The year 1890 marked a transition between an old and a new order in the University. The coming of Henry Wade Rogers, as the sixth President, broke the line of Methodist clergymen and introduced the community to a layman who had previously served as Dean of the School of Law at the University of Michigan. His was the task of bringing the institution into conformity with the newer methods, standards and ideals of a modern university. Hitherto the College of Liberal Arts had served as a center, about which clustered the largely autonomous professional schools. Each of the latter had its own President and Board of Trustees, received and held property, administered its affairs and observed its individual commencement exercises. An apt comparison would liken the machinery of the University to the operation of the fledgling United States government under the Articles of Confederation.

It was President Rogers who emphasized that "while this relationship obtained, the University can hardly be said to have been a University except in name." It was he who largely succeeded in amalgamating these separate units into an organic whole, under the management of a single board of control, and created deans to serve as the executive officer of each subordinate school. Not only was authority channeled and centralized, but so also trust funds, receipts and disbursements were handled by a common exchequer. For the first time the vision of President Hinman, at the very start, was made a reality, and the loose fabric of the schools was rewoven so that a uniform pattern and purpose showed throughout the whole.

The last decade of the nineteenth century proved to be a prosperous one for the University in other ways, as well. Two new Schools arose — Music and Speech. The value of its various properties increased from two to more than five million dollars; attendance doubled and tuition receipts tripled. To the Medical School, this
period brought a slightly closer relationship with the University and the first major change in administrative leadership, but only partial adjustments to rapidly shifting concepts in medical education.

In the early Nineties President Rogers wrote, “An institution which is not prepared to give graduate instruction . . . is not a university in fact, whatever it may be in name.” Ten years later, President James restated this truism in the following words: “I am inclined to think that the distinguishing characteristic of the true university — that which will mark it off from a mere group of professional schools — will be found in the existence of a strong graduate school.” Organized activity in this field at Northwestern began in 1891, when conditions for gaining the Master’s and Doctor’s degrees were adopted essentially like those in force today. For nearly twenty years the College of Liberal Arts administered the graduate work through a committee of three, but in 1911 these matters were assigned to a Board of Graduate Studies, on which Medicine, Law and Engineering were represented. Not until 1917 were graduate activities and administration dignified by setting them apart as a School of the University, under a Dean.

THE CONTRACTUAL UNION: 1891

At the end of the 1890-91 session the Medical Faculty directed its Executive Committee to confer with the Trustees of Northwestern University concerning a closer union between the Medical College and the University, and to draw up a contract for the consideration of the Faculty. There presumably was a satisfactory conference, since a detailed set of proposals was placed promptly before the Medical Faculty. A preamble in these resolutions by the Committee plunged deep into a general educational policy for the University: “We believe the mutual interests of Northwestern University and its departments of Medicine, Law, Pharmacy and Dentistry will be promoted by identifying these departments with the University, and we favor the unification of the professional schools in the University.” It seems that this statement represented more than wishful thinking on the part of the Executive Committee, and that it reflected what was already shaping up among all the professional schools. At least, presently and on the same date, each of the four
schools just mentioned did consummate a contract that would make it a branch of the University. In three of the Schools the union was organic and complete, but the Medical School remained fairly autonomous for fifteen more years.

The report-proper counseled that the College, now a department of Northwestern University, could be merged more intimately, but safely, into the University in the manner and on the conditions set forth in twelve proposals. This report was accepted by the Medical Faculty, item by item and as a whole. The final paragraph authorized the President and Secretary of the Board of Trustees of the College to take such action as might be necessary to bring about the union under the terms proposed. With no essential change of meaning, the several provisions were embodied in a legal contract dated July 1, 1891, and the Treasurer of the University at once requested an inventory of all equipment and furnishings owned by the Medical College. With even tighter contracts executed for the Schools of Law, Dentistry and Pharmacy, in one concerted move the University straightway came into complete control and ownership of this set of professional schools. The Medical College, on the contrary, still retained control of its policy-making, its finances and its power to recommend for appointments and removals (except for cause). Each School was destined to benefit ultimately through the surrendering of any remaining autonomy to a recognized University; the latter, in turn, gained stature by true absorptions that put an end to nominal affiliations that had actually been little more than uncontrolled sponsorship.

The lengthy contract between Northwestern University and the Trustees of the Chicago Medical College embodied provisions that can be condensed to the following items:

1. The name to become the Northwestern University Medical School, with Chicago Medical College carried in brackets so long as both sets of trustees desire to retain it.

2. The College to continue its corporate existence until both parties agree to its surrender. This would enable the University to transfer the property held in trust back to the College if both parties agree upon this action.

3. The College to agree to conduct no medical school under its charter so long as the contract remains in force. The University to confer
no medical degree except as recommended by the Medical School
(or the Woman's Medical College if it affiliates).

