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Part IV: University Components and Activities — Chapter 49: The Medical College Deanship and Chapter 50: Hospital Administration (pages 850-888)

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The Medical College Deanship

SAMUEL S. CONLY, JR., M.D.

“I will teach you, and guide you in the way you should go. I will keep you under my eye.”

—PSALMS 32:8

AT THE FIRST regular meeting of the faculty of Jefferson Medical College held on December 20, 1824, Dr. Benjamin Rush Rhees, who was serving as Secretary, was appointed Dean of the Faculty, the first Dean of this new medical school. Just six months previously, Jefferson had come into existence as the Medical Department in Philadelphia of Jefferson College located in Canonsburg, Pennsylvania.

From 1824 through 1986, Jefferson Medical College has had 22 Deans, one Interim Dean, one Acting Dean (who became the Dean), and numerous Associate Deans, Assistant Deans, and Assistants to the Dean. The Deans are listed in Table 49-1, their Associates in Table 49-3.

While the average tenure of a Dean of a United States medical school is given as 3.5 years, the Deans at Jefferson Medical College remained in

office longer, averaging 7.4 years, with a range from one (Eberle, Barton, Dickson, Lowenstein) to 29 years (Holland). One Dean served for 13 years (Huston), two for 14 years (Dunglison, Kellow), and one for 22 years (Patterson). The average age of Jefferson Deans at the time of appointment was 47, in a range from 27 (Rhees) to 70 (Dickson). Only one of the 22 Jefferson Deans was a woman (Lowenstein, 1982–1983). All had the M.D. degree, and one (Lowenstein) a D.Phil. degree. Many were granted special academic recognition by the award of honorary degrees. All held the rank of Professor in various Departments of the College: 18 in clinical fields (Medicine, Therapeutics, Materia Medica, Obstetrics, and Preventive Medicine); three in preclinical fields (Chemistry, Toxicology, and Anatomy); one in both (Medicine and Biochemistry).

Table 49-1 Deans of Jefferson Medical College

<i>Name</i>	<i>Tenure</i>	<i>Medical Degree From</i>	<i>Age When Appointed Dean</i>	<i>Professorship at Jefferson</i>
Benjamin Rush Rhees	1824–27	University of Pennsylvania	27	Institutes of Medicine and Medical Jurisprudence
John Eberle	1827–28	University of Pennsylvania	40	Medicine
William P.C. Barton	1828–29	University of Pennsylvania	42	Materia Medica and Botany
Samuel McClellan	1830–34	Yale University	30	Anatomy and Midwifery and Diseases of Children
Samuel Colhoun	1835–39	University of Pennsylvania	48	Materia Medica and Medical Jurisprudence
John Revere	1839–41	University of Edinburgh	52	Theory and Practice of Medicine
Robert M. Huston	1841–54	University of Pennsylvania	46	Materia Medica and General Therapeutics
Robley Dunglison	1854–68	Erlangen	56	Institutes of Medicine
Samuel H. Dickson	1868–69	University of Pennsylvania	70	Practice of Medicine
Benjamin Howard Rand	1869–73	Jefferson	42	Chemistry
John Barclay Biddle	1873–79	University of Pennsylvania	58	Materia Medica and General Therapeutics
Ellerslie Wallace	1879–83	Jefferson	60	Obstetrics and Diseases of Women and Children
Roberts Bartholow	1883–87	University of Maryland	52	Materia Medica, General Therapeutics and Hygiene
James W. Holland	1887–1916	Jefferson	38	Medical Chemistry and Toxicology
Ross V. Patterson	1916–38	Jefferson	39	Therapeutics
Henry K. Mohler	1938–41	Jefferson	51	Therapeutics
William Harvey Perkins	1941–50	Jefferson	47	Preventive Medicine
George Allen Bennett	1950–58	University of Munich	46	Anatomy
William A. Sodeman	1958–67	University of Michigan	52	Medicine
William F. Kellow	1967–81	Georgetown School of Medicine	45	Medicine
Leah Lowenstein	1982–83	University of Wisconsin	51	Medicine and Biochemistry
Joseph S. Gonnella	1984–	Harvard University	50	Medicine

It is interesting that the word Dean comes from the Latin *decamus* meaning “one set over ten.” The word evolved through a series of meanings: a head, chief, or commander of a division of ten (1483); head of the chapter in a collegiate or cathedral church (Middle English); the registrar or secretary of the faculty (1524); ten officers in the colleges of Oxford and Cambridge appointed to supervise the conduct and discipline of the junior members (1577); head of ten monks in a monastery (1641); a presbyter invested with jurisdiction over

a division of an archdeaconry (1647); the president of a faculty or department of study in a university; or the president, chief, or senior member of any body.

Typically, a Dean is the administrative head of a college and reports directly, or through a Vice President, to the President, who is responsible in turn to the Board of Trustees, the governing body. Each college of a university usually has its own Dean. Thomas Jefferson University has three Deans, one for Jefferson Medical College, one for

the College of Graduate Studies, and one for the College of Allied Health Sciences. Before Jefferson Medical College became a university in 1969 there was but one Dean who supervised the Medical School and also the early days of the Graduate School. Before 1949 the Chairman of the Board of Trustees was also President, and the Dean functioned under his supervision. In reporting to the President, the Dean was reporting directly to a member of the Board, the Chairman. Since 1949, the President of the Corporation and later the President of the University did not have membership on the Board, and the Dean no longer reported directly to a Board member. Since 1962 the Dean's title has also included the title of Vice President.

The Dean is the chief executive officer of Jefferson Medical College and has the responsibility for developing and managing the administrative officers, academic programs, and research in this college. He or she should be a competent supervisor who by training, experience, and personal attributes is qualified and has the authority to interpret and implement high standards in medical education. The Dean should have the respect and support of the faculty, the President, other officials, and the Board of Trustees.

The Dean directly or indirectly supervises or influences the following:

1. Students (recruitment, admission requirements, selection, evaluation, counseling, financial aid, organizations, discipline, academic and nonacademic programs, attitudes and conduct, records, government, publications, societies, services, graduation, health, facilities, and rights and privacy protection);
2. Faculty (recruitment, selection, evaluation, teaching methods, research activities, advancement, compensation, facilities, support, tenure, discipline, and student-faculty relationships);

3. Curriculum (objectives, control, implementation, and evaluation);
4. Research (facilities, support, and evaluation);
5. Budget (sources, distribution, and adequacy of finances);
6. Facilities (adequacy, maintenance, expansion, and utilization);
7. Continuing Medical Education (objectives, implementation, sponsorship, control, policies, and funding);
8. Graduate Medical Education (selection of house staff, teaching by house staff, program, and evaluation);
9. Alumni (supplying information, speakers at meetings, accessibility, and maintenance of good relationships); and
10. Affiliated Hospitals (teaching and program, evaluation, student assignments, and affiliation agreements).

The Deanship is thus a position of power, but with accountability.

The increasing responsibility and complexity of the Dean's Office is illustrated by the financial activities for the period 1961-1986. (Table 49-2).

Biographical data relative to the first 17 Deans of Jefferson (Rhees through Perkins) are located in the Office of the Dean. The remaining five Deans (Bennett through Gonnella) were personally known by the present author who worked with each one in the Dean's Office. Their biographies include his own observations and reaction.

Table 49-2 Jefferson Medical College Financial Activity for Fiscal Years 1961-1986

<i>Fiscal Year</i>	<i>Medical College Operation</i>	<i>Sponsored Programs</i>	<i>Medical Practice</i>	<i>Total</i>
1960/61	\$ 2,807,332	\$ 663,709	\$ -0-	= \$ 3,471,041
1965/66	4,064,138	3,897,621	-0-	= \$ 7,961,759
1970/71	8,801,904	7,391,170	320,000	= \$16,513,074
1975/76	15,009,582	10,648,334	3,024,993	= \$28,682,909
1980/81	20,942,686	10,863,324	9,051,202	= \$40,857,212
1985/86	33,283,688	13,358,947	23,724,932	= \$70,367,567

additional help was necessary to carry the burden. By the year 1987, there were two Senior Associate Deans and four Associate Deans (a fifth Associate Dean recently died) aiding the Dean in his heavy and diverse responsibilities. Supporting the office functions are a long procession of secretaries, clerks, financial aid officers, business managers, registrars, librarians, supervisors of facilities and space planning, and directors of sponsored programs, development, and alumni affairs.

The following list contains only the names of the Assistants to the Dean, Assistant Deans, and Associate Deans arranged in the order of their appearance on the scene.

In late 1824, the same year as its founding, Jefferson Medical College had its first Dean, but it was not until more than 100 years later, in 1931, that the office of Assistant Dean was created. The varied activities of the Dean's Office increased in number and complexity as the years went by, and

Table 49-3 Associates of the Dean

<i>Dean's Assistant</i>	<i>Faculty Rank</i>	<i>Dean's Office Titles</i>	<i>Dates</i>	<i>Deans</i>
Joseph O. Crider, M.D.	Professor of Physiology	Assistant Dean	1931-49	Patterson, Mohler, Perkins
W. Paul Havens, M.D.	Associate Professor of Preventive Medicine	Assistant to the Dean	1949-50	Perkins
James R. Martin, M.D.	Professor of Orthopaedic Surgery	Associate Dean	1951-56	Bennett
Robert Bruce Nyc, M.D.	Assistant Professor of Medicine	Assistant Dean	1951-60	Bennett,
Samuel S. Conly, Jr., M.D.	Associate Professor of Physiology	Associate Dean	1960-66	Sodeman
		Assistant to the Dean	1956-60	Bennett, Sodeman
		Assistant Dean	1960-65	Sodeman
		Associate Dean	1965-67	Sodeman, Kellow
		Associate Dean and Director of Admissions	1967-82	Kellow, Lowenstein
Robert P. Gilbert, M.D.	Associate Professor of Medicine	Associate Dean	1965-70	Sodeman,
		Associate Dean and Director of Extramural Programs	1970-72	Kellow
John H. Killough, Ph.D., M.D.	Associate Professor of Medicine	Assistant Dean for Continuing Ed.	1965-68	Sodeman,
		Associate Dean for Continuing Ed.	1968-70	Kellow
		Associate Dean and Director of Cont. Ed.	1970-77	
		Associate Dean and Director of Affiliation Programs and Continuing Education	1977-81	Kellow
Joseph S. Gonnella, M.D.	Professor of Medicine	Assistant Dean	1967-68	Kellow
		Associate Dean	1968-70	
		Associate Dean and Director of Academic Programs	1970-83	Kellow,
		Acting Dean, Dean for Educational Programs and	1983-84	Lowenstein

Table 49-3 Associates of the Dean (continued)

<i>Dean's Assistant</i>	<i>Faculty Rank</i>	<i>Dean's Office Titles</i>	<i>Dates</i>	<i>Deans</i>
Carl L. Hansen, M.D., Ph.D.	Professor of Radiology	Director of the Center of Research in Medical Education and Health Care Associate Dean and Director of the Regional Therapy and Nuclear Medicine Medical Program	1968–72	Kellow
Robert C. Mackowiak, M.D.	Clinical Professor of Medicine	Assistant Dean and Director of Student Affairs Associate Dean and Director of Student Affairs	1972–75 1975–81	Kellow
James H. Robinson, M.D.	Clinical Professor of Surgery	Associate Dean and Director of Allied Programs and Continuing Education Associate Dean and Director of Minority Affairs	1981–83 1975–81	Kellow, Lowenstein Kellow
Jussi J. Saukkonen, M.D.	Professor of Microbiology	Associate Dean and Director of Student Affairs Dean of Scientific and Faculty Affairs	1981–84 1983–84	Kellow, Lowenstein Gonnella
Benjamin Bachrach, M.D.	Clinical Professor of Surgery	Senior Associate Dean of Scientific and Faculty Affairs Associate Dean for Admissions	1984– 1983–84	Gonnella
Joseph R. Sherwin, Ph.D.	Associate Professor of Physiology	Associate Dean, Admissions	1984–	Gonnella
Robert Blacklow, M.D.	Professor of Medicine	Assistant Dean of Scientific Affairs	1983–84	Gonnella
Carla E. Goepf, M.D.	Clinical Associate Professor of Medicine	Assistant Dean Scientific Affairs	1984–85	Gonnella
Joseph F. Rodgers, M.D.	Clinical Associate Professor of Medicine	Associate Dean, Scientific Affairs	1985–	Gonnella
Clara Callahan, M.D.	Clinical Assistant Professor of Pediatrics	Senior Associate Dean	1984–	Gonnella
George Alexander, M.D.	Assistant Professor of Radiation Therapy and Nuclear Medicine	Associate Dean, Student Affairs, Student Counseling and Career Planning	1984–	Gonnella
Peter Chodoff	Professor of Anesthesiology	Associate Dean, Affiliations and Residency Programs	1984–	Gonnella
James B. Erdmann, Ph.D.	Assistant Professor of Radiation Therapy and Nuclear Medicine	Assistant Dean for Student Affairs	1987–	Gonnella
	Professor of Anesthesiology	Assistant Dean; Director of Education and Research Medicine, Medical Center of Delaware	1987–	Gonnella
		Associate Dean for Administration and Special Projects	1987–	Gonnella

charming gentleman, abounding in Christian charities, in varied information, in biblical and classical lore, and in all the amenities which adorn the domestic and social circle. Had his life been spared to an advanced age, he would have earned an enviable reputation as a teacher and practitioner, if not also as an author."

Benjamin Rush Rhees, M.D.; First Dean (1824–1827)

The first regular meeting of the Jefferson Medical College Faculty was held December 20, 1824, with Dr. Eberle in the Chair and Dr. Rhees as Secretary. On motion, Dr. Rhees was appointed Dean. It may be noted that the office of Dean carried little weight in the early years, and for a time the Deanship could not be held by the same incumbent even for two successive years. Dr. Rhees was Professor of the Institutes of Medicine and Medical Jurisprudence.

