Women in Medicine at Indiana University
Purdue University Indianapolis

A Walking Trail

by Mary Owen, graduate student in Public History
Introduction

Women on IUPUI’s medical campus have worked towards the growth and development of the university’s medical programs. As doctors, nurses, and staff, they established programs, instituted reforms, and earned national reputations as leaders in their fields. This trail provides an opportunity to learn about important women in IUPUI’s history, to see where they worked and what entities they helped to establish, and to understand how their historical presence continues to impact the modern-day IUPUI campus.

This version of the women’s history trail is intended for use as an accompanying guide for walking on IUPUI’s medical campus. For a more in-depth version of the trail, information on methodology, and bibliographical citations, please visit the IUPUI women’s history trail website.
Itinerary:

Site 1: Robert Long Hospital (LO)
1110 W. Michigan St.

Site 2: William H. Coleman Hospital for Women (CF)
1140 W. Michigan St.

Site 3: Ball Nurses’ Residence (BR)
1226 W. Michigan St.

Site 4: Riley Hospital for Children (RI)
702 Barnhill Dr.

Site 5: Fesler Hall (FH)
1120 South Dr.
Indiana University's struggle to establish a viable medical program in Indianapolis ended on April 7, 1908, when it succeeded in consolidating its medical curriculum with programs at Purdue University and the Central College of Physicians and Surgeons in Indianapolis. The idea to begin a medical school originated with Indiana University's president, William Lowe Bryan, in 1903. The original plan called for a two-year course in Bloomington. Plans changed, however, when Purdue University decided to establish its own medical school by consolidating two independently run institutions in Indianapolis. The state would only fund one program, and Indiana University was determined to fight. In January 1906, the university placed itself in direct competition with Purdue University when it moved some of its medical coursework to Indianapolis. Indiana University would eventually prove victorious, and the 1908 merger would signal the beginnings of Indiana University's monopoly on medical training in Indiana.

Beginning with the opening of the Robert Long Hospital in February 1912, Indiana University's medical campus on West Michigan Street grew slowly. In September 1919, the University opened its first classroom building, Emerson Hall. The coming of the 1920s and 1930s signaled a huge growth on the medical campus, with the construction of six buildings: Riley Hospital for Children, the William H. Coleman Hospital for Women, Ball Nurses' Residence, Rotary Convalescent Home, the Clinical Building, and Fesler Hall. Additional construction has continued into the present day.

While early roles for women in medicine remained limited, those who did achieve positions at the Indiana University School of Medicine worked to make the medical program a success. As physicians, nurses, domestics, and secretaries, these women dedicated their lives to the care of the sick. The everyday lives of women at the medical campus were uniquely tied to its environment. Early nurses, for example, both lived and worked on site. Thus, stepping back into the places where these women walked provides a unique opportunity to truly understand their experiences.
Prior to the opening of the Robert W. Long Hospital on June 15, 1914, the Indiana University School of Medicine did not have its own teaching hospital. Its teaching facilities were located downtown at the site of the former Central College of Physicians and Surgeons. Without a hospital of its own, the School of Medicine sent students to City Hospital to complete their medical rotations.

In order to offer a top-notch medical program, Indiana University needed its own hospital, but had no funds to build one. The school struggled with this problem from its move to Indianapolis in 1906 until a local Indianapolis physician, Robert Long, donated the money to build a hospital in 1911. The university eventually settled on a site on the west side of the city and began construction. When concluded, Long Hospital became the first building on Indiana University’s current medical campus. Besides medical facilities, Long Hospital offered Indiana University’s first Training School for Nurses. From the hospital’s beginnings, women found ample opportunities to contribute to hospital operations and patient care as physicians, nurses, and domestic staff.
One of the earliest acceptable female occupations, nursing first evolved into a trained profession in the years after the Civil War. Training schools for nurses slowly sprang up along the east coast and eventually spread throughout the country. By the time the Indiana University Training School for Nurses opened, fourteen other schools of nursing had been established throughout the state. In 1914, Dr. Charles P. Emerson, Dean of the Medical School, hired Alice Fitzgerald as the first director of the new Indiana University Training School for Nurses.