4. An Executive Committee of the Medical Faculty to be constituted
of five members, elected annually by that Faculty.

5. The previous agreement to continue concerning free lecture-tuition
in the Medical School for students spending two or more years in
the College of Liberal Arts.

6. All alumni of the Chicago Medical College to become alumni of the
Northwestern University Medical School.

7. The University to hold in perpetual trust, for the sole use of the
College, all present property of the College and all future legacies
or endowments to it. The University to devote all fees derived from
medical students to the sole uses of the Medical School.

8. The University to expend no money belonging to or earned by the
Medical School except on recommendation or by concurrence of
its Executive Committee. The same procedure to hold on actions
involving the curriculum, fees, rules governing students, and care of
buildings.

9. The University to appoint members of the Medical Faculty on
recommendation by that Faculty. The University to have the power
of rejecting such nominations and returning them for further con­
sideration and recommendation. The University to have the power
to fill vacancies if the Medical Faculty fail or refuse to make
recommendations. The power to remove members of the Medical
Faculty to be vested in the University Trustees on recommendation
by that Faculty (except in cases of removal for cause, following an
opportunity for hearing).

10. The University to pay out of its own funds so much of the salary of
the Professor of Chemistry as is now paid by the College, and to
continue to do so until that chair is endowed.

11. The University to support the attempt to endow the chairs of
physiology, pathology and chemistry and the attempt to erect
suitable laboratories.

12. The University to hold lots 34 to 42 in block eleven on South Dear­
born Street for the use of the Medical and Pharmaceutical Schools
so long as these Schools remain connected with the University.

Analysis of this contract shows that the University gained noth­
ing new, other than having its name move into primary mention in
the title of the School, and safeguarding the mechanism of faculty
appointments and dismissals. On the other hand, the Medical
School got all of its property held safely in trust and its business affairs managed, while retaining full control of these funds. It received a promise of support in obtaining endowment (which did not materialize) and in a building program. In the latter instance the University did nothing more than advance money at commercial rates; the lots to be “held for use” were actually sold to the Medical School at what promised to be a handsome profit. On the whole, therefore, the new contract did not change the former alliance fundamentally, since the University retained its semblance of possessing a professional school, but still assumed no responsibility for the standards or support of its ward. Actually, the progress toward full union was small. Was the new contract a face-saving move, in view of the bolder action of the other three schools?

The name of the Chicago Medical College was carried as a subtitle on the Annual Announcements until 1910, although it was dropped from the diploma at once. Strangely enough, lethargy kept the old College seal in use until 1924. In the course of years a few changes were made in the provisions of the contract to suit existing working conditions. For example, in 1896 the fifth paragraph, the granting of free tuition to applicants with two or more years’ attendance in the College of Liberal Arts, was repealed. Also, in 1902 there were further changes. The setting up of an Executive Committee in 1878 had been a move toward efficiency that relieved the full Faculty of many burdensome details and gained speed of administrative action. Now its membership was increased to nine; its name would soon change first (1906) to Advisory Council and then (1909) to Medical Council. A curious move made the deanship of the Medical School subject to annual nomination by the Medical Faculty to the Board of Trustees, but after several years the nominating prerogative passed to the President of the University without limitation of time.

INTEGRATION COMPLETED: 1906

Subsequent to a growing sentiment toward replacing the contractual relation with the University by an organic relation, the Trustees of the Chicago Medical College in April, 1903, volunteered to surrender its charter and transfer to the University full title to all
the property heretofore held in trust for the College, thereby making the Medical School an integral part of the University. This recommendation was made, however, "on the condition, or confident expectation, that the University will enact and maintain permanently the two statutes requested by the Medical School, to wit: first, that medical degrees be granted only to the individuals recommended by the Faculty of the Medical School; second, that no appointments or changes in the teaching body of the medical department be made, unless approved by the Medical Faculty." This offer was accepted by the Executive Committee of the University Trustees; it authorized the drawing up of papers necessary to a complete union, and the presentation of these to the University Trustees for final approval. The consummation of the transaction, nevertheless, was destined to suffer a long delay and, finally, important modification (p. 140).

For the first fifty years of its existence the Medical College was not a burden upon any sponsoring organization. Except for the benefit of minor donations it had always paid its way, and had made far more generous donations to other institutions than those received. The only annual expense that the University had ever stood was the contribution of $1,000 toward the salary of the Professor of Chemistry. All this was granted by President James in the report of his short administration (1902-04), in which he also argued that the University was generous in not rendering a charge for a share of all its administrational and promotional expenses!

