The Sydney M. Shoenberg Pavilion is named in tribute to a man whose continuing benefactions in behalf of The Jewish Hospital of St. Louis and whose contributions to its growth and development embrace three quarters of a century. Mr. Shoenberg’s humanitarian concern for his fellow man is emulated in philanthropic tradition by his three sons, Sydney M., Jr., Robert H., and the late John M. Shoenberg. We gratefully acknowledge the major support provided by the Shoenberg family in making this sophisticated patient care building a reality.

OUR AGE IS CHARACTERIZED BY THE MOST RAPID CHANGES IN HISTORY. IN MEDICAL SCIENCE THE RATE OF CHANGE HAS BEEN ESPECIALLY FAST AND DRAMATIC, WITH ENORMOUS IMPLICATIONS FOR EVERYONE.

AS A HEALTH CARE INSTITUTION, JEWISH HOSPITAL HAS BEEN RESPONSIVE TO SCIENTIFIC, TECHNOLOGICAL AND SOCIAL CHANGE. IN SOME INSTANCES, IT HAS BEEN A PIONEER AND INNOVATOR.

HOWEVER, WHILE CHANGE IS ESSENTIAL TO PROGRESS, SOME THINGS REMAIN UNCHANGEABLE. THE CAPACITY FOR CHANGE . . . WHILE REMAINING TRUE TO WHAT IS PERMANENT . . . IS CHARACTERISTIC OF JEWISH HOSPITAL.

OUR $21.5 MILLION EXPANSION PROGRAM FOR EXCELLENCE IN HEALTH CARE, HIGHLIGHTED BY THE OPENING OF THE NINE-STORY PATIENT CARE SYDNEY M. SHOENBERG PAVILION, IS CONTINUING EVIDENCE THAT WE REMAIN FAITHFUL TO THE MANDATE OF THE FOUNDING FATHERS – NAMELY TO SERVE THE HEALTH NEEDS OF OUR ENTIRE COMMUNITY. IN UNDERTAKING THIS MAJOR EXPANSION, THE BOARD OF DIRECTORS RECOGNIZED THE NEED FOR CHANGE AND ACTION NOW . . . AND FROM THEIR RELIGIOUS TRADITIONS DREW FAITH AND VISION TO CONTINUE STRENGTHENING AN INSTITUTION WHICH WILL BRING HEALING AND HAPPINESS TO FUTURE GENERATIONS.
FORMAL DEDICATION
THURSDAY, AUGUST 8, 1974, 4:30 P.M.

THE SYDNEY M. SHOENBERG PAVILION

As part of the final portion of tonight's ceremony, we have chosen a garden of living Calamondin Orange Trees. This is a species of orange tree that at every moment of its mature life carries on a process of growth and development. It knows no sharp cycles, no seasonal rest. Budding, flowering, growing, maturing, aging and regenerating occur in every instant of its life — suggestive of the unceasing development and restoration of life and health that characterize a modern patient care institution and give inspiration to its progress.
The Sydney M. Shoenberg Pavilion is named in honor of a man whose continuing benefactions in behalf of The Jewish Hospital of Cincinnati and whose contributions to its growth and development embrace three-quarters of a century. Mr. Shoenberg's humanitarian concern for his fellow man is consistent with philanthropic tradition by his three sons, Sydney M., Jr., Robert H., and the late John M. Shoenberg. We gratefully acknowledge the major support provided by the Shoenberg family in making this sophisticated patient care building a reality.

Our age is characterized by the most rapid changes in history. In every sector no rate of change has been especially fast and the implications for everyone are numerous. As a health care institution, a Jewish hospital has been responsive to recent technological, social, and personal change. In some instances, it has been a pioneer and innovator.

However, while change is everywhere, some things remain unchangeable. The mission of the hospital remains true to who we are as an institution of Jewish hospitals.

Our $21.5 million new building will provide state-of-the-art patient care, high technology, and the highest levels of care. The new pavilion will serve the health needs of the community, the major excesses of age, and the needs of women and children.
FORMAL DEDICATION
THURSDAY, AUGUST 8, 1974, 4:30 P.M

In lieu of the traditional ribbon cutting ceremony, we have chosen a garland of leaves suspended from living Calamondin Orange Trees. This is a species of orange tree that at every moment of its mature life carries on a process of growth and development. It knows no sharp cycles, no seasonal rest. Budding, flowering, growing, maturing, aging and regenerating occur in every instant of its life — suggestive of the unceasing development and restoring of life and health that characterize a modern patient care institution and give inspiration to its progress.
THE SYDNEY M. SHOENBERG PAVILION
WALKING TOUR

You enter the tower of red brick, sand-beige concrete and glass from a double driveway, lined with trees, running between Forest Park Boulevard and Parkview Place. As you walk across the herringbone-patterned tile lobby, you face a glass-enclosed courtyard, centered by a pool and beautifully landscaped by Shaw’s Garden.

On your right you see the Auxiliary Gift Gallery and Clover Garden. Admitting and business offices are immediately north of this area, near the elevators to the patient floors.