Benjamin Rush Rhees (Figure 49-1) was a native of Pennsylvania, born in 1798, and was educated in the University of Pennsylvania. His medical preceptor was Dr. James Rush. For a time Rhees was resident physician to the City Hospital, and later, after a period of foreign travel and study, he settled in practice in Philadelphia, where he also gave private instruction. One of his pupils was Henry D. Smith, the first matriculate of the Jefferson Medical College. In the College, Rhees taught several subjects at various times, as emergency required, until his death. He was a man of varied accomplishments, a careful, conscientious teacher, and a patient student of classical literature and theology, qualities not often found in medical men of those times. His example and influence in early Jefferson Medical College history were beneficial to the institution and to the graduates who left its halls during the period of his Professorship. In speaking of Professor Rhees' qualities as an instructor, Gross said:

"His discourses were always written out at full length, and it was evident that he availed himself freely in their composition of the works of Bostock and Beck, at the time the great standard treatises upon three respective branches of medicine. Although his voice was naturally feeble, it possessed uncommon sweetness and there was an earnestness in his manner and delivery that made him one of the most captivating and agreeable lecturers I ever listened to. Besides, he was a

Dr. Rhees died of tuberculosis in 1831 at age 33.

It was during Rhees' attendance as a student at the University of Pennsylvania that an incident occurred that exerted no ordinary influence upon his future. As early as 1818 an effort had been made to obtain a charter for a new Medical College. The friends of the University, fearing that the attempt, if successful, would be prejudicial to its interests, deemed it proper to organize a counter movement. Among other expedients was the appointment of a committee of the class that



FIG. 49-1. Benjamin Rush Rhees, M.D., First Dean (1824–1827).

reported a series of resolutions strongly adverse to the scheme. A unanimous approval of these resolutions had been anticipated, and the presiding officer was about to put the question, when suddenly and unexpectedly a tremulous voice was heard in the back part of the hall, addressing the chair and requesting to offer a few remarks.

“All eyes were turned in the direction of the speaker, and considerable commotion for a time prevailed. Order being restored, and the speaker, in the meantime having ascended one of the back benches of the amphitheatre, was found to be a gentleman of slender frame, somewhat diminutive in stature, and quite juvenile in appearance. With considerable embarrassment of manner, but with the great force of reasoning, he attacked the positions of the committee, disputed their premises, and in a lucid argument combated their conclusions, and argued the importance and necessity of a second Medical College. This man was Benjamin Rush Rhees.”

John Eberle, M.D.; Second Dean (1827–1828)

Dr. John Eberle (Figure 49-2) was born of German parents in 1788 and was graduated in medicine from the University of Pennsylvania in 1809. He early displayed ability as a writer on political subjects. In 1818 he edited the *Recorder*. Soon afterward he issued *Materia Medica and Therapeutics*, and later, *The Diseases and Physical Education of Children*. He joined McClellan in his School of Medicine, and was his earnest friend and fellow worker for many years. He was a man of learning and filled satisfactorily the important Chair of Theory and Practice when the first faculty was completed. In 1831 he went to Cincinnati, Ohio, and continued his career as a lecturer, but he died in 1838. Dr. Eberle was a factor for good in the early history of the College and helped to lay the foundation for its subsequent prosperity. Dr. Gross, in an address on the first faculty, said that John Eberle was in many respects a remarkable man, that he came from an obscure Pennsylvania family, had no early educational advantages, but that he rose by force of his own native ability, industry, and perseverance to high rank in the profession. His work on *Materia Medica* and his treatise, *The*

Practice of Medicine, were standard productions in their day, and created for him a wide reputation both at home and abroad. The former, soon after its publication, was honored with a German translation and secured for him a membership in the Medical Society of Berlin. Eberle was a devoted student and in the truest sense a “bookworm.” In consequence of his secluded habits, he never enjoyed a large practice, the public foolishly assuming that a man who wrote so many books could not have much time to attend to the sick.

On September 26, 1827, Dr. Eberle was elected Dean and served until 1828, when he was

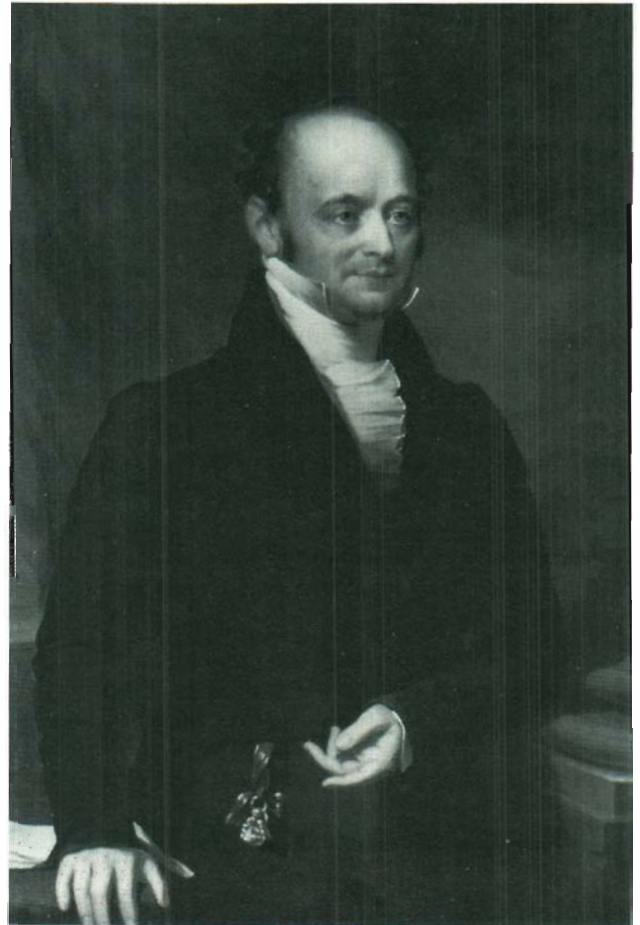


FIG. 49-2. John Eberle, M.D., Second Dean (1827–1828).

Samuel McClellan, M.D.; Fourth Dean (1830–1834)

Samuel McClellan (Figure 49-4) was born in Woodstock, Connecticut, in 1800. The early years of his life were devoted to agricultural pursuits on his father's farm. In 1819, however, he commenced the study of anatomy with Dr. Daniel Lyman, a respectable physician of his native town, with whom he remained one year.

In 1820 he entered the office of his brother, Dr. George McClellan, in Philadelphia, and for the next two years also attended lectures at the Philadelphia Almshouse, the Pennsylvania Hospital, and the University of Pennsylvania.

In March 1823, he graduated in Medicine at Yale College and, intending to locate in South America, he obtained both from the faculty of that College and from the Board of Examiners the

succeeded by Dr. William P.C. Barton. Dr. Eberle, Professor of Medicine, resigned from the faculty in 1830, subsequently to join Dr. Daniel Drake in Cincinnati. His portrait along with that of his wife, Salome, are highly regarded in Jefferson's art collection.

William Paul Crillon Barton, M.D.; Third Dean (1828–1829)

Dr. Barton (Figure 49-3), a Navy surgeon, was born November 17, 1786, into a distinguished family of Philadelphia physicians. He received his A.B. degree from the College of New Jersey (Princeton) in 1805 and his M.D. degree from the University of Pennsylvania in 1808.

Dr. Barton was a man of untiring energy, with a high sense of duty, to whom the Medical Department of the Navy owes some valuable reforms. He was also a writer of ability and a noted botanist. Among his more outstanding writings may be mentioned: *A Treatise Containing a Plan for the Organization and Government of Marine Hospitals* (1814); *Vegetable Materia Medica of the United States* (1818); *Compendium Florae Philadelphicae* (1818); and *A Flora of North America*, with colored plates (1821).

He held the position of Professor of Botany in the University of Pennsylvania from 1816 to 1828 and was Professor of Materia Medica and Botany at Jefferson from 1828 to 1830. Previously, he had also been a member of the Medical Staff of the Philadelphia Hospital from 1821 to 1822.

Dr. Barton was Dean of Jefferson Medical College from 1828 to 1829. In 1830 he was called to active duty in the Navy. There he rapidly advanced in rank to become Chief of the Naval Bureau of Medicine and Surgery in 1842, which position he held until retirement in 1844. Dr. Barton died in Philadelphia, February 28, 1856, and was buried with military honors in East Laurel Hill Cemetery. His life-size bust is displayed in the Army Medical Museum at Washington, D.C.



FIG. 49-3. William P. C. Barton, M.D., Third Dean (1828–1829).

most satisfactory letters as to his qualifications for the practice of his profession.

The next three years of Dr. McClellan's life were spent traveling through Mexico in company with a noted English naturalist. At this time his attention was particularly directed to the diseases of the eye, in the treatment of which he was signally successful. At last, tiring of a foreign climate, he returned to Pennsylvania and settled in the town of Bristol.

In 1828, at the solicitation of his brother, McClellan removed to Philadelphia and became Assistant Demonstrator of Anatomy at Jefferson. In 1829 he was appointed Adjunct Professor of Anatomy, and in January, 1830, Professor of Anatomy. This Chair he held until the close of the session of 1832, when he resigned in favor of Dr. Granville S. Pattison. In March of the same year he was elected to the Chair of Institutes, Medical Jurisprudence, and Midwifery. He held this post until June 24, 1836, at which time the Institutes of Medicine and Medical Jurisprudence was made a

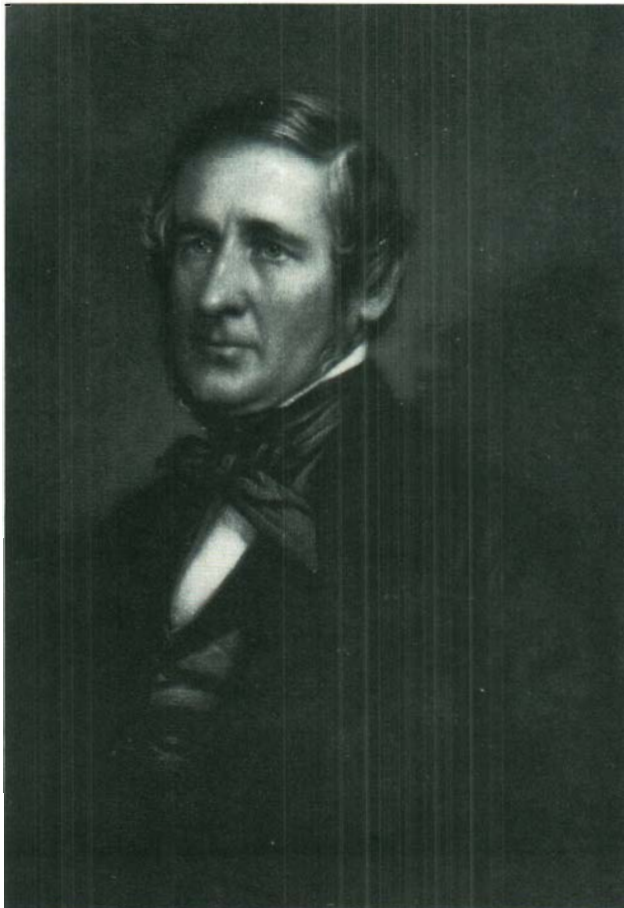


FIG. 49-4. Samuel McClellan, M.D., Fourth Dean (1830-1834).

separate Chair given to Dr. Robley Dunglison. Dr. McClellan served as Dean from 1830 to 1834, a time when reputations depended more upon performance as Professors than as Deans. From mid-June, 1836, until 1839 he held the Chair of Obstetrics and Diseases of Females: developing the foundation of his future reputation in the practice of this branch of his profession. In the latter year, the faculty of Jefferson was dissolved and all the Chairs vacated. Upon the appointment of a new faculty, Dr. McClellan was again elected to the Chair of Obstetrics and Diseases of Women. In September of the same year, however, he resigned.

Dr. Samuel McClellan was a quiet, unassuming man who shrank from rather than sought applause. He was noted among his friends for his remarkable memory. His mind grasped and never forgot the most minute details of his studies. The last 20 years of his life were devoted to private practice, in the discharge of the duties of which he was conscientious and kind, but unyielding. In January, 1854, after a short but painful illness aggravated by excessive application to his studies, he died as he had lived, beloved by all who knew him.

Samuel Colhoun, M.D.; Fifth Dean (1835-1839)

Samuel Colhoun (Figure 49-5) was born in Chambersburg, Pennsylvania, in 1787, and graduated from Princeton in 1804 and from the University of Pennsylvania Medical School in 1808. During his nine years as a member of the Jefferson faculty he was Professor of *Materia Medica* and Medical Jurisprudence and also served as Dean (1835-1839). He was a faithful friend of George McClellan and, after the latter was dismissed, joined him in the third medical school. Colhoun was a bachelor, a learned man and of a genial, generous nature. He died in 1841 at the age of 54.

John Revere, M.D.; Sixth Dean (1839–1840)

Another conspicuous figure in faculty circles was Dr. John Revere (Figure 49-6), who in 1831 was appointed to the Chair of Theory and Practice of Physick. He was born in 1787, graduated from Harvard in 1807, and four years later received his medical degree in Edinburgh. His professional career was begun in Baltimore, from which city he came to Philadelphia and to the Chair of Medicine at Jefferson. He served as Dean for the 1839–1840 term. “Here,” says one writer, “his excellent qualities as a physician and lecturer added greatly to the strength of the Faculty during his ten years of service. He and Dr. Pattison both resigned in

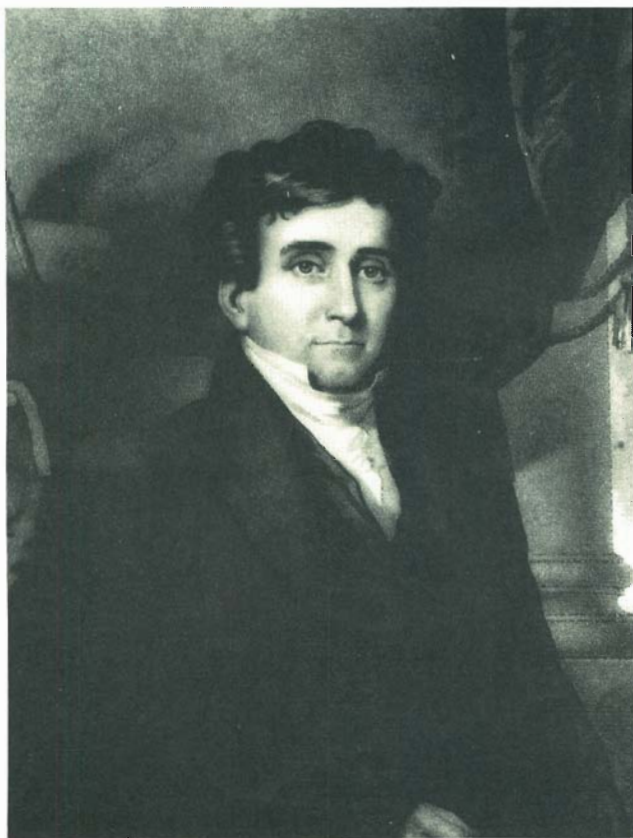


FIG. 49-5. Samuel Colhoun, M.D., Fifth Dean (1835–1839).

