

HISTORY  
COLLEGE OF MEDICINE  
1959 - 1968  
CHAPTER - 25  
UNIVERSITY HOSPITALS

by

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## HISTORICAL EVENTS

The following comments may perhaps help to fill out the history of University Hospitals as it is written in the previous volumes of the College of Medicine History. In 1914 the first hospital was located in what was known as the "Little Dorm" at the corner of Tenth and Neil Avenues. To make this building more usable for patient treatment, steam heat was installed from the central heating plant of the University, a ventilating system was installed, and the inside of the building was thoroughly painted; 21 beds were opened the first year. During the first year 1,168 patients were seen, of which 886 were inpatients. The hospital proudly noted that in the first year the death rate was less than 2%. Before the end of the first year demand was so great that x-ray equipment was installed.

The summer of 1915 saw the first expansion, with a large two story porch being added, which increased the bed space to 35 beds. In addition a house across Neil Avenue was rented to house 14 graduate and student nurses.

By the fiscal year 1916-17 business had grown to the extent that cash receipts exceeded \$10,000 for the first time reaching the grand sum of \$10,484.26.

January 1918 saw the first unit of the new "University Homeopathic Hospital" being occupied. This first unit is the northern two thirds and the first three floors of what is today the A-Wing of Starling Loving Hall. The number of student and graduate nurses had increased to 30, requiring the University to obtain a second nursing home.

In 1920 the Pediatric and the Obstetrical Departments required additional space. The original old hospital building was turned over for the care of children. A Maternity Hospital was established about a half mile from the Hospital in the old Barracks Hospital. The Barracks had originally been set up as a hospital for the Aviation School during World War I. This addition increased the capacity to 110 beds. Later the Barracks Hospital became the isolation hospital until the south addition of Starling Loving A-Wing was added.

Medical practice during these early days would be considered primitive by today standards. One such practice was related by Dr. Charles W. Pavey. Horse hair sutures were used in the operating rooms on the forth floor of Starling Loving. For many years

they were made by Miss Reba Gardner, a nurse in the operating room. Each morning she would pull a handful of horse hairs from the tail of the horse pulling the milk wagon in the area. She would then bring this handful of hairs to the hospital, wash and autoclave them, and prepare them for use as sutures. Despite the rather precarious problems involving the sterilization of horse hair, it is not known that any ill affects ever resulted.

Much of the work done in the Hospital during this time up until 1943 was provided by students who worked for their board. They worked 2 1/2 hours daily for their meals.

Salaries for other employees were low. As late as 1939 workers were paid \$45 per month and meals. There were only two shifts, a day and a night shift, and most employees worked 6 days a week. In 1943 a forty-four hour week was finally adopted. It is no wonder that charges for a ward accommodation for many years was only \$3 per day. Cost of delivering a baby was a flat rate of \$55 which covered a ten day stay and all delivery and nursery charges.

Nurses performed almost all the tasks done in the hospital. It was not until World War II that aids, orderlies, and other ancillary personnel made their appearance as a result of the shortage of nurses.

The range of duties performed by nurses, particularly at night, was amazing. Miss Blanche Skinner, who has been the night supervisor for many years has seen many changes. The night supervisor used to staff the Emergency Room. When a patient would come they would ring a door bell which would summon the supervisor from her duties up on the wards. If the patient needed to be admitted, the supervisor would complete the necessary work. Until recently, she would obtain drugs from the "Drug Room" if any were needed.

The people such as Blanche Skinner are the ones to whom the history of the hospitals really belongs. To name some is to surely miss many who would be equally important to the course of events. Miss Lelia Evans, business office; Miss Faye Irvin, Radiology, Mrs. Vern Boyer, Miss Marie Connel, and Miss Louise Kagay, all in nursing are a few names, but there are many more.

The following people in addition to those previously mentioned were particularly helpful in developing this section: Miss Ruby Martin, Mrs. Agnes Defenbaugh, Mr. Charles Harris, Dr. Campbell Haynie, Mrs. Martha Lewis, and Dr. Russell Means.

## II

### GENERAL INTRODUCTION

The period since the one hundred twenty-fifth anniversary of the founding of the Willoughby Medical College has been a significant one for the University Hospital. The Medical Center, as it was called in 1958, was still a loose conglomeration of Hospitals operated by various departments of the State of Ohio. University Hospital was part of the College of Medicine. The Columbus Psychiatric Institute and Hospital was operated by the Ohio Department of Public Welfare. The Ohio Tuberculosis Hospital was administratively operated by the State Department of Health. Ten years later there existed a strong, unified, and innovative organization.