President James directed attention to the present relation of the University to the Medical School which, unlike other faculties, was based on a contract reserving certain rights of self-government to the Medical Faculty. In his opinion, no change in these relations should be made short of absolute, organic union. He foresaw that taking over the Medical School would create a pressure on University funds "quite as severe and continuous and irresistible as has been the pressure from the Law School and the other departments which have been added." He had no doubt that in this event the Medical School before long would become a considerable charge upon the general funds of the University. Yet he felt that there was no way of avoiding this, if the School were to keep abreast of the times, since a point had been reached in medical education when income from tuition could no longer be expected to provide for all the needs of teaching and research. In short, the President advised the
University Trustees to accept the School, and all of the outlay that it would entail, but only when the Trustees of the Chicago Medical College and the Faculty of the Medical School were willing to waive all reserve privileges and turn the School over to the absolute control of the University Trustees. No large obligations, he counseled, without larger privileges; no additional financial obligations without financial control. This was sound advice, because the University could not hope long to retain public respect and to fulfill its duty to education by an uncontrolled affiliation made originally to acquire a semblance of institutional completeness.

It is not hard to understand why the medical group was chary of surrendering all of its prized autonomy. It had attained success and reasonable security while maintaining a stable organization. It was making money and paying back the large advances that financed the 1893 buildings. The record of the University, in view of its larger scope, had certainly been no better, and its repeated turnover in leaders had made long-term policy unpredictable and stability of effort uncertain. Even to the end of the century the University had needed the association with its first professional school more than this school needed the prestige of University sponsorship. Moreover, there had been no urgent reason, previously, for the Medical College to seek cover.

Important to the pride of the Medical College were the two requested reservations, since they seemed consonant with the record of the School for responsible action. These rights were that the granting of medical degrees or the making of appointments or changes in the Medical Faculty must be subject, respectively, to recommendations or approval by that Faculty. On the other hand, it is amusing to learn why President James was so insistent that the Medical Faculty should not have “the privilege of recommending members of that Faculty for appointment or dismissal.” The reason, he explained, was because “It is extremely difficult, under the very best of conditions, for a faculty to get that sense of responsibility which is necessary to make its recommendations worthwhile. It is rendered still more difficult in a professional school by the thousand and one elements of professional jealousy which enter upon the situation.” His position reduced to the thesis that “no President worthy of the position, or Trustees worthy of the name, would think of making appointments without due consideration of the best opinion of the medical faculty,” yet this Faculty should not
be given the absolute right to initiate such recommendations.

So time wore on for two years, with the two groups of Trustees in an apparent deadlock over complete integration. But time was a potent ally of the University, since it was becoming increasingly plain to all that if the College were to keep pace with the important medical schools being developed in other institutions, it must spend greatly increased sums on administration, equipment and services. The number of full-time instructors must be increased also and their salaries raised, in order to maintain the relative position educationally that had long been a proud claim to distinction. Only the University loomed as a prospective source of such financial support, and its realistic President advised that the University must be prepared to shoulder this burden whenever complete control and responsibility were obtained. The Medical Faculty, on its part, became more and more inclined toward enlisting the University in its overdue program of expansion. It probably was also viewing with increasing concern its isolated position among a dwindling number of schools with university affiliation, but not organically united.

The Trustees of the Chicago Medical College continued to exist as a corporate body for fifteen years after the union of 1891, and for thirteen years after moving into the new buildings erected on the Dearborn Street site. In August, 1905, the then Trustees transmitted a memorandum to the Trustees of Northwestern University, giving notice that the Chicago Medical College acceded to the terms stipulated, and authorizing the conveyance of property and powers to the University without limitation on either point previously raised. The University, accordingly, took steps to terminate the existing contract, assume complete ownership and control of the Medical School, and take charge of its work. On June 16, 1906, papers were executed by which the Trustees of the Chicago Medical College transferred and deeded all their rights in that College to the University, thereby completing the total union. The outcome was a final step in integration, yet only time could bring to pass the prediction of President James: "The university of the future will consist of a group of professional schools based on a college, and not in a group of professional schools attached to a college." Dean N. S. Davis, Jr., stated bluntly concerning the merger: "from this year, the character and standing of the Medical School, in the future, will depend upon the wise management of the
Trustees of the University."

In reorganizing the administration of the Medical School, the University Trustees decided that its interests could best be served and preserved by the appointment of an Advisory Council of nine members besides the Dean (and a Secretary, if such were to be elected). Its appointed members should be representative of the main divisions of the medical curriculum, and to include, as far as possible, those members of the Faculty who had been longest identified with the work of medical education. This body, meeting first in July, 1906, was an elaboration of the previous Executive Committee of the same number; its name changed later (1909) to Medical Council. The Council was "to consider matters pertaining to the internal administration of its affairs." It should make recommendations through the President to the Board of Trustees. To the Medical Faculty was reserved only "the fixing of requirements for degrees and the recommendation for degrees."