1841 to take Chairs in the University of New York.”

Dr. Revere died in New York at the age of 60. He was the son of the Revolutionary War patriot, Paul Revere, and was the paternal grand-uncle of Grace Linzee Revere. Grace Revere married Samuel W. Gross (1876) and after his death became the wife of Dr. William Osler (1892). She endowed a Professorship in Surgery (1929) at Jefferson in honor of her first husband for his interest in tumors.

Robert M. Huston, M.D.; Seventh Dean (1841–1854)

Dr. Huston (Figure 49-7) was a Virginian, born in 1794. He served as Assistant Surgeon during the War of 1812 and afterward settled in Philadelphia, where he practiced medicine many years before he identified himself with the Jefferson Medical College. In 1838 he was appointed to the Chair of Obstetrics, and in 1841, upon the reorganization of the faculty, he was retained and assigned to the Chair of Materia Medica and Therapeutics. In the

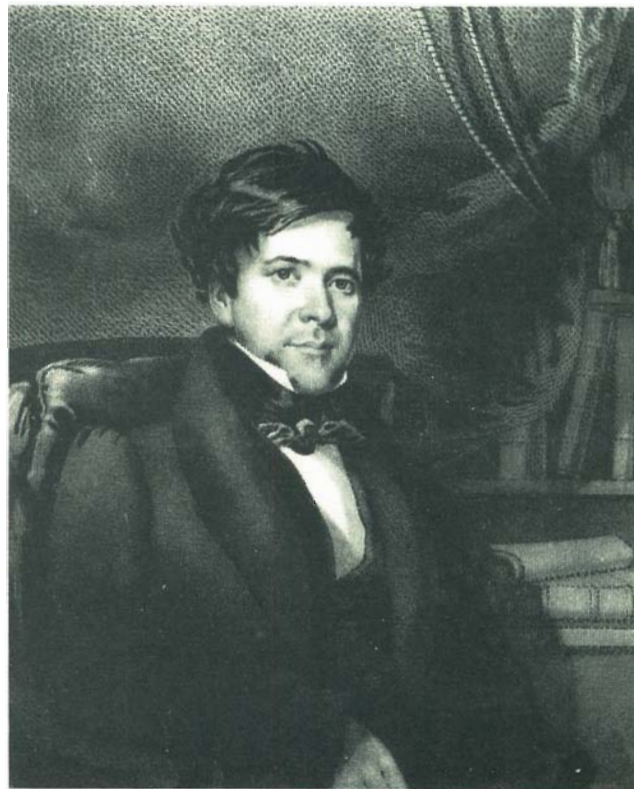


FIG. 49-6. John Revere, M.D., Sixth Dean (1839–1840).

same year he was made Dean of the Faculty and served in that capacity until 1854. In the next year he resigned his Chair and was made Emeritus.

Dr. Huston's lectures were delivered from manuscript and were marked by honesty and faithfulness in their teaching. He dwelt much upon therapeutics, a subject more to his taste than obstetrics, which he formerly taught. In whatever capacity he was called to serve, he always acquitted himself well and to the credit of the school. In addition to his qualifications as a teacher, Dr. Huston possessed excellent business ability. This was shown during his incumbency of the Deanship, where his services contributed far more than ever was publicly known to the advancement of the College and the placement of its affairs upon a solid financial basis.

Upon Dr. Huston devolved the double duty of attending to the business affairs of the College, such as usually were put upon the Dean, and also the active work of an important Chair. He was a constant toiler, with an abundance of nervous energy, yet his manifold duties never appeared to worry him. One of his best traits was his perfect

simplicity, a quality that showed itself in his lectures, his everyday conversation, his personal habits, and his methods of business. Dr. Huston died in 1864, and the loss of his counsel was deeply felt in College and professional circles.

Robley Dunglison, M.D., LL.D.; Eighth Dean (1854–1868)

Robley Dunglison's career at Jefferson began with his appointment as Professor of the Institutes of Medicine in 1836. In 1854 he succeeded Dr. Huston as Dean and served in that additional capacity until 1868.

Dr. Dunglison (Figure 49-8) was born January

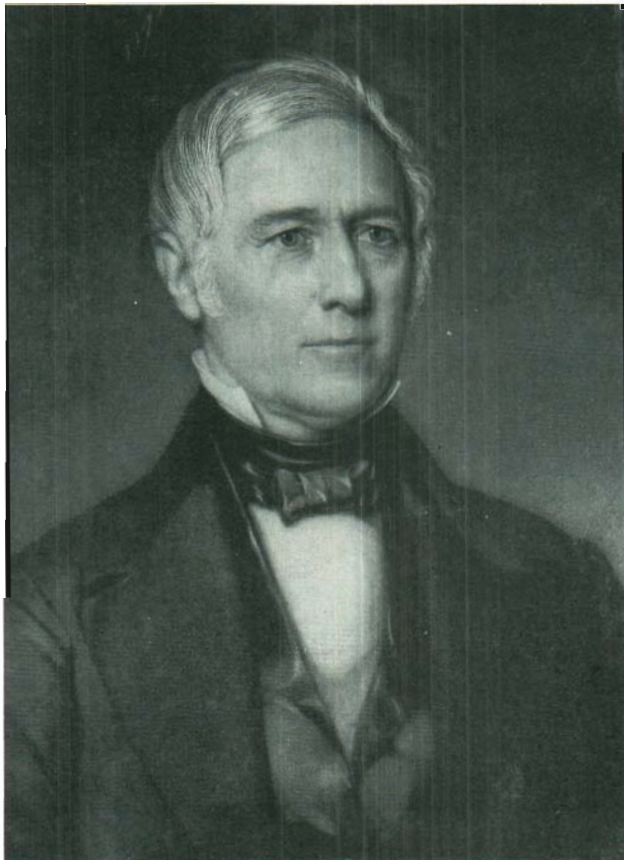


FIG. 49-7. Robert M. Huston, M.D., Seventh Dean (1841–1854).

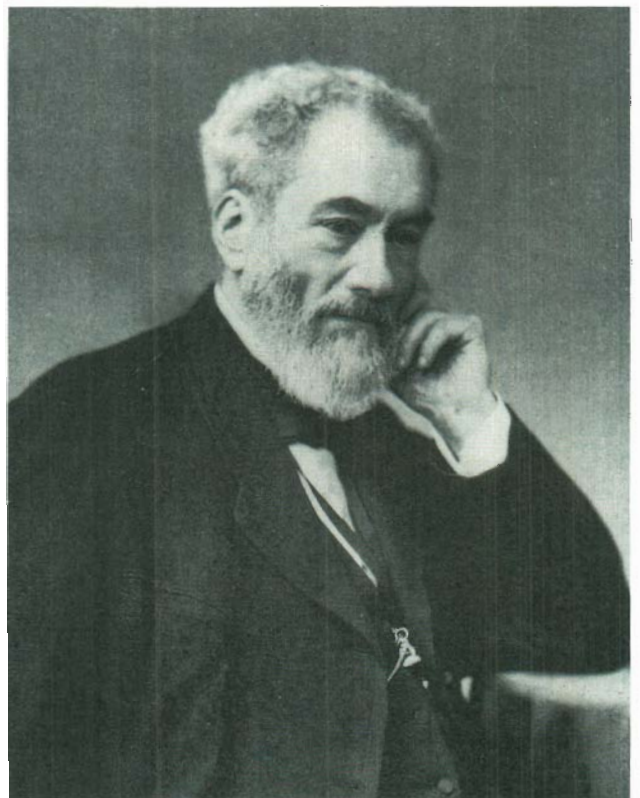


FIG. 49-8. Robley Dunglison, M.D., LL.D., Eighth Dean (1854–1868).

4, 1798, at Keswick, in Cumberland, the beautiful lake country in the north of England. In his seventeenth year he began the study of medicine in Cumberland, and afterward went to London. He subsequently attended one course of lectures at the University of Edinburgh, visited Paris, and, having returned to London, passed his examinations at the Royal College of Surgeons and at Apothecaries Hall. He began practice in London in 1819 and obtained his medical degree from Erlangen, Germany, in 1824.

At first Dr. Dunglison intended to restrict himself to medical and obstetrical practice, especially the latter, and had announced a course of lectures on midwifery for the fall of 1824. He had also begun his career as an author, and was about to associate himself with Dr. Copeland, writer of a well-known dictionary. Just at this time he received from ex-President Jefferson, Rector of the University of Virginia, the offer of a comprehensive Chair in that institution. He accepted the position and remained nine years at the University, winning fame as a lecturer and building up his reputation as an author and man of letters. He became the personal physician to Thomas Jefferson and attended him at death.

In 1833 Dr. Dunglison became Professor of Therapeutics, Materia Medica, Hygiene, and Medical Jurisprudence in the University of Maryland. In June 1836 he was elected to the Chair of Institutes of Medicine at Jefferson, which he filled until the early part of 1868. Thus, for more than a third of a century he was a Professor at this school. In 1854, after an absence of 30 years, he revisited England. Late in the same year he returned to America, at the urging of Dean Huston who was relinquishing his Deanship.

Dr. Dunglison was an extraordinary man, a man of learning in the highest sense of the term, familiar alike with the classics of medicine and with the medical literature of his day. No professional topic escaped his keen observation. He was cognizant of all theories but was not carried away by any of them. The bent of his mind was eminently judicial. He listened patiently to all arguments, sifted all evidence, rejected the

false and held fast to the true, and his decision, once reached, was in the end almost always correct. He was not an enthusiast nor an ardent investigator in the modern sense of the term. He preferred rather to analyze the research of others and to base his conclusions upon accumulated evidence.

As a writer on medical subjects, Dr. Dunglison early won repute with the profession, but his literary efforts carried him into fields other than those of purely medical character. His *Practice of Medicine, Therapeutics, and Materia Medica; New Remedies; Physiology*; and also his *Medical Dictionary*, were for many years an enduring monument to his professional and literary genius. His best works, the textbooks and the dictionary, passed through many editions, and some of them were found on the tables of nearly every practitioner in the land. His qualities as a writer gave him a stronghold on the medical profession, and it is not surprising that medical students pursuing their preliminary courses in physicians' offices should seek to place themselves under the personal instruction of a man of such distinguished ability.

Dunglison's appreciation of character was remarkable. His judgment of the moral attributes of men was rarely at fault. As a friend to young men, no one could be more true, and no advice was more to be depended upon than his. His knowledge of the world and of the motives that impelled men's actions was accurate. In the expression of his opinion he was cautious and guarded, qualities he endeavored to inculcate in others.

Dr. Dunglison was a fluent speaker. His language was lucid and elegant. He never wanted for a word, and every word was well chosen. His diction was Johnsonian, and his lectures, always extemporaneous, never failed to command the attention of his class. He stood before the world as an exemplar of medical science, and the honors heaped upon him from so many lands in memberships in more than 100 scientific bodies testified to the esteem in which he was universally held.

In 1868, after 32 years of active service, Dr. Dunglison was compelled by failing health to resign the Chair of Institutes of Medicine (1836–1868), and also the important office of Dean (1854–1868). His colleagues were reluctant to part with their faithful co-worker, whom they regarded as the balance wheel of the College and whose counsel and influence always were for its best

interests; but the worthy senior member of the faculty was now broken in health and bowed with infirmities of age, having passed the allotted three score and ten years. He had earned retirement, but his continued association with faculty work was desirable, hence his appointment as Emeritus Professor of Institutes of Medicine and Medical Jurisprudence. His death, in April, 1869, was a serious loss not only to Jefferson but to the great community of scholars and to the medical profession at large.

Samuel H. Dickson, M.D.; Ninth Dean (1868–1869)

Samuel H. Dickson (Figure 49-9) was born in Charleston, South Carolina, in 1798, and was graduated from Yale in 1814, at the age of 16. In 1819 he was graduated from the Medical Department of the University of Pennsylvania, and

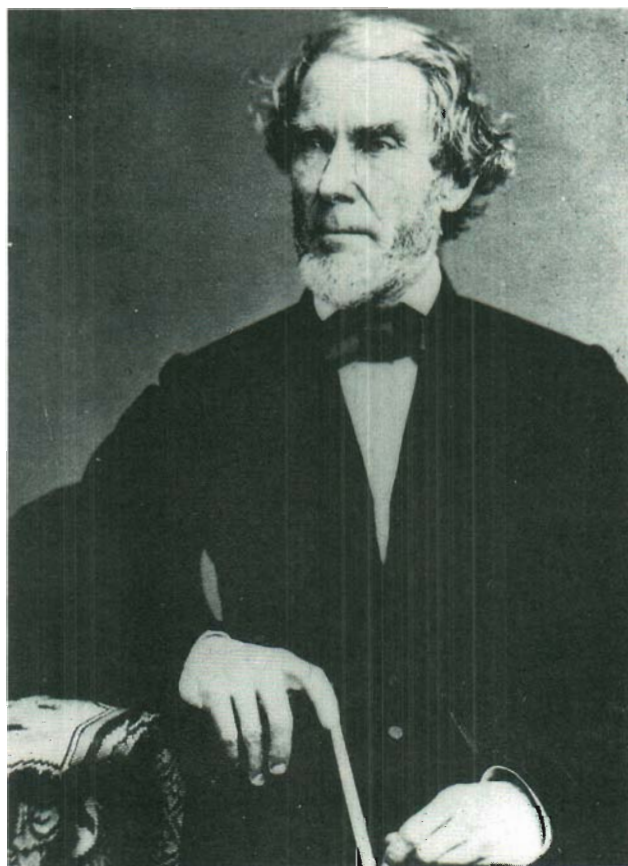


FIG. 49-9. Samuel H. Dickson, M.D., Ninth Dean (1868–1869).

five years later (1824) joined with Ramsay and Frost in founding the Medical College of South Carolina, he taking the Chair of Institutes and Practice. After 22 years of experience and faithful service in this institution, Dickson was called in 1847 to the University of New York to succeed John Revere. In 1850 he returned to his former position and remained there eight years more. The degree of LL.D. was conferred by the University of New York in appreciation of his splendid character and service while a member of the faculty of that institution.