The history of University Hospitals over the past ten years contains three main components. First an adjustment to a newly gained size and complexity. Secondly amalgamation of the Columbus Psychiatric Institute and Hospital, the Rehabilitation Center, and The Ohio Tuberculosis Hospital with University Hospital to create the University Hospitals as we know it today. Thirdly has been the maturation into one of the leading teaching hospitals, doing significant

work in developing new fiscal methods, innovative management techniques and organizations, creative patient care programs, and significant advances in systems research and development.

The University Hospitals developed during this time against the nationwide backdrop of rapidly escalating health costs, tremendous technological and scientific advances, and a constantly developing shortage of trained and qualified personnel. The University Hospitals faced these national problems, and has provided leadership in developing solutions.

Highlights of the period include a growing awareness of the need to organize the Hospital centered on the patient, vast improvements in the fiscal programs of the institution, and numerous construction, renovation, and remodeling projects which greatly enhanced the physical resources of the Hospitals.

Under the leadership of Bernard J. Lachner, a Patient Centered concept of organization was developed between 1965 and the present. The administration assumed direct responsibility for the quality and efficiency of patient care with trained Hospital Administrators given the responsibility for specific patient care areas. This type of decentralized administration was a radical break from traditional patterns of organization and could become a trend setter if its promise is fulfilled.



The fiscal areas of the Hospitals have changed rapidly during the past ten years. Sources of payment have changed greatly. The introduction of Medicare for those over 65 and of Medicaid for a large portion of the people on public assistance provided financial support for a portion of the public that previously contained many bad debts.

One of the significant fiscal highlights was the creation of a program of relating all charges to the cost of providing the particular service. Considerable cost accounting was performed to isolate the teaching and research cost from patient care costs. With the use of such accounting tools, the "Hospitals" was in a rational position for developing charges to meet the rapidly rising costs of the period.

Many physical changes have occurred during the past ten years. Most significant additions include the completion of the North Wing of University Hospital, the Radiation Therapy addition, a North Wing addition to Upham Hall, construction of Dodd Hall, and construction of Wiseman Hall (Health Center Research Laboratory). Significant remodeling projects include the addition of several elevators in University Hospitals, remodeling of the Emergency Rooms and the operating rooms, airconditioning of large segments of the Hospitals, and renovation of patient rooms.

Several significant events have occurred in the personnel area. Shortage of personnel, particularly nursing personnel, has been a continuous problem since 1958. Perhaps the most difficult year was 1960 when 120 beds were closed during the summer. Extensive recruitment, supervisory development courses, and the development of the College of Medicine Personnel Office have helped reduce the problem. The most significant action occurred however on December 1, 1962 when all nurses, dietitians, and other professional employees were reclassified from Civil Service to an Unclassified status. This move allowed for periodic review of educational requirements, job description, salary ranges, and recruitment by the University to assure the maintenance of a competitive set of employee benefits. Major readjustments of wage scales have occurred in 1965, twice in 1966, and again in 1967. These salary and wage increases have been a major portion of the rapid rise in hospital costs.

The Pharmacy area has been a leader in developing many new concepts. Most notable have been expanding to a 24 hour, seven day a week operation; establishing a formulary system; creation of a revolutionary Narcotic Control System; development of an I. V. additive program; work with self-medication programs, as Physical Medicine, Rehabilitation, and Maternity Service; and the initiation of a drug administration program by pharmacy personnel. Recognition of the

many accomplishments in this area was evidenced in 1967 when Mr. Clifton J. Latiolais, Director of Pharmacy Service, received the Harvey A.K. Whitney Award from the American Society of Hospital Pharmacists for outstanding contributions to the field of hospital pharmacy.

The nursing care programs have changed during the past few years with the addition of several specialized nursing areas; a Medical Intensive Care Unit, a Surgical Intensive Care Unit, and a Coronary Intensive Care Unit. These specialized areas reflected the increasing complexity of medical science today, and the increasing demand being placed on all areas.

The history of University Hospitals is a proud one with a long list of accomplishments; the future is a bright one. The future promise can be met if the hospitals can continue to respond to the problems of the future as it has to those of the past.

The College of Medicine, it should be noted, maintains educational affiliations with the following hospitals to supplement the experience available at University Hospitals: Children's Hospital, Columbus Childrens Psychiatric Hospital, Grant Hospital, Harding Hospital, Mt. Carmel Hospital, Riverside Methodist Hospital, St. Ann's Hospital for Women, St. Anthony Hospital, Dayton Veterans Administration Hospital.

### III

#### ORGANIZATIONAL CHANGES

Dr. Richard L. Meiling was appointed Dean of the College of Medicine and Director of University Hospital and its ancillary facilities, effective January 1, 1961. Dr. Meiling succeeded Dr. Charles A. Doan.

Approval by the President of the University in 1962 of a new organizational plan for the College of Medicine was of major importance. University Hospital was clearly identified as an essential element of the complex, and many areas of the Hospital's operating structures were revised.

