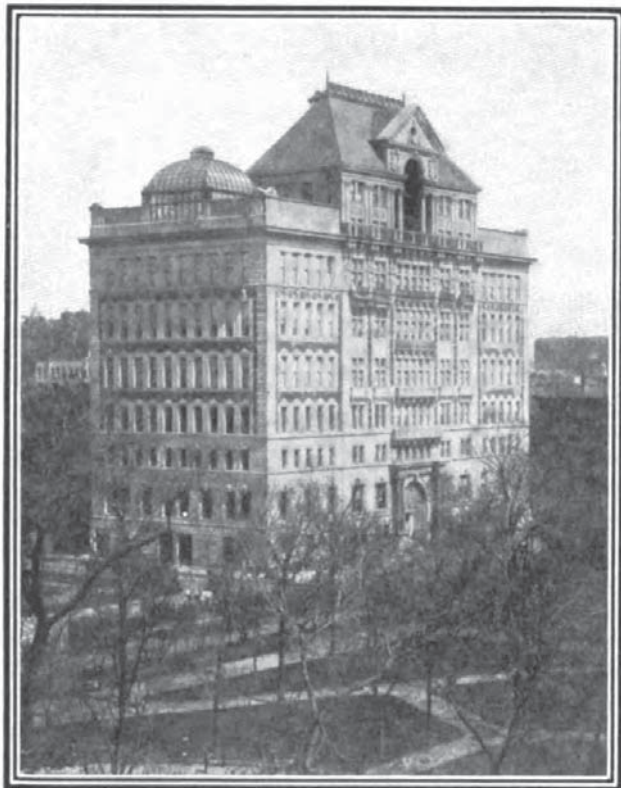


THE NEW LYING-IN HOSPITAL IN NEW YORK.

BY ROBERT L. DICKINSON, M.D.



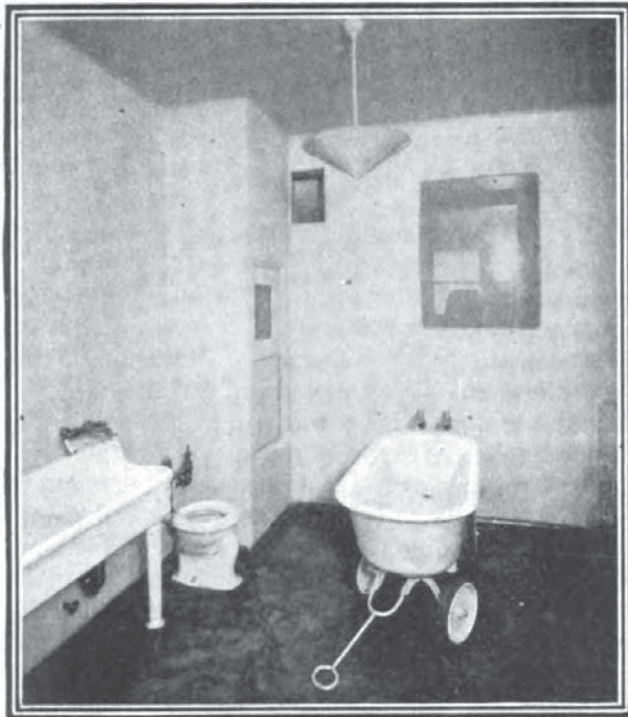
THE NEW LYING-IN HOSPITAL OF THE CITY OF NEW YORK.

WHEN, two hundred years ago, surgery was in the hands of the barbers—and barbarous,—when, a hundred years ago, childbirth was in the hands of midwives, untrained and unclean, “man-midwife” was a term of reproach. Yet emergencies as sudden and overwhelming as any in surgery are not infrequent in obstetrics; rigid precautions against infection are as necessary in confinement as in the gravest of operations; and it is not easy to name a service to the state that any citizen may render which is better than this,—to safeguard its mothers in the perilous crises of their lives, and to preserve its little children. Most of the perils are preventable. What Lister, the pioneer in antiseptic methods, did for general surgery, Semmelweiss did for obstetrics. Before the day of asepsis, one of the foremost operators of England gravely counseled that all hospitals should be built of wood, in order that they might be frequently burned to the ground to clear their wards of blood-poisoning and gangrene. In an Edinburgh hospital, in days not very far past, there were as many as forty con-

secutive deliveries after which the mothers died infected. Now maternities vie with each other to show series of 1,500, or even 3,000, consecutive labors without a septic death, or two deaths to the thousand from all causes. Both death-rate and illness-rate have fallen wonderfully.