The following financial statement accompanied the declaration of relinquishment by the Trustees of the Chicago Medical College:

### ASSETS:

<table>
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<tr>
<th>Item</th>
<th>Amount</th>
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<tbody>
<tr>
<td>Grounds</td>
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<tr>
<td>Laboratory Building</td>
<td>141,732.48</td>
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<td>Davis Hall</td>
<td>37,352.17</td>
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<td><strong>Total</strong></td>
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<td>Trust funds</td>
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<tr>
<td>Nathan Smith Davis Professorship</td>
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<tr>
<td>Robert Laughlin Rea Professorship</td>
<td>9,700.00</td>
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<tr>
<td>Medical Research Fund</td>
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<td><strong>Total</strong></td>
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<td>Credit balance with the University</td>
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<td><strong>Total</strong></td>
<td><strong>$383,085.17</strong></td>
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### LIABILITIES:

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<tr>
<td>Advances loaned by University</td>
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<tr>
<td>Laboratory Building</td>
<td>$ 95,329.26</td>
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<tr>
<td>Mercy Hospital Amphitheater</td>
<td>14,555.00</td>
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<tr>
<td><strong>Total</strong></td>
<td><strong>$109,884.26</strong></td>
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Of this indebtedness, $75,000 was in the form of a mortgage against the new Laboratory Building (p. 163); the remainder was represented by a floating debt of the University. All indebtedness was charged 4¾ per cent interest, and trust funds were credited at the same rate. The Medical School had taken out of its income in the last fourteen years (since the 1891 union), for investment in permanent property, $91,000, of which $30,000 was a gift to the building fund of Wesley.

The operational picture about midway of the current period can be seen from the following memorandum submitted at the Annual Meeting of the Medical School in 1896:

**RECEIPTS:**

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<td>Other</td>
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<td><strong>Total</strong></td>
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**DISBURSEMENTS:**

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<tbody>
<tr>
<td>Salaries</td>
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<tr>
<td>Laboratory equipment</td>
<td>7,826.26</td>
</tr>
<tr>
<td>Other purposes</td>
<td>12,955.07</td>
</tr>
<tr>
<td>Paid on building and interest</td>
<td>6,325.66</td>
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<tr>
<td><strong>Total</strong></td>
<td><strong>$33,826.99</strong></td>
</tr>
<tr>
<td>Credit Balance</td>
<td>1,762.90</td>
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The minuscule item for salaries is arresting; two years later it had doubled and ten years later, quadrupled. Also at the end of the current period the total income would be more than doubled. Organization was still very simple. A clerk, also serving as registrar, was the only administrative aid until 1895, when “the House Committee was empowered to hire a stenographer and typewriter for the College.” In 1902 a news item informed the alumni that “a new telephone will be placed in the Laboratory Building.” Even in 1915, when the present writer joined the Faculty, all telephones in the School could still be counted on the fingers of one hand. Today the annual telephone bill is more than six times the total expenditures of the Medical School as just cited for 1896.
During twenty years (1870-90) of occupancy of the college building at the Twenty-Sixth Street site, the accommodations were becoming increasingly crowded and inadequate. Not only had enrollments increased from 107 to 237 and the dispensary outgrown its modest quarters, but also there was urgent need for space that would make possible separate rooms for pathology and the introduction of general laboratory instruction in physiology and bacteriology. Mercy Hospital was unwilling to assign land for such an addition since it coveted the ground, now occupied by the School, for its own extensive program of expansion. After the expiration of the original twenty-year contract with Mercy Hospital, a new contract was made whereby the Medical College relinquished its 99-year option and returned its building site to the Hospital. In return, the privileges of clinical instruction and hospital appointments were extended into 1923. The College Building was sold to the Hospital, and was used for temporary hospital services during its period of remodelling and expansion. The Sisters finally decided that the 26-year-old College Building should not be remodelled into a nurses' residence, as had originally been planned, and its demolition followed in 1896 (three years after the College moved away).

Aid toward relocation of the College was forthcoming in 1890 when Northwestern University purchased land, with 450 feet free frontage on the east side of South Dearborn Street, for $41,507. Of this sum, $21,506 was contributed by William Deering, a Trustee of the University and always a staunch friend. The strip extended from Twenty-Fifth Street three-fourths of the way toward Twenty-Fourth Street.

The choice south half of the strip, including the corner site, was sold to Wesley Hospital for $15,340; the details of deferred payments were stipulated in the contract of affiliation. Actually it became a gift in 1899, when it was deeded to the Hospital on the payment of one dollar. The conveyance stipulated that the grantee should erect a hospital whose staff should "be drawn from the Faculty of Northwestern University Medical School, and that facilities for clinic teaching be afforded the students in the wards and amphitheater of the hospital as required by the grantor herein, and that on the failure of said Wesley Hospital to carry out these condi-
tions, the title shall revert to Northwestern University." An equal amount of land was assigned to the Medical and Pharmacy Schools. For this northern half the University received $5,000 from each School. Had the Wesley payments been made, the University would have cleared a profit of $5,339 on the deal.