In 1858 Professor Dickson was called to the Chair of Practice of Medicine at Jefferson. He spent the remaining 14 years of his life in that position and served as Dean from 1868 to 1869.

Both Dickson and Thomas D. Mitchell were well advanced in years when they accepted their Chairs at Jefferson. Dickson's office during this period must be associated with his successor, Jacob Mendes DaCosta, who had been for several years an influential teacher in the school, and who during the four closing years of this period (1872–1876) gave abundant evidence of the exceptional ability that always marked his teachings.

Benjamin Howard Rand, M.D.; Tenth Dean (1869–1873)

When Professor of Chemistry Dr. Franklin Bache died it was with considerable satisfaction that the faculty announced the appointment of B. Howard Rand (Figure 49-10), a native Philadelphian. Bache's successor would have to be a teacher of unquestioned strength, for he was to replace one of the model faculty of 1841. Rand had been tried and proved. Born in 1827, he had studied medicine under Huston, and for two years as a Jefferson student he had been Clinical Assistant to Mütter and Pancoast. Following graduation in 1848, Rand was connected with the Academy of Natural Sciences, at one time was its Secretary, and also was Lecturer on Chemistry at the Franklin

Institute and at the Philadelphia College of Medicine until that institution passed out of existence at the outbreak of the Civil War. Rand's *Medical Chemistry*, published in 1865, was for several years a popular reference and textbook. Rand was elected in 1864 and was one of the faculty for 13 years, until 1877, when ill health compelled him to resign. On the basis of his business ability he was appointed Dean of the Faculty and served creditably in that capacity four years (1869–1873). There were many changes during this time, and responsible duties devolved to the Dean. He died in 1883 at the age of 56. His portrait was painted by Thomas Eakins in 1874 and remains one of Jefferson's art treasures.

John Barclay Biddle, M.D.; Eleventh Dean (1873–1879)

John Barclay Biddle (Figure 49–11) was born in Philadelphia in 1815. He received an excellent elementary training and classical education, having been graduated from St. Mary's College, Baltimore. He took up the study of law, but changed his determination and became a student of medicine under Nathaniel Chapman. He was graduated from the University of Pennsylvania School of Medicine in 1836. He then spent a year or more in Europe, chiefly in France, pursuing his medical studies. Upon his return he began his professional career in Philadelphia. In 1838, with Dr. Meredith Clymer, he founded *The Medical Examiner*, an early, popular, and very successful medical publication. In 1846 he joined with Rogers, Van Wick, Tucker, Clymer, and Leidy to found the Franklin Medical College. There he took the Chair of Materia Medica, which he held for a few years until the institution closed its doors.

Biddle was a graceful and forceful writer, especially on medical topics, but he excelled as a teacher. His address was pleasing, his language clear and pertinent. His monographs won him

popularity with the profession, and when he issued *Biddle's Materia Medica* the work was regarded as authoritative. It was published in 1852 and was a reference book for several years. His success as a teacher and writer made Biddle the natural successor to Thomas D. Mitchell (1865). He held the Chair of Materia Medica for 13 years until failing health made him retire. During the last six years of that period (1873–1879) he served as Dean and was one of the most earnest supporters of the first Jefferson Hospital, which was erected during his time (1877). Dr. Biddle died in January 1879 at 64 years of age.

Ellerslie Wallace, M.D.; Twelfth Dean (1879–1883)

Ellerslie Wallace (Figure 49–12) was a native of Philadelphia, born in 1813, and was of Scotch



FIG. 49-10. Benjamin Howard Rand, M.D., Tenth Dean (1869–1873).

ancestry. He was educated at Bristol for civil engineering but was attracted to medicine by his brother, Dr. Joshua Wallace, then Demonstrator of Anatomy at Jefferson. He matriculated there in 1841 and received his degree in 1843. His professional career was begun in Philadelphia, where he was soon appointed Resident Physician at the Pennsylvania Hospital.

In 1846 Wallace resigned his position at the Pennsylvania Hospital in order to become Demonstrator of Anatomy at Jefferson. For the next 16 years he was an efficient teacher. When it was found that Professor Keating would not be able to perform the arduous duties of the Chair of Obstetrics, Wallace was called upon to take his place for the remainder of the session, was then appointed to succeed him, and for more than 20 years afterward was recognized as one of the leaders in the faculty. With his ability as a teacher he combined excellent business qualities, as was shown by his four years' incumbency in the office of Dean from 1879 to 1883.

After the close of the session of 1882–1883, Professor Wallace was forced by failing health to

resign the Chair of Obstetrics and the Deanship, but he had no inclination to sever all connections with the College. He was given the honorary title of Professor Emeritus, which he held for two sessions. Death ended his useful career in 1885.

Roberts Bartholow, M.D.; Thirteenth Dean (1883–1887)

A graduate in arts from Calvert College, Roberts Bartholow (Figure 49–13) received his degree in medicine from the University of Maryland in 1852 in his twenty-first year. From 1857 to 1864 he was



FIG. 49-11. John Barclay Biddle, M.D., Eleventh Dean (1873–1879).



FIG. 49-12. Ellerslie Wallace, M.D., Twelfth Dean (1879–1883).

active member of leading American professional bodies. His portrait is in the Jefferson art collection.

a surgeon in the United States Army and resigned in the latter year to take the Chair of Theory and Practice of Medicine, and later the Deanship, in the Ohio Medical College at Cincinnati. In 1879 he resigned to become Professor of Materia Medica and Therapeutics at Jefferson. He was chosen Dean in 1883. In 1887 he resigned that position to resume his work as a Professor, in which he continued until he was made Emeritus in 1893. Bartholow was the author of several medical works; among the best known were *Hypodermic Medication*, *Treatise on Therapeutics and Materia Medica*, and *Practice of Medicine*, the last of which was translated into Japanese. He was a member of the Royal Medical Society of Edinburgh and the Société Médicale Pratique of Paris, as well as an

James W. Holland, M.D.; Fourteenth Dean (1887–1916)

Dr. James W. Holland (Figure 49–14) was born in Louisville, Kentucky, April 24, 1849, the son of Dr. Robert and Elizabeth (Turner) Holland. Dr. Holland received his collegiate education at the University of Louisville, from which he was graduated with the B.A. degree in 1865 and M.A. in 1868. He became acquainted with Professor J. Lawrence Smith, one of the most brilliant and distinguished of American chemists. Professor Smith had studied abroad under Orfila, Dumas, Desprez, Becquerel, Dufrenoy, and Liebig. The benefits derived from such an acquaintance were reflected in his accomplishments as a teacher of chemistry.

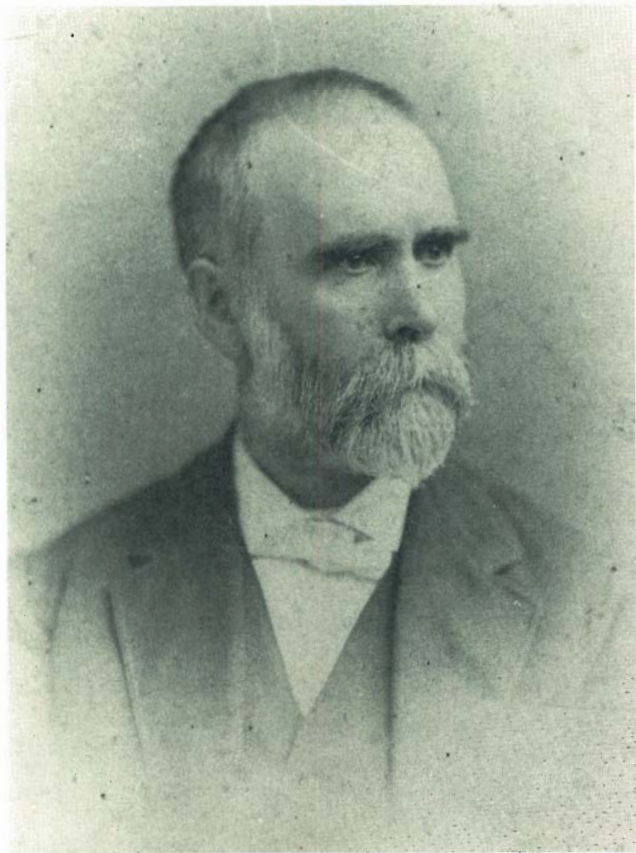


FIG. 49-13. Roberts Bartholow, M.D., Thirteenth Dean (1883–1887).

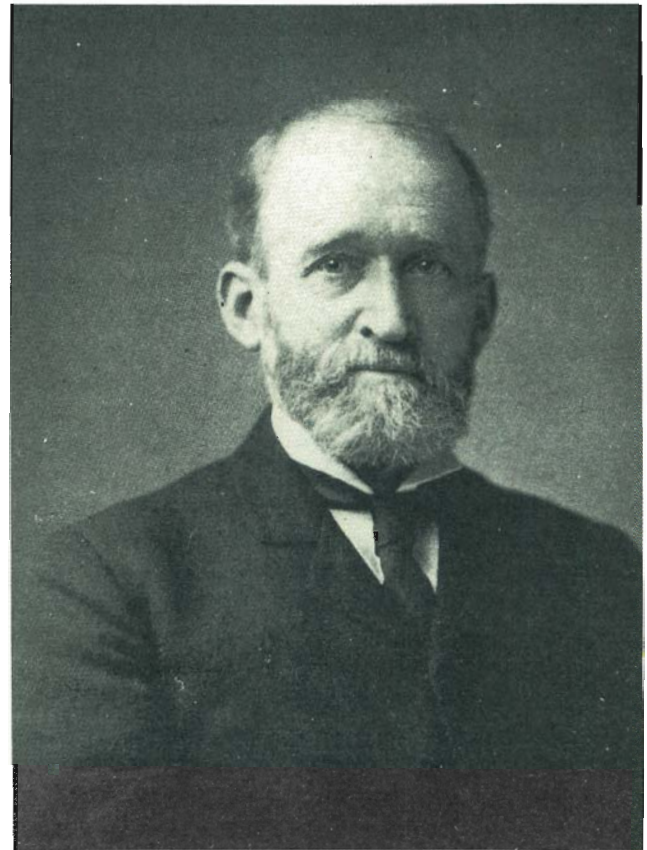


FIG. 49-14. James W. Holland, M.D., Fourteenth Dean (1887–1916).

Dr. Holland received his medical training at Jefferson. Upon graduation in 1868 he returned to Louisville and engaged in practice. In 1872 he was elected to the Chair of Practice of Medicine and Clinical Medicine, University of Louisville, where he served for 13 years. In 1885 he was called to the Chair of Medical Chemistry and Toxicology at Jefferson. He was chosen Dean of the Faculty in 1887, in which capacity he served for 29 years until 1916. After a service of 27 years as Professor of Chemistry, he resigned and was elected Emeritus (1912). In 1913 Holland was honored with the Sc.D. degree.

His course of lectures was remarkable for the freshness and thoroughness of his chemical knowledge. He appeared fully abreast and even in advance of the general status of the science. He spoke as a master. His experiments and illustrations were often novel, spectacular, and generally successful, owing to the fact that every experiment of any moment was tried out immediately preceding its presentation. Attention was always directed toward the practical side of his subject and its relation to medicine.

His constant admonition to his associates in his Department was to teach “chemistry as applied to medicine,” and not as a chemical profession. His enunciation was clear, his words well chosen and forcibly expressed, and his presentation such that he could easily and at all times hold the attention of his classes. His lectures on toxicology were fascinating. In them was reflected the advantage of his acquaintance with Professor Smith. Orfila, who was Professor Smith’s master in toxicology, was the foremost authority on toxicology of his day. Temperamentally, Dr. Holland was tranquil, and during most trying moments he gave no outward evidence of displeasure. He had many rare preserved specimens and toxicological preparations, some of which were 50 years old.

During his incumbency he had the pleasure of directing the development of the teaching in the chemical laboratory from a most elementary to a very respected clinical and physiological course. At the end of his final lecture in chemistry, the Class of 1915 presented him with a token of remembrance in the form of a magnificent facsimile of the original “Victoire de Pompei,” symbolic of the “Crowning Glory” of a long and useful career.

Dr. Holland served as editor of the *Medical News*. He was a member of the College of Physicians of Philadelphia, the American Philosophical Society, and the Council of

Medicine of the American Medical Association from 1907 to 1916.

Among his writings were the following: *Diet for the Sick*; *Common Poisons and the Urine*; *Inorganic Poisons*; *Medical Chemistry and Toxicology*; and many papers and contributions on medical subjects. A portrait of Holland hangs in the Dean’s office suite, but the famous one by Thomas Eakins, called *The Roll Call* (1899), belongs to the Boston Museum of Art. A copy of the latter hangs in Jefferson’s Eakin Gallery.

Ross V. Patterson, M.D., Sc.D., LL.D.; Fifteenth Dean (1916–1938)

Dr. Ross Vernet Patterson (Figure 49–15), Dean of Jefferson and Assistant Professor of Medicine, was born in New Orleans, Louisiana, October 5, 1877. His mother was Marguerite Jeanne Vernet, whose maternal ancestry was Scottish and paternal inheritance was French, the Vernet family having included artists and soldiers who sought refuge in Louisiana during the French Revolution. Patterson’s father was John Harrison Patterson of Illinois, whose lineage went back to the Colonial period of American history. Ross Patterson’s childhood and early life were spent in the South and West (Louisiana, Illinois, Missouri, Kansas, and Colorado). On the Western plains, as a small boy, he saw the Wild West disappear: the cattle trails fade, the cowboys ride away, and the buffalo vanish. Early in life he had decided to study medicine—a great-grandfather had practiced in New York City. His preliminary education was obtained in various schools—common school courses in Colorado Springs, college preparatory work begun in Central College, Missouri, and completed in Chenet’s Institute, New Orleans, Louisiana. He then entered Washington University in St. Louis and completed two years, after which he matriculated at Jefferson and graduated as Class

Orator in 1904. During his preparatory studies he played on the football and tennis teams and was captain of the baseball team.

Two years following graduation were spent in residence at the Philadelphia Hospital, in which he served as Intern, Assistant Physician to the Department for the Insane, and Assistant Chief Resident Physician.