And who have been our teachers? The specialists in obstetrics, equipped with their own wards, or their own hospitals, applying modern methods, training obstetricians to succeed them. Indeed, it has come to this: the well-to-do woman is less safe in childbirth in her mansion than the poorest of her sisters in a maternity. The everyday doctor shows in his practice no such periods of immunity as the average hospital can from childbed fever, which is blood-poisoning, which is dirty finger-nails and dirty instruments, unscrubbed, unboiled. And if this be true of a trained man, what shall be said of the untrained woman whose only qualification or certificate of fitness is that she has borne children herself? Of the 50,000 babies arriving last year in the Borough of Manhattan, over half were delivered by midwives, and these midwives were not trained, examined, licensed, and reexamined at stated intervals, as in Germany. Even among our better classes, who employ physicians, this special work is so cheapened that studious care is discouraged. In view of these facts it is evident that a great school of practice, as well as a great house of refuge from the poorer midwives, is a need of that metropolis to which the destitute and the foreigner swarm in vast numbers.

Mr. J. Pierpont Morgan has just completed and given to the Society of the Lying-In Hospital of New York City, at a cost of \$1,350,000, a wonderful white house expressly built for its use. It stands on Second Avenue, occupying the end of the block between Seventeenth and Eighteenth streets, overlooking Stuyvesant Square. Its three frontages are, respectively, 184, 166, and 83 feet. Its height is 150 feet. Four electric elevators run to the roof, to one of the most attractive features, the solarium. This spacious room, enclosed in glass, is supplied with plants and easy-chairs, and gives sun baths to many convalescents brought up here on their beds; for those who can walk an open-air outside promenade is provided for fair weather. On the roof, too, are the photographers' quarters, and chambers containing air-filters and ex-



THE RECEIVING ROOM FOR PATIENTS.

(The bath-tub is on rollers. All edges are rounded, all surfaces shining. Even the window is flush with the wall. Under the group of electric bulbs is an inverted cone, reflecting all light to the ceiling, to be diffused in a soft radiance; no naked light is seen. Here a patient undresses and is bathed and shampooed; then puts on hospital clothing before entering the wards.)

haust fans, ten in number, each six feet in diameter. From these run three miles of galvanized iron ducts for ventilation and heating. These figures hint at the stress laid on purity of air, evenness of temperature, and frequent change, driven, as it is, through every part of the great building by means of 600-horse-power boilers in the cellar.

On the top floor is an operating theater, with its rooms for sterilizing and etherizing and its laboratories. Here is also the kitchen.

Next below are three stories all designed alike, each complete in itself, to which all the rest of the building is accessory. Here, overlooking all adjoining roofs, 200 patients live. The wards are of the great height of $17\frac{1}{2}$ feet, and 30 feet in

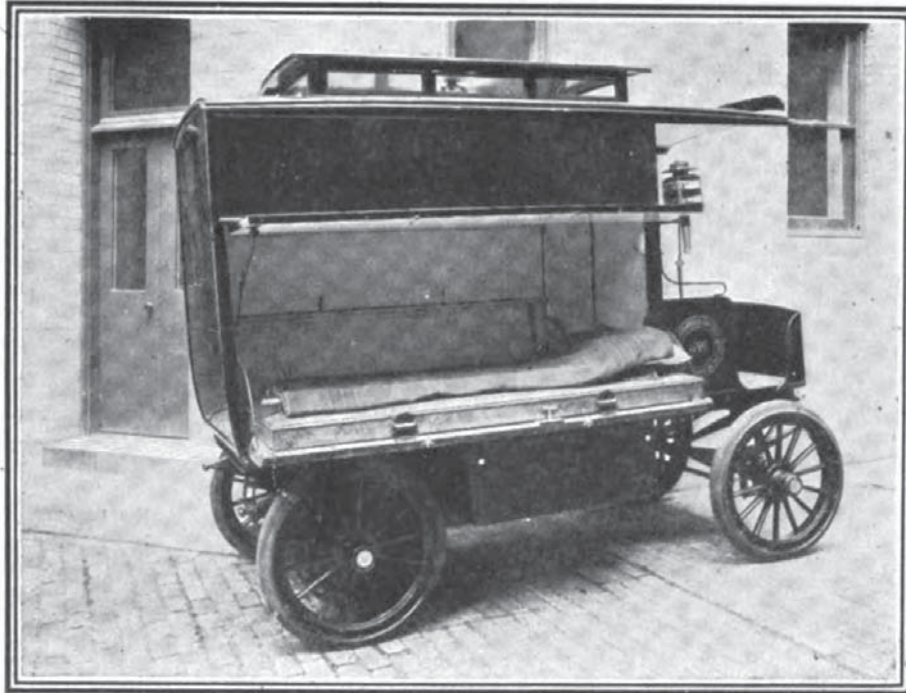
width, with two rows of beds. They are planned for 9 beds in the waiting-room, 9, 11, 19, and 20 beds, respectively in the convalescent wards, 8 in the babies' ward, with an isolating room for each ward. They have common dining rooms, nurses' rooms, and nursery, and a large sitting room for convalescents, where a bed can be rolled in to meet the visitor not allowed in the ward. Near the delivery room, with its three glass-topped tables covered with soft pads, its sterilizers and stands, is a students' waiting room. Mezzanine floors provide offices for the physician-in-waiting, for the nurses' workroom, and for storage of linen and supplies. This arrangement is ingenious, since the unusual height of ceiling necessary in the large wards to yield sufficient cubic air space furnishes headroom for an additional story over all the small rooms on the same floor.

