



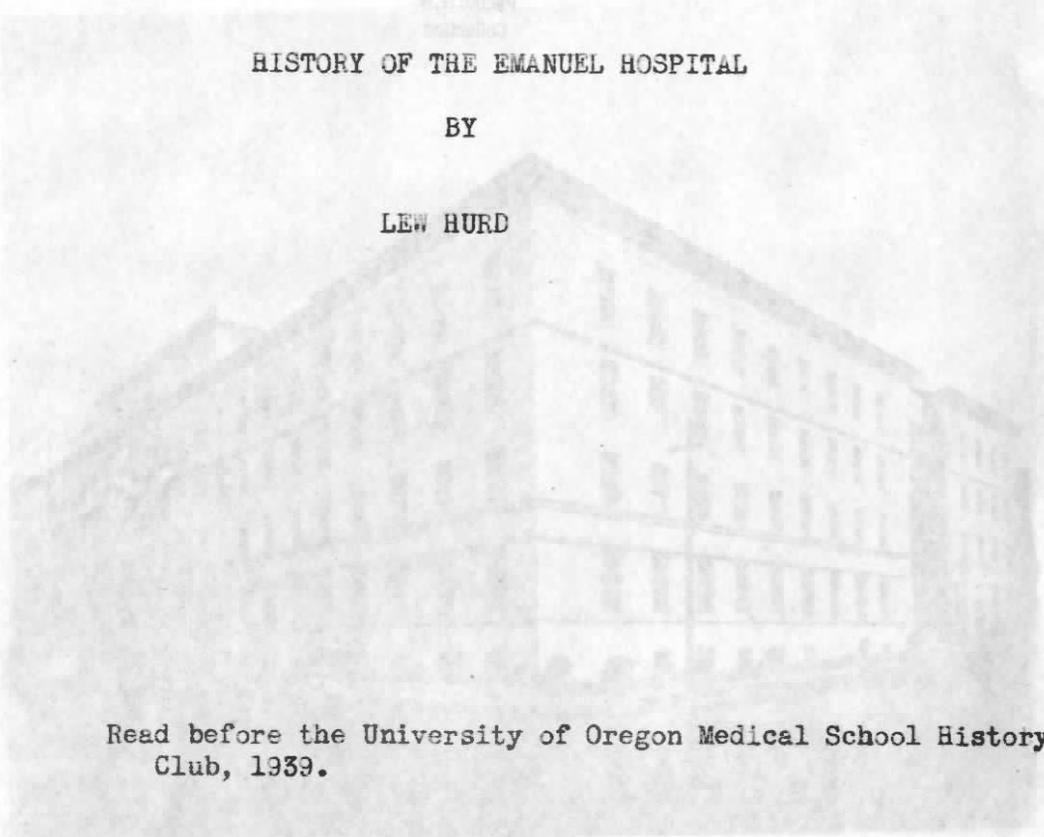
81517

JPH
PER

HISTORY OF THE EMANUEL HOSPITAL

BY

LEW HURD



Read before the University of Oregon Medical School History Club, 1939.

The Present Hospital - 1939

HISTORY OF THE BRIDGE HOSPITAL

There is in Portland in this year of 1939 a great hospital, and claiming its twenty-seventh year of life, it stands as a monument to the progress of medicine. Conceived at a time when Portland was already a city of some size, it grew to its status of a general hospital, and has continued its former surge in all lines: patient care, buildings, equipment, laboratory, nurses' training, staff, and standards of care.



The Present Hospital - 1939

and any speak of light. The Present Hospital - 1939. necessary furnishings to prevent it from slipping rapidly from polished surface to earth. It is stronger with each passage and so it might be the light and country of Jordan where originated the tale. developed, universal and whose character is not reflected in our life.

Our hopes are glad for the stream of the shore, good and bad, mostly associated with hospitals, and we begin a rapid tour under the guidance of Dr. A. L. Burdick, the superintendent, not forgetting to get some few figures