Alice Fitzgerald only remained at Indiana University for one year, but in that time she succeeded in creating a top-notch nursing program among the most desolate surroundings. When she arrived at Long Hospital, construction was not complete. The neighborhood was less than attractive. To the west stood the city dump. The rest of the neighborhood contained cornfields and a few isolated hospitals. Fitzgerald later recalled, “When I arrived in Indiana, the Hospital seemed so lonely and small.”

Thus began Fitzgerald’s affiliation with Indiana University. When she arrived at Long Hospital, Fitzgerald equipped it with all the best technologies. She also planned the nursing school, created its curriculum, designed the nurses’ uniforms and caps, and oversaw the admittance of the first students. Fitzgerald's initial nursing staff was very small, with only one instructor, two head nurses, a night supervisor, an operating room supervisor, and seven staff nurses. In the first year, five students entered the training school. Fitzgerald’s requirements for admission seem strict now, but in 1914 followed the guidelines established by the best training schools in the country. Fitzgerald only admitted young, single, female students in the best of health. The program lasted three years and provided nurses-in-training with coursework as well as on-the-job training.

Years later Thurman Rice, a physician on the medical campus, would remember that Fitzgerald left the Nurses Training School because she could not cope with its rural surroundings. Available records, however, only indicate that after leaving the training school, Fitzgerald traveled to Europe, where she served as a nurse for wounded soldiers, first with the British Army and later with the American Red Cross. She later became the first Director of the Nursing Bureau of League of Red Cross Societies at Geneva, Switzerland.
In describing Keller's contributions to the advancement of women, Grace Julian Clarke declared, “Woman’s world is now man’s world, and it was his failures and her needs which have brought them together to form a world better than any yet known.” Keller's participation in medicine, politics, and social organizations would indeed open many new doors to women in Indianapolis.

When Keller joined the faculty of the Indiana University School of Medicine in 1908, she became its first female faculty member. In 1906, Keller had joined the faculty of the Central College of Physicians and Surgeons in Indianapolis. When it merged to form the Indiana University School of Medicine in 1908, Keller retained a position as a faculty member at the new school. Around the turn of the century, female physicians were rarely welcomed onto university hospital staffs, but Dr. Keller proved to be an exception, serving as an associate professor of pediatrics until 1918. Among women choosing to specialize, many chose pediatric medicine because the care of children had traditionally been accepted as a woman’s role.

Many early female physicians in the United States were staunch feminists, and Keller was no exception. In 1899 when she married Dr. Eugene Buehler, Keller continued to use her maiden name. Her feminism was also evident in her great interest in woman's suffrage. When the Woman's Franchise League of Indiana organized in 1911, Keller became its first president. She retained this position until 1917, and succeeded in extending the league statewide. Keller also edited the suffrage department column of The Citizen magazine and actively campaigned to have women represented on the Indianapolis Board of Education.

Besides her work as a physician and suffragette, Keller was also an active clubwoman. She served as vice-president of the Indiana Federation of Clubs, was a member of the Local Council of Women, and was a charter member of the Women's Rotary Club in Indianapolis.
After graduating from Indiana Medical College in 1906, Jane Merrill Ketcham practiced general medicine for six years before joining the faculty of the Indiana University School of Medicine in 1912. Like Keller, Ketcham was a pioneer female physician at Indiana University, although she despised such titles and did not consider herself to be particularly unique. “Don’t you dare call me a pioneer woman doctor,” she warned one Indianapolis Star journalist in 1960. At Indiana University, Ketcham became a professor of clinical medicine, although she primarily practiced in obstetrics.

While Amelia Keller’s feminism led her to become a suffragette, Jane Merrill Ketcham used her feminism to practice social medicine. Throughout the nineteenth and early twentieth centuries, many female physicians used their skills to offer free healthcare to the poor. As women began to search for ways to extend their influence outside the home, many began to believe that medical care was a natural extension of women’s roles. Some opened dispensaries while others volunteered at these institutions. As a woman with a social conscience, Ketcham spent many years providing free healthcare to those in need. She served as a house doctor at a home for unwed mothers. She also provided free care to victims of Indianapolis’s 1913 flood, after the university asked her to take charge of the flood relief hospital at Manual Training High School. Years later, in 1933, she would do the same in Jeffersonville, traveling by boat in search of smallpox victims.