We descend to the third floor. Here, at one end, only accessible through an open-air corridor, are the sixteen rooms that make up the independent and isolated quarters of the septic (or infected) department, with nurses' rooms, laundry, and kitchen of its own. On other parts of this floor are the sleeping apartments of the male,—and, further on, of the female,—graduates in medicine, who are under instruction,—provision for fifteen in all. Here, too, are the servants' quarters. The second floor is given up mainly to nurses. On the first floor are the executive offices, a lecture room and a library for staff and students, and a room for storing the hospital



THE SOLARIUM ON THE ROOF.

(It is full of sunlight and plants, is warmed by radiators all about, has a promenade outside, and has room for a number of beds. The chairs are comfortable, and built so as to be easily cleaned.)



THE ELECTRIC AMBULANCE.

(It embodies new features, in opening from the side and being lighted from the top. Its great weight lessens jars and swaying.)

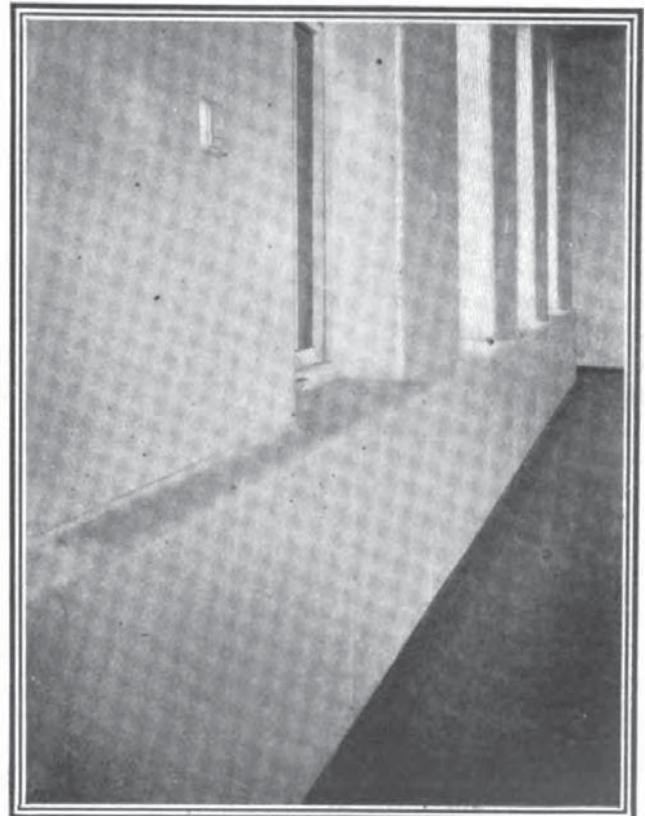
records. In the basement there are more offices, the waiting and examining rooms for patients, clothes rooms, a chapel, a mortuary, and a stable for the electric ambulance. In another part forty students may live in fifteen bedrooms, with sitting rooms and a writing room attached. In the cellar are engines and dynamos, a storage battery that will run the building two days in case of accident, and a refrigerating plant that pumps cold to refrigerators all over the building, to kitchens and wards alike.

