FROM THE DIRECTOR

Reflection on Events of August 11–12, 2017, Charlottesville, Virginia

BARBRA MANN WALL, PhD, RN, FAAN

On August 11 and August 12, 2017, the University of Virginia and the Charlottesville community experienced vicious attacks by white supremacist groups. As a result, three people died and at least thirty suffered injuries. Colleagues at the University of Virginia Medical Center and Martha Jefferson Hospital treated the injured, and we are proud to be a part of their community. Many of the nurses were graduates of our School of Nursing. Yet on Wednesday night, August 16, thousands of University of Virginia faculty, staff, and students along with Charlottesville community members participated in a candlelight vigil on Grounds to repudiate prejudice and hate. All joined in the singing of “We Shall Overcome,” “Amazing Grace,” “This Little Light of Mine,” “This Land is Your Land,” “Lean on Me,” and the beautiful UVA song, “The Good Old Song.”

The Eleanor Crowder Bjoring Center for Nursing Historical Inquiry commits itself to enhance greater understanding of racism and discrimination. We stand united for the values of equality, diversity, integrity, respect, and justice. We are explicit in our rejection of racial and religious hatred. To this end, we address these subjects in all the classes we teach to PhD, master’s, traditional, and RN to BSN students. We also discuss them in our publications and presentations. Drs. Arlene Keeling, Michelle Hehman, and John Kirchgessner’s new book, *History of Professional Nursing in the United States: Toward a Culture of Health*, addresses nursing’s history with race, class, (continued on page 2)
We, as a discipline of historians, need to more thoroughly analyze the integration among health care, politics, race, religion, and conflict.

hospitals as institutions. My talk was entitled “Religion, History, Politics, and Health Care: A Call for Multidisciplinary Action.” I argued that we, as a discipline of historians, need to more thoroughly analyze the integration among health care, politics, race, religion, and conflict. I built on an initiative going on at the University of Virginia today. Several of us have formed the Religion/Politics/and Conflict consortium that aims to carry out and publish research on causes and solutions to religion-related conflicts. We are using cross disciplinary methods—quantitative, qualitative, and historical—to examine conflicts in their broader historical, political, religious, and economic settings. My work on Catholic sisters’ health care work in Nigeria and Uganda in the 1960s and 1970s helps us understand the larger question of what conditions enable religion-related violent conflict, and the social, political, cultural, and religious factors that give rise to such tensions. Topics we plan to study include indigenous values and the influence of different world religions; colonialism and religious change; and the cultural landscapes of post-colonial arenas. We know that long intractable influences of religion, ethnicity, race, class, and gender remain. The Eleanor Crowder Bjoring Center for Nursing Historical Inquiry stands united and committed to help our communities heal, recover, and understand these issues. History has much to teach us. ■

Barbara Mann Wall
Arlene Keeling Retires

Arlene Keeling will retire in December 2017, after twenty-five years of service to the University of Virginia and the School of Nursing. Arlene has served the school in many capacities throughout her tenure as teacher, mentor, scholar, and leader. She has worked closely with countless students on history projects, guided many doctoral students through dissertations, and served on academic committees in the School of Nursing and across the University’s Grounds.

Throughout her career at the University, Arlene has been dedicated to preserving the history of the nursing profession and bringing to light the work of nurses in the past. Her dedication to the profession’s history ultimately led to her appointment as the Centennial Distinguished Professor of Nursing in 2005. Her commitment to scholarship and research are evident in her numerous articles and books on nursing history. She wrote Nursing and the Privilege of Prescription, 1893–2000, a book that the American Association for the History of Nursing recognized with the Lavinia L. Dock Award for outstanding research and writing. She coauthored and edited several other books, including Rooted in the Mountains, Reaching to the World: A History of the Frontier School of Nursing, 1939–1989 (2012) written in collaboration with Anne Z. Cockerham, The Nurses of the Mayo Clinic (2014) and Nursing Rural America: Perspectives from the Early 20th Century (2015) written in collaboration with John Kirchgessner. Her most recent book, History of Professional Nursing in the United States: Toward a Culture of Health, was written in collaboration with Michelle Hehman and John Kirchgessner and released in August.

