	Eng. & Maint.	Mrs. Wenonah Cheeseman	10	Dietary
Miss Lotis M. Hebel	16	Nursing	Mrs. Bessie Cooper	10	Housekeeping
Sr. Cleone Knasel	16	Business Office	Mrs. Esther DeMartini	10	Radiology
Miss Matilda Kostreva	16	Housekeeping	Mrs. Ellen Kincaid	10	Laundry
Miss Shirley Mueller	16	Dietary	Mrs. Mary S. Krasinski	10	Dietary
Miss Joanne Radke	16	Laboratory	Mrs. Ruth Malone	10	Nursing
Miss Catherine Clark	15	Physical Therapy	Mr. Stanley W. Martin	10	Administration
Miss Arlene Tischer	15	Laundry	Mrs. Edna Rincker	10	Nursing Education
Mrs. Helen Tschida	15	Housekeeping	Mrs. Hilda Schiff	10	Nursing
Mrs. Ira Bivens	14	Motherhouse	Mrs. Elizabeth Tomsevic	10	Housekeeping
Mrs. Geneva Kreuscher	14	Nursing	Mrs. Helen West	10	Housekeeping



DEPARTMENT OF PERSONNEL AND PAYROLL

Mr. Dennis J. Frost, B.S., Director

The principles on which this department operates can be traced back to the very beginning of the hospital's existence. In 1963, as in 1863, good personnel management is the responsibility of all persons in executive and supervisory positions. Every individual who works in the hospital is a member of the patient-care team, either directly or indirectly. Employees put forth their best effort in their respective jobs when they know that they are treated fairly and uniformly by management in the application of policies and compensation for their services.

Milwaukee Hospital today needs the skills, dedication, and wholehearted effort of approximately 750 full and part-time employees in nineteen different departments to continue to render the type of care that thousands of patients have come to expect from this organization in the past century. The Personnel Department has been assigned the general responsibility for maintaining the machinery necessary to preserve the individuality of each employee. The administration of recruitment, selection and placement of employees, their orientation, health program, safety, life and health insurance programs, sick leave, wage adjustments, payroll, pension program and all other personnel policies is the responsibility of the Personnel and Payroll Department.