By the end of 1890 an architect had been chosen to design a new laboratory building, and in March, 1892, the Executive and Building Committees were empowered to supervise the final revisions of plans and to let the contract at the earliest date. The five-story building was ready for occupancy in the summer of 1893. It was a fairly impressive edifice, constructed of cut stone and brick, with terra cotta trimmings. It contained a large amphitheater, a lecture hall and various laboratories that were planned to meet the needs of both staff and students in the rapidly expanding area of research and instruction in the basic sciences.

The new laboratories were the first in the country to be adapted to the newer requirements in medical science. Their novel features brought visitors from afar to inspect, and sometimes to copy. One oddity of the gross anatomy laboratory was doubtless unique, and never subsequently duplicated elsewhere. The ranking scientist of the School, fearing that his chemistry laboratory might be contami-
nated or inundated from the dissecting room just above, insisted that the floor of that room be overlaid with a thick mantle of asphalt. One outcome was that during each summer the legs of the dissecting tables settled into the asphalt, so that an annual chore in September was to pull them out and reset the tables in new positions before the new class assembled.

In agreement with contemporary construction-practice, stairways and floors of the new building were wooden. Dressed with oil they comprised a prime fire hazard. This potential danger was much on the mind of the administration, even though no serious fire ever occurred. Nevertheless, as a precautionary measure an annual fire drill was held without previous warning. A loud alarm was the signal for the precipitate departure of students through opened windows and down to the ground by way of iron fire escapes. To the student this exercise became something of a lark rather than a serious drill. On one occasion an unexpected, full compliance occurred. The dissection laboratory was on the fifth floor, reached by inadequate stairs built, apparently, on the reasonable assumption that traffic to the top of the building would be light. In that laboratory was kept a collection of teaching models and similar aids, so instructions were given that, in the event of fire, students were to pick up these materials and carry them to safety. On this particular drill, one dissection-pair decided that their cadaveric remains was the most important item in sight. Carrying it by head and feet, they descended the fire escape and found ground-level on Dearborn Street.

The Demonstrator of Anatomy had been delegated to visit eastern colleges for the purpose of learning the best methods of preserving anatomical material, since this problem had constituted a long-standing annoyance. As the result of information gained, it was recommended that a room, set apart for the purpose in the basement, be equipped with the best apparatus obtainable. A four-ton refrigerating apparatus, costing $2,700 and requiring a half-ton of coal daily, was installed. Much later, in 1912, a separate one-story morgue was built just north of the Laboratory Building, on the side opposite to Davis Hall. It was not long in full service, however, because during World War I arrangements were completed for a co-operative central plant, located near the County Hospital, which thereafter did much of the work for all of the medical schools in the city. So it was that the morgue became largely limited, in terms of
the traditional euphemism, to the storage of "the materials of dissection." An occasional, unauthorized use by upper-classmen was to lock an inquisitive freshman inside the storage room containing rows of suspended, embalmed cadavers.

The School of Pharmacy originally occupied the second floor of the Laboratory Building and shared still other space, but it moved out in 1902 when accommodations were provided in the Northwestern University Building in the business section. This permitted some rearrangements and provided increased facilities for the basic sciences as laboratory subjects. In 1913 the School of Pharmacy returned for a while, sharing laboratories with the Department of Chemistry, but it continued to be a financial burden and was soon thought to be no longer essential to the work of the University. Hence, in 1917 it was absorbed into the pharmacy school of the University of Illinois. As long as the clinics of the Dental School occupied the upper floors of Davis Hall (1893-96), its courses in basic science were given in the laboratories of the Medical School and by the Medical Faculty, under the same arrangement that had prevailed when the Dental School was located opposite the Twenty-Sixth Street site, and later on Twenty-Second Street.