In 1992, while still a doctoral student, Arlene and fellow doctoral student Sylvia Rinker approached Dr. Barbara Brodie to initiate the Center. Later, as Director of the Eleanor Crowder Bjoring Center for Nursing Historical Inquiry, Arlene was instrumental in the Center’s growth. Under her leadership, the Center grew physically when it moved into its larger and more visible space in McLeod Hall. The Center’s holdings also grew extensively during this time. The increase in size and the expansion of the collections has allowed the Center to serve more student, national, and international researchers. During her years as Center Director, Arlene’s contributions were essential in the Center’s rise as an international leader in nursing history through research productivity, reputation, and the cultivation of the next generations of nurse historians.

Arlene will be greatly missed by the Center’s faculty and staff. Arlene, we wish you well in your next life chapter!
Presentations, Publications & Awards

FACULTY


STUDENTS


Hundt, B. “‘No neutral ground in this contest’: The Government Hospital for the Insane during the American Civil War.” Paper presented at the Southern Association for the History of Medicine and Science Conference, Myrtle Beach, South Carolina, March 17, 2017.


FUNDING RECEIVED

Arlene Keeling has received a $1,500 grant from the University of Virginia Center for Global Inquiry and Innovation. Her research project will be titled: “The Nurses of Ellis Island, 1892–1954”. Today the United States is faced with questions about immigration policies and the conflict of those policies with the moral imperative to care for people seeking refuge from war torn areas of the world. This project will document and analyze the role that nurses played in the care of European immigrants who arrived on Ellis Island.
Island during the early 20th century, particularly in relation to their work in three major hospitals on the island. The research will fill a gap in the history of nursing and may have implications for health and immigration policies today.

Elizabeth Hundt received the UVA School of Nursing 2017–2018 Barbara Brodie Scholars Endowment Award ($16,400) and the American Association for the History of Nursing H-31 Award, May 2017 ($2,000).

AWARDS

Barbra Mann Wall, PhD, RN, FAAN was selected as the University of Texas at Austin School of Nursing Outstanding Alumna. Congratulations!

“With Great Determination”

On April 7, 2017, the Catherine Strader McGehee Lecture featured Ms. Mavis Claytor, the School of Nursing’s first African American graduate. Ms. Claytor earned her baccalaureate degree in 1970 and a master’s degree in 1982 from the University of Virginia. When Ms. Claytor entered the baccalaureate nursing program, no African American had ever been admitted; and as she tried to register at the student dorm, she was told that no rooms were available. She finally found a room at a local hotel, where she stayed for weeks. As Ms. Claytor stated, “I was so focused on getting my education that I didn’t let it deter me, that I was the only African American student.... With my previous experience in nursing, I felt very confident and comfortable in my abilities to complete the program.” With great determination, Ms. Claytor eventually talked with Dean Mary Lohr, who found a dorm room for her. After Ms. Claytor graduated, she spent the bulk of her career at the US Department of Veterans Affairs Medical Center in Salem, Virginia, and retired as chief nurse in geriatrics.

Doctoral student Victoria Tucker, who is focusing on Ms. Claytor for her dissertation, interviewed her for the Lecture. Brief questions from the audience followed. At the end of the Lecture, Dean Dorrie Fontaine issued a formal apology for the way Ms. Claytor was treated as a student at UVA, the first official apology made to any graduate at the University of Virginia. Ms. Claytor responded to the Dean’s apology, saying “All is forgiven.” This historical moment of reconciliation was very moving for the more than 300 people in attendance. Ms. Claytor expressed gratitude to Dean Fontaine and all the members in the audience. As Ms. Tucker stated, “Ms. Claytor’s story is a celebration of the strides that have been made” toward greater inclusivity and diversity at the university, “and a blueprint for more changes to come.” A portrait of Ms. Claytor will be unveiled in the School of Nursing later this fall.
Transorbital lobotomy in progress.

COURTESY MEDICAL RECORDS, EASTERN STATE HOSPITAL
Much is written about pre-frontal lobotomy and the subsequent technique, transorbital lobotomy, as treatment for mental illness. Previous research on the subject focuses on autobiographical accounts or the personality of Walter Freeman. Most of these accounts run into the brick wall of contempt and blanket condemnation. This feature focuses on the experience at Eastern State Hospital in Williamsburg, Virginia, how Walter Freeman got access to Virginia state hospitals, how patients were chosen for the operation, and the outcome for the patients and their families. Over the course of three years, from 1951 to 1954, 185 patients at Eastern State were recipients of transorbital lobotomy. As with any medical intervention, some patients were helped and some were not.