Beneath your feet, unseen, are two basement levels, housing general storerooms, pharmacy sterile supply rooms, and the massive transformers, generators, boilers and chillers that pump electricity, heat and cool air to the building above.

On the second floor is the new radiology department with 20 rooms. The floor is designed for general and special procedure x-ray rooms. For maximum efficiency, outer corridors serve patients while inner corridors are for staff use.

The third floor is the surgical operating suite, with 16 operating rooms — twice the number the old surgical suite contained. The operating room in the northeast corner is specially designed and equipped for open-heart surgery, while the southeast corner is devoted to orthopedic surgery, with a special air-filtration system to assure completely sterile conditions for delicate bone surgery, such as total hip-joint replacement.
The fourth, fifth and sixth floors contain patient rooms. These floors are completely carpeted, adding quietness as well as beauty to the surroundings. The rooms, decorated to achieve a residential rather than institutional atmosphere, are located along the outer walls, which are of bronzed glass, making every room light and cheerful. A large suite located on each corner of the patient floors has its own small sitting room adjoining the large bedroom. Those on the east side of the pavilion have spectacular views of downtown St. Louis and the Gateway Arch; those on the west overlook Forest Park and the skyscraper Clayton skyline.

The nursing stations and service areas are in the center part of each patient floor, as are the elevators, simplifying the corridor traffic patterns.

The top two floors of the nine-story structure (with the basement counting as the bottom story) will remain unfinished for the present, but can be quickly completed as fully furnished patient floors when the need for further expansion arises.

A penthouse on the roof houses elevator equipment, additional generators and air-handling systems. Should future expansion require additional stories to the pavilion, the foundation and walls are adequate for another nine levels to be placed above the present nine.
Opening of the Sydney M. Shoenberg Pavilion marks the completion of Phase II of the $21,500,000 Expansion Program for Excellence in Health Care. A 593-space parking garage on Parkview Place, opened in late 1971, fulfilled the goal of Phase I.

Phase III — the renovation of the Kingshighway Pavilion — already has begun, with remodeling in various divisions.

The success of this Expansion Program has been made possible through the generous response of thoughtful and concerned members of the community who share our feelings about the importance of excellent health care.

We wish to take this opportunity to thank all of those who made contributions to this important aspect of our physical growth. Their names are listed on the following pages which also include the names of all Major Benefactors who have contributed cumulative gifts of $25,000 or more to the Hospital throughout the years.

In extending our appreciation, we particularly want to pay tribute to those individuals, corporations and foundations who have responded so magnificently to the health needs of the community. Most of these generous gifts are individually recognized on bronze tablets which are placed on appropriate facilities throughout the new Shoenberg Pavilion, the Kingshighway Pavilion and the Central Medical Building.
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All donors listed have made gifts of $100 or more to the 1969-1974 Expansion Fund for Excellence in Health Care.

*These names appear on the Major Benefactor plaque located in the main lobby.

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From its beginnings at the turn of the century, the Jewish Hospital of St. Louis has stood as a response to a community need and a reflection of a community's concern. While community needs have changed in nature over the years, they are no less urgent today in the daily demands for the Hospital's services, and the concern that brought the Hospital into being nearly 75 years ago is as strong and supportive as ever.

A group of prominent St. Louis physicians began talking about the need for a Jewish Hospital in the late 1870s. At that time, the city had a growing Jewish population, swelled in the early half of the century by an influx of German intellectuals fleeing a militaristic regime to seek a new climate of freedom and humanism. Some 30 years later, Jewish immigrants were coming to the United States Eastern Seaboard, and on to St. Louis, as refugees from despotic persecution in Russia and other parts of Eastern Europe. They had fled with little more than their clothing and meager savings, speaking little or no English, and most of them were forced to huddle in urban tenements. Jewish physicians in St. Louis were appalled at the living conditions, ripe for the spread of disease, that they saw among these immigrants.

What was needed, the physicians agreed, was a hospital where such new citizens of St. Louis could find a haven of understanding as well as medical care and treatment.

Perhaps equally compelling was the need for a hospital where the physicians could treat their patients without the frustrating barriers so prevalent then in the medical world. Jewish medical students also needed a hospital they could look to for training in their medical careers.

In spite of the obvious needs they saw, Drs. S.H. Sonnenschein, August Binswanger and Jacob Furth were unsuccessful in their attempt to rally the necessary financial support to bring to reality the hope for a Jewish Hospital in St. Louis. But they did sow the seed of an idea that was destined to bear fruit.

The idea grew slowly for the next decade, nurtured by Jewish physicians and far-sighted leaders of the Jewish community, until by late 1890 enough interest had spread for the calling of a public meeting to discuss how a hospital might actually be built. Early in 1891, what was reported as "the largest assemblage of Jewish citizens that had been brought together for many years in this city" took a momentous step. After full discussion and debate, the gathered citizens voted to form an association to collect "a fund with the ultimate object of building and maintaining a hospital under Jewish auspices." Membership in the association would cost $6 a year. Many joined that very evening, including some of the recent Eastern European immigrants who had few financial resources but were determined to be part of this worthwhile undertaking.