The Laboratory Building was undertaken as an individual responsibility of the Medical and Pharmacy Schools, to which project the University gave only its approval and an unenthusiastic advance of money. Originally the University had not planned to assume any part of the expense, but it was forced to advance nearly $83,000 on which it charged interest, at first at the rate of six percent, compounded semiannually. The building was expected to cost $100,000 but, at the time of occupation, the expense had soared to $138,500. The anticipation of a large expenditure and the obvious need of endowment had brought about a joint meeting between medical representatives and the University Trustees as early as May, 1891, to formulate a plan toward consummating these ends. While the building was in progress President Rogers, of the University, placed before the Medical Faculty the practical problem of how to raise this money, which he set at $500,000, at least. A detailed report of ways and means was returned by an appointed committee, but a record of accomplishment, twelve years later at the end of the present period, lists only $62,300 of endowment restricted to specific purposes, and other gifts of $40,000 expended on the new site and building.
The cost of the Laboratory Building was charged equally against the two occupants; hence the Medical School owed nearly $70,000. On taking possession of the property the School paid in $21,000; further payments out of earning brought the total to $51,063 by 1898. Previously, in 1897, the School had suggested that the Trustees of the University appropriate $5,000 to help extinguish the debt, but nothing came of this appeal. Again, in the following year, the Trustees were asked (p. 506) to relieve the School from its remaining indebtedness of $26,000, in view of a proposed outlay to strengthen the basic science departments by obtaining full-time, salaried professors of anatomy (including histology) and of pathology (including bacteriology). The Trustees approved this progressive policy in principle, but felt unable to assume the residual debt on the building at once. Nonetheless, they favored the expenditure, if necessary, of the entire income of the School for the maintenance of instruction, even if this meant ceasing payments, for a time, on the debt. In addition, they encouraged the School to hope that later its indebtedness would be assumed by the University. Disappointed, but ever courageous, the Medical School went ahead with its schedule of payments. It also managed to take steps toward staff-improvement in gross anatomy, histology and pathology. Salaried appointments were made, but resignations and an untimely death failed to stabilize all of these departments immediately.

During the period of construction Dean Davis pointed out to the University Trustees that the surplus earnings of the School that had been transferred to the purchase of land and to the building fund represented a contribution from the Medical Faculty, since these monies otherwise would have been subject to division as compensation for services rendered. He said: “But fully realizing the imperative need of an early completion of the new building . . . they cheerfully forego pay . . . until that object is accomplished.” This abnegation marked the end of the annual ‘dividend’ from earnings. Long before the building debt could be amortized, the Medical School found it must enter upon an expensive program of expansion in laboratory instruction, with full-time, salaried teachers. In this way, without fanfare, a long era of voluntary service by clinicians was being ushered in.

The School of Pharmacy immediately found itself unable to meet any part of its share of the obligation on the Laboratory Building,
or even to pay interest on the money advanced by the University. After four years in its new quarters operational deficits totaled $18,000, and the accumulated interest on the loan was even more. President Rogers advised his Trustees that "the only way the interest loss can be stopped is by getting the Medical School to assume the whole cost of the building and occupy it for its own uses exclusively. But we cannot remove the Pharmacy School and pay rent [elsewhere] until the Medical School will take over." The solution came when the Tremont House, on Lake Street, was bought and reconstructed for occupancy by the Schools of Law, Dentistry and Pharmacy in 1902. The Medical School then did take over the entire building and assume the defaulted debt. Between the years 1906 and 1910 alone, its payments to the University totalled $108,153. Thus the entire return by the Medical School to the University, for sums advanced on the Laboratory Building (cash and mortgage), amounted to $159,214.

But the Medical School was not yet through with its role as host to the School of Pharmacy. Later, in 1913, this peripatetic offspring of the University returned to the Laboratory Building. This time it operated in conjunction with the Department of Chemistry, whose Chairman served also as Dean. This makeshift arrangement continued until the demise of the School in 1917.

OTHER BUILDING PROJECTS

At first it was expected that all of the work of the third and fourth medical years, as well as the dispensary service, could continue in the old College Building on Twenty-Sixth Street, but this plan was abandoned when Mercy Hospital required the land for its own expansion. This new crisis led to the erection of a smaller building, named Davis Hall by the Trustees, alongside the Laboratory Building and just south of it. Although its necessity was not announced to the Faculty until January, 1893, this clinical building got a prompt start and was finished only a few months after the larger one. The first plans called for two stories, but the University decided to add two more in order to house the Dental School. Its style and construction resembled somewhat the Laboratory Building. Besides a large and a small amphitheater, there were the rooms
related to the dispensary. Originally it also accommodated the executive offices and library; and until 1896 the third and fourth floors were given over to the clinics and specialized classes of the Dental School. In 1894 the University Trustees ordered that “the [chiseled] name ‘Davis Hall’ be taken from the present building, so designated, and placed upon the Laboratory Building in recognition of the services of the Dean of the Medical School.” This was not done, and the official change of name was never observed by the Medical Faculty, students or alumni.