Dr. Patterson was appointed Subdean at Jefferson in 1906 and Dean in 1916, serving until his death in 1938. He taught in the Department of Medicine from 1906 to 1927, and was Physician in Charge of the Department of Electrocardiography.

In May 1934 he was appointed Sutherland M. Prevost Professor of Therapeutics.

Dr. Patterson served as President of the Medical Society of the State of Pennsylvania (1930–1931) and President of the Association of American Medical Colleges (1933–1935). Although the Presidency of the Jefferson Alumni Association is ordinarily for a term of one year, Dr. Patterson served for three (1923–1925). His portrait was presented to the College by Alumni in 1930. He was awarded Sc.D. degrees by LaSalle College (1931) and Colgate University (1932), and LL.D. degrees were bestowed by Ursinus College (1935) and Wake Forest College (1937). A strong, often uncompromising administrator, his term as Dean covered World War I, the Great Depression, and a period of great change in the teaching and practice of medicine. He left his estate to Jefferson to establish Ross V. Patterson Fellowships in Research.



FIG. 49-15. Ross V. Patterson, M.D., Sc.D., LL.D., Fifteenth Dean (1916–1938).

Henry Keller Mohler, M.D., Sc.D.; Sixteenth Dean (1938–1941)

Henry Keller Mohler (Figure 49-16) was born April 2, 1887, in Ephrata, Pennsylvania. He attended the public schools and was graduated from the Ephrata High School in 1904. That same year he entered the Philadelphia College of Pharmacy, from which he received a Pharm.D. degree in 1907 and stood as first man in his class. Next he entered Jefferson and received his degree in 1912. He was President of his senior class and was voted its “most popular man.”

After serving his internship in Jefferson Hospital, Dr. Mohler was placed in charge of the Laboratory of Clinical Medicine until 1914 and while still on that post was named Instructor in Medicine. He rose through the ranks to Clinical Professor of Medicine in 1936. In June 1938 he was elevated to the position of Sutherland M. Prevost Professor of Therapeutics. In 1939 he served as President of Jefferson Alumni Association. An Honorary degree, Doctor of Science, was conferred on him by LaSalle College.

Dr. Mohler served as Medical Director of the Jefferson Hospital from 1914 to 1938, during which time he was in immediate contact with the affairs of both College and Hospital. In 1918 he served as

Lieutenant-Colonel in World War I in France with U.S. Base Hospital No. 38. He returned in 1919.

He was elected Dean of Jefferson Medical College on August 1, 1938, and served in this capacity until his death on May 16, 1941.

William Harvey Perkins, M.D., Sc.D., LL.D.; Seventeenth Dean (1941–1950)

Dean Perkins (Figure 49-17) was born in Philadelphia on October 21, 1894. He was a graduate of Central High School and received his M.D. from Jefferson in 1917. After an internship in Jefferson Medical College Hospital, he went to France in 1918 as First Lieutenant, Medical Corps, U.S. Army, Base Hospital No. 120, Tours, France.

Dr. Perkins held a Fellowship in the Rockefeller Foundation (1924–1926), and went to Siam (now Thailand) in 1926 as Professor of Medicine at Chulalongkarana University, Bangkok. At the same time he was physician to the Siamese Government and in 1930 received the Order of the White Elephant from the King of Siam. He then returned to the United States and was appointed Instructor in Medicine at Tulane University. From

1931 he held the Chair of Preventive Medicine at Tulane.

Perkins' specialty was Preventive Medicine, and he held the following offices: President, Tuberculosis and Public Health Association of Louisiana; Chairman, New Orleans Mental Hygiene Association; President, Louisiana Mental Hygiene Association; Chairman, Health Division of the Council of Social Agencies of New Orleans; Representative Director of the National Tuberculosis Association; Chairman, Social Hygiene Section, Louisiana Parent Teachers Association; and Past Vice-Chairman of the Section of Public Health of the American Medical Association (1933). He was a member of the New Orleans Academy of Sciences, the Synthesis Club (philosophical), and Theta Kappa Psi and Alpha



FIG. 49-16. Henry K. Mohler, M.D., Sc.D., Sixteenth Dean (1938–1941).



FIG. 49-17. William Harvey Perkins, M.D., Sc.D., LL.D., Seventeenth Dean (1941–1950).

Omega Alpha Fraternities. He came to Jefferson as Dean and Professor of Preventive Medicine in September, 1941, serving during the difficult years of World War II. Due to illness, he retired as Dean on November 6, 1950.

Dr. Perkins authored numerous papers on public health problems and preventive medicine, and a book, published in 1938, entitled *Cause and Prevention of Disease*. He served as President of the Alumni Association in 1945. His Class of 1917 presented his portrait to the College in 1951. He was awarded the Sc.D. degree from Franklin and Marshall College and the LL.D. degree from Dickinson College. One of the rooms in the Kellow Conference Area (on the second floor of the College Building) was named in his honor in 1977.

George Allen Bennett, M.D., Sc.D., LL.D.; Eighteenth Dean (1950–1958)

There is uniform agreement among the students instructed by George Allen Bennett (Figure 49–18) as teacher of anatomy in the amphitheaters and dissecting room of the Daniel Baugh Institute of Anatomy at Eleventh and Clinton Streets that this Professor was among the best teachers they had ever had. Not only was he effective in making the material clearly understandable, but his booming voice carried to all corners of the largest room. He was perceived as being committed, dedicated, very bright, well prepared, insistent, courteous, and a strong motivator. His phenomenal memory is cited frequently and ranks highly among anecdotes shared at Jefferson alumni reunions. He memorized the names, schools, and selected personal history of each member of the entering class in association with their pictures supplied with the entrance papers. He never referred to notes, and when he called on a student he addressed him by name and could even remember

where he had sat the previous day. He would remember names years later when graduates returned for visits. When he became Dean, Jefferson lost one of its finest teachers. Dr. Bennett's educational background was unusual for his time, reflecting his own avid search for knowledge and his later skill in inspiring students. A Phi Beta Kappa graduate of Wabash College in Indiana, a Ben Hur Scholarship took him to the University of Athens, Greece (1923), and then to the University of Zürich, where he studied ancient history and archaeology. This was followed by a five-year study of philosophy and medicine at the University of Munich. In 1928 he received the rank of Artzt (physician). After fellowships at Baylor University College of Medicine and Harvard University, he returned to Munich for six more months in anatomic research in 1929. In 1930 he was appointed Professor of Histology at Georgetown Medical School, also serving for a time as Acting Head of the Department of Biology at Georgetown University. In 1934 he returned to Munich, where he conducted research



FIG. 49-18. George Allen Bennett, M.D., Sc.D., LL.D., Eighteenth Dean (1950–1958).

and multiple studies in dermatology, anatomy, and thoracic surgery. Lifelong interest in the musculature of the tongue followed. His thesis in 1937 resulted in the award of the degree of Doctor of Medicine *summa cum laude* from the University of Munich. He joined the Department of Anatomy at Jefferson in 1939.

Dr. Bennett quickly demonstrated his superb teaching skills and was promoted in rank until he succeeded Dr. J. Parsons Schaeffer as Chairman of Anatomy in 1948. The students dedicated their yearbook to him in 1944. For 15 years he taught applied and surgical anatomy to the medical officers of the Army and Navy, for which he received the “Consultant’s Certificate of Merit” from the Armed Forces of the United States. He undertook many research projects including muscle-shoulder joint studies, for which he received (with Drs. Anthony F. DePalma and Gerald E. Callery) the gold medal of the American Academy of Orthopaedic Surgery in 1948.

Succeeding Dr. Perkins as Dean in 1950, Doctor Bennett displayed exceptional competence, sagacity, and determination. In recognition of his academic stature and accomplishments, he received honors and degrees, including the Doctor of Science from St. Joseph’s College (1951), Doctor of Laws from Temple University (1951), and Doctor of Science from Dickinson College (1955) and Grove City College (1956). A bronze medal, “The Order of Carlos Finlay” was presented to him by the government of Cuba in recognition and appreciation of his role in the Centennial celebrations (1955) of the graduation of Carlos Finlay from Jefferson. The Wabash College Alumni Award of Merit was given to Doctor Bennett in 1951. Through his premature death, however, he failed to receive an honorary degree that he would have cherished—this was scheduled for presentation on June 11, 1958, by Wabash College, but he died February 27, 1958, at age 53 while attending the meeting of the Council on Medical Education and Licensure in Chicago. His portrait was presented to the College by the Board of Trustees in 1959.

William Anthony Sodeman, M.D., Sc.D., L.H.D.; Nineteenth Dean (1958–1967)

Dr. William A. Sodeman (Figure 49–19) came to Jefferson as Chairman of the Department of

Medicine in 1957 but served only one year before succeeding Dr. Bennett as Dean. He brought exceptional talents to his new tasks, and his accomplishments during the next nine years reflected his breadth of concept, medical knowledge, analytical skills, and ability to arrive at balanced decisions quickly. He had been acquainted with Dr. Perkins at Tulane and succeeded him as Professor of Preventive Medicine there in 1941.

Dr. Sodeman was a native of Charleroi, Pennsylvania, and received his B.S. and M.D. degrees from the University of Michigan. His experience at Tulane began in 1932 following internship at St. Vincent’s Hospital, Toledo, Ohio. He progressed in Medicine, Public Health, and Tropical Medicine to Chairman of Tropical Medicine and Public Health (1946–1953). From



FIG. 49–19. William A. Sodeman, M.D., Sc.D., L.H.D., Nineteenth Dean (1956–1967).

1953 to 1957 he served as Chairman of the Department of Internal Medicine at the School of Medicine, University of Missouri.

Upon assuming the Jefferson Deanship, Dr. Sodeman had already become an internationally recognized medical educator. During his early career he had developed into a well-rounded internist and consultant beginning with fellowships in New Orleans and at the University of Michigan during the 1930s that encompassed cardiology, tropical medicine, and preventive medicine. He became Senior Visiting Physician at Charity Hospital and in 1951–1952 was Visiting Professor of Medical Sciences at Calcutta School of Tropical Medicine. Later he was Consultant to the United States Public Health Service Hospital, Carville, Louisiana, and to the Bureau of Special Services, U.S. Public Health Service, Washington, D.C. He was also an official examiner for the American Board of Internal Medicine.

Sodeman served on several Boards of Trustees and had membership in numerous medical societies. He published over 200 articles in the medical literature and was author of the textbook *Pathologic Physiology*, which was translated into several foreign languages. He belonged to several prestigious clubs and the following fraternities: Phi Beta Pi, Phi Beta Kappa, Alpha Omega Alpha, and Delta Omega. He was on the editorial boards of the *American Journal of Cardiology* (1964–1970) and the *Journal of Laboratory and Clinical Medicine* (1957–1960). He received the Shaffrey Medal at St. Joseph's College of Philadelphia for Distinguished Contribution to Medical Science (1962) and the University of Michigan Sesquicentennial Award (1967). Villanova University awarded him the Honorary Degree of Doctor of Science in 1959, and Jefferson bestowed the Doctor of Humane Letters Degree in 1967.

Dean Sodeman felt that faculty *esprit* needed strengthening and arranged several faculty retreats off campus where in-depth discussions took place on such matters as curriculum changes, student evaluation, graduate school development, hospital activities relating to academics, and relationships with affiliated hospitals. Resolution of differences

and a team approach carried over into regular meetings. The faculty felt a new sense of direction and greater participation in final decision making.

National board examinations were introduced as an aid in evaluating Jefferson students and comparing their performance with medical students in other schools. A solid program of continuing medical education was begun for practicing physicians, at first in conjunction with Pennsylvania State University, which had continuing education offices across the Commonwealth. Later, Jefferson alone conducted programs in Delaware and at home. A medical accelerated program was initiated with Penn State whereby highly selected high school graduates could in five calendar years obtain the B.S. and M.D. degrees, thereby shortening the usual process by three years. This program became very successful.

Women medical students were admitted to Jefferson for the first time in 1961. Alumni of Jefferson Medical College were given memberships on the Board of Trustees. Research was encouraged and increased. Jefferson began receiving more national attention both as a result of its programs and because Dean Sodeman was prominent in major medical educational activities. He served for ten years on the Council on Medical Education, and for four years (two years as Chairman) on the medical school accreditation body (the Liaison Committee on Medical Education). The size of Jefferson's first-year class rose from 175 in 1958 to 192 in 1967. Curricular changes involved large blocks of elective time while still requiring a core of basic studies. Under Dean Sodeman's vision and leadership, Jefferson enhanced its image.

William Francis Kellow, M.D., D.Sc., L.H.D.; Twentieth Dean (1967–1981)

Dean Kellow (Figure 49–20) arrived at Jefferson after having been Dean at Hahnemann Medical College for six years. His tenure at Jefferson lasted for 14 years and would undoubtedly have lasted longer if serious illness had not forced his retirement. Only two Jefferson Deans were in office longer (Holland, 29 years, and Patterson, 22 years) and one (Dunglison) served for the same length of time as Dean Kellow.

Dean Kellow was a well-organized and hard

worker. It seemed that no matter how early his assistants arrived at their desks he was already in his office. He jealously guarded the hours before the normal workday began and used this time for uninterrupted concentration and accomplishment. He was serious, sensitive, kind, orderly, dedicated, systematic, gentlemanly, humble, and self-restrained. His demeanor suggested patience and calm, but on occasion he could become visibly annoyed and insistent. He was often heard to say that some causes are worth dying for, some not. He had excellent ability at a meeting in maintaining order and stimulating productivity. As a strong administrator, he knew how to delegate responsibility, monitor unobtrusively, and give back-up support.



FIG. 49-20. William F. Kellow, M.D., D.Sc., L.H.D., Twentieth Dean (1967-1981).

Born in Geneva, New York, on March 14, 1922, Kellow received the B.S. degree from the University of Notre Dame in 1943 and the M.D. degree from Georgetown School of Medicine in 1946. Honorary degrees included the D.Sc. from St. Joseph's University in Philadelphia (1967) and from Georgetown School of Medicine (1979), and Doctor of Humane Letters from Hahnemann Medical College (1978).

His postgraduate training was mostly at the District of Columbia General Hospital: Intern (1946-1947), Assistant Medical Resident (1947-1948), Senior Medical Resident (1949-1950), and Chief Resident in Pulmonary Diseases (1950-1951). He was Assistant Surgical Resident at Georgetown Hospital (1948-1949) and a Captain in the U.S. Air Force Medical Corps (1951-1953).