A charter for the Jewish Hospital Association of St. Louis was granted by the State of Missouri on April 27, 1891. By the time of its first annual meeting — May 1, 1892 — the association had $2,482 in its treasury and a real estate committee looking for likely hospital sites in the city.
Four exceptional ladies — Mrs. Rebecca Kahn, Mrs. Gertrude Mathes, Mrs. Julius Weil and Mrs. Ida Kohn — gave guiding force to the fund drive launched in the association’s early years. They brought in the first major donation of $10,000 by Elias Michael, president of the Rice-Stix Dry Goods Co. In 1902, just a year later, the first Jewish Hospital opened its doors in St. Louis.

It was a modest, three-story red brick building at 5415 Delmar Boulevard, with beds for 30 patients, student nursing quarters in the basement and a parking lot at the side of the building for the doctors’ horse-drawn buggies. Though small in size, its reputation for excellence in medical care and treatment soon loomed large on the city horizon, so much so that demand for the Hospital’s services quickly exceeded its capacity.

In 1905, a second building campaign was started, under the leadership of Moses Fraley, first president of the Jewish Federation of St. Louis, to raise $250,000 to add two wings to the Hospital. The campaign was a success, and the Hospital’s capacity was increased to 100 beds.

By now the Hospital had begun to serve a far wider community than its originators had envisioned. The high quality of care, the unexcelled reputation of its medical staff and the convenience of its West End location drew more and more patients, so that 100 beds were no longer sufficient by 1913. But this time, plans to expand the building were blocked by the discovery that the foundations and walls were not strong enough to support additional stories. Aaron Waldheim, the Hospital president, quickly pointed to a solution — a new site for a much bigger hospital.

An ideal location was found, at Kingshighway and Forest Park Boulevard, near the Washington University Medical School where so many of the Hospital’s medical staff had studied. The fund drive begun in 1919 had raised more than $1,000,000 by the following year, when the site was purchased.

1926 was a memorable year — the occasion of the dedication of the new $2,250,000 hospital, a seven-story building of stately Georgian architecture, with a bed capacity of 250, a house staff of 11 and a medical staff of 109 physicians. Within the year, an out-patient department for indigent patients was opened, keeping faith with the Hospital’s original commitment to serve the poor.

August Frank was the first president of The Jewish Hospital of St. Louis, 1900-1907.
Building on a Strong Foundation . . .

In 1926 the Jewish Hospital moved to the present site at Kingshighway and Forest Park Boulevards.

Only three years after the Jewish Hospital of St. Louis had settled into its new location at 216 South Kingshighway, its first major addition was opened — the Moses Shoenberg Memorial, a modern nurses’ residence connected with the hospital by an underground tunnel. It was a far cry from the Hospital’s first student nurse quarters, in the basement of the original building on Delmar.

During the Depression years and World War II, Jewish Hospital grew in services to the community without being able to grow in physical plant. Other institutions and agencies had been organized in St. Louis, under auspices of the Jewish Federation, that were also serving various needs of the ill and handicapped. After the war, in the late 1940s, the Federation recognized the need for reorganizing and consolidating these services. An intensive study of the situation led to a far-reaching decision, to integrate within Jewish Hospital the Miriam Rosa Bry Convalescent and Rehabilitation Hospital, the Jewish Sanatorium and the Jewish Medical Social Service Bureau.

It was evident that Jewish Hospital badly needed to expand to accommodate these new services, so in 1951 plans for new construction and alteration of the main hospital building were begun. Ground was broken for the expansion project in June, 1954, and two years later a $7,000,000 building program was climaxed with dedication ceremonies for the new Jewish Hospital Medical Center. The fund drive had raised the largest amount of money ever invested up to that time by the St. Louis Jewish population in a single community project.

Completion of the building program, which put a new front on the Hospital’s Kingshighway entrance
area, ushered the Hospital into its new role as a modern, multi-faceted medical center, with more than 500 beds, a medical staff of 350 physicians and dentists, and more than 1,000 employees. A $1,000,000 gift from the Mark C. Steinberg Charitable Trust was responsible for the Steinberg Memorial Hospital wing and the Aaron Waldheim Clinic was made possible by a gift to the people of St. Louis from Mr. and Mrs. Millard A. Waldheim.

Added later was a nine-story research building, constructed with aid of a $1,000,000 contribution by Charles H. Yalem and named in his honor; a building at 4949 Forest Park Boulevard, purchased by donations of the Sydney M. Shoenberg family, named the Shoenberg Research Building which houses the Department of Otolaryngology. The Central Medical Building was obtained in 1965.

The Hospital took another major step in progressive medicine in 1953 when full-time salaried physicians were engaged to head up departmental activities in Medicine and Surgery. The Board of Directors, cognizant of the revolution which was developing in the medical sciences, took the position that the growing complexity of hospital specialties demanded full-time attention from physicians who could administer the details of the professional program and reinforce the expertise of an outstanding medical staff. Since 1953, full-time physicians have been appointed to head up Rehabilitation Medicine, Ophthalmology, Psychiatry, Otolaryngology, Radiology, and Pathology and Laboratory Medicine.