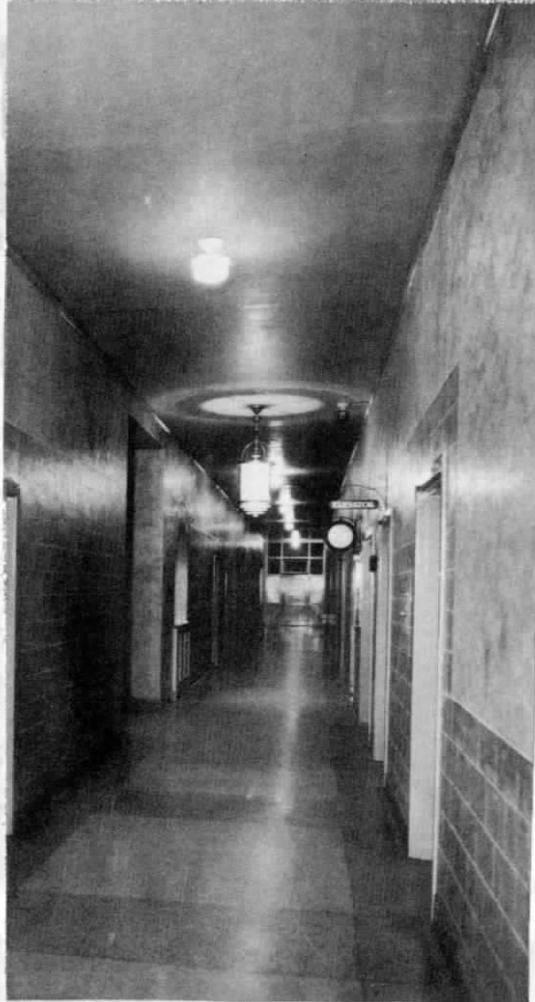
HISTORY OF THE EMANUEL HOSPITAL

There is in Portland in this year of 1939 a great hospital just finishing its twenty-seventh year of steady, efficient care in the sheltering of the sick. Conceived at a time when Portland was already a metropolis, it soon grew to the stature of a modern city hospital, and has continued its forward surge in all lines, that is, buildings, equipment, laboratory, nurses' training, staff members, and standards of care.

Before retracing the interesting development in detail, let us visit the hospital as it is today in an effort to catch the spirit of those early Swedish Lutherans who first felt the need of it, and whose labor, sacrifices, and sane, conservative judgment have kept the doors swinging with satisfied patients and competent doctors. On the exterior we see a plain, neat, gray-brick, five-story building of modern design rising from the sidewalk the length of Graham and Commercial Streets. We pass through the main entrance from the latter, up a few steps, and through a rounded Roman archway, to face the business office and information desk beneath a similar arch. Close on the right is the illuminated register with the names of the one hundred forty local physicians who serve the hospital. Just beyond is the serene reception room. Our first glances are not for these, but are drawn to the right and left where the apparently endless, wide, main corridor shines its clean, cool way. Only light colors are used, and any speck of light that finds its way in has no unnecessary furnishings to prevent it from skipping happily from ^{one} polished surface to another, growing stronger with each passage much as it might in the bright snow country of Sweden where originated the calm, clear-eyed, unhurried race whose character we see reflected around us.

Our noses are glad for the absence of the odors, good and bad, usually associated with hospitals, and we begin a rapid tour under the guidance of Mr. A. L. Morland, the superintendent, not forgetting to jot down a few figures

Medical Staff Quarters



Main Corridor - Ground Floor

for the benefit of the statistically minded. Each new floor bears out our first impression that clean, practical, efficient, service is the routine order of the day, unhampered by idealistic extravagances, religious trappings, or outworn traditions. We count eight fully equipped major surgeries, necessary for the five thousand annual operations; and three delivery rooms in the new maternity wing where twenty-five percent, or fifteen hundred per year, of Portland's future leading citizens are first viewed complacently by mamma and unbelievably by papa. Plaster encased extremities held at perilous angles by complicated ropes and pulleys remind us that this is the headquarters of the city's leading orthopods, and that under Dr. Dillehunt the Emanuel interne enjoys six weeks' added orthopedic service at the Shrine Hospital for crippled children. Starched white uniforms worn by comely samples of the two hundred nurses that service the hospital pass about us in business-like patterns. On the first floor is found Dr. H. H. Foskett's spacious laboratory, where six technicians and two students perform all modern tests amid chromium-plated surroundings that would seem more human if we could find one spot of dirt, or one specimen bottle out of its mathematical alignment.