Davis Hall originally cost $34,500, of which sum $25,450 (74 percent) was immediately charged to the Medical School, even though the Dental School occupied equal space above the basement. The South Side Dispensary, a lineal descendant of the original College dispensary, contributed its invested funds (amounting to $10,000) to aid in the construction of the new building. In return, it demanded adequate space and the promise of an annual subsidy of $500 from the Medical School (which would offset the lost interest from endowment). The proceeds from the sale of the former medical building to Mercy Hospital supplied $10,000 more. The remainder was subscribed by members of the Medical Faculty, among whom the most generous contributor by far was N. S. Davis. When the Dental School outgrew its quarters and moved away in 1896, the University proposed that the Medical School take over these “two upper stories . . . upon payment of $9,000, the cost price [actually, the charged price] of that part of the building.” A counter proposal of $4,000 was accepted by the University, which then extracted $5,700 from the Dental School for past rent, since nothing had been paid toward building costs. As a result, the entire building became used thereafter by the Medical School for clinical purposes.
The thirty-fifth annual session of the School opened in the new buildings in the autumn of 1893. As on the three previous occasions when the School had occupied new quarters, Dean Davis gave the introductory address. He welcomed the students and Faculty "to the occupancy of the entire new and elegant buildings, which, with the grounds, have cost over $200,000." He praised this fourth "and, I hope, permanent location and building," and then continued with congratulations and an admonition:

The progress during the thirty-four years of the history of this medical school, from nothing but the temporary fitted up rooms in Lind's block, to the buildings and grounds we now occupy, should satisfy the most ambitious in that direction. But stately buildings and costly furnishings do not constitute the whole, nor even the most essential part of a medical college or a university school. They constitute only the shelter and tools, while the actual work done in, and with them, afford the more important criterion of progress and educational success.

The Chicago press ignored the newsworthy event completely, but devoted columns to a descent of hordes of Oddfellows on the Columbian Exposition. Yet the Tribune found space on its front page for the ordinary annual opening of Rush Medical College, and on page two for that of Bennett Medical College. Three days before it had described a newly completed Rush secondary building and pictured it. The failure to gain publicity for the significant Northwestern move into unique housing on a new campus site may have reflected laxity with respect to public relations on the part of an aging Dean.

Wesley Hospital, recently organized, in 1891 erected a small, two-story brick building on the Dearborn Street site, at the corner of Twenty-Fifth Street. For ten years this served as a modest hospital of 35 beds, but it was inadequate in every way. Patients who were operated upon in Davis Hall had to be carried to and fro on stretchers. The student-porters were popularly dubbed "pall bearers," and the clinicians were in continual anxiety lest injury befall in transit. At one period in the Nineties a canopied sedan chair was used for the transportation of obstetrical patients, delivered in the amphitheater of the School. It had been salvaged from the 1893 Columbian Exposition in Jackson Park, and patient-carriage extended even to Mercy Hospital, a half-mile distant.
The definitive, six-story Wesley Hospital was erected between Davis Hall and Twenty-Fifth Street at an initial cost of $237,000. When the beginnings of work on this project were delayed by lack of funds, the Medical School decided to suspend payment on its own debt and to pledge $30,000 toward the Hospital building-fund. This was a generous act, and of the total amount, $20,000 was paid within two years. The new building opened in 1901 with a capacity of 171 beds, whereas the final wing that added 54 more beds (at a cost of $110,000) was not erected until nine years later. This, and the morgue (1912), completed the medical group on the Dearborn-Street site, since a large clinical building which the Medical Faculty urged in the early years of the new century, and President James supported as a pressing need, never materialized. Yet, as a protection against future growth, the remainder of the half-block between the east side of Dearborn Street and the alley was purchased, and most of the facing land on the opposite (west) side of the street as well.
One further building enterprise featured the years just after the turn of the century. The School, wishing to maintain and improve its historic relations with Mercy Hospital, built a complete surgical pavilion to replace and extend the former clinical amphitheater, now become inadequate. This project is said to have cost something more than $25,000; the amount paid by the Medical School was $22,400, whereas the remainder was to be contributed by the surgeons who would use the improved facilities. At the time when the Trustees of the Chicago Medical College conveyed all property to the University, and rendered a statement of assets and liabilities, there was said to be an unpaid balance of nearly $15,000 due on a loan advanced by the University to finance the project. On the contrary, the report of Dean N. S. Davis, Jr., for the preceding year records that the full amount had been paid out of earnings of the School.