Regardless of Keller and Ketcham’s presence in the School of Medicine, female students remained a distinct minority. Overall, most female physicians did not achieve the success characteristic of Keller or Ketcham’s lives. Women’s experiences at the same institutions could be divided, as oral history interviews prove some women at the Indiana University School of Medicine remembered experiencing discrimination while others did not. As a counter to this negative environment, female physicians in Indianapolis began a medical sorority for students, who would meet periodically at the doctors’ homes. Dr. Keller and Dr. Ketcham were among those to facilitate this organization, although students later recalled that Ketcham was very stern and not very encouraging. Perhaps this is where she got her nickname as the "Dean of Indianapolis Women Physicians."
The Department of Social Services at the Indiana University Medical Center had its origins in the development of professional training for medical and social workers. Schools of social work and departments of medical social work first opened around the turn-of-the-century. In 1910, when Ulysses G. Weatherly, head of the department of Economics and Social Sciences at IU Bloomington, proposed to President William Lowe Bryan that a program be implemented at the Indiana University Medical Center, the field of medical social work was still in its infancy.

In June 1911, Indiana University President William Lowe Bryan wrote a letter to Edna Henry asking if she would take a position establishing a sub-department of the Bloomington Department of Sociology at the Medical Center. The new department would “study charity problems in connection with the city dispensary and later in connection with the city hospital, and also in order to render service to the deserving poor who come to the medical school for assistance.”

Henry began establishing the department in September 1911, and spent the first year establishing connections, building a curriculum, and collecting case records for teaching and research. She succeeded in creating a successful social work program that not only provided students with practical experience but also offered the city much-needed social services. When the Robert Long Hospital opened in 1914, Henry’s offices were housed in the hospital. By the 1915-1916 school year, IU had temporarily fallen on hard times and the department’s budget was reduced to $5000. Henry succeeded in reorganizing the school to offer more formal courses under the new budget restrictions.

Henry dedicated her entire life to social work. In conjunction with her work at the Medical Center, Henry organized a city dispensary to aid those in need. At the close of World War I, she was invited to Washington D.C. to organize medical social service work in the army, where she served a term as supervisor of reconstruction aids in the Surgeon General’s office. Henry also became the first president of the American Association of Hospital Social Workers and the first treasurer of the Marion County Tuberculosis Association.

In 1921, after ten years of developing medical social work at Indiana University Medical Center, Henry resigned from her position as director due to failing health. She continued teaching classes in her home until 1926. Henry died in June 1942.
When it opened on October 10, 1927, the William H. Coleman Hospital for Women became the first women’s hospital built in the state, and only the twelfth in the nation. It quickly earned a place at the forefront of women’s health research in the United States. Between 1927 and 1974, hospital doctors and nurses pioneered many new technologies in obstetrics and gynecology.

For centuries, midwives supervised the birth of babies. When obstetrics and gynecology emerged as medical fields circa 1860, physicians shared responsibility with midwives for attending to births. The vast majority of these births remained in the mothers’ homes. Around the turn-of-the-century, as technology advanced and hospitals began to offer specialized treatment, women with birth complications began to be treated in hospitals. However, as antibiotics had not yet been invented, pregnant mothers faced a great risk of infection from contagious patients. As a result, separate women’s hospitals began to open throughout the country.

The William Coleman Hospital for Women became a reality in 1926, when Mr. and Mrs. William Coleman donated between $300,000 and $350,000 for the creation of a teaching hospital for obstetrics and gynecology in Indianapolis. The gift was prompted by the death of their only daughter, Suemma, as a result of complications to a pregnancy.

The hospital was designed by the famous local architect, Robert Frost Daggett. The completed hospital boasted 22 private rooms for patients, 64 beds, several delivery rooms, nurseries, 2 operating rooms, a sterilization room, an anesthesia room, and doctor’s quarters. As a teaching hospital, a large percentage of patients would have been lower-income women, as evidenced by the larger numbers of beds compared to private rooms.