The interior presents many notable features and interesting details. Some are original and peculiar. For, in this house, the immaculate, to catch dirt, or to hold it, is the deadliest of the sins of construction. One must abolish all corners, the uncleanable; all cracks, all seams, all hiding-places however minute, whether they be grain of wood, of stone, of plastered wall, or joint of tiling. Every surface must shine. Every wall meets the ceiling in a simple cove without mouldings, and it meets the floor in the same way. The upper angles or corners of doors and windows are rounded. Doors and interior windows, and clocks and sterilizers, are set into the walls, flush with the surface. Radiators, which are notorious dust-collectors, are boxed in. Paneling is abhorred. The doors are flat wooden slabs, enamel painted. Yet it must not be supposed that their proportions are uncomely, only the absence of trim or framing is an architectural loss.

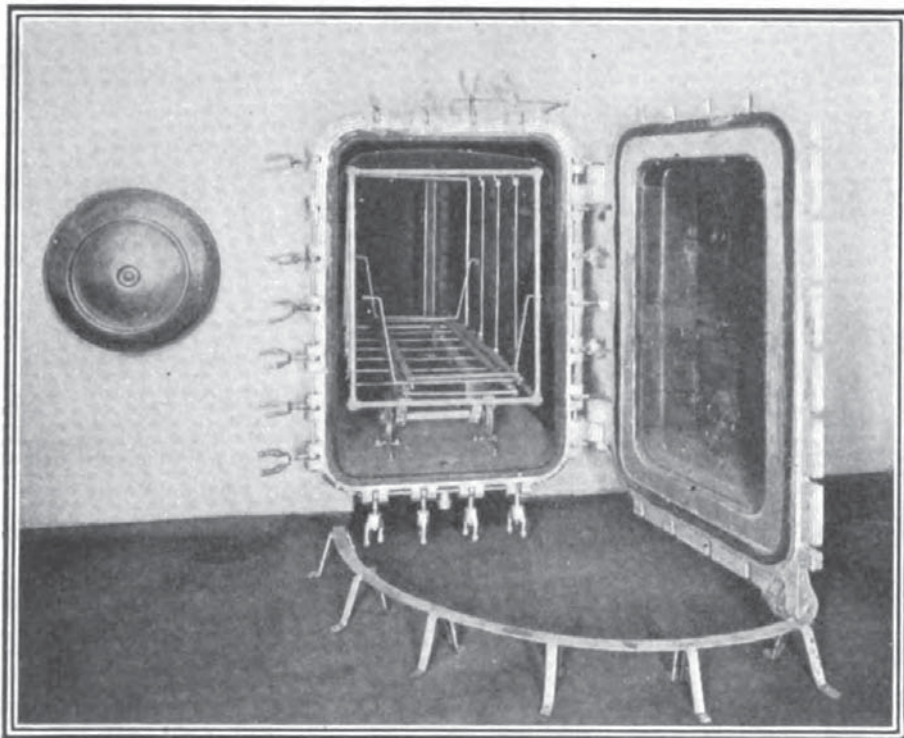
To avoid shaking down of dust, the window shades run on the outside of the windows. The finish of floor and walls has a glazed look, and all the furniture, too, for it is iron, enameled white, and glass. The flooring material—nightmare of all hospital superintendents and builders—is lignolith, a compound of sawdust and cement, made in any tint. Neither noisy nor cold, like hard cement or tiling, it is laid in one unbroken surface. Its one defect is a tendency to crack.

Thus the hose and scrubbing-brush have sway and free access on every least or largest surface of this gleaming, polished hostelry. And the whole is of a spotlessness as no fuller can white it. The lighting of these wards

at night is unusual. Our common practice is not to contrive a diffused illumination, but to con-



SIDE-WALL OF WARD, SHOWING RADIATORS ENCLOSED, THEREBY PREVENTING THE ACCUMULATION OF INACCESSIBLE DUST AND GERMS.