In 1951, Eastern State Hospital was still recovering from World War II, and, like many hospitals of the era, it was overcrowded and understaffed. During those post-war years Eastern State established an American Psychiatric Association two year residency program for physicians. A psychiatric nursing student affiliation was also begun in response to a 1949 decision by the Virginia Board of Nursing. The new policy required all nursing students to have knowledge and experience in psychiatric nursing for licensure. No records exist for the fledgling nursing affiliation or its student enrollment. However, these changes improved staffing to a minimal degree.

In 1951, seven physicians and fewer than ten registered nurses were on the staff at Eastern State to care for 2,015 patients. Two social workers, two or three psychologists and an occupational therapist provided support services. Few patients truly benefitted from direct professional care, as most were cared for by hospital attendants.

The first prefrontal lobotomy was performed in 1936 by neuropathologist Walter Freeman and neurosurgeon James Watts. Thereafter, they reported their results at medical society meetings and published in medical journals. An extensive body of literature soon accumulated both in professional journals and the popular press. Surgical intervention in the form of the lobotomy was rapidly accepted by the psychiatric profession and the public. The surgery was a practical therapeutic advance in a time when psychiatric treatment of mental illness seemed hopeless. Nothing could have seemed more logical for the treatment of mental illness than brain surgery, and it became a moral imperative to employ any treatment that offered even a scintilla of hope.

The prefrontal lobotomy technique required the aseptic environment of the operating room and the services of a qualified

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1 Granville L. Jones, Eastern State Hospital, Annual Report, June 30 1951.
neurosurgeon. Beginning in 1941, prefrontal lobotomy was performed at the Medical College of Virginia. Unfortunately, the surgery was costly and not likely to be available to patients in the state hospitals. Walter Freeman developed the technique of the transorbital lobotomy to simplify the operation and thus make it swift and cost effective. His research partner, James Watts, was opposed to Freeman’s innovation and thereafter ended their collaboration.²

Between 1936 and 1951, some 20,000 psychiatric patients in the United States received prefrontal lobotomy in both private and public hospitals. At the Medical College of Virginia, F. Findley Gayle, a board certified psychiatrist, had at his disposal neurosurgeons and the highest level of surgical technology and nursing care, which facilitated his performance of the technique. Dr. Gayle also served on the Executive Committee of the Virginia State Hospital Board. Between 1949 and 1951, the medical superintendents of Dejarnette Sanatorium and Western State Hospital in Staunton, Virginia, requested the approval of the Board to have Freeman offer the transorbital lobotomy at their hospitals. Dr. Gale resolutely vetoed the idea and the Board refused to approve the request.³ Nevertheless, despite the disapproval of the State Hospital Board, the medical superintendents of Western and Eastern State Hospitals decided to go ahead with the operation. Since the Board did not approve of Freeman’s conducting the operation on the premises, the patients from Dejarnette Sanatorium were transported by bus to Washington, D.C. where their lobotomies were performed and returned to the Sanatorium after two days. After their surgeries the Superintendent of the Sanatorium reported to the Board that “some of them are quite refractory, and the proposed arrangements for the operation here would obviate the necessity of struggling with them to get them to Washington.”⁴

Throughout this time Walter Freeman presented himself, usually uninvited, at Virginia state hospitals. Evidently, he was well-received by the state hospital medical superintendents. His personage in medicine and his numerous publications led them to readily accept his offers to train the resident physicians to perform transorbital lobotomy. In August 1951, Hospital Superintendent Granville L. Jones, M.D. announced that Eastern State Hospital would begin to offer “brain surgery.”⁵ Without the approval of the State Hospital Board, Jones had made arrangements with Freeman to visit Eastern State twice a year as he made his rounds to the other state hospitals in Virginia.

Jones then established a Lobotomy Committee to select patients for the operation, subject to Freeman’s approval. The Committee was comprised of physicians, a psychologist and a social worker. Nursing was not included in the meetings, but in the course of their deliberations, Dr. Jones and the resident physicians often referred to nursing reports. At the time, nurses did not write patient care notes on the medical records but submitted a “nursing report” at the end of a shift. On November 15, 1951, Freeman operated on the first eleven patients. Of these, one patient, a twenty-two year old male, died ten days after the lobotomy from a staphylococcal infection in the operative tract. One patient who had been physically aggressive and spent many hours in seclusion became manageable and was able to participate in ward activities. After four years, he was discharged and never readmitted to Eastern State.