Besides becoming the first women’s hospital in Indiana, Coleman Hospital was also the first hospital in the state to offer a residency in obstetrics and gynecology. After opening, doctors and nurses at Coleman Hospital pioneered groundbreaking medical research for women’s health. Between 1927 and 1974 it earned nationwide recognition for a number of research studies. These included treatments for infants with birth defects,
pioneering efforts in the use of new obstetric anesthetics, and research on ovarian tumors during pregnancy. In addition, nurses in the 1950s at the William H. Coleman Hospital for Women pioneered a study in alternates to footprint technology, using fingerprint training from the Indianapolis police. In the 1960s, Coleman Hospital became one of the first institutions to use electronic monitors to record the heartbeats of fetuses.

The hospital served patients and pioneered research in women’s health for almost fifty years. In 1974, Coleman Hospital closed because the building needed extensive remodeling if it was to continue to operate as a hospital. It no longer met fire codes, and its equipment had become outdated. In addition, while specialized hospitals would again rise to popularity towards the end of the twentieth century, in the 1960s and 1970s, they had lost popularity.

Advances in antibiotics after World War II had ended the practical need for separate women’s hospitals, and some hospitals chose to consolidate all of their care into one program. When the new University Hospital opened in 1974, university trustees decided to move its obstetric and gynecology practice to the second floor of University Hospital. The former Coleman Hospital building now houses the Division of Allied Health Sciences of Indiana University School of Medicine.
Nursing students in the Training School were required to live on site. In the earliest years, finding adequate housing proved a big challenge. The first nurses lived at Long Hospital before the university purchased three houses nearby. Known as the "first, second, and third cottages," these houses soon ran out of room. No further houses were available near the hospital, so the university rented a fourth home eight blocks away. By 1918, the lease expired and Fourth Cottage moved to 433 North Illinois Street, fifteen blocks from the hospital. From these longer distances, students were bussed to the hospital in a makeshift truck. A staff nurse lived at each site and acted as their chaperone. By 1917, the university began building two-story stucco cottages near Long Hospital. Additional housing was made available on the third floor of Riley Hospital. Even this housing was not sufficient to meet the demand.

The need for a larger, more unified space was finally made possible in February 1926 when George and Frank Ball of Muncie donated $500,000 for the construction of a nurses' home. Opened in October 1928, Ball Nurses' Residence housed a capacity of 165 nurses, allowing the Training School to admit more nursing students. Whereas in 1927, the training school admitted 28 new trainees, in 1928 they admitted 47.

The building housed classrooms for the nurses, offices for the instructors and director, living rooms, kitchenettes, laundry areas, bedrooms for faculty and students, and a gymnasium. Ball Nurses' Residence provided nursing students a place to hold activities and resulted in their ability to experience a more normal college experience. In the 1950s, for example, activities available at Ball included student government, water ballet, various sports, dances, and chorus.
In Indiana University School of Medicine’s early days, a few women earned staff positions as physicians, but the majority of the women present were affiliated with the nurses’ training school. While it would evolve to become a separate, accredited school in 1965, the original training school operated under the control of the School of Medicine.

The curriculum at the original Indiana University Training School for Nurses focused mainly on simple tasks, including housekeeping, changing dressings, washing soiled clothing, and bathing patients. Student nurses at IU worked an eight-hour day, but worked nine to twelve hours if assigned to night duty. Most of their classes were held in the east operating room of Long Hospital until Ball Nurses’ Residence opened in 1928. Classrooms were set up as practice hospitals, with beds, cribs, and dolls. Once the initial six-month probation period ended, student nurses worked in the hospital six and one half days per week with two weeks of vacation per year.

A nurse’s day began at 6:45 A.M. when she assembled for “Prayers” at Long Hospital. Morning prayers were not only a time for reflection, but also announcements, assignments, and the awarding of nursing caps, senior bars, and class pins. From there, a nurse would begin her work. While rules would change over the years, early nurses were not allowed to talk to their patients. Despite this restriction, a large number later recalled that they had still developed friendships. Many even used the big pockets of their uniforms to sneak food to their patients.