At Georgetown School of Medicine, Dr. Kellow was Clinical Instructor in Surgery (1947-1948) and Clinical Instructor in Medicine (1948-1953). At the University of Illinois College of Medicine he was Clinical Instructor in Medicine (1953-1955), Assistant Professor of Medicine (1955-1959), Assistant Dean (1955-1959), Associate Professor of Medicine (1959-1961), and Associate Dean (1959-1961). He was Dean and Professor of Medicine at Hahnemann Medical College (1961-1967) and Dean and Professor of Medicine at Jefferson Medical College (1967-1981).

Some of his awards and honors included: Centennial of Science Award, University of Notre Dame, 1965; Mastership, Alpha Omega Alpha, Jefferson Medical College, 1978; first recipient, Winged Ox of St. Luke Award for Distinguished Service, Thomas Jefferson University, 1981; and Alumni Achievement Award, Jefferson Medical College, 1981. His portrait was commissioned both by the Hahnemann Medical College and Alumni Association of Jefferson Medical College (1978). He belonged to many medical and scientific societies and participated in several influential local and national extramural professional activities. Some of these included: Board of Trustees, Eastern Pennsylvania Psychiatric Institute (1962-1969); Regional Comprehensive Health Planning Committee, City of Philadelphia (1969-1971);

Board of Trustees, Educational Commission for Foreign Medical Graduates, Philadelphia (1970–1980); General Research Support Program Advisory Committee, National Institutes of Health (1971–1974); Board of Regents, American College of Physicians (1970–1976); Advisory Committee on Undergraduate Medical Education, American Medical Association (1974–1980, and Chairman, 1977–1980); Liaison Committee on Medical Education, American Medical Association and Association of American Medical Colleges (1974–1981, and Chairman, 1981); and Council on Medical Education, American Medical Association (1979–1981).

Dean Kellow had outstanding managerial skills; in particular, he was proficient in handling fiscal matters. He kept a tight rein on the College budget, avoided deficit spending, and proportioned funding wisely and prudently to maintain and improve programs and to support new activities. Financial facility assumed even greater importance when, two years after his Deanship began, Thomas Jefferson University was formed and Jefferson Medical College became one of the component parts.

Kellow gave the faculty a feeling of greater democracy by providing increased opportunities for faculty participation in decision making, both in existing procedures and in developing new directions. He formed a General Faculty and Professorial Faculty to create a forum where individuals could be heard. A set of bylaws was developed that for the first time allowed membership on committees by the faculty at large; previously, only Chairmen of Departments could sit on most committees of the College. An Annual Report from the Dean's Office was prepared and given wide distribution, making quickly available current information on the functioning of the various aspects of the Medical College. With the help of the faculty he developed a Medical Practice Plan that allowed a balance between private practice and academic responsibilities.

Many changes and new programs developed during Dean Kellow's long tenure. The size of the entering first-year class rose from 192 to 223. This

continued to qualify for federal per capita appropriations and also helped to increase the output of physicians in order to lessen the threat of a physician shortage in the country. To aid in the better distribution of future physicians, a Physician Shortage Area Program was begun in affiliation with Indiana University of Pennsylvania. Particular attention for a limited number of places in the class was paid to applicants from physician shortage communities in Pennsylvania who stated their desire to return to these areas and gave promise of doing so.

In order to increase heterogeneity of the student body and provide greater opportunity for underrepresented groups in medicine to gain admission and receive counseling as students, an Office of Minority Affairs was created, and a black Associate Dean (James H. Robinson, M.D.) was appointed to supervise this activity.

A Department of Family Medicine was created in 1973, and all students were required to spend a segment of their curricular time in this discipline. Two hospitals with strength in Family Medicine located in rural Pennsylvania were added as affiliates: Franklin Hospital in Franklin and Latrobe Area Hospital in Latrobe.

In partnership with the Delaware Institute of Medical Education and Research, the University of Delaware and Wilmington Medical Center, Jefferson established a program in 1970 funded by the legislature of Delaware to provide each year access of up to 20 qualified residents of Delaware to Jefferson's first-year class. Delaware had determined that it was too small to establish its own medical school but recognized the problem its residents had in gaining admission to medical schools since most schools received state appropriations and had to limit the number of out-of-state places in their classes.

He established an Office of Medical Education in 1968, as he had done while Associate Dean at the University of Illinois College of Medicine. The Jefferson office instituted a longitudinal study of Jefferson students that has attracted national attention and this made a significant contribution to medical education.

On December 4, 1981, the illness that the previous month had forced his retirement, took his life. At the time he left Jefferson a suite of rooms on the second floor of the College building was designated the Kellow Conference Center. Each of the six rooms was named after a Jefferson physician who had made an outstanding contribution to medical education.

Frank W. Gray, Jr., M.D.; Interim Dean (1981–1982)

To fill the vacancy in the Dean's Office, Dr. Frank W. Gray, Jr., Magee Professor and Chairman of the Department of Medicine, was named Interim Dean (Figure 49–21). Dr. Gray's administrative experience served well during the period from Nov., 1981 to July, 1982 while the search for a new Dean was in process.

Leah Lowenstein, M.D., D.Phil.; Twenty-first Dean (1982–1983)

The first women medical students matriculated at Jefferson in September, 1961. Jefferson thereby became the last all-male Medical School to become

coeducational. Dr. Lowenstein (Figure 49–22) was the first woman to become a Dean at Jefferson and the first woman Dean of a coeducational medical school in the United States; during her tenure she was the only woman Dean of a medical school in this country. Her Deanship lasted from July 1, 1982, to September 1, 1983, when she resigned for health reasons. She died of cancer on March 6, 1984, at age 53.

A native of Milwaukee, Wisconsin, Dr. Lowenstein received her M.D. degree from the University of Wisconsin in 1954 and completed an internship at the University of Wisconsin



FIG. 49-21. Frank W. Gray, Jr., M.D., Interim Dean (1981–1982).



FIG. 49-22. Leah Lowenstein, M.D., D.Phil., Twenty-first Dean (1982–1983).

Hospital. For three years she was a research associate in the Department of Anatomy (Biophysics) at Oxford University in England and received her D.Phil. degree through Summerville College in 1958. Returning to the United States, she completed a residency in Internal Medicine at Beth Israel Hospital of the Harvard Medical School and a fellowship in renal and metabolic diseases at the Veterans Administration Hospital, Tufts University School of Medicine. She served on the faculty of Tufts and Thorndike Memorial Laboratories at Harvard Medical School. In 1968 she was appointed Assistant Professor of Medicine at Boston University School of Medicine and, at the time of her selection as Dean of Jefferson, was Professor of Medicine and Biochemistry and Associate Dean at this school.

Dr. Lowenstein held several key hospital appointments in Boston including Attending Physician at University Hospital, Boston University School of Medicine; Physician-in-Chief, Medical Service, Boston City Hospital; Medical Director of the Alcohol Research Unit of Harvard Medical School and Boston City Hospital; and Director of Basic and Clinical Sciences of the Gerontology Center and Director of the Unit of Metabolic Nephrology at Boston University School of Medicine. She was also medical advisor in the Office of the Assistant Secretary for Health of the former Department of Health, Education and Welfare (1978–1979).

Lowenstein was a member of the Academy of Sciences and a Fellow of the American Association for the Advancement of Science. A member of Phi Beta Kappa and Alpha Omega Alpha, she was honored at her alma mater, the University of Wisconsin, in 1983 with an award recognizing her “outstanding service to medicine and medical education.”

Dr. Lowenstein published extensively on kidney and metabolic disorders and lectured throughout the nation and abroad. She was coeditor of *Becoming a Physician: Development of Values and Attitudes in Medicine* and coeditor and coauthor of *Mammalian Models for Research on Aging*.

Selected for the Deanship after a nationwide

search that included 177 nominees, Lowenstein was identified as an experienced administrator and teacher and was highly respected as a superb investigator in the field of kidney disease. It was felt that she would continue Jefferson’s traditional commitment to excellence in medical education, research, and patient care. Her background, accomplishments, and outgoing personality gave great promise. Unfortunately, health problems shortened her tenure to but one year and little can be accomplished in such a short span of time. She believed that Jefferson needed strengthening in the quality and quantity of its research and wanted the institution to become more successful in competing for the limited amounts of extramural support in this area.

Joseph S. Gonnella, M.D.; Twenty-second Dean (1984–)

Joseph Salvatore Gonnella, M.D. (Figure 49–23) became the Dean of Jefferson Medical College on May 7, 1984. He had been Acting Dean since September 1 of the previous year, Associate Dean from 1969 to 1983, and Assistant Dean from 1967 to 1969. He was the first member of the Dean’s office staff to rise through the ranks to full Dean.

Born on April 5, 1934, in Pescopagano, Italy, Gonnella moved to this country at age 12 with his family. His early education was in his hometown in Italy, then in public schools in Westfield, New Jersey. His undergraduate college was Dartmouth (B.A., 1956, *summa cum laude*, Phi Beta Kappa) and for his medical education he attended Dartmouth Medical School (1955–1957) and Harvard Medical School (1959, Alpha Omega Alpha). Postgraduate training as an Intern and Resident in Internal Medicine took place at the University of Illinois Research and Educational Hospitals (1959–1961 and 1963–1965). It is interesting that during the first phase of his residency he became acquainted with the Attending Physician there, Dr. William F. Kellow, who became Jefferson’s twentieth Dean in 1967; a mutual regard was a determining factor in the direction of Dr. Gonnella’s professional career. Dr. Gonnella’s residency was interrupted for two years (1961–1963) when he served as Captain in the Medical Corps of the U.S. Army. In the first year of this period he was assigned to a medical detachment in Korea, where he met his wife,

Margaret Linda Rapp, who was serving there with the Red Cross. In 1963 he returned as Resident in Internal Medicine at the University of Illinois Research and Education Hospitals and was Chief Resident the next year (1964–1965).

The year following his residency (1965–1966), Dr. Gonnella became a Fellow and Research Associate in the Office of Research in Medical Education, University of Illinois College of Medicine. The very next year he was appointed Assistant Dean at Hahnemann Medical College, Philadelphia, under Dr. Kellow, who had become Dean in 1961. The same year, upon Dr. Kellow's appointment as Dean at Jefferson, Dr. Gonnella joined him as Assistant Dean and Assistant Professor of Medicine. The Department of Medicine quickly recognized his teaching talents as he progressed to Professor of Medicine. In the Dean's Office, he advanced from Assistant Dean, through Associate Dean, Acting Dean, and finally Dean and Vice President in 1984. In addition, he



FIG. 49-23. Joseph S. Gonnella, M.D., Twenty-second Dean (1984–).

had been since 1969 Director of the Office of Medical Education (now Center for Research in Medical Education and Health Care), which has been conducting an impressive longitudinal study of Jefferson students, as well as other significant studies. He has taught medical students and house staff, been counselor and financial aid officer to medical students, been responsible for curriculum evaluation and development and for guidance and letters of recommendation for Jefferson students for postgraduate training, served on and chaired many faculty committees, and has been prominent in extramural, local, national, and international activities. For years he had been highly visible to Jefferson's Board of Trustees, Senior Officers, Department Chairmen and other faculty, nonprofessional personnel, and students. Gonnella's proven competence generated enthusiasm widely, but particularly among the faculty, at the time of his candidacy for the Deanship. He was identified as being a "known quantity" and was selected with confidence.

Dr. Gonnella's extramural professional activities have been extensive and include advisory, consultant, membership, and chairmanship duties in the following: Alliance for Continuing Medical Education, American Board of Medical Specialties, American Medical Association, Association of American Medical Colleges, Department of Health and Human Services, Educational Commission for Foreign Medical Graduates, Institute of Continuing Biomedical Education, Joint Commission on Accreditation of Hospitals, Ministry of Health (People's Republic of China), National Board of Medical Examiners, Philadelphia College of Physicians, Philadelphia Professional Standards Review Organization, State of California's Department of Health and the World Health Organization (Certificate of Appreciation); University of Chieti, Italy (Honorary Degree of Medicine), and Australasian and New Zealand Association for Medical Education (Guest Speaker). He is a member of a number of prestigious professional societies.

Dean Gonnella, in pursuing the goal of excellence, clearly recognizes that the objective of

advancing Jefferson Medical College in its role of educating competent physicians requires careful handling of varied activities. As Dean he has responsibility for the administrative affairs of Jefferson Medical College, and as Vice President he has staff responsibility for many University service areas. Important among these is establishing criteria for selection of students that emphasize humane, caring attributes as well as

academic qualifications—attention to student development regarding the social aspects of medicine, professional ethics, and skills in patient care is vital. Faculty matters relate to recruitment and development of superior teachers and assuring adequate time and facilities for both basic and clinical research. Also important is the maintenance of an appropriate balance among teaching, patient care, research, and administration on the part of faculty members. Dr. Gonnella has pursued these objectives effectively in his 20 years (1967–1987) and has contributed impressively to the institution's prestige. His relative youth is the potential for fruitful years that lie ahead.

Jefferson Medical College takes justifiable pride in the choice of its Deans and their accomplishments.



Hospital Administration

J. WOODROW SAVACOO, M.D.

“Hospitals are the outcome of the innate tenderness that marks all noble souls in whatever land they dwell and in whatever creed they are received.”

—SIR HENRY BURDETT (1847–1920)

HOSPITALS HAVE always existed in one form or another. Whether known by the name *hospital* or not, there have been places for the sick, poor, aged, and disabled since history was recorded. The origin of the hospital is credited by historians not to medical science but to religion. The Christian Church played a large part in the development of hospitals early in the Christian era, and, being associated with churches, administration became largely the responsibility of ecclesiastical personnel. From the sixteenth century the functions of hospitals expanded, and physicians came to be more intimately involved in such services and responsibilities. The hope for cure of disease as a reason for hospitals' existence is relatively recent. They began mainly to isolate infectious persons or for custodial and domiciliary care of the mentally ill and the chronically

disabled. Physician administrators became more frequent during the nineteenth century, and by the beginning of the twentieth century they dominated the scene. The increasing complexity of services performed in hospitals, however, resulted in a need for delegated responsibilities, with eventual transfer of major duties to lay administrators.