During this same period the research program was enlarged to attract outstanding physician-scientists who could pursue their own specific investigative interests while adding depth to the patient care program. These men provide an immediate and often urgent link between the discovery of new knowledge and its application to patients.

The next step in fulfilling the commitment to future medicine was the evolution of the Hospital as an academic institution. As early as 1952 Jewish Hospital formed an association with Washington University School of Medicine by participating in the education of third and fourth year medical students, whose very presence, need for knowledge, and seriousness of purpose stimulated the entire staff to even higher levels of patient care, education and research.

This association was further strengthened in 1962 when the Hospital became a charter member of the Washington University Medical Center (WUMC). In joining WUMC, Jewish Hospital became an integral part of an outstanding medical center which is able to draw upon the diverse strengths of each member in developing advanced programs of patient care while avoiding unnecessary duplication of facilities.

In 1963 the Hospital became a major teaching affiliate of Washington University School of Medicine.

There were a few murmurings in the community that Jewish Hospital might be endangering its individual character, its distinctive identity, its reason for being, in this affiliation with a university and with neighboring hospitals.

In fact, becoming a teaching hospital was wholly in keeping with the Jewish traditions on which the Hospital was founded.

Just as the synagogue is a house of study as well as a house of prayer, the rabbi is a teacher as well as a religious leader, so is a hospital looked upon as a house of medical learning as well as a place of healing. A physician is also a scholar, whose diagnostic methods are not unlike the traditional Talmudic method of logical deduction. In Judaism, the physician has always had an almost religious aura, perhaps in recognition of the human body and its working as a direct manifestation of what people call God. At any rate, from the earliest days of medicine, Jews have been in the forefront of the medical profession, both as teachers and practitioners.

Significantly, too, becoming a teaching hospital assured an even higher quality of patient care than that for which Jewish Hospital already was noted. It meant that top medical school graduates would be attracted to its house staff, to serve as the resident physicians on duty around the clock. It meant that the hospital staff would be stimulated by their contact with students to keep pace with the latest in medical research and treatment, to the direct benefit of their patients. And it would draw to the hospital staff even more outstanding men and women in every field of medicine, further expanding the Hospital’s reputation throughout the medical world.

Not only had it much to gain, but Jewish Hospital had much to give to the university with which it affiliated. The medical school faculty was enlarged by the addition of the medical staff members of the Hospital and its training programs by including the patient care, surgical, medical, laboratory and other facilities of Jewish Hospital. Medical students began coming in a steadily increasing number to take their clinical education in the Hospital’s departments.

Inevitably, Jewish Hospital has entered still another era of growth. But it is determined never to become simply a huge, impersonal institution, where people are reduced to the status of numbers on a computer card. Patient care and comfort remain a primary concern of the Hospital and its staff.

Jewish Hospital had been a pioneer in community
The Moses Shoenberg Memorial School of Nursing building was Jewish Hospital's first major addition in 1929.

In 1956 remodeling and room additions to the Kingshighway building were completed, giving a new look to the Hospital’s main entrance.

The addition of the nine-story Yalem Research Building in 1964 provided much needed space for a rapidly growing clinical and scientific research program.
Lewish Hospital has followed the path of progress from a 30-bed hospital serving the needs of the Jewish population, to a thriving medical complex providing comprehensive health care to a total community.
The story of Jewish Hospital cannot be told only in terms of dates and dollars, of cornerstones and milestones. It is a much greater story of people — those who serve and those who are served — told anew each day and night, year in and year out.

You could spend many weeks going from department to department, division to division in Jewish Hospital and still have more to learn about the role of each in the overall Hospital story.

We can only capsulize here what these departments and divisions are doing at this point in time, in the year 1974, as they carry out the basic functions of a great medical center — patient care and treatment, research and teaching.

MEDICINE
Acting Physician-in-Chief, Dr. J. Russell Little Jr.

The largest of the Hospital’s departments, Medicine has a full-time group of 22 physicians and medical scientists and a house staff of 17 first-year residents (interns), eight junior assistant residents, six senior assistant residents, two chief residents and more than 20 clinical and research fellows.

Diagnosis of disease, treatment and care of patients, is the major role of the department. Its major divisions of internal medicine include: cardiology, gastroenterology, respiratory disease, oncology (tumors), vascular disease, hematology, nephrology, metabolism, neurology, dermatology and arthritis.

Special units of the department include a renal medical intensive care ward, concentrating on care of patients with severe kidney and electrolyte disorders, and a cardio-respiratory intensive care unit, with 12 fully monitored beds for cardiac problems and four fully monitored beds for acute respiratory illnesses. The department also supervises patients admitted to the emergency ward area.

Serving the entire hospital are these laboratories of the department: pulmonary function, inhalation therapy, hematology, blood bank, coagulation and thrombosis, electroencephalography, immunology, cardiac catheterization, cardiac graphics, renal dialysis unit and gastrointestinal endoscopy.