A strict structure of seniority ruled the everyday lives of nurses in the IU Medical Center system. One nurse later recalled that seniority was observed in every aspect of daily life from seating in prayer services and classrooms to the occupation of elevators. If doctors and nurses were both waiting for an elevator, nurses were not allowed to enter unless there was additional room after the doctors had all entered the elevator. Overall, nursing students had varied reasons for entering the program. In 1947 when a group of students were polled, answers ranged from “I knew that with such high entrance requirements it would be good” to “Medical and Dental schools here – good chances for dates.”
When Alice Fitzgerald resigned her position in 1915, Ethel P. Clarke became the new director. Born in England, Clarke had studied nursing at University of Maryland Training School for Nurses and Teacher's College at Columbia University. Unlike most of the early nursing directors and head nurses, Clarke had chosen to continue her profession in nursing after marrying Thomas Clarke. During her years as director, Clarke witnessed the development of the medical center from one lone hospital to a true campus of buildings, observing the construction of Emerson Hall, Riley Hospital for Children, the William H. Coleman Hospital for Women, Rotary Convalescent Home, and Ball Nurses’ Residence.

As the director in charge of nursing at the time construction began on Ball Nurses’ Residence, Clarke oversaw the building’s design. She also selected all of its furnishings and equipment. Under Clarke’s direction, the Training School for Nurses continued to grow. Clarke planned and organized entrance examinations for potential students. She also designed the school’s pin and added a cape to the uniform. When students approached Clarke with a plan to create an Alumnae Association and bring a chapter of the Sigma Theta Tau honorary society to campus, Clarke assisted in the development of both of these plans.

Students remembered Ethel Clarke as “very stately, dignified, and reserved and commanded the respect of everyone. She was also extremely critical and strict. At the same time she was most understanding and fair.” Clarke headed the nursing program until 1931, when she resigned to move with her husband to Bridgeport, Connecticut, where she became director of nurses at the Bridgeport Hospital.
In 1916, a group of friends of poet James Whitcomb Riley formed the Riley Memorial Fund in his honor. The group intended to collect enough money to build a children’s hospital on Indiana University’s campus, since Riley had always loved children, and wrote about them in many of his poems. This dream became a reality when the hospital finally opened in 1924 with a bed capacity of eighty patients.

Besides traditional medicine, Riley Hospital offered one of Indiana’s first occupational therapy programs. The hospital would go on to become a national leader in children’s health care.

Women at Riley Hospital have served in many important capacities. As doctors, nurses, and occupational therapists, women have provided medical care to thousands of children.
A pioneer in her field, Winifred Kahmann later explained how she chose her profession: “Two of my sisters were nurses… I thought I wanted to be but mother said she didn’t want any more nurses. I went into about the closest thing to it.” Winifred Kahmann became a student in the first graduating class in occupational therapy at Devereux Mansion School in Massachusetts, one of the first schools to offer the degree. When Kahmann graduated, few hospitals in the United States had accepted the value of this new field. In fact, the Indianapolis Star later declared that she was ”instrumental in introducing it to the Middle West.”

In 1924, the Indianapolis Junior League hired Kahmann to head the occupational therapy clinic that it planned to establish at Riley Hospital for Children. Under Kahmann’s direction, the occupational therapy program at Riley evolved into one of the best programs in the country. After becoming its own separate program within the School of Medicine, a degree in occupational therapy was offered under Kahmann’s supervision. In 1934, she was appointed director of occupational therapy and physiotherapy. In this role, Kahmann supervised programs at all of Indiana University’s hospitals. She also coordinated the cerebral palsy clinic and helped establish a burn clinic. By this time, Kahmann was known nationally not only as a pioneer but also as one of the best occupational therapists in the country. Students nationwide flocked to Indiana University to train under her.

During the early 1940s, Kahmann became a member of the National Research Council Committee on Occupational Therapy, which worked to develop an official therapy program approved by the office of the Surgeon General. As a result of this activity as well as her national reputation, in 1943, the United States Army appointed Kahmann its Chief of Occupational Therapy. She served in Washington, D.C. for two and a half years, overseeing the therapy of soldiers wounded in World War II. In 1946, Kahmann returned to Riley Hospital, where she continued her duties until retiring in 1959.
Nancy Arnold Roeske earned her degree in medicine at a time when new opportunities were opening for women physicians. Roeske later credited her success in medicine to the feminist movement of the 1960s and 1970s, stating, “The recrudescence of the woman’s movement over the past 2 decades has given me an opportunity to move beyond the social constraints placed on previous generations of women physicians in medical education and political activism.”