This complete surgical unit contained, as a special feature, a gigantic clinical amphitheater with seats for 511 persons. The arena was finished in marble and white tile. It was designed for the exclusive use and benefit of the Faculty and students of the School, and embodied every recent improvement that a touring committee could seek out and approve. Dr. John B. Deaver, of Philadelphia, made the dedicatory address in 1902; it was followed by a surgical clinic under the auspices of the Chicago Medical Society, which organization attended the exercises in a body. Here for nearly twenty years were held the famous operative clinics of Drs. John B. Murphy and E. Wyllys Andrews, the medical clinics of C. L. Mix and A. R. Edwards, and others; visitors were drawn there from all parts of the world, especially to witness the “Murphy Clinics.” Suddenly, in 1920, the existing contract with the Hospital was abrogated preemptorily by Church command, the long relations were severed and the use of all facilities lost. The pavilion itself had been a gift to the Hospital, and technically was not a direct property loss. It is only fair to state that the Sisters, whose Hospital had been staffed by the College for sixty years, were presumably in no way responsible for the decision that repudiated the unexpired contract and made these facilities available to another school. Northwestern University never received any notification from the Church of its edict, nor of the ambiguous effect of this on those members of the Medical Faculty serving as a clinical staff.
All of these developments of 1891-1906 plainly placed the School in a far stronger position potentially than it had previously enjoyed. On the other hand, responsibility for financing the School was the price that the University would sooner or later have to pay in exchange for complete control. For several years after the absolute union, however, large enrollments continued not only to meet running expenses of the School but even to amass large, favorable balances that repaid the University for monies advanced for the several building projects. Yet the picture would reverse later when entrance requirements became raised twice, the intern year became obligatory and the laboratories continued to expand in personnel and activities. Then the true value of the merger to the Medical School would be made plain to any and all dissidents.

Physically the School was immeasurably improved, both initially and especially after the departure of the Pharmacy and Dental Schools. Only the dispensary quarters would become embarrassingly inadequate during the total period of occupancy. In truth, this new group of medical buildings was, for a time, a notable set. Erected in the period of rapid expansion of practical work in the basic sciences, laboratories had been carefully designed to care for class- and investigative work in these branches. It is said that these arrangements were highly regarded by visitors, among whom were medical educators and administrators who journeyed from afar to inspect an example of what might be done in regard to their own problems of rehabilitating or building anew. But, naturally, no one could foresee in the early Nineties the rapid advances that were still to come in the basic sciences and the slower, but even more dramatic, expansion of the clinical horizon. For a decade or two, however, the new accommodations were to seem adequate, except for the overcrowded dispensary, and even luxurious in comparison to the simple, Spartan arrangements that everywhere characterized medical housing in the first century of the Republic.

Improvement in clinical facilities seemed assured. The relinquishment of the leased land to facilitate the expansion of Mercy Hospital and the gift to it of the surgical pavilion should strengthen the historic ties with that institution, which hitherto had borne the brunt of clinical teaching. Faith in the potentiality of Wesley
Hospital was made manifest by the gift of land by the University and the generous donation of money, in a time of dire need, by the Medical School. It was little suspected that the near future would entail disappointment in the clinical opportunities at both institutions. But, for the present, both hospitals could be counted on heavily; also the size and services of St. Luke's Hospital were increasing, and Peoples and Provident Hospitals were helpful. Before long Michael Reese would supply added strength; and the Calumet Dispensary, built alongside Mercy Hospital at University expense, would open. No other college in Chicago could offer bedside teaching such as Junior and Senior students were then receiving. The School faced the future with optimism and confidence.

Some statistics concerning the University and its Medical School at the start of each of their three phases of association can be ascertained from the following table:

<table>
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<th>NORTHWESTERN UNIVERSITY:</th>
<th>1870</th>
<th>1891</th>
<th>1906</th>
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<tbody>
<tr>
<td>Enrollment</td>
<td>184</td>
<td>998</td>
<td>2,560</td>
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<tr>
<td>Income</td>
<td>$28,350</td>
<td>$193,700</td>
<td>$560,800</td>
</tr>
<tr>
<td>Endowment</td>
<td>none</td>
<td>$275,700</td>
<td>$4,120,200</td>
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</tbody>
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<table>
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<tr>
<th>MEDICAL SCHOOL:</th>
<th></th>
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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Enrollment</td>
<td>107</td>
<td>243</td>
<td>456</td>
</tr>
<tr>
<td>Income</td>
<td>$4,000</td>
<td>$27,000</td>
<td>$82,800</td>
</tr>
<tr>
<td>Endowment</td>
<td>none</td>
<td>none</td>
<td>62,300</td>
</tr>
</tbody>
</table>

The University, in 1870, though lacking endowment in the form of trust funds, owned salable land (both productive and unproductive) valued at $680,300. The proceeds from sales of land were used commonly to meet running expenses. In 1891 the remaining land had appreciated to $1,753,500.

The wholly tax-free status of the University was apparently settled by the ruling of the Supreme Court of the United States in 1879 (p. 300). Yet toward the end of the present period a new Collector of Cook County brought suit on the claim that the decree did not show that the exemption applied to property acquired subsequent to the tax-free amendment to the original charter. In the end, nevertheless, the Supreme Court of Illinois ruled (1908) that all property of the University, whenever acquired, is to be forever exempt from taxation. Once again this kind of challenge seemed to reach an end, but it did not (p. 284).