Bernard J. Lachner was appointed Administrator of the University Hospital, retaining his appointment as Assistant Dean of the College of Medicine in the area of Business Affairs, succeeding Peter A. Volpe, M.D., who resigned to take a position with the Columbus Hospital Federation. Mr. Lachner, who had been Associate Administrator since 1958 was replaced by Harold L. Autrey.

Four new positions were created at the College level. Hatcil Conner became Director of Personnel, Clifton Latiolais became Director of Pharmacy and Supply, Adrian Kisling became Director of Fiscal Services, and Joseph L. R. Mazur became Director of New Construction Planning, Space Assignment, and Classroom Scheduling, in addition to Assistant Administrator for University Hospital.

The Nursing Service, Dietary, and Building Service Departments were expanded in 1962 to include all related activities in University Hospital, the Psychiatric Institute and Hospital, and the Rehabilitation Center. Mr. Fred Butts was appointed Assistant Administrator with administrative responsibility to coordinate the activities of the Psychiatric and Rehabilitation programs with those of University Hospital. Mr. John Bergman replaced Mr. Jack Robinette as Assistant Administrator in charge of business activities for all three hospitals.

Dr. John Prior was named Associate Dean of the College of Medicine and Associate Director of the University Hospitals in 1963. Mr. R. Vitello was appointed Assistant Administrator with responsibilities for the Out-Patient Clinics and Professional Services. Mr. Leon Dietschweiler, Administrative Assistant, and Mr. G. E. Howe, Administrative Resident also joined the Administrative Staff in 1963.

Mr. Joseph L. R. Mazur resigned to accept a position at the Loveless Clinic and Hospital in Albuquerque, New Mexico.

Dr. Torrence Makley was named Chairman of the Clinical Division of Ophthalmology and Dr. William Saunders was named Chairman of the Clinical Division of Otolaryngology in 1963. Both had been Acting Chairmen of their Clinical Divisions during the previous year.

A significant change occurred in the house staff with the institution of the straight internship program in 1963. In the first year of this program, Medicine filled 18 of 18 internships; Surgery filled 6 of 6 internships; Pediatrics filled 3 of 6 internships; and Pathology filled 2 of 4 internships.

Mr. T. Abner Huff joined the Administrative staff during 1964 as an Administrative Resident. Dr. Bruce D Graham became Chairman of the Clinical Division of Pediatrics. The year 1964 was celebrated as the 50th anniversary for the College of Medicine on the Ohio State University Campus.

1965 saw a reshuffling of the organizational structure and the first beginnings of the decentralized patient care program.

Mr. John Bergman assumed responsibility for Fiscal Services; Mr. Fred Butts, the Personnel and Payroll Departments; Mr. Robert Vitello,

the Dietary Department; and Mr. Leon Dietschweiler, the Outpatient Clinics and Emergency Room. Mr. T. Abner Huff, Administrative Assistant, became responsible for Purchasing and also for administrative coordinating of the patient care program on the 10th floor.

Mr. Joseph P. DiRuscio joined the staff as Administrative Resident in 1965. Dr. Ian Gregory was named Chairman of the Clinical Division of Psychiatry; Dr. Ronald B. Berggren became Director of the Plastic Surgery Service; Dr. James N. Allen became Director of the Neurology Service; and Dr. Charles E. Mengel became Director of the Hematology Service.

The decentralized patient care program continued to develop in 1966 with Mr. Harold Autry and then Mr. Joseph P. DiRuscio assuming responsibility for the activities on the 9th, 10th, and 11th floors in a effort to cut through the many levels of organization to provide prompt and effective coordination. Mr. G. Edwin Howe was made administratively responsible for Dodd Hall, the Outpatient Department and Emergency Room.

Mr. Robert Bowman was appointed Director of the newly created Department of Systems Research. The beginning objective of the Department included research in systems relating to the teaching programs of the Hospitals. The implementation of a Computer Based Real Time Hospital Information System was the largest single project undertaken.

Late in 1966 the Ohio Tuberculosis Hospital experienced severe personnel problems. As a result, the Ohio Department of Health requested The Ohio State University to staff and operate the T.B. Hospital. As the year came to an end, University Hospitals assumed this responsibility.

Dr. Harold V. Ellingson was appointed Professor and Chairman of the Clinical Division of Preventive Medicine during 1966.

A major organizational change occurred in the Nursing Service Department which further developed the decentralized patient care program. Eight areas were identified with a Director of Nursing Service being appointed for each area. The area directors were: Miss Lucy Schneiter, Medical Nursing; Mr. Robert L. Godwin, Surgical Nursing; Miss M. Jean Reed, Operating Room; Miss Blanche Skinner, Night Nursing; Mrs. Frances Lollar, Ambulatory Nursing; Miss Maxine Cramton, Physical Medicine and Rehabilitation Nursing; Mrs. Elsie B. Hayes (acting Director), Means Hall Nursing.