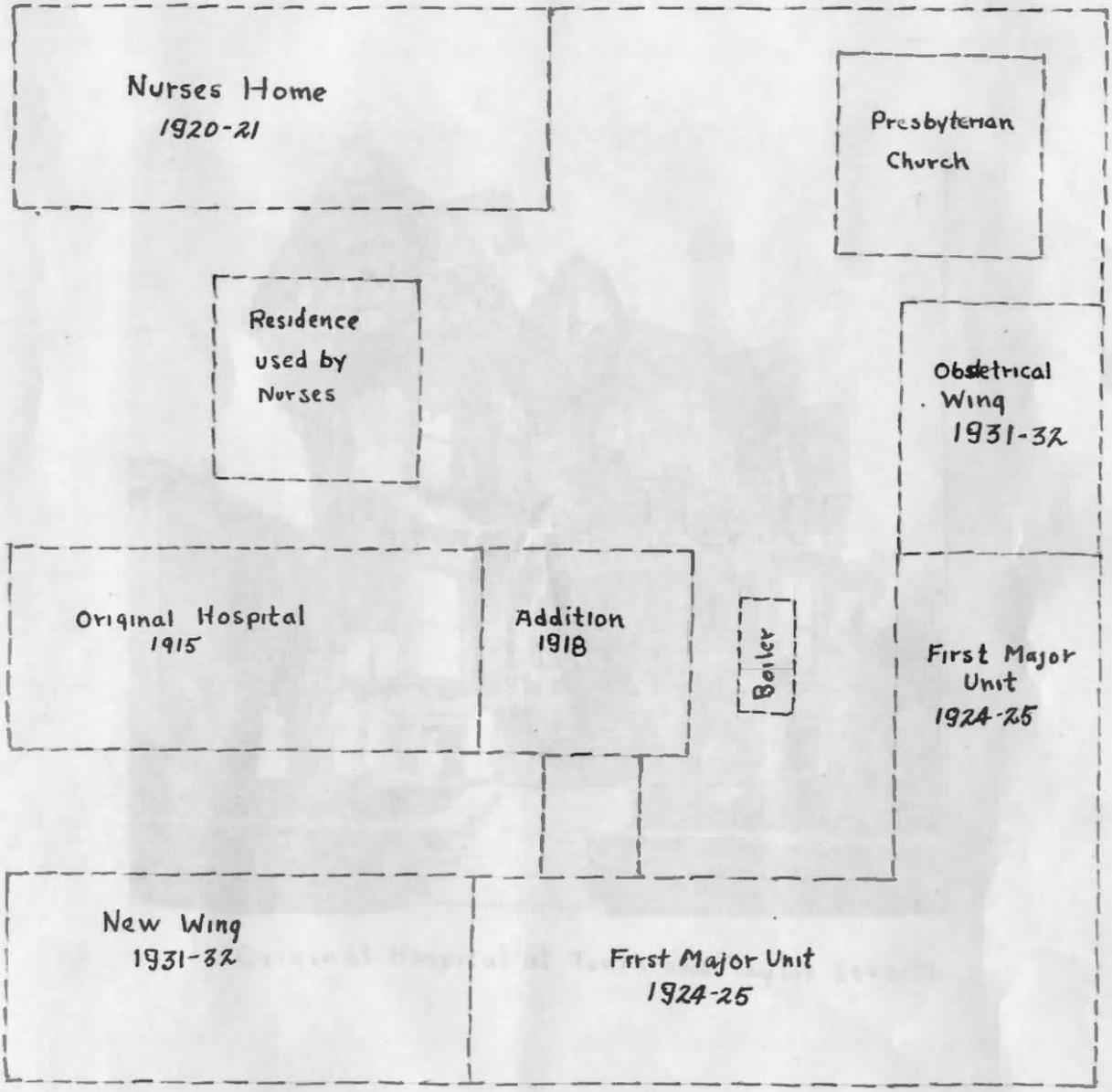
Now that we have surveyed briefly the physical structure of this fine hospital, let us replace the torn calendar leaves to 1909 when all these things were only afferent impulses in the cerebral hemispheres of the congregation of the Lutheran Immanuel Church at Nineteenth and Irving Streets. The care of the sick has always been a tradition with the Lutherans who had already at that time many good hospitals in the East, and whose devout North-West disciples having felt the need of another hospital in Portland had often discussed the possibility of founding one here.

The first definite action was taken by the farsighted, Reverend

Mr. C. J. Renhard, who now resides in Colton, Oregon. On September 14, 1909, as revealed by the carefully penned, Swedish minutes of the meeting, he called

GROWTH OF EMANUEL HOSPITAL

GANTENBEIN ST.



COMMERCIAL

STATION

GRAHAM

together eight likely members of his flock, including J. E. Nordling, Anton Hendrickson, Swen Peterson, A. J. Staffanson, J. W. Hawkins, A. L. Morland, Frank O. Carlson, and Sam Holm (not a member of the church). A tempting offer of three lots at Stanton and Commercial Streets had been made the church as a potential hospital site, and it was decided to close the option; they also formed themselves into a temporary hospital committee with the Reverend Mr. Renhard, and J. E. Nordling as chairman and secretary.

But money was scarce and during the next three years the embryo hospital suffered from malnutrition. No one thought of turning to Uncle Sam for help because in those days he was not so benevolent as now, and it took more than a numbered red, white, and blue sign in front of a project to coax a million or so from him.

In 1912, lacking money to build, the committee incorporated into the permanent Emanuel Charity Board, and scraped together money sufficient to purchase the most primitive equipment. They rented an ornate, frame building at Tenth and Taylor Streets where the Medical Arts Garage now stands; originally a residence, it had already served as the Pacific Hospital, and it was here on January 23, 1912 that actual operation of the Emanuel Hospital was begun.