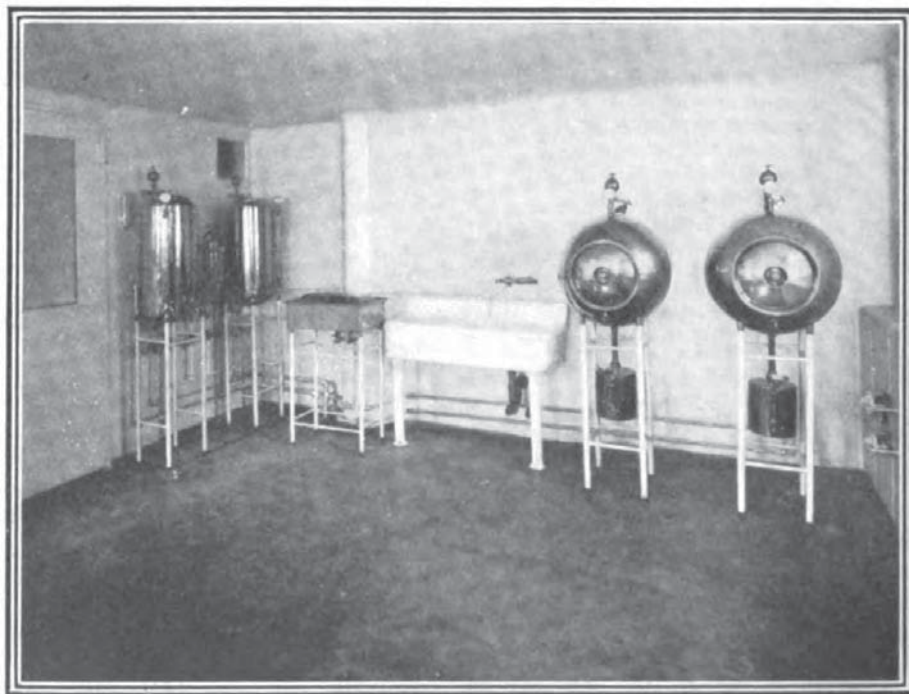


LARGE STERILIZER USED TO DISINFECT BEDS, BEDDING, AND CLOTHING.
(A smaller sterilizer, with circular opening, is seen on the left.)

concentrate, to exhibit, light. Here the groups of incandescent bulbs hanging from the ceiling are shielded by an inverted cone which casts back all light to the ceiling and to the higher walls, whence it is reflected, sufficiently bright and gratefully softened. Moreover, a switch in the wall controls a "dimmer," which can cut down the light during sleep hours to any degree.

One hesitates to offer any criticism of this stately foundation with its exalted purpose. Yet again and again we must protest that charity, which is love, must not lack cordiality, warmth, sympathy. Science must not be so clothed as to seem heartlessly impersonal, indifferent to human suffering. The greeting at the inn is proverbially cordial. The reception at any hospital is notoriously inhospitable. If the well and well-dressed are thus affected, how must this greeting work upon the timid, the suspicious, the shabby? Why

erly attended thus are brought into the hospital. The out-patient visits last year numbered



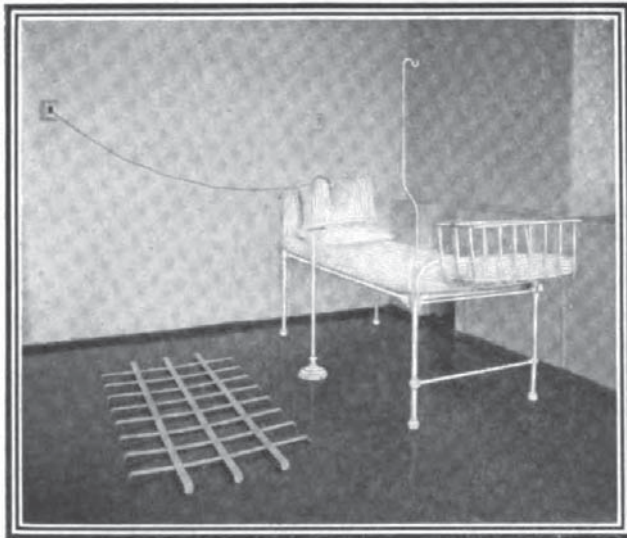
THE STERILIZING ROOM.

(In the center is the tank for washing hands or instruments. At the right are two sterilizers, with the gauges and safety valves that watch over them, for dressings. At the left the boiler for instruments; against the side-walls are the water sterilizers. The little cage by the door works the automatic device for keeping the room at an even temperature. The door, flush with the wall and with the least possible trim, is worthy of note. It is without panels and rounded at its upper corners.)

should every wall be blue-white, bald, chilling and repellent, as they are here, when an ivory tint, a studied symmetry of relief, perhaps a simple scheme of decoration, would rest the eyes of the bedridden, hungry for color and interest? Is the mental effect nothing, or much? The fine tints of the Presbyterian Hospital's operating room, or that of the Massachusetts General, or the light and color of the Polhemus Memorial Clinic, are but a few of many contrasting examples.