A woman of many achievements, known both locally and nationally for her commitment to Indiana University's psychiatry program and to her patients, Dr. Roeske's lifestyle was later described by her colleagues as consisting of “Hard work, a deep professional commitment and an immense concern for her students and trainees…”

In 1964, Roeske became the director of the Riley Child Guidance Clinic. Ten years later, she was appointed chair of the Department of Psychiatry. She was highly interested in medical education and worked to redevelop the department's undergraduate curriculum. She also served as the coordinator of medical education in the Department of Psychiatry from 1976 until her death in 1986. Psychiatrists nationwide regarded Roeske as an outstanding leader, and credited her with starting many innovative programs in patient care and student education.

In the larger Indiana community, Roeske offered mental health services to underprivileged families in Central Indiana. Roeske also became a leading expert on mental illness associated with blindness, and served at the Indiana State School for the Blind for twenty-two years. Her contributions to the field of psychiatry extended well beyond her influences in Indiana. She served as editor of the *Psychiatric Annals*, a nationally recognized psychiatry journal. She was also elected to the Board of Trustees of American Psychiatric Association and the American Medical Association. Roeske became an advocate for issues facing female physicians, serving as the first chair of the American Psychiatrists Association's Task Force on Women. For all of her work, both locally and nationally, Roeske received the distinguished American Association of University Women Achievement Award in 1979. Roeske died in 1986.
Fesler Hall houses the school of admissions and the administrative offices of Indiana University School of Medicine. Opened in 1939, the building originally belonged to the State Board of Health, which had chosen to locate its offices at the medical center because of the location's proximity to Indiana University's hospitals and to City Hospital (now Wishard). By the mid-1940s, the State Board of Health had outgrown the building, and began construction on a new facility. When its new building opened in 1949, Indiana University obtained the old facility, renamed it Fesler Hall, and began to use the space for offices.

During her years in medical administration, Doris Merritt, an assistant dean, and later associate dean, in the Indiana University School of Medicine, had an office in Fesler Hall. Through the years, as Merritt took on other administrative posts outside the School of Medicine, her office moved to the Administrative Building on N. Lansing St.
As the first female assistant dean at the Indiana University School of Medicine, Doris Merritt earned a reputation as one of the medical school's, and later IUPUI's, most competent administrators. Merritt served in the U.S. Navy before deciding to study medicine. She completed her residency in pediatrics, but after moving to Maryland to the National Institutes of Health (NIH) with her husband in 1957, found that the only available position for her was as executive secretary of the cardiovascular study section in the Division of Research Grants. Merritt found that she loved administrative work.

In 1961, Merritt and her husband accepted positions at Indiana University School of Medicine. She became the director of medical research grants and contracts and an assistant professor of pediatrics. The following year, Merritt became assistant dean for medical research. Under Merritt's guidance, the university obtained millions of dollars for the medical school's construction and research projects. As the Indiana University extension campus began to explore a merger with Purdue University Indianapolis, Merritt was asked in 1965 to serve as assistant dean of research for the entire IU Indianapolis campus. Merritt retained this position after the merger of Indiana University and Purdue University took place in 1969, although her actual title changed several times.

In 1978, Merritt and her husband left Indianapolis and returned to NIH. There, she served as special assistant to the director for research training and resources, and later became the first director of the National Center for Nursing Research. Following her husband's death, Merritt returned to the IU School of Medicine in 1988 as a professor of pediatrics and associate dean. At this time, she did not have an actual job description, but instead took on the role of "the dean who did what needed doing". This included supervising the clinical research center and the Institutional Review Board (IRB). Then, in 1995, due to an unexpected resignation from the dean of the Purdue School of Engineering and Technology at IUPUI, university administrators asked Merritt to take the position as acting dean. She may have been an unlikely candidate, but Merritt's leadership skills made her an appealing choice. Merritt became the first woman dean of the Purdue School of Engineering and Technology at IUPUI.

After retiring as the Dean of Engineering and Technology, Merritt served for a year as Acting Associate Vice President for Research and Graduate Studies before finally retiring from IUPUI in 1998. Because of her dedication to medicine and to IUPUI, three awards have been named in her honor.
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