From the first, the new hospital's twenty-five beds were filled with paying patients, and the business-minded trustees began to dream of expansion. They reasoned that the two hundred and fifty dollar monthly rent would cover the interest on the thirty thousand dollars needed to erect a new and adequate building on the dormant lots at Commercial. Their personal notes were good for the thirty thousand, and accordingly, in 1914 a sixty-bed, three-story, concrete structure began to rise on the East side despite protests that it was too far out in the country. It was formally occupied in December 1915.

Thus the lusty, young hospital was transplanted to new and healthier surroundings where its rate of growth was so rapid that its founders were forever



Entrance of First East-Side Building
Erected in 1915.

pressed to provide larger quarters. From the first the hospital has been self-sustaining (donations counting for only fifty thousand in thirty years), and by careful management a little has been left over each year for a building fund. Approximately every three years this surplus has been sufficient to provide for an addition; so that in 1918 there was an enlargement to one hundred beds; and in 1921 the Nurses' Home was added. The latter is a four-story, gray-brick structure at Gantenbein and Stanton Streets, within the same block, and in the style characteristic of all later developments. In 1924-25 came the first major unit, L shaped with the angle at the corner of Graham and Commercial Streets, flanked later by new wings in 1931-32, bringing the capacity to 325 beds.

This was a difficult task for the hospital, and it was not until the late 1920s that a full understanding of medical affairs had inevitably led to the formation of a board of trustees, who strove to maintain the standards of care. Finally, in 1928, in order to insure that all the profits should go back into the hospital, the board withdrew the Society's Conference's privilege of managing the hospital, and organized the seven Swedish Lutheran Churches (two in Portland, and one in Astoria, Warrenton, Colton and St. Helens, of Oregon, and one in Grand Rapids, Michigan) all within fifty miles of Portland to manage the hospital. In 1936 the Columbia Conference was allowed to share four trustees, but in 1939 all the administrative power was returned to the seven churches.

The hospital has always been a wholly independent institution, all profits going to raise the medical standards and to supply the one-half million dollars worth of free care distributed during its existence. The directors serve without pay, and to shoulder responsibility altruistically for twenty-eight consecutive years, to fight for honest convictions, to give time freely from a lucrative law practice, to keep divergent personal ties working towards a common goal, to be the driving power, and yet to keep in the background, requires a gift of a man.

THE ADMINISTRATION

The parent church of the hospital is guided by the Columbia Conference which is the governing body of the churches of Idaho, Oregon, Washington and British Columbia as far north as Vancouver. Naturally the conference was interested in the hospital from the first and gave the church its whole-hearted moral encouragement; but withheld any monetary support.. However, as the project gained momentum the conference demanded and received the right to elect the board of trustees of the hospital, chosen at large from the entire conference. (The board consists of twelve members four of whom, including the president, vice president, and secretary serve with the superintendent of the hospital as the executive committee). This gave authority to men far removed from the local viewpoint and understanding of hospital affairs and inevitably led to friction with the founders, who strove to maintain the balance of power. Finally, in 1924 in order to insure that all the profit should go back into the hospital, the local group withdrew the Columbia Conference's privilege of choosing the trustees, and organized the seven Swedish Lutheran Churches (two in Portland, one each in Gresham, Warren, Colton and St. Helens, of Oregon, and one in Brush Prairie, Washington) all within fifty miles of Portland to manage the hospital. In 1928 the Columbia Conference again was allowed to choose four trustees, but in 1939 all the administrative power was returned to the seven churches.

The hospital has always been a wholly benevolent institution, all profits going to raise the medical standards and to supply the one-half million dollars' worth of free care distributed during its existence. The directors serve without pay; and to shoulder responsibility altruistically for twenty-eight consecutive years, to fight for honest convictions, to give time freely from a lucrative law practice, to keep divergent personalities working towards a common goal, to be the driving power, and yet to keep in the background, requires a giant of a man.

Fortunately for the destiny of the Emanuel Hospital David E. Lofgren, president or vice-president of the trustees since 1911 is such a man. ^{to leave} Other trustees have been: Pastors, C. J. Renhard, H. E. Sandstedt, B. S. Nystram, Richard Olson, John E. Carlson, A. V. Anderson, J. E. Shipp, C. C. Bloomquist, S. E. Johnson, H. P. Johnson, Erik Wahlstrom, O. S. Odell, Paul V. Randolph, V. G. Ogren, and Arthur Pierce.

Laymen: John W. Hawkins, A. L. Morland, H. P. Hult, A. J. Steffenson, Swen Peterson, Hilmer Henrikson, Anton Hendrikson, F. O. Carlson, J. A. Nordin, John A. Westerlun, H. Waklund, P. A. Johnson, O. H. Hult, Emaneul Anderson, C. J. Larson, Sherman Nelson, Paul Palmblad, C. H. Earl, Oscar Nilson, E. M. Erikson, John Charlstrom, Arthur Lind, J. Luther Anderson, A. C. Malmquist and Julius Sture.