The work of this society is twofold. — out-patient or home care, and indoor or hospital care. Doctors, with students or nurses to assist them, go out free of charge to attend destitute patients in their crowded rooms.

Those who cannot be prop-



ENAMELED IRON BED, WITH BABY'S IRON CRIB-BASKET ATTACHED.

(The movable electric-light standard; the wall-light; the easily cleaned spring; three-part, covered mattress, and the standard for the douche-bag are shown. The absence of angles, joints, or cracks about the bed, windows, boxed-in radiators, and junction of side walls and floors, that might harbor dirt or be difficult to clean, is noteworthy. All surfaces are smooth and glistening, therefore easily washed.)

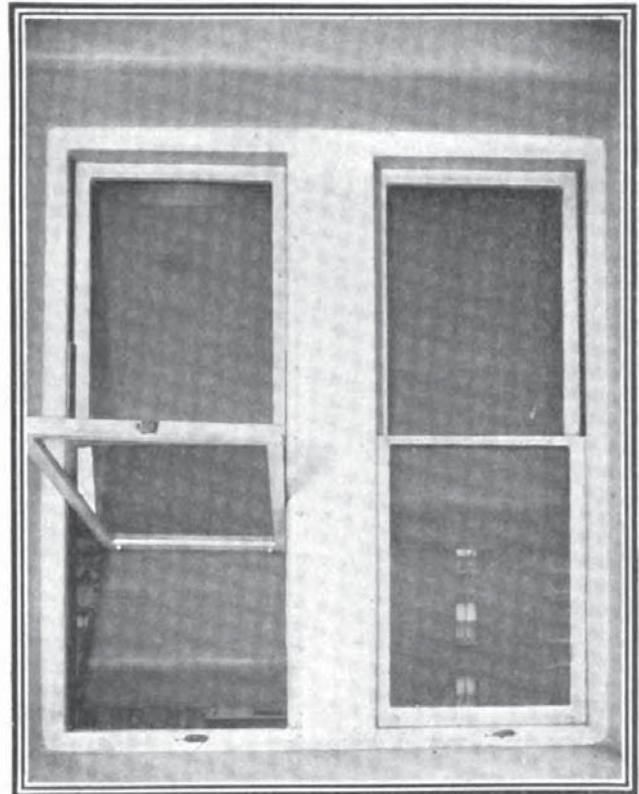
47,000, with the remarkable average of 18 to each of the 2,738 patients. This is evidence of thoroughness in the care of the great East Side, and exhibits an enormous amount of free service, when one considers that 5 per cent. of the babies of the borough are ushered in under the wing of this great charity.

Hereafter, in addition to the attendance on women in their homes, there can be housed in the newly completed building nearly 200 patients. These will be waited on by 175 people, the number of nurses being 75, under the supervision of specialists and noted consultants, with a staff of



CORNER OF THE NURSERY, SHOWING WHERE THE BABIES ARE BATHED.

resident physicians, assisted by 15 graduates in medicine and 40 students. Private subscription must provide \$200,000 a year to administer this work with the building full. No patient pays. There are no private rooms for rent. The students are charged \$20 for a two-weeks' training, and \$5 for their meals, and a very carefully supervised course and routine is followed out. The excellent methods of this great work, outdoor and in, were perfected by Drs. J. C. Edgar, now



A WINDOW IN THE OPERATING ROOM.

(To avoid dust showers when shades roll up and down, they are hung outside the window-frames. The sashes slide to the pivot, then tilt for better cleaning. The window corners are rounded out.)

professor of obstetrics at Cornell; Austin Flint, Jr., Professor at the University-Bellevue College; James W. Markoe, of masterly executive ability; S. W. Lambert, and H. McM. Painter. The architect of the building was R. H. Robertson.

Helpless and suffering, ignorant and poor, the mother-to-be places herself under this protection. The best that skill and science and sympathy, with money, can provide, are hers. In a spotless bed she watches the tiny new arrival laid in his iron wicker crib that hangs at her bed-foot, and is watched over by a system and a perfectness of skill in every detail, which minimizes suffering and danger, and teaches invaluable lessons in cleanliness, in order, and in the care of herself and her child.