At the time of the founding of Jefferson Medical College in 1824, there was no perceived need for a hospital as a component of the teaching process for medical students. The medical school functioned as a didactic teaching facility with instruction by lectures to which medical students added preceptorial experience. No American medical school had an affiliated hospital—the Hospital of the University of Pennsylvania, the first associated with a medical school, was not

founded until 1874. (There were seven hospitals in all the United States in 1800 and only 87 in 1850).¹ From the beginning, however, Jefferson students experienced patient care through an outpatient dispensary for medical and surgical cases, which was George McClellan's radical and innovative contribution to medical education. To be sure, the Pennsylvania Hospital (founded in 1751) was available for certain aspects of teaching. Students of medicine were accommodated there by arrangement with their preceptors plus the payment of an annual fee, which in 1751 was £1. Hospital management at Pennsylvania was geared to care of the poor, the Board of Directors from the beginning having been elected by the contributors. The Directors were immediately responsible for management.² During the mid-nineteenth century, hospital practice slowly changed from almshouse and domiciliary care to accommodation of injured patients and surgical patients, although most surgery was still done in the home.

Jefferson patients were at first cared for only in the dispensary (the Tivoli Theater building and its successors) but soon the need for short-term admissions led to makeshift hospital facilities, mainly for the poor. A historical summary in the 1912 Hospital report states: "As the classes grew and demands for advance in methods became more evident, the facilities were extended until ten and later twenty patients could be temporarily housed, resting often on cots of the most temporary kind, and in quarters having no semblance to what now would be called a hospital. The nursing care was by volunteer assistants, mostly from the student body."³ At the time, patients were being operated upon by distinguished surgeons connected with the College, and the custom was that those unable to reach their residences in other ways were taken home in the doctor's carriage. Some were cared for near the operating room by unpaid nurses and attendants, and food was obtained from a nearby restaurant or brought from the kitchens of the attending surgeons. It is obvious that during this period virtually no administration was required,

and presumably the attending physicians and surgeons were totally responsible. Partly related to Civil War experiences was the gradually increasing awareness of the need for organized facilities.

Action was taken at the instigation of the Alumni Association and the faculty during the early 1870s, and the first Jefferson Medical College Hospital building was opened in 1877 on Sansom Street between Tenth and Eleventh (the present site of Thompson Annex).

First Hospital Management (1877)

Administration of the first Hospital appears to have been the responsibility of the Board of Trustees with major delegation to the Medical Staff. The earliest report of the Trustees to the contributors to the Jefferson Medical College Hospital, dated 1881,⁴ indicates an administrative arrangement whereby the Trustees had hospital committees designated for each month. At the time, the President of the Trustees was a physician, Emile Blaise Gardette, M.D. (Jefferson, 1838) and the first election of the Hospital Staff was made by the Board, March 28, 1877. In that report no hospital directors or administrators are listed. There was a steward, a housekeeper, and an engineer. These were responsible to the Board of Trustees. The close supervision of the Hospital by the Board continued into the 1890s, as noted in an 1891 publication of Rules and Regulations.⁵ The Hospital Committee of three members was required to "visit the Hospital at least once every week . . . and receive reports of its condition, requirements, receipts and expenditures." The booklet also defines the status and duties of a Superintendent, although the identity of the Superintendent is not stated.

Some of the earlier functions of the Trustees appear to have been taken over by the Dean of the Medical College in the latter part of the century. The Hospital Report for the year ending September 30, 1893, includes a "Dean's Annual Report." At that time, administrative changes occurred with more management functions assumed by the faculty. Dr. Edward E. Montgomery, Professor of Gynecology, was named Superintendent and under him a layperson, George Bailey, Jr., was designated Assistant Superintendent. The same report describes the

inauguration of the Training School for Nurses, established in 1891, with Miss Effie Darlene as Director. The title of Superintendent was replaced in 1894 when Dr. James C. Wilson (Jefferson, 1869), Professor of Medicine, was made Medical Director (Figure 50-1). George Bailey, Jr., continued his post as Assistant Superintendent. This administrative arrangement appears to have continued for the next few years, but in 1895 Dr. Joseph S. Neff was made Medical Director, and in 1897 George Bailey, Jr., was named Superintendent.

Joseph S. Neff, M.D.; Medical Director (1895)

Dr. Joseph S. Neff (Jefferson, 1875) may be described as a prototype of the modern hospital administrator, his areas of responsibility having

extended well beyond those of the period (Figure 50-2). Educated at the University of Pennsylvania (B.A., 1873; M.A., 1877) and in Vienna with a year at the Allgemeines Krankenhaus, he was appointed Attending Physician at Jefferson in 1881. He was named to the same post at Philadelphia General Hospital in 1882. Impaired health caused his resignation from practice and hospital appointments in 1889. A year later he joined the firm of L.C. Vanuxem and Co. in a business appointment, during which time he appears to have developed his management skills. His medical career was resumed a few years later, and in 1895 he was made Medical Director of Jefferson Hospital. Dr. Neff made major contributions to the planning of the 1907 hospital, sharing committee duties with Trustees William Potter and Alba B. Johnson without the employment of a



FIG. 50-1. James C. Wilson, M.D. (1847-1938), First Medical Director (1894-1895).



FIG. 50-2. Joseph S. Neff, M.A., M.D. (1854-1930), Medical Director (1895-1907).

(Jefferson, 1906), later to become Professor of Surgery (1930–1936), was made Chief Resident in 1908.

The Twentieth Century

The administrative pattern changed under Dr. Coplin. No Superintendent was named, but in 1909 John M. Smith was listed as Steward, later to be succeeded by Joseph W. Mott, who was in turn replaced by F.E. Jacob and, in 1913, by F.W. Sellick. This post was filled in 1914 by a Mr. D. Adams, who served for a number of years. Dr. Elmer H. Funk (Jefferson, 1908), who was Chief Resident Physician in 1910, became Acting Medical Director in 1912 (Figure 50-4), succeeding Dr. Coplin until Dr. McCrae appointed him Director of the new Department for Diseases of the Chest in 1913. In the latter post he was responsible to Dr. McCrae as Attending Physician and to the Board of Trustees for administration. Dr. Coplin continued as President of the Medical Staff until

general contractor. His career changed again with his appointment as Director of the Department of Public Health and Charities of the City of Philadelphia in 1907, and he was named Emeritus Physician by the Jefferson Board of Trustees in 1909. Dr. Neff served as President of the Hospital Staff as well as Medical Director.

In 1900, during Dr. Neff's administration, a fire occurred in the 1877 Hospital building as a result of an explosion across the street. Dr. W.W. Keen reported in the *Philadelphia Medical Journal* the "Heroism of Nurses and Physicians in the Path of Duty." He described the excellent discipline that prevented fire-associated injury to any hospital patients and was highly complimentary, especially of the nurses' behavior.

William M.L. Coplin, M.D.; Medical Director (1907–1912)

The post of Medical Director continued as a part-time one until midcentury. Dr. Neff was succeeded in 1907 by Dr. William M.L. Coplin, Professor of Pathology since 1896 (Figure 50-3). Dr. Coplin was an able successor whose managerial skills had been proven by his recent experience as Director of the Department of Public Health and Charities for the City of Philadelphia. The first few weeks of his administration in the latter position (1905) had been marked by major exposure of neglect and graft in the operations of Philadelphia General Hospital. Increasing administrative responsibilities and decisions relative to the opening of the new Hospital in June 1907 (Old Main) were met with determination and success by Dr. Coplin, who continued his teaching and research in pathology without interruption and also served as President of the Medical Staff from 1908. The increased patient load also required increased numbers of resident physicians and new definition of their responsibilities. Previously numbering seven, 15 were now appointed. Dr. Edward J. Klopp



FIG. 50-3. William M.L. Coplin, M.D. (1864–1928), Medical Director (1907–1912).

1922, when he was replaced by Dr. Hobart A. Hare. Dr. Henry K. Mohler succeeded Dr. Funk as Acting Medical Director in 1914 and was named Medical Director the following year, serving in that capacity for many years.

Hospital administrative duties during the early decades of the twentieth century underwent some changes, although not nearly as remarkable as those that occurred after 1930. Primary responsibility continued to be vested in the Board of Trustees, and the operation of the Hospital was delegated largely to the Medical Director and his appointees, whereas the affairs of the Medical College were in the hands of the Dean whose responsibilities to medical students and faculty complemented the duties of the Hospital Medical Director in the provision of medical care.

There was a brief wartime period (1918–1919) when Dr. Elmer Funk was again called upon to serve as Medical Director, while Dr. Mohler was

on active military duty as Lieutenant Colonel and Chief of Medical Services, U.S. Army General Hospital No. 38 in France.

The Mohler Years (1914–1938)

Dr. Henry K. Mohler (Figure 50-5), a Jefferson honor graduate of 1912, soon demonstrated his leadership qualities as he assumed the post of Director, continuing in that capacity until he succeeded Ross V. Patterson as Dean in 1938. At the same time he advanced in the Departments of Medicine and Therapeutics, and as Dean he also was made Professor of Therapeutics in 1938. During his Directorship there was a rapid increase in the diversity of problems relative to hospital management which he coordinated well with his clinical career even while dealing with the strong medical personalities of the Jefferson Staff. There was perhaps no one who was as familiar with Jefferson affairs for three decades as Dr. Mohler. He was a charter member and Fellow of the American College of Hospital Administrators, a member of the American Hospital Association, and belonged to many local and national societies. He received an Honorary degree of Doctor of



FIG. 50-4. Elmer H. Funk, M.D. (1886–1932), Acting Medical Director (1912–1914).

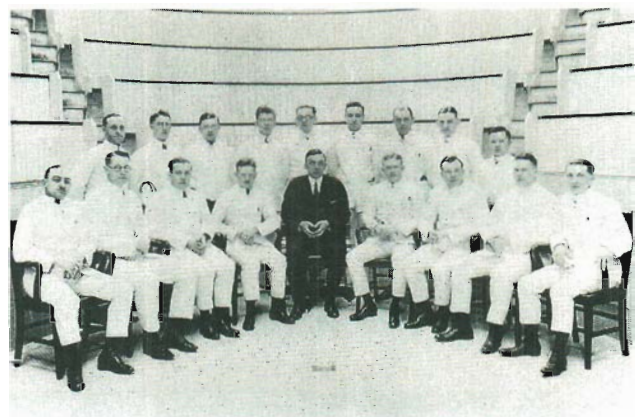


FIG. 50-5. Henry K. Mohler, M.D., D.Sc. (1885–1941), as Medical Director (1914–1938) with Interns in the amphitheater of the 1877 Hospital (ca. 1920).

Science from LaSalle College in 1939. The Class of 1940 presented his portrait to the College. His career as Dean was brief, ending with his sudden death in 1941.

The construction of the Thompson Annex in 1924 and the opening of the new College building and Curtis Clinic in 1931 provided many new challenges and experiences in administration. Dr. Mohler's continuity as Director during these changes proved useful. When the Curtis Clinic, Jefferson's new outpatient facility opened in 1931, it was directed at the outset by another bright, youthful clinician, Dr. Robert Bruce Nye (Jefferson, 1927). Dr. Nye (Figure 50-6) quickly

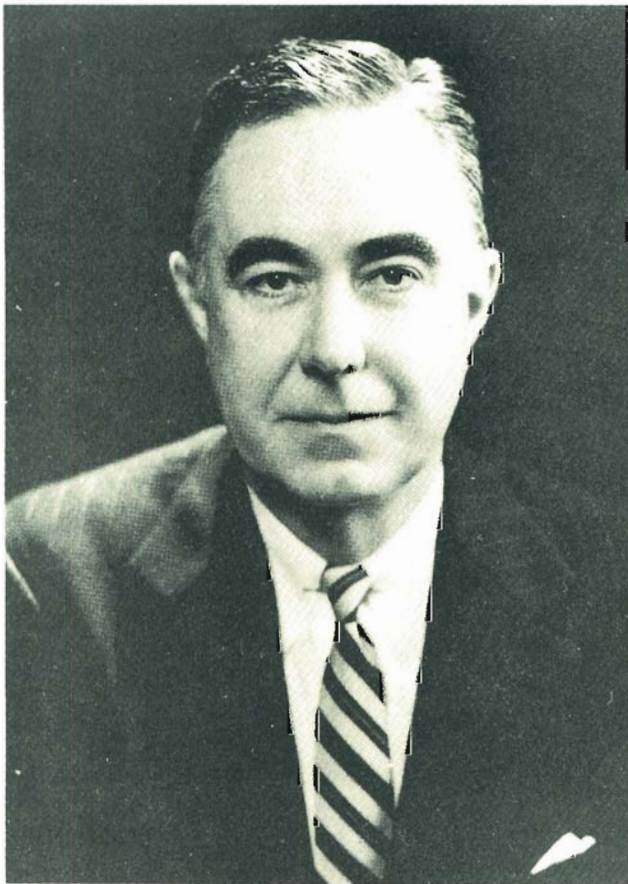


FIG. 50-6. Robert Bruce Nye (1905–1966), Curtis Clinic Director (1931–1942) and Hospital Medical Director (1938–1942).

adapted to the challenge of administrative duties, his success in the post resulting in his appointment to succeed Dr. Mohler as Medical Director of the Hospital in 1938 when the latter became Dean. His tenure was interrupted by World War II when Dr. Nye served as Lieutenant Colonel with the 38th General Hospital from 1942 to 1945.

World War II Changes

Dr. Hayward R. Hamrick (Jefferson, 1935) who had succeeded Nye as Curtis Clinic Director in 1938, was appointed Acting Medical Director in 1942. In 1943 he became Medical Director of the Hospital and Director of the Curtis Clinic (Figure 50-7). Dr. Nye returned to his teaching post in the Department of Medicine in 1946 and in 1951 became Assistant Dean. He was promoted to Associate Dean in 1960 and until his sudden death in October, 1966, he was intimately concerned with medical school admissions.

Dr. Hamrick followed the pattern of



FIG. 50-7. Hayward R. Hamrick (1907–1957), Curtis Clinic Director (1938–1957) and Medical Director (1942–1957)

administrators drawn from the Departments of Medicine and Therapeutics established through Drs. Patterson, Funk, Mohler, and Nye. His experience began as Chief Resident Physician (1937–1938), and his appointment as Curtis Clinic Director directly thereafter prepared him further for the succession to Medical Director of the Hospital. His familiarity with all the aspects of Jefferson affairs was enhanced by his appointment as Acting Secretary and, in 1943, Secretary of the Board of Trustees, which post he held until his death. Special wartime challenges and subsequent postwar expansion caused his appointment to amount to a virtually full-time one, supplemented only by his continuing interest in cardiology and electrocardiography. He quickly mastered the power structure of the institution and wielded his responsibilities effectively. Membership in the American College of Hospital Administrators and the American Hospital Association broadened his perspective. In 1948 the Board of Trustees recognized his accomplishments by electing him to a newly created position of Vice President of the Corporation.