The executive board of trustees and the medical staff meet independently once a month. The only member that attends both meetings is the superintendent of the hospital who serves as a liason officer between the two groups.

The first actual superintendent was Sister Betty of whom more will be said later. In the days at the frame building she could throw a hurried order over her shoulder as she rushed from patient to patient, but as the hospital expanded it became impossible for one person to supervise every detail, and so in 1917, with plans for further growth underway, a full time, executive superintendent was selected. Previous superintendents Rendhard and Standstedt had filled advisory roles mainly.

The new man, Dr. A. M. Green, possessed a clear head, pleasing personality, and the faculty of inspiring his associates. His title of Doctor referred to the clergy and not to medicine and so we can understand how unfamiliar were the questions that first confronted him. But with Sister Betty's guidance he showed, in a few years, a complete understanding of hospital management.

Excerpts from the report of the board of trustees reveal the esteem of his colleagues: "Our hospital during the year 1935 again led all the hospitals in

our synod in the number of patients treated ----- the cost per patient per day is the lowest (\$4.33) and also the labor cost, per day, per patient is the lowest (\$1.54).

"The foregoing figures reflect the efficiency and ability of our superintendent and his loyal efficient organization.

"Dr. Green has during the year had several advantageous calls and offers from Eastern hospitals and business institutions, one offer was for a salary of three times as much as he receives from Emanuel Hospital, yet he decided to remain with us, for which we express our hearty and sincere thanks and appreciation. May he be given health and strength to carry on for many years to come."

But fate was to answer this last wish in its own ironic way. In 1938 Dr. Green was dead from a gastro-intestinal malignancy that had defied detection from this modern stronghold of scientific skill, equipment, and knowledge, until too late.

The present Superintendent, Mr. A. L. Morland, has been continuously on the board since the first meeting in 1909, in the role of treasurer.

is the well known physiologist, A. J. Carlson, of the University of Chicago. Sister Maria upheld the best tradition of nursing until the weakness of Addison's disease stole over her, and caused the death of this beloved servant in 1930. Sister Freda returned as Miss Freda Thor to take her old place until her marriage in the late twenties, and now lives in Vancouver, Washington. When the demand for her services was no longer acute, Sister Eva entered matrimony to share twenty abundant years with her mate until his death in 1928; now she is once more in the fold of the hospital as housemother to the nurses.

Sister Betty, the dominant personality, was chosen Superintendent of Nurses. Pragmatic, neat, astute, and energetic, she kept the hospital functioning smoothly. Following are anecdotes illustrative of the adjectives applied to this remarkable woman:

THE SISTERS

We have discussed the dreams and plans that made possible the Emanuel Hospital, but the most high-minded idealism is valueless if it lacks a workable medium to put it into use. Even as the most perfect and brainy law is dependent on the character of the administrator, and so the cherished hopes of the Emanuel's future were dependent at first upon the energy, knowledge and spirit of three women; Deaconesses Betty Hanson, Eva Anderson, and Freda Thor, sent from Omaha to deliver and nurse the tiny new hospital. Sisters Betty, Eva, and Freda, as they are affectionately remembered, inspired the hospital to the high type of service it has been glad to follow. The Deaconesses devote their lives to church and hospital work but are not bound by life-long vows and are free to leave the service at any time. They are young, faithful Lutherans, especially trained at the Deaconess Immanuel Institute in Omaha, Nebraska and receive about \$150 per year.

Sister Freda was drawn by other interests and left the hospital before the East-side migration. She was replaced by Sister Karin Carlson, whose brother is the well known physiologist, A. J. Carlson, of the University of Chicago. Sister Karin upheld the best tradition of nursing until the weakness of Addison's disease stole over her, and caused the death of this beloved servant in 1920. Sister Freda returned as Miss Freda Thor to take her old place until her marriage in the late twenties, and now lives in Vancouver, Washington. When the demand for her services was no longer acute, Sister Eva entered matrimony to share twenty abundant years with her mate until his death in 1938; now she is once more in the fold of the hospital as housemother to the nurses.

Sister Betty, the dominant personality, was chosen Superintendent of Nurses. Frugal, neat, austere, and energetic, she kept the hospital functioning smoothly. Following are anecdotes illustrative of the adjectives applied to this remarkable woman:

Frugal: During the adolescence of the hospital it was her custom to
 can personally during the summer sufficient fruit for the entire
 winter needs of the hospital.

Neat: It is said that a spot of dirt and Sister Betty could not exist
 in the same room. She kept the hospital immaculate.