³ Minutes of the Executive Committee, September 6, 1949; the State Hospital Board finally relented and established a policy announced on December 14, 1952.
State. Four of the patients had a slow resolution of their symptoms and were discharged after three years. One of the patients had no therapeutic effect from the lobotomy or any other intervention. He died eleven years later. Four of the patients were lost to follow-up.6

Freeman returned on February 28, 1952. Emboldened by a modicum of success with the first patients, the Lobotomy Committee identified 15 more patients. After a brief visit with each patient, Freeman approved of all of the candidates. All of the patients in this cohort had been hospitalized for several years and had received multiple courses of electroconvulsive therapy and insulin coma therapy. Some experienced brief improvement after these treatments, but regressed and again became aggressive and unpredictable. Four of these patients improved after the lobotomy and were discharged within the year. Four patients made slower but gradual improvement and were discharged in 1955 and 1956. Four of the patients had no appreciable effect from the operation and remained in the hospital. Three of the patients were lost to follow-up.

It became evident that transorbital lobotomy did not affect an immediate or even a rapid resolution of psychiatric symptoms, but positive change in mental status was protracted and eventual in many cases. One persistently disturbed and aggressive patient had been hospitalized since 1936. Her parents visited regularly throughout her twenty-five years at Eastern State and in 1951 requested that she receive a transorbital lobotomy. The nursing reports to the Lobotomy Committee indicated her lack of progress, and that “sometimes she becomes very disturbed…. “ thus leading Freeman to believe that she was not an appropriate candidate for the procedure, but in view of the parents’ request, Freeman agreed to do the operation.7

Her recovery from the operation was uneventful, and after three days in the medical unit, she was transferred back to a “secure ward.” Eventually and slowly, she became less withdrawn and her episodes of disturbed behavior disappeared. Still, she remained confined to the secure ward. The nursing reports noted that she was capable of taking care of herself and that she participated in ward activities. This case shows that sometimes even patients who were lost on the “back wards” of overcrowded hospitals could be helped. On June 26, 1960, she was granted a three day pass with her parents. She got along well, and her parents requested an extension of her pass. In fact, she never returned to the Hospital.8

The lobotomy program ended after November 1954. Early in 1955, the Hospital began to use the first neuroleptic drugs. It soon became evident that the antipsychotic drugs had the same effect as transorbital lobotomy. Jones noted in his June 1955 Annual Report, “This year we did no lobotomies. This treatment … produces to some extent the same effects that the tranquilizing drugs produce and it was felt advisable to suspend the more radical treatment until a thorough trial of the drugs has been carried out. We ... may discover that we cannot discard lobotomies altogether.”9 With the rapid development of antipsychotic and antidepressant drugs, no further lobotomies were performed at Eastern State.

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6 Eastern State Hospital, Lobotomy Records, 1951–1954.
7 Walter Freeman, M.D., Summary for Transorbital Lobotomy, Medical Record, December 9, 1953.
8 Trial Visit Note, Medical Record, Eastern State Hospital, June 30, 1960.
Conferences

- **American Association of the History of Medicine**
  Los Angeles, California
  May 10–13, 2018
  Additional information: www.histmed.org

- **American Historical Association 132nd Annual Meeting**
  Race, Ethnicity, and Nationalism in Global Perspective
  Washington, DC
  January 4–7, 2018
  Additional information: www.historians.org

- **Canadian Association for the History of Nursing**
  “Tracing Nurses’ Footsteps: Nursing and the Tides of Change”
  Halifax, Nova Scotia
  June 15–17, 2018
  Additional information: www.cahn-achn.ca

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  June 15–17, 2018
  Additional information: www.cahn-achn.ca

- **Medical History of World War I**
  U.S. Army Medical Department Center and School, San Antonio, Texas
  March 22–25, 2018
  Abstracts due November 10, 2017
  Additional information: william.s.marble.civ@mail.mil

- **Society for the Social History of Medicine**
  Conformity, Resistance, Dialogue and Deviance in Health and Medicine
  University of Liverpool
  July 11–13, 2018
  Abstracts due February 2, 2018
  Additional information: sshm.org/upcoming-sshm-conferences

- **Southern Association for the History of Medicine and Science**
  Augusta University
  Augusta, Georgia
  February 15–17, 2018
  Additional information: www.sahms.net

Calls for Abstracts

- **Canadian Association for the History of Nursing**
  “Tracing Nurses’ Footsteps: Nursing and the Tides of Change”
  Halifax, Nova Scotia
  June 15–17, 2018
  Additional information: www.cahn-achn.ca

Call for Applications

The American Association for the History of Nursing (AAHN) offers four awards for completed research, each presented annually at the Fall Nursing History Conference. Only AAHN members are eligible to apply for these awards. Deadline for award submissions is May 15 of each year.