Teaching and training are important roles of the Department of Medicine. Second, third and fourth-year students at Washington University School of Medicine take a substantive part of their training in internal medicine at Jewish Hospital. Medical school graduates fill the posts of hospital residents, clinical and research fellows.

Research is an integral part of the department’s function, vital to its teaching role as well as the development of new and better methods of caring for patients. Significant contributions to our understanding of thrombosis have been made by the department in the past decade.

Jewish Hospital is an outstanding center for diagnosis and treatment, as well as research, in diseases of bone and mineral metabolism, and for many aspects of diagnosing and treating heart disease.

SURGERY
Surgeon-in-Chief, Dr. Arthur E. Baue

This major department of the Hospital is housed in the new Shoenberg Pavilion and has the city’s most modern surgical suite, including specially equipped rooms for open-heart surgery and orthopedic procedures such as total hip-joint replacement.

The department is widely known for its special expertise in the treatment of esophageal disease, including hiatus hernias, and for thoracic and cardiac surgery, such as coronary artery by-pass grafts and heart valve replacements.

Its general surgery division has pioneered in nutritional support for patients unable to eat, with a program of intravenous hyperalimentation. One of its surgical intensive care units is devoted to a special study of shock and trauma, with beds reserved for patients who have suffered accidental injury.

Other divisions specialize in urology, neurosurgery, anesthesiology, orthopedic, plastic and vascular surgery. The department has 250 surgical patient beds and last year performed nearly 10,000 in-patient operations.
The department has an approved American Dental Association general practice residency, the only one in a private, general teaching hospital in St. Louis, and has had three dental interns in the past year.

Research is carried out as funds are available. The department has tested various dental equipment products and conducted programs for training dental assistants.

REHABILITATION MEDICINE
Director, Dr. Franz U. Steinberg

The main objective of the department is the evaluation and rehabilitation of patients, of any age, who have physical disabilities. Many relatively young patients can be found here, particularly those with spinal cord injuries from automobile and sports accidents. They, like the older patients partially paralyzed from strokes, need specialized therapy to reach a level of independence that will permit them to return to their families and the community at large.

Amputees who have been fitted with artificial limbs come to the department for training in use of these prosthetic devices, which in the near future may become far more sophisticated with development of small transistorized parts for better movement.

The department includes two in-bed services, one with 36 beds for patients undergoing intensive rehabilitation, and the other with 20 beds for patients who require considerable nursing care. There are active programs of physical and occupational therapy, and electromyographic diagnostic tests are given.

A pioneering home care program, initiated at the hospital about 20 years ago, provides nursing and nursing aid services, a social worker, physical and occupational therapists who go to the patients' homes to teach them and their families how to manage outside the hospital environment.

Physicians and nurses also provide medical services for some patients in the home care divisions, as do laboratory staff members who go into patients' homes to give services at greatly reduced costs.

The department has a residency program in rehabilitation medicine which is the only one in the St. Louis area accredited by the American Medical Association and the American Board of Physical Medicine. In addition, medical students from Washington University come to the department for an elective course, along with physical and occupational therapy students and student nurses.

While patient care is the main emphasis, the department also is doing research on strokes, setting up a registry of stroke patients to determine which ones do well at home after leaving the Hospital and which ones must go into a nursing home. Another research project deals with the management of spasticity.
Equipment available to the staff includes a colposcope, which permits microscopically close examinations of internal body areas; fetal monitors, arwoscopes and cryo-surgical units.

The department is justifiably proud of its educational program. There is a board-approved three year residency program. During the course of training a resident gets special instruction in high risk neonatology, obstetrical anesthesia, radiotherapy, and obstetrical-gynecologic pathology. In addition, the resident rotates through the Booth Memorial Hospital, where he first gets full responsibility in all phases of obstetrical management. The teaching program strongly emphasized a core program of basic lectures.

Members of the department have been actively engaged in research, and contributions have been made in the areas of psychosomatic problems, perinatal mortality, amniotic fluid analysis to determine maturation of the fetus, abnormal blood clotting in women taking birth control pills, immune interreactions between the fetus and mother and chromosomal abnormalities.

The department has one of the city's lowest maternal and fetal mortality rates, and offers facilities for natural childbirth and rooming-in of babies with their mothers.

OTOLARYNGOLOGY
Director, Dr. Sam E. Kinney

Patients with every kind of communication problem involving hearing, speech, voice and language come to this department for diagnosis, care and treatment. It has two divisions — audiology and speech pathology, both essential to a good, viable Otolaryngology Department.

The ear, nose and throat medical specialty has become very complex in the last five to 10 years, far advanced from days when an ENT physician only removed tonsils and treated sinus problems, sore throats and ear aches. Now, improved procedures and sophisticated testing equipment in the teaching hospital setting make possible rehabilitation of hearing, removal of tumors from the hearing nerve and larynx, transplantations of eardrums and other delicate repair work.