Austere: While on duty she carried herself with an aloofness, which was
 melted by the warmth of her personality, when with friends
 in private. Her dignified bearing, respected by all, intimidated
 the nurses a bit, although she was never heard to raise her voice
 against a subordinate.

Energetic: Her own record of accomplishing forty-eight hours work each day was
 constantly before potential grumblers and shirkers to keep them
 at their tasks far more satisfactorily than mere oral instructions
 would have done.

After Dr. Green came in 1917, Sister Betty stayed on as Superintendent of the nurses
 at the same time giving freely from her practical wisdom to the new superintendent
 who had a fine business head but no previous hospital experience. Somewhere in her
 busy career the ground had been prepared for that crippling and baffling disease,
 arthritis, which insidiously lowered her great physical capacity until she regret-
 fully retired in 1926 to return to Omaha. She spent the summer of 1938 in Portland
 warmly welcomed and entertained by old friends and the guest of honor at several
 hospital functions. How could she do else than feel the finest of human emotions,
 an inextinguishable inner glow, as she saw what a splendid mature product her
 little hospital had become.

THE DOCTORS

Joseph A. Pettit, Ralph Moore, J. Earl Egan, E. M. Davis, Louis Fack, J. M. Short, H. W. Brown, and C. O. Boyer.

Dr. Karl Swenson and A. K. Higgs have the distinction of being the only staff members present since the beginning of the hospital. It was the former who as a youngman fresh from an Eastern School, dismounted from his buggy at Tenth and Taylor Streets in 1912 to be greeted by a flurry of eager nurses. The passenger with him was solicitously aided to the room called surgery, and the most spectacular major surgery could not have commanded more rapt attention than the minor hand operation that followed, for this was the new hospital's first patient.

Dr. G. T. Trommald with his tremendous Scandinavian following gave a great impetus to the hospital. He was a general practitioner of the highest type, gifted with the power of inspiring confidence in all types of people - a trait common to the great bedside physician of any age, whether he be a Hippocrates, a Sydenham, or an Osler - a trait of making the most dejected patient feel that the world is not so crazy after all and that he must recover to fill his place in it once more. The present superintendent is proud to have Dr. Trommald's picture in his office and remembers him as, "loyal and capable to the hospital----understanding and kind to patients."

Dr. J. G. Swenson was another early patron who always had a full quota of patients in the surgery ward. He possessed a well developed organic heart lesion that ultimately carried him away, characterized by a loud murmur often disturbingly audible during tense surgical moments.

An ear, nose, and throat specialist, Dr. E. C. Brown, is remembered for his operative speed. He would casually enter surgery to bare his wrists of their celluloid cuffs during a few minutes at the wash basin--^{the}meaty scrunch of the tonsillotome--and he was replacing the cuffs under the sleeves of the unspoiled frock coat and on his way.

to be

Other prominent early supporters were Ben Wade, R. H. Ellis, S. H. Sheldon, Joseph A. Pettit, Ralph Moore, J. Earl Else, E. H. East, Louis Buck, J. M. Short, H. W. Howard and C. O. Boyer.

Dr. C. D. BoDine found the Graham Street location convenient to his busy office, now expanded to the BoDine-Cantril Clinic, and he and his associates have used the hospital since.

The staff whose first recorded meeting was in 1919 now consists of 140 physicians, headed by the president, who presides at the monthly meetings. The presidency is voted to a different man each year and is largely an honorary position, although it may involve a good deal of effort, as in periods of expansion when the president consults frequently with the architects as a representative of the doctors. The routine business is smoothly handled by the staff on the basis of sound policies tested by time, and proved by the steady progress of the hospital. Their decisions are carried to the board of trustees by the hospital superintendent who correlates the two bodies, who never meet together in business but climax each year with a joint banquet in January.

The staff headquarters are in a fine three room suite on the ground floor, mahogany panelled and fittingly furnished in a comfortable masculine style suitable for business, study, consultation, gossiping, or just plain relaxing. It was planned under the direction of Stewart Sheldon and furnished through personal donations by the doctors.

President William Wilson, Vice-President C. W. Brunkow, and Secretary C. E. Marston head the staff of 1939 and a partial list of members not mentioned elsewhere include: Orthopods Dillehunt, Lucas, and Chuinard; Obstetricians Watkins, Dudman, Stearns, Schauffler, G. Nelson, Dowsett, and Blatchford; Surgeons Bueerman, Steinberg and Nisbet; Internists Berger, H. P. Lewis, A. Jones and Proctologist Black.

The Laboratory

The story of the laboratory is the story of Dr. H.P. Foskett obtained from that brisk business man in his downtown office, where he practices in the afternoons after spending the mornings at the hospital as Pathologist and Director of the laboratory.