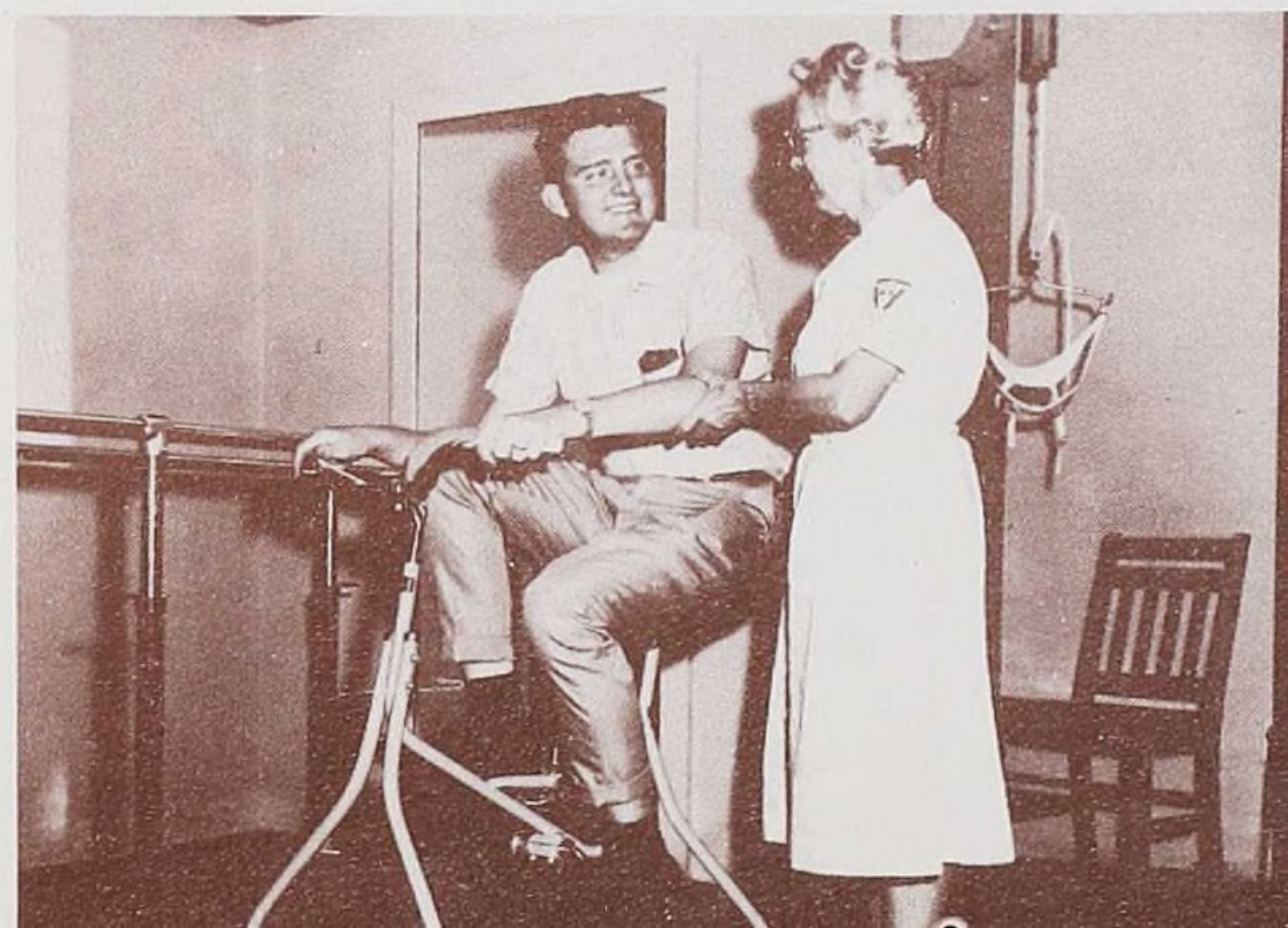
DEPARTMENT OF PHYSICAL THERAPY

Miss Catherine Clark, B.S., R.P.T., Chief Physical Therapist

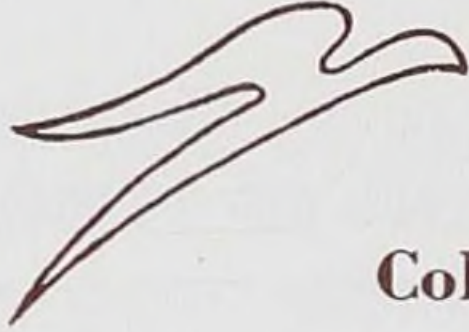
All physical therapy treatments for a patient are ordered by his physician and are in accord with the patient's need for muscular rehabilitation.

The physical therapists assist the physician in evaluating muscle tone as therapy progresses. They supervise and give both active and passive exercise to affected parts. They instruct patients in modes of therapy which can be followed at home. They assist patients undergoing treatment for back or neck injuries, who have had fractures or strokes, who must learn to walk with canes or crutches.

In 1962 physical therapy treatments totalled 18,364.



COLLECTS FOR MILWAUKEE HOSPITAL



Collect of Thanksgiving:

Our Heavenly Father, who art the Giver of every good and perfect gift, we thank Thee for the inspired men and women of faith whom Thou didst motivate to plan and establish Milwaukee Hospital in our community as a place where Thy love in Christ, our Lord, might be shared with the sick, the injured, and the suffering. We yield Thee our praise and gratitude also for the faithful people who, for the love of Christ, have served and continue to serve Thee in this place of mercy, and ask Thy benediction upon all their endeavors to alleviate the suffering of their fellowmen. Through the same, Jesus Christ, Thy Son, our Lord. Amen.

Collect of Intercession:

O God of mercy and compassion, who art loving in all Thy dealing with Thy children, look with mercy, we pray Thee, upon Milwaukee Hospital, and bless it in its centennial observance. Grant that the spirit of those who unselfishly gave of themselves and their substance so that our community might have this institution of mercy may continue to motivate those who serve therein. Accept our praise for all those who labor and serve to alleviate disease and sickness, and guide them to continued progress in research and treatment of human ills. Let the spirit of Thy Son permeate all that is undertaken in this place of mercy, so that it may continue to glorify Thy gracious name. We ask this in the name of our Great Physician, Jesus Christ, our Lord. Amen.