The department is located in the Shoenberg Research Building, at 4949 Forest Park Boulevard, and is equipped with modern testing facilities, speech pathology rooms and instruments for high-quality evaluation of hearing. Here also are housed the editorial offices of the prestigious Annals of Otology, Rhinology and Laryngology, which publishes ear, nose and throat research material. Founded in St. Louis in 1892, its editor now is Dr. Ben H. Senturia, director emeritus of the department. A cleft palate clinic also is conducted by the department.

Recently the department published a very helpful booklet titled, Practical Suggestions for Persons with a Hearing Impairment, given to patients to help them and their family members understand how to make life easier for those with a hearing loss.

PATHOLOGY AND LABORATORY MEDICINE
Acting Pathologist-in-Chief, Dr. Gustave L. Davis

Nearly every patient in Jewish Hospital is served in some way by this department in its role of testing and research.

Five full-time pathologists, who spend much time in direct consultation with clinicians, help with diagnosis and treatment decisions. Laboratory testing of body fluids and other biological material aids in detecting and identifying the disease process. Testing during treatment also helps the clinician to select the most effective means of caring for the patient.

The department's divisions include microbiology, clinical chemistry, endocrine chemistry, pathologic...
supervises the clinic patients at Jewish Hospital. There is an active surgical pediatric service under the direction of the Department of Surgery. The staff of the Pediatric Department is available to any of the other Hospital departments admitting children as patients.

PSYCHIATRY
Director, Dr. Nathan M. Simon

The Department of Psychiatry’s high priority for patient services is evidenced in all aspects of its programs. The active out-patient clinic program provides facilities for individual and group treatment, evaluation and family consultation, not just for low-income but many middle-income persons unable to meet the full cost of private psychiatric treatment.

The department’s recently remodeled inpatient service houses a 36-bed inpatient unit, which offers maximum therapeutic capability for patients of all ages. Treatment of adolescent patients is a specialized service for which Jewish Hospital has gained widespread recognition.

The inpatient unit includes a therapeutic community, in which intensive therapy and group activities help patients develop self-reliance and healthy relationships with others. It also has a traditional psychiatric hospital service, with highly individualized programs worked out for each patient.

Staff members carry their dedication to community service outside the Hospital too, acting as consultants to the Jewish Family and Children’s Services, the Salvation Army’s Booth Memorial Hospital and several inner-city clinics.

The Department of Psychiatry’s educational program provides both didactic and clinical training in a three-year approved residency program, a one-year program for psychology interns and rotations for medical students and graduate students in clinical psychology. A current second year resident in the department is a Falk Fellow of the American Psychiatric Association, a distinct honor since only 25 psychiatry residents across the nation are chosen each year by the American Psychiatric Association for these fellowships.

Important research being conducted in the department includes a federally funded project with the St. Louis Heart Association, in which high-risk factors in heart disease are being studied.

Another significant research project involves biofeedback methods that may help hypertensive patients and those who suffer migraine and tension headaches. The department also is known for its research into psychological aspects of women with spontaneous abortions (miscarriage) and therapeutic abortions.

RADIOLOGY
Director, Dr. Noah Susman

Completion of the Shoenberg Pavilion is an especially happy occasion for this department, since the new building’s entire second floor is a spacious modern x-ray suite, replacing its crowded old quarters in the Kingshighway Pavilion.

Sophisticated equipment of advanced design has been installed in the new suite, which is designed for maximum efficiency and convenience of both staff and patients.

Three main divisions make up the department — diagnostic roentgenology, radiation therapy and nuclear medicine. A new division of ultrasound, including echocardiography and echocardiography has been developed.

One of the busiest departments in the Hospital, its diagnostic division performs more than 47,000 examinations each year, radiation therapy provides about 8,150 treatments, and nuclear medicine examines and treats 2,400 patients annually.

A gamma camera is used to expedite radio-isotope examinations to detect
The unique laboratory developed in this laboratory to detect bone mineral changes in the bones and detectable by x-ray.

The radiation therapy division, headed by Dr. Hyman R. Senturia, will continue to be housed in special quarters in the basement of the Kingshighway Pavilion. A new and improved cobalt therapy unit will be added to provide modern capabilities for the care of patients with malignant disease.

An approved four-year residency program in general radiology is combined with Mallinckrodt Institute of Radiology at Washington University School of Medicine. A six-week elective in radiology also is available for senior medical students.

The preceding capsule summary of the multi-faceted work of the Hospital’s 11 departments has only skimmed the surface. If you had several weeks to go into each division and special unit within the departments, you would learn just a little more of the full story, which is being rewritten in new accomplishments every day.

However, since you probably lack the time — just as this booklet lacks the space — to go into every one of the Hospital’s divisional units, we give you a mini-report on some of those divisions and the work they are doing.