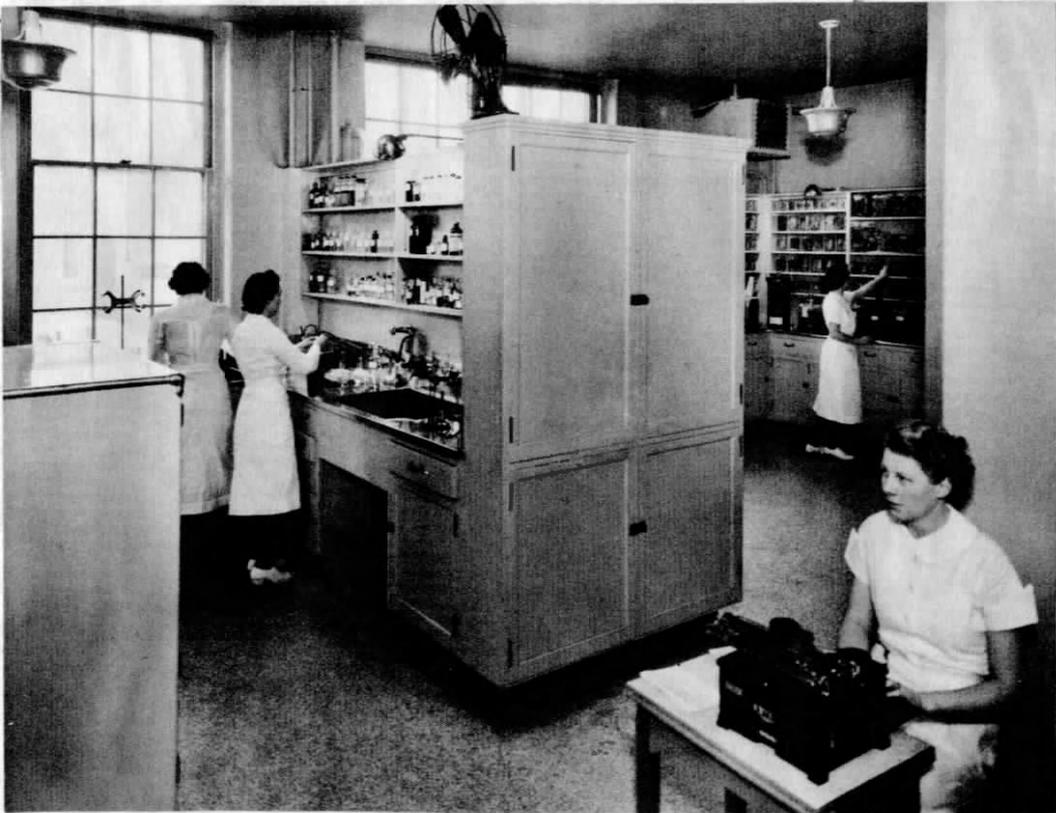
He graduated from the University of Oregon Medical School in 1919, working part time in Pathology and became the first five year student assistant in the school. It was not necessary then to serve a full time internship and most of the students interned during their Senior year. Dr. Foskett served at the Emanuel and states that being a five year man he had more time to give than the ordinary Senior. As he was interested in laboratory work the hospital was glad to have him take charge of that department. Previously the work had consisted of casual urine examinations done haphazardly by the internes with practically no equipment. Dr. Foskett soon had the laboratory in working order and issued the ultimatum, faithfully followed since, that routine blood, urine, and serology must be done on each patient.

The first laboratory was a seven by ten scrub room that was soon outgrown and so most of the work was done, with the aid of one technician in Dr. Foskett's downtown office, until the new hospital unit in 1925 gave adequate space. The staff now consists of six full time technicians, two students, and a secretary, fully prepared to make any reasonable test. The students, necessarily college graduates, are trained thoroughly, and those not absorbed into the regular staff can always find employers glad to have an Emanuel graduate.

Dr. Foskett attends to his first love, Pathology, in the same quarters where, following another of his innovations of 1919, he examines all surgical tissues. He attends nearly all the major pathological conventions and does regular post-graduate work. The autopsy rate is near thirty-five percent, and Dr. Foskett recalls one autopsy above others; that of Sister Karin Carlson, not only because of the personal angle, but because it was his first diagnosis of Addison's disease as a young pathologist. Also there was the presence of the great A.J. Carlson who confirmed the cause of his sister's death.