1963 CALENDAR OF EVENTS OBSERVING A CENTURY OF SERVICE

JANUARY 20, 1963

In Milwaukee Hospital Chapel, the 25th Anniversary of Consecration of Deaconesses Lena Bosshard, R.N., B.Sc., Elinor E. Falk, M.A.S.A., Lorene Kroner and Anna Pohlmann. A reception in the Lutheran Deaconess Home following the 2:30 p.m. service at which the Rev Professor August Baetke, head of the Sociology Dept., Wartburg College, Waverly, Iowa, and former Pastor and Director of the Lutheran Deaconess Motherhouse was guest speaker. The Motherhouse and the Lutheran Deaconess Congregation observe the 70th Anniversary of their formal organization.

MARCH 11, 1963

The opening night performance of the "Merry Widow" produced by the Florentine Opera Co. at the Pabst Theater sponsored by the Women's Auxiliary of Milwaukee Hospital. After theater party groups at the Pfister Hotel.

MARCH 24, 1963

Milwaukee Hospital Sunday at Lutheran churches in their morning worship services. At 3:00 p.m. in Milwaukee Hospital Chapel a worship service of praise and thanksgiving. Guest speaker, the Rev. George Schultz, LL.D., Executive Director of the Board of Trustees of The American Lutheran Church, Minneapolis, Minn.

MARCH 25 through APRIL 5, 1963

Designated as "Know Milwaukee Hospital Days." Groups to have opportunity to get better acquainted with the hospital and its services through pictures, speakers, and partial tours.

MAY 2, 1963

A Pastoral-Physician Seminar at Milwaukee Hospital. Guest speaker, the Rev. Wm. Hulme, Ph.D., Professor of Theology and Pastoral Counseling, Wartburg Theological Seminary, Dubuque, Iowa.

MAY 10 and 11, 1963

The Medical Staff's Centennial Reunion and medical meeting with historical medical exhibits. Dinner-dance at the Wisconsin Club for the evening of May 10. Guest speaker, Edward R. Annis, M.D., President-Elect of the American Medical Association.

MAY 11, 1963

Milwaukee Hospital Service dinner for 94 persons working at the hospital ten or more years.

MAY 12-18, 1963

National Hospital Week.

JUNE 23-25, 1963

The Thirty-Sixth Biennial Lutheran Deaconess Conference in America meeting at the Lutheran Deaconess Home and Milwaukee Hospital Chapel.

AUGUST 3, 1963

The official birthday of Milwaukee Hospital observed in the hospital for patients and personnel.

OCTOBER 2, 1963

Milwaukee Hospital Centennial and Recognition Banquet at the Elks Club. Guest speaker, Karl S. Klicka, M.D., Executive Director, Hospital Planning Council for Metropolitan Chicago, formerly Administrator of St. Lukes-Presbyterian Hospital, Chicago.

OCTOBER 18, 1963

Annual Homecoming of the Milwaukee Hospital School of Nursing. The School of Nursing observes its 60th Anniversary in 1963.

MILWAUKEE HOSPITAL

Accredited by:

The Joint Commission on Accreditation of Hospitals

Approvals from:

American Medical Association, Council on Medical Education and Hospitals, for:

- X-Ray Students
- Laboratory Students
- Interns

Residents in:

- Internal Medicine
- Pathology
- General Surgery
- Radiology
- Obstetrics and Gynecology

Wisconsin State Board of Pharmacy for:

- Pharmacy Interns

Registered with the:

- American Medical Association

Member of:

- American Hospital Association
- Milwaukee Hospital Council
- Protestant Hospital Association
- Wisconsin Hospital Association
- Associated Hospital Service, Inc.
- Lutheran Hospital Association

MILWAUKEE HOSPITAL SCHOOL OF NURSING

Accredited by:

Wisconsin State Board of Nursing
National League for Nursing