**METABOLISM**

**Director, Dr. Louis V. Avioli**

This is one of the outstanding centers for diagnosis, treatment and research related to diseases of bone and mineral metabolism. In the past six years it has received over $1 million in research grants and has established innovative methods of analyzing bone and treating a variety of bone diseases such as Paget’s disease and osteoporosis. Techniques were developed in this laboratory to measure an active metabolite of vitamin D in blood and hydroxyproline in urine, facilitating a more accurate differential diagnosis of bone disease. The laboratory also documented the deleterious effects of anti-convulsant medications such as phenobarbital and dilantin on bone and the specific nature of the bone disease which is associated with chronic kidney disease. The laboratory has established the bone density analyzer as a routine diagnostic tool for measuring alterations in bone mineral content, and to date, the center has sampled over 1000 individuals. Significant alterations have been noted in the bone of patients with diabetes and those who drink alcoholic beverages excessively.

**CARDIOLOGY**

**Director, Dr. G. Charles Oliver**

This division is intimately involved in a variety of activities related to the diagnosis and treatment of patients suffering from heart disease. Included are phonocardiography (a recording of heart sounds) and echocardiography which involves an ultrasonic sound wave being passed through the chest wall. This technique provides detailed information on valve disease, congenital heart disease and blood clots in the lungs. Through the use of a catheter the heart, valves or lung are projected on a television monitor so that physicians can determine whether treatment is indicated by medication or surgery.

Nationally significant research in heart disease is also being utilized clinically. The project is involved in the study of irregular heart beats — arrhythmias — and how they are related to malfunctions of the heart. In many cases, sudden death.

Patients wear small portable tape recorders called Holter Monitors that record heart rhythms continuously.

Tapes from these recorders are analyzed with the aid of a high-speed digital computer, and preliminary findings point dramatically to a particular kind of arrhythmia, called early premature ventricular contractions, as a likely indicator of “sudden death.” If this can be established, then likely candidates for such fatal attacks can be treated with drugs, coronary by-pass surgery or, possibly in the near future, implanted defibrillators to normalize the heart beat.

**BLOOD BANK**

**Director, Dr. Morton A. Levy**

Each year the demand for blood and blood products has increased. In 1973 it reached 5,280 units.

The increase in cardiovascular surgery, the renal dialysis unit and the availability of blood components to treat patients with hemophilia or those who have leukemia has placed new demands on the Blood Bank. To meet these demands, blood is supplied from volunteer donors for the Hospital Blood
Bank and the Red Cross. This blood is screened by the most modern techniques for infectious diseases, such as hepatitis, and carefully crossmatched in order to provide the safest possible transfusion. The Blood Bank is staffed around the clock with highly trained personnel.

The first school in the state of Missouri for training technicians in the specialty of blood banking was established at Jewish Hospital in 1969, and continues to provide us and the community with skilled employees.

HEMATOLOGY LABORATORY
Director, Dr. Daniel Rosenblum

This laboratory is responsible for measuring the cells which circulate in the blood, the red blood cells, white blood cells and platelets. With the help of automated equipment, about 600 separate measurements are made here each day. The data plays a key role in caring for patients who are bleeding or who have infections as well as patients with diseases of the blood and bone marrow.

The hematology staff is actively engaged in research into the biochemical abnormalities in cells which have undergone malignant change. In addition, the members of the staff participate in a nationally organized drug testing program which is designed to discover new and better ways of treating patients with malignancies such as leukemia and cancer.

PULMONARY DISEASES AND RESPIRATORY CARE
Director, Dr. Robert M. Senior

Besides operating the Pulmonary Function Laboratory and the Inhalation Therapy Department, this division supervises four beds in the intensive care unit set aside for respiratory emergencies, such as severe pneumonia, drug overdose or blood clots in the lung. The Pulmonary Function Laboratory tests patients for their ability to breathe quickly, handle exercise and other indicators of possible causes of their respiratory problems. The Inhalation Therapy Department, headed by Dr. Stephen S. Lefrak, maintains equipment used throughout the Hospital, around the clock, to treat patients with respiratory problems.

Research in the division is centered on a study of the structure of the lung, how it is destroyed in certain diseases, and what sort of repair processes take place when the lung is injured by diseases like emphysema. Teaching at Washington University School of Medicine is another important function of this division, and Dr. Senior was named “Teacher of the Year” by the school’s senior class in 1973.

ONCOLOGY, IMMUNOLOGY AND INFECTIOUS DISEASE
Co-Directors, Dr. J. Russell Little Jr. and Dr. Harvey Liebhaber

Research, with eventual benefits to patients and the world of medicine at large, is the main function of this division. Just now, its investigators are trying to develop a vaccine for hepatitis, searching for the microscopic origin of the virus that causes this debilitating disease. Another project is development of an improved rubella vaccine, to make it safer for more persons. The laboratory test for measuring rubella antibody that is now recommended by the U.S. Center for Disease Control was developed at this laboratory.

Tumor immunology is another major research subject here. Starting from evidence that persons with tumors make an immune response similar to the response made to infection, the researchers hope to learn more about this response, how to manipulate and augment it. Just as research like this is essential to improving patient care, it is vital to a major teaching hospital, since physicians actively engaged in research are sought out by medical students and graduates as the best possible teachers. The high quality of the staff at Jewish Hospital thus is directly attributable to its high standing in the field of medical research.