The New Department

The new department is under the leadership of Dr. Frank Butler, an associate, Dr. Frank Butler, who joined the staff in 1915 as a bacteriologist. Dr. Butler was associated with the hospital as a bacteriologist. Dr. Butler graduated from the University of Chicago Medical School. He was one of the first to use of it. As one of the first Manual Insurers, he participated in his career. Work to Commercial Street in his earlier years. During the war



Emanuel Hospital Laboratory

The X-ray Department

The x-ray department is under the charge of friendly, deep-voiced, Dr. Frank Butler, and his associate, Dr. Ivan Wooley, who joined the staff in 1930 as Roentgenologist. Previously Dr. Wooley was connected with the hospital as a Pediatrician. Dr. Butler graduated from the University of Oregon Medical School. He excels in yarns about the class of '15. As one of the first Emanuel internes, he participated in the Eastward trek to Commercial Street in his Senior year. During the war he was trained in Roentgenology, after having applied for that service because of those mysterious new gadgets that had challenged his skill to get any kind of an exposure; he was anxious to learn the principles behind the crackling and spluttering. After service overseas he returned to the Emanuel in September 1919.

The hospital's equipment dates from an unreliable portable in 1916 augmented by a standard machine in 1918 purchased from Dr. BoDine. At that time the Reverend Mr. Green served as the technician and the few plates taken were read by Dr. Frederick Diemer until Dr. Butler's return. In 1922 a 10,000 volt deep therapy machine began service in a frame building back of the main hospital. It was replaced in 1936 by the latest in equipment. Three large rooms in the basement now house the gradually accumulated equipment that enables the two technicians to produce excellent plates of any portion of human anatomy. One room is devoted to cystographic work while a new portable stands ready in the hall for a trip to the bed of the patient too ill to move.

much of its growth to the direction of Miss Alice Swanson in charge since 1936. She brought from Chicago sound principles learned under Dr. DeLee that have made the Emanuel Hospital outstanding in Obstetrics.

Records of the first days at the original hospital are sparse and inadequate; the demands of the sick were too pressing to allow time for careful notations, but from the first nurses themselves we can get a far more human impression than from cold white pages. Fresh in their minds are the memories of the old frame building, of their crowded quarters on the top floor where every

THE NURSES

Under Sister Betty's supervision the training of nurses was undertaken from the beginning and the first graduates in 1914 after two and one half year's training were Signe Young, Fridelborg Hutl, Sally Ekstrom, and Nannie Munson. In 1916 Alice Swarman, Carrie Staffanson, and Delia Lofgren comprised the second class. Since then there has been a larger class each year to make a total of 427 graduates and on May 12, 1939, forty-six more will be added.

The nurses began their East-side residence in a dormitory converted from a private home. They soon overflowed this and in 1921 they moved ^{to} a new \$90,000 home at Stanton and Gantenbein Streets. This became inadequate for their increasing number and now they fill all the minor structures within the hospital block, including two residences and the first East-side unit. The directors have listed a new dormitory for the nurses as one of the essential needs of the hospital.

The line of Superintendents of the nurses following Sister Betty in 1926 include Miss Edith Bergquist until 1934, Mrs. Martha Smith until 1936, and the present Superintendent Miss Enola Miller.

A complete, intensive three-year course is offered and recently an affiliation was made with Doernbecher Hospital for three month's training in Pediatrics to round ^{out} the one service that the Emanuel lacks.

The obstetrical training deserves special mention. This department in its own separate wing since 1932 is the finest and largest in the city. It owes much of its growth to the direction of Miss Alice Swarman in charge since 1926. She brought from Chicago sound principles learned under Dr. DeLee that have made the Emanuel Hospital outstanding in Obstetrics.

Records of the first days at the original hospital are sparse and inadequate; the demands of the sick were too pressing to allow time for careful notations, but from the first nurses themselves we can get a far more human impression than from cold white pages. Fresh in their minds are the memories of the old frame building, of their crowded quarters on the top floor where every

footstep must be cushioned in thoughtfulness of the patients below, of kindly Drs. Trommald and J. G. Swenson, and of the humanness of the Sisters. Every afternoon the latter would produce from somewhere a pot of tea and cakes for a friendly pause. The impersonal attitude characteristic of large institutions was lacking and all were drawn together in a close familiar group with the common realization that the future of this bold, young hospital was squarely on their shoulders. Time has graciously dimmed the remembrances of the petty jealousies of human nature, of the friction of personalities kept in too close contact by endless long shifts, and of the provoking extra work necessitated by lack of equipment. These first nurses have become accustomed to anguished humanity stripped of niceties by suffering; they no longer question the whims of fate as it whisks away from the community the beloved and respected ones and spares the deficient and unfit. Then and always the Emanuel has taught its nurses to apply the ideals expressed in Florence Nightingale's pledge: "I solemnly pledge myself before God, and in the presence of this assembly, to pass my life in purity and to practice my profession faithfully.

"I will do all in my power to maintain and elevate the standard of my profession, and will hold in confidence all personal matter committed to my keeping, and all family affairs coming to my knowledge in the practice of my calling.

"I will abstain from whatever is deleterious and mischievous, and will not take or knowingly administer any harmful drugs.

"With loyalty will I endeavor to aid the physician in his work and devote myself to the welfare of those committed to my care."

Lew Hurd