Miss Ruby M. Martin continued as the Director of Nursing Service for the University Hospitals with responsibility for Nursing Policy in all the hospitals, as well as nurse recruitment, nursing inservice education and training, and research in nursing service systems.



In 1967 she served as Chairman of the Organizational Meeting of the New Society for Hospital Nursing Service Administrators of the American Hospital Association and subsequently served on the Society's Board of Directors.

The organization of administrative responsibility for patient care activities was realized to assure active involvement of a hospital administrator in each of the patient care programs.

Mr. Robert A. Boissoneau was appointed Assistant Administrator with responsibility for Means Hall. Mr. David L. Kohr was appointed Assistant Administrator for the Patient Care Program in University Hospital. Mr. Frederick Butts retained the responsibility for Upham Hall, and Mr. G. Edwin Howe retained the responsibility for Dodd Hall and the Ambulatory Patient Care Program.

The Dietary Department was separated into two main functional divisions, with Miss Annabell Marteney being appointed Director of Food Service, and Miss Joan Sharp being appointed Director of Nutritional Service.

Several other organizational changes occurred in 1967 with the following appointments; Mr. Ronald G. Spaeth, Administrative Assistant; Mr. Stephen H. Lipson, Administrative Resident; Mr. John P. Howell, Director of Systems Research; Mr. William Byers, Director of Personnel; Mrs. Catherine M. Hawkins, Director of Housekeeping.

Dr. Walter N. Jensen was named Director of the General Medicine Service. Dr. Jack C. Geer was named Director of the Clinical Division of Pathology, and Dr. Frank Batley was named Director of the newly created Clinical Division of Therapeutic Radiology. Dr. Thomas G. Skillman was named Director of the Endocrinology Service replacing Dr. George J. Hamwi who passed away in February 1967. The Anesthesiology Service gained the status of a Clinical Division during 1967 with Dr. William Hamelberg as Director.

The decentralized patient care program took another major step forward during 1968 with Housekeeping and Nutrition Departments being decentralized as was the Nursing Service Department the previous year. This organizational change directly brings together with an Administrator the three departments which have the most patient contact. Along with the relineament of the various patient care departments the responsibility for several of the service departments was changed.

During 1968 Dr. Thomas F. Ferris was appointed Director of the Renal Disease Service Dr. Philip Bronberg was appointed Director of Pulmonary Disease Service, Dr. Stanley Balcerzak was appointed Director of the Hematology Service.

IV

CLINICAL DIVISIONS AND CHIEFS

The Ohio State University Hospitals 1968-1969

Division	Service	Chief
Anesthesia		William E. Hamelberg, M. D.
Medicine	General Medicine Allergy Arthritis Cardiovascular Diseases Communicable Diseases Dermatology Endocrinology & Metabolism Gastroenterology Hematology Neurology Pulmonary Diseases Renal Diseases	James V. Warren, M. D. Wallace N. Jensen, M. D. William F. Mitchell, M. D. Francis W. McCoy, M. D. Arnold M. Weissler, M. D. Samuel Saslaw, M. D. Richard D. Carr, M. D. Thomas G. Skillman, M. D. Norton J. Greenberger, M. D. Stanley P. Balcerzak, M. D. J. Norman Allen, M. D. Philip A. Bromberg, M. D. Thomas F. Ferris, M. D.
Obstetrics & Gynecology		John C. Ullery, M. D.
Ophthalmology		Torrence A. Makley, M. D.
Otolaryngology		William H. Saunders, M. D.
Pathology		Jack Geer, M. D.
Pediatrics	Pediatric Medicine Pediatric Allergy	Bruce Graham, M. D. Bruce Graham, M. D. Charles E. Miller, M. D.
Physical Medicine & Rehabilitation		Ernest W. Johnson, M. D.
Preventive Medicine		Harold V. Ellingson, M. D.

Psychiatry

Ian Gregory, M.D.

Radiology

Diagnostic Radiology  
Therapeutic Radiology

Sidney W. Nelson, M.D.  
Frank Batley, M.D.

Surgery

General Surgery  
Neurosurgery  
Orthopedic Surgery  
Plastic Surgery  
Thoracic Surgery  
Urology

Robert M. Zollinger, M.D.  
Robert M. Zollinger, M.D.  
William E. Hunt, M.D.  
Paul H. Curtiss, Jr., M.D.  
Ronald Berggren, M.D.  
Karl P. Klassen, M.D.  
Chester C. Winter, M.D.

Dentistry

General Dentistry  
Oral Surgery

John R. Wilson, D.D.S.  
John R. Wilson, D.D.S.  
Morgan L. Allison, D.D.S.