Middle Twentieth Century

In company with the postwar burgeoning of industry, research, and development, medical and health-related matters underwent major mid-century changes. The age of medical technology and increasing awareness on the part of the public of the curative role of hospitals resulted in major expansion of their responsibilities. Patterns of administration changed. In many instances the specialized functions of administrators demanded educational preparation not usually associated with physicians' training. Organizationally, the American Hospital Association, founded in 1906, provided a forum mainly for physician directors. Gradually, lay administrators came to be frequently seen, and in 1933 the American College of Hospital Administrators was founded. The need for specialized education was recognized as early as 1913, when a committee of the American Hospital Association reported on the "desirability of university training of hospital administrators."⁶ In 1924, Marquette University established a College of Hospital Administrators for training of executives, technicians, dieticians, and other hospital specialists. Other universities followed with degree courses, and in 1934 the University of

Chicago established the first graduate program in hospital administration.⁷ An increasing proportion of nonphysician hospital directors was already a trend between 1930 and 1950, but by 1952 only one-third of hospital heads were physicians. By 1962 only one-fifth were medical graduates,⁶ even though Faxon in 1952,¹ in describing the attributes of a successful administrator, stated that "physicians are most appropriate for 'larger' hospitals."

The administrative process at Jefferson underwent a change in 1949 when the Board of Trustees elected James Laurence Kauffman, Vice Admiral, U.S.N. (Ret.) as President of the Corporation, and the title of the Head of the Board of Trustees was changed to Chairman. This brought about little immediate change in the responsibilities of the Medical Director but presaged an ongoing process of increasing administrative change. Dr. Hamrick soon became involved in planning for the new Foerderer Pavilion that was built in 1954, thereby increasing the administrative burdens. It was his fate not to survive very long to share in the realization of the fruits of the building program. He died on January 21, 1957.

Professional Administration Begins

As a successor to Dr. Hamrick, the Board appointed Dr. Ellsworth R. Browneller (Jefferson, 1948) as the first administrator to have had formal postgraduate training (Figure 50-8). Following U.S. Naval service from 1948 to 1954, he enrolled at the School of Public Health and Administrative Medicine at Columbia University and was awarded an M.S. degree in Medical Administration. He served an administrative residency under Dr. Robin C. Buerki at Henry Ford Hospital in Detroit, Michigan. He joined the administrative staff at Jefferson immediately upon completion of his educational program in June

1956, and was designated Acting Medical Director on January 25, 1957, directly following Dr. Hamrick's death. Later the same year he was made Medical Director. His administration was featured by many new programs, some of which were introduced after 1959, when Admiral Kauffman was succeeded by William W. Bodine, Jr. as President. Dr. Browneller was responsible for the introduction and institutionalization of professional management principles.

By midcentury the increasing complexity of hospital management resulted in further changes in administration. Procedures varied in different institutions, some hospitals retaining a physician as the executive. In others the chief administrator became designated as President or as Hospital Director. Larger institutions developed sectional administrative heads as local needs dictated.



FIG. 50-8. Ellsworth R. Browneller, M.S., M.D. (1923–), Medical Director (1956–1962).

Insurance, legal, financial and ethical problems assumed new importance, and full-time associate personnel were required. Jefferson developed the team approach under Dr. Browneller. During the 1950s, two assistant directors and two administrative assistants were recruited. These included Mabel C. Prevost, R.N., M.S., who was first appointed as Administrative Assistant in 1958 and promoted to Assistant Administrator in 1959. She had served as Director of the School of Nursing and Nursing Services since 1953, the last to hold that position.

In 1959 the first administrative resident was accepted from the School of Public Health and Administrative Medicine at Columbia University. This training program escalated during the next two decades so that by 1985, up to four or five administrative residents were being accepted annually. A number of these trainees went on to important posts at Jefferson and elsewhere. Under Dr. Browneller regular administrative conferences were developed as all aspects of hospital management came under organized supervision.

Dr. Browneller resigned on March 9, 1962. His successor, Maurice P. Coffee, Jr. (Figure 50-9), was appointed Acting Director, and on July 18, 1962, his appointment as Director of Jefferson Medical College Hospital was confirmed by the Board of Trustees. Coffee had pursued a management career from the beginning (B.S. in Institutional and Hotel Administration, Pennsylvania State University, 1955; M.S. in Hospital Administration, Northwestern University, 1957). He came to Jefferson as Associate Director January 1, 1961, following residency experience at Lankenau Hospital in Philadelphia and an appointment as Assistant Administrator at Shadyside Hospital, in Pittsburgh, from 1958 to 1961. Coffee's term at Jefferson was marked by new experiences, especially related to the implementation of the National Medicare Program in 1966. He resigned on August 31, 1967, to join a new health management firm as Vice President.

Francis J. Sweeney, Jr., M.D. (1967–1984)

Having followed the principle of appointing a lay person as executive during Coffee's tenure, the Trustees once more went back to recruiting a physician to succeed him. Dr. Francis J. Sweeney,

Jr. (Jefferson, 1951) was appointed Director in 1967 and served Jefferson with devotion until 1984 (Figure 50-10). Dr. Sweeney, whose academic background included teaching and research in the Department of Medicine (infectious diseases) and a four-month study of cholera in Thailand, served as Attending Physician and Chief of Medicine on the Jefferson Service at Philadelphia General Hospital (1966–1967). His medical background and administrative abilities merged admirably as his career progressed, although his medical role gradually diminished under the weight of increasing management responsibilities. Nevertheless, he advanced in the American College of Physicians governing councils to ultimately become Governor for the Pennsylvania Chapter in 1969 and Chairman of the organization's Board of Regents in 1982.

Dr. Sweeney quickly mastered the organizational aspects of his new duties and established a position of authority as Director. It was a time

characterized by increasing health and hospital costs as well as problems of insurance and government regulations. He became influential in local and national hospital groups including the Delaware Valley Hospital Council, serving as its Chairman for 1973–1974. A director of the National Health Council in 1976, he represented the American Hospital Association on the same Council in 1978. He was a Trustee of the Hospital Association of Pennsylvania the same year.

Upon the succession of Dr. Sweeney, the administrative structure was well in place with associate and assistant administrators in each established area of responsibility. He was,



FIG. 50-9. Maurice P. Coffee, Jr., M.S. (1931–), Hospital Director (1962–1967).

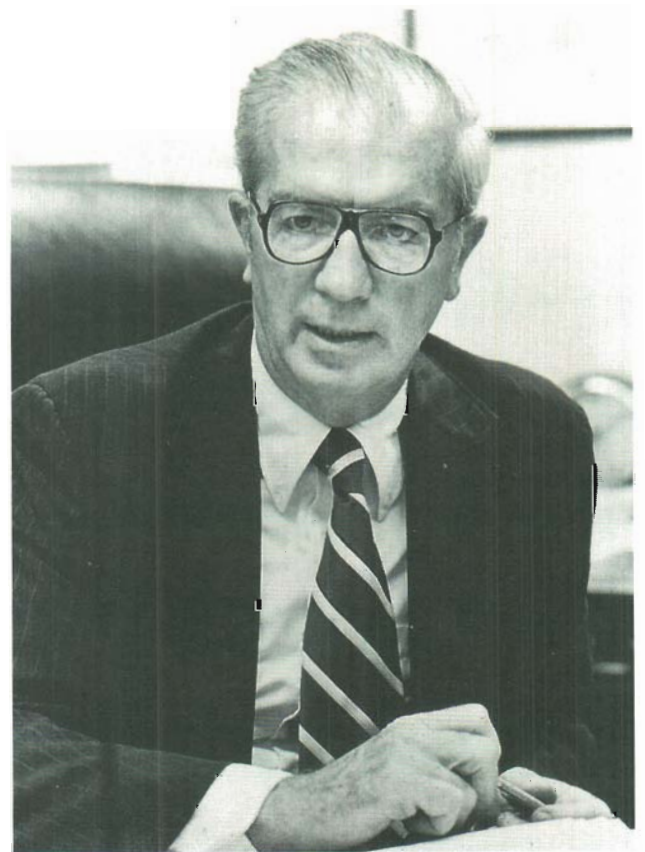


FIG. 50-10. Francis J. Sweeney, Jr., M.D. (1925–), Medical Director (1967–1984) and Vice President for Health Services (1972–1984).

however, faced with some challenges new to the process, especially with respect to Medicare and third-party payment programs, which caused major changes in hospital experience generally. The handling of cost reimbursement proved successful, especially as good relations with Blue Cross management eased some of the problems that accompanied the new programs.

Almost at once the need for expansion of hospital facilities and changes in methods of provision of hospital care became apparent. The adoption of the policy of "one level of care" would eliminate the long-established ward-private differential. At the same time the total number of beds had to be decreased as a reaction to the new and anticipated realities. It proved totally impractical and cost ineffective to renovate existing buildings, so a new hospital structure was decided upon. Dr. Sweeney began with planning in the early 1970s, and in 1972 he was appointed Vice President for Health Services. To free him from routine executive duties Edwin J. Taylor was brought in as Chief Executive Officer of the Hospital. Following completion of the basic planning for a block-long hospital building, many meetings were held to present and discuss the innovative plans with the Medical Staff and other involved persons. By 1976 the design was completed and construction was under way.

Edwin J. Taylor, M.S., M.H.A. (Figure 50-11), the new Hospital Director, came to Jefferson with a background of long experience in health care administration. His service (Captain) in the administrative corps of the U.S. Army was followed by graduate training at Columbia University, leading to the degree of M.H.A. in 1948. From 1948 to 1972 he served as Director of the Graduate Hospital of the University of Pennsylvania. Taylor's experience and business skills were quickly recognized at Jefferson, and in 1976 he was appointed University Vice President for Business Affairs. At that time, Dr. Sweeney resumed the duties of Hospital Director.

The opening of the New Hospital required many administrative adaptations and increased personnel. One of the major new changes related

to patient care programs. Six were developed, each under an Associate Administrator. Renovation of the Foerderer Pavilion was a part of this process, and planning proceeded immediately upon occupancy of the New Hospital. Psychiatry and maternity care programs were then located in Foerderer. Major expansion and modernization of the Clinical Laboratories in Foerderer proceeded at the same time.

Michael J. Bradley (1984-)

In 1984 Dr. Sweeney resigned to accept a new appointment as Vice President for the Health Sciences Center of Temple University. He was succeeded by Michael J. Bradley, M.S., C.P.A., who had served as Vice President for Finance of Thomas Jefferson University since 1979 (Figure 50-12). Bradley's career following graduation from Drexel University in 1969 included a four-year



FIG. 50-11. Edwin J. Taylor, M.S., M.H.A. (1919-), Hospital Director (1972-1976) and Vice President for Business Affairs (1976-1983).

experience in accounting and finance with Touche Ross & Co. He joined the Jefferson staff in 1973 as Chief Financial Officer of the Hospital Division and quickly manifested skills in management and finance, resulting in his 1979 promotion. He was well poised to assume the full duties of Vice President for Health Services and Executive Hospital Director.

Hospital administration has become a major process in recent years, and Jefferson's experience is a prime example. In addition to the numbers of personnel and the multiplicity of programs to be

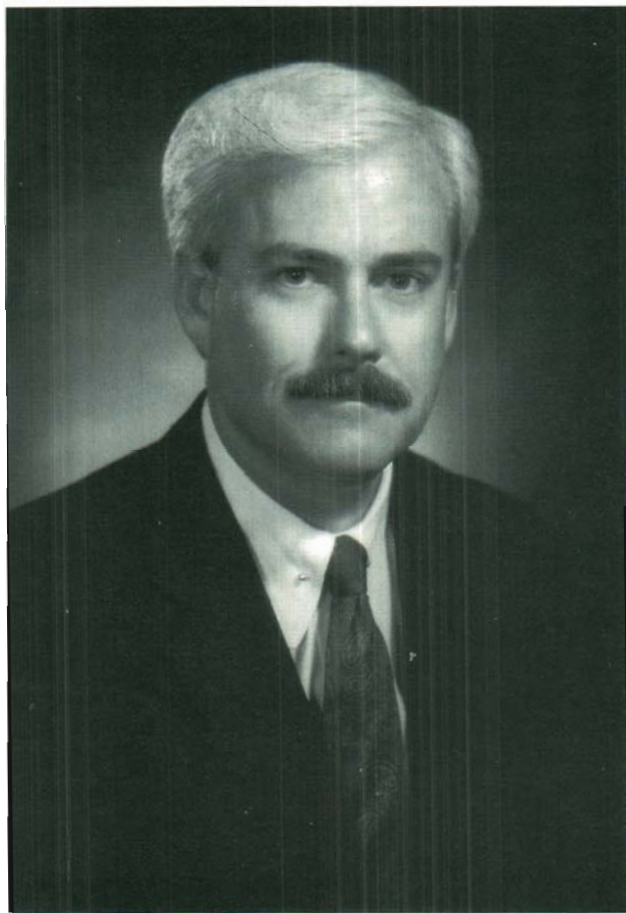


FIG. 50-12. Michael J. Bradley, M.S., C.P.A. (1944–), Vice President for Health Services and Executive Hospital Director (1984–).

administered, entirely new challenges have developed. The pattern of organization of administrative services under Bradley is far removed from the simple arrangements that worked well at the turn of the twentieth century. In 1987 there were four Associate Executive Directors and 11 Assistant Directors, with many divisions and programs under each one. The training program continued with administrative residents. Bradley's strong financial management and highly regarded organizational skills have contributed greatly to the stability of Jefferson's increasingly complex administrative requirements.

The modern hospital, in addition to its service commitments, must deal with conflicts in health policy, governmental agencies, corporate medicine, uncontrollable inflation, and legal surveillance, which mandate a highly accountable administrative process, often referred to as a bureaucracy. At the same time the hospital must manage the fundamental leveling and unchanging experiences of birth, disease, accident, and death. The challenge is not so much to emphasize advances in technology but to humanize the mystical powers of the healing within the hospital walls.

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