Nephrology
Director, Dr. Herbert Lubowitz

In recent years, this division has greatly strengthened its capabilities for patient care and research in kidney and electrolyte disorders. It has a chronic hemodialysis program that helps train patients for home dialysis while they await kidney transplants. It also provides a dialysis technician who goes to patients’ homes to assist in hemodialysis.

Research in the division centers on the development and prevention of glomerulonephritis, a disease that destroys the kidney and is the major cause of chronic renal failure, and on the prevention of certain forms of acute tubular necrosis, one of the main causes of sudden renal failure. Another research area involves studies on the mechanism of salt balance and edema formation in kidney disease.
GASTROENTEROLOGY
Director, Dr. Burton A. Shatz

Care of patients with diseases of the gastrointestinal tract — colon, esophagus, stomach, small intestine, gall bladder and associated organs — is the main function of this division, which has some of the most sophisticated types of equipment for examining patients and performing certain procedures. For example, Jewish Hospital was one of the first hospitals in the country to remove certain types of tumors from the colon by use of a fiberoptic endoscope, an instrument that enters the gastrointestinal tract by mouth or rectum, without surgery, and permits removal of the tumor by electro-cauterization. The division works closely with the division of thoracic surgery in diagnosis and treatment of complicated esophageal disease.

BIOCHEMISTRY AND MICROBIOLOGY
Director of Biochemistry, Gerald Kessler, Ph.D.
Director of Microbiology, Alex C. Sonnenwirth, Ph.D.

Both of these Pathology and Laboratory Medicine Divisions are among a very select group that serve as national reference laboratories for the U.S. Center for Disease Control’s Proficiency Testing Programs which establish and monitor quality standards for all of the nation’s laboratories and which also serve as licensing criteria for all U.S. laboratories involved in interstate commerce. The Microbiology Division is one of 13 reference laboratories in the world serving the International Committee on Gram-Negative Anaerobic Bacteria.

Biochemistry performs a multitude of essential chemical analyses of body fluids while Microbiology examines body fluids and tissues for infective microbial agents and determines their identity and antibiotic sensitivity, for the entire Hospital. In addition, both laboratories are involved in research projects. Biochemistry is focusing on drug monitoring, to help determine effective levels of medication for treatment of individual patients, and on toxicology research to develop faster procedures for recognizing overdoses of drugs. Microbiology research includes studies of anaerobic bacteria (organisms incapable of growing in the presence of oxygen): These are the most numerous members of the normal bacterial flora of man and are usually harmless, except in debilitated individuals where they are capable of causing severe, often life-threatening, infections.

UROLOGY
Director, Dr. Charles Manley

The Division of Urology is primarily concerned with delivery of health care for patients with a wide variety of diseases of the kidneys and genito-urinary tract. A major activity of the Division is the training of physicians specializing in this surgical field as part of the Washington University School of Medicine Urology teaching program. Clinical research activities are being conducted into certain aspects of urinary obstruction and cancer of the urinary bladder.

The Division of Urology has also been responsible for development of the only Vasectomy Clinic in the St. Louis Metropolitan area. The Clinic, which is primarily provided as a service for low income families desiring this form of family limitation, has performed more than 1,000 out-patient vasectomies in the past three years.

The professional program as described in the preceding pages is the medical and scientific aspect of patient care. We would be remiss in not mentioning the Nursing Department which has the main responsibility of coordinating all patient care activities.

NURSING SERVICE
Director, Brenda Ernst, R.N.

Of the 600 members in the Nursing Department, there are 200 registered nurses who are reinforced by licensed practical nurses, nursing technicians, nurse aides, orderlies, transporters and ward clerks. Six assistant directors are responsible for line and staff functions in Nursing Service.

An assistant director is in charge of the in-service division which is responsible for orientation of all new nursing personnel, on-going staff development programs, skill training for non-professional personnel and refresher and nurse intern programs.

The School of Nursing located adjacent to the Hospital is a 27 month diploma program with a current enrollment of 201 students. These enthusiastic young men and women provide patient care services while learning. The school is affiliated with the St. Louis-St. Louis County Junior College District, with St. Louis Children’s Hospital and with the state psychiatric hospital.

In addition to nursing, there are some 1500 other employees in 40 departments which include dietary, housekeeping, laundry, central supply, business offices, medical records, social service, purchasing, and many others. Their combined efforts and dedication are essential in providing quality care for our patients.
Then and now . . . more than 2,000 students have been graduated from the Jewish Hospital School of Nursing since the first graduating class (above) in 1905. The 1974 graduating class numbered 90 (below).
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In recognition of the dedication and opening of the Sydney M. Shoenberg Pavilion, we have produced this Dedication Brochure as a special issue of 216. We have taken this opportunity to introduce the Shoenberg Pavilion as well as to keep you, our supporters and the community, informed of the professional teaching and research programs and the quality of total health care services available at your Jewish Hospital of St. Louis.

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