- **Teresa E. Christy Award** to encourage new nursing history investigators, and to recognize excellence of historical research and writing done while the researcher was in a student status.

- **Lavinia L. Dock Award** to recognize outstanding research and writing produced by an experienced scholar in nursing history who submits a book

- **Mary Adelaide Nutting Award** to recognize outstanding research and writing produced by an experienced scholar in nursing history who submits, most often, a post-doctoral research manuscript or article.

- **Mary M. Roberts Award** to recognize outstanding original research and writing in an edited book of nursing history.

Additional information:
www.aahn.org/awards.html

Want to learn more about the history of nursing? Connect with other nurses, scholars and archivists exploring the fascinating history of our healthcare system? Curious about the historical roots of current health policy and clinical practice? Join the American Association for the History of Nursing today!

Membership includes the annual journal, The Nursing History Review, AAHN Bulletin, a discounted rate for the AAHn annual meeting, and more!

For more information on the advantages of membership in the American Association for the History of Nursing and to join, visit: aahn.org.
Call for Papers: Medical History of WWI

San Antonio, Texas, US
Proposals Deadline: November 10, 2017

Over 22–25 March 2018, the Army Medical Department Center of History and Heritage and the Uniformed Services University of the Health Sciences will be co-sponsoring a conference on the medical history of WWI.

It will be hosted at the U.S. Army Medical Department Center and School in San Antonio, Texas.

Presentations on all facets of medicine and healthcare related to the war are welcome, to include: historical understandings of military medicine as practiced by all participants and in all geographic regions; consideration of the repercussions of the war on the practice of medicine; medicine in various campaigns; effects on the home fronts; postwar medical issues; mental health issues; the pandemic influenza; and related topics.

Presentations should be 30 minutes long, and two-paper panels are welcome.

As with the 2012 conference, we anticipate publication of selected papers.

Contact Dr. Sanders Marble, Army Medical Department Center of History and Heritage at william.s.marble.civ@mail.mil

Barbara Brodie Nursing History Fellowship

The Eleanor Crowder Bjoring Center for Nursing Historical Inquiry Barbara Brodie Nursing History Fellowship, a postdoctoral award, is open to nurses engaged in historical scholarship that advances the field of nursing history. Applications for the $3,000 award are due October 15, 2017, and the recipient will be announced in December, 2017. The selected Barbara Brodie Nursing History Fellow will present a paper from their research in the Center’s Nursing History Forum series.

Selection of the fellow will be based on the scholarly quality of the investigator’s project including: the clarity of the project’s purpose, its rationale and significance, the rigor of its methodology and questions posed, and its potential contributions to the field of nursing.

The application and a curriculum vitae should be sent by email to the Center’s Director, Dr. Barbra Mann Wall, bmw8y@virginia.edu. Applications are available on the Center’s Web site: www.nursing.virginia.edu/Research/CNHI/Fellowship

Center Archivist Accepts New Position

Our very capable archivist, Eric Drongowski, has left us to become the library media specialist at Vernon Johns Middle School in Petersburg, Virginia. We will miss his skilled help with our archival activities. Eric appraised and organized individual and group documents, processed new collections, wrote grants, and reviewed Center policies to ensure privacy and preservation. He developed systematic ways to describe our collections to help future researchers, and he helped us with new ways to protect and store our documents in climate controlled conditions. Eric will remain in a consultative capacity with the Center, and we wish him the best in his new endeavors!
SURVEYS HAVE BECOME ubiquitous—businesses desire to understand consumer opinions and preferences in order to improve their products and services. Healthcare organizations have also surveyed clients for years, and the results of those surveys have become increasingly important as the responses are now tied to potential additional reimbursement from insurers. But nurses have long been interested in the thoughts and responses from their clients. Here are some snippets originally published in *The American Journal of Nursing* that describe patient perceptions of nursing care:

**From an anonymous patient in 1920:**

I feel, however, as I lie here on my back, hardly able to raise my head from the pillow, and realize all that is being done for me by the woman into whose care my person has been committed—autocrat though she be!—that the nurse is entitled to fully two-thirds of the credit for every cure. The doctor plants the little seed of health, but the nurse is the one who makes it grow.1

**This male patient held nothing back when he recorded his thoughts in 1934:**

I am a patient. For the past seven years I have been in sanatoriums, hospitals, and health homes throughout Missouri, Arizona, New Mexico, and Colorado.… I think I know nurses—their good points as well as their bad.… There are three types of nurses about whom patients complain and who are responsible for all the ills of the profession. These are: the “dumb” nurse; the lazy nurse; and the giddy nurse.

The “dumb” nurse is found in every hospital. Except for ordinary routine work she is useless. The simplest daily requests must be constantly repeated.… The lazy individual is no more unusual among nurses than any other occupation.… It is in the small tasks where her nature shows itself. The patient has emptied his water pitcher. It is now 10:30 A.M. The nurse always fills it at noon. She ignores the empty pitcher, trying to act as if she does not see it. Unless the patient complains it remains unfilled until the regular hour.… The giddy nurse, the third and last source of annoyance to patients, is often a likable girl whose failing is in the unconscious neglect of her duties.2

**A public relations consultant presented findings of a survey in 1947:**

Quite a number of patients considered that in view of the failings of hospitals in the way of janitor and laundry service, the nurse did well to keep her good disposition. A fairly typical comment from Rockford, Illinois, summed it up by saying that the deficiency of service was “enough to tax the nerves of the best of nurses.”3

An ... extreme criticism and not typical was that most of the older nurses were “stiff, pompous and officious after age forty. Fire them before.” Were that patient a member of your exacting profession, very likely she would not have been so critical.4

**Finally, from a young boy in 1967, who tries to set the record straight:**

A nurse is nice and kind. She is not a mean one like some people. But it don’t matter anything what people think. But I think a nurse is nice still. You can eat almost anything she fixes for you.5

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4 Ibid.

Reunion for School of Nursing Diploma Graduates

On March 30, 2017 the Eleanor Crowder Bjoring Center for Nursing Historical Inquiry hosted a reunion for alumnae of the University of Virginia School of Nursing diploma program. The honored graduates represented graduation classes from the 1940s, 1950s and 1960s. Throughout the evening the attendees reminisced about night duty with twenty to thirty patients to care for, house mothers, evening curfews, sunning on the roof of McKim Hall, and the U.S. Cadet Nurse Corps. But most of all, they agreed there were plenty of good times during their student years at the UVA School of Nursing.

A UVA Graduate Nurse in World War I

Camilla Wills, whose collection we archive at the ECBCNHI, was one of one hundred nurses who reported for duty to Margaret Cowling, Superintendent of Nursing for UVA’s Base Hospital 41. The group formed in spring of 1917, but was kept stateside until the summer of 1918. The Center’s window depicts Camilla’s voyage overseas on the USS Cartago en route to France in July 1918. The window commemorates UVA nurses’ participation in World War I.
We would like to extend sincere thanks to each of our contributors.

GUARDIAN
$10,000 AND ABOVE
Eleanor Crowder Bjoring
Debra J. Mann
Denise G. and Charles H. Shearer
Barbra Mann Wall

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Annette Gibbs

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$400–$699
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Jeanette Waits

CENTER SUPPORTER
$100–$399
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ECBCNHI RECENT ACQUISITIONS

Carole L. Battle  vintage nursing texts, documents and photographs  
Barbara Brodie  books pertaining to nursing and healthcare history  
Sue C. Bryant  nursing history book, memorabilia, and documents related to doctoral study at the UVA School of Nursing  
Suzanne Houg Clark  documents and photographs pertaining to her Harper Hospital School of Nursing Class of 1961 student experience  
Ellen K. DuVall  annotated list of books on experiences of military nurses during wars  
June W. Echols  additions to the collection pertaining to her nursing experience  
Dunlop Ecker  photographs of his grandmother, Charlotte Martin, the first superintendent of nursing at the University of Virginia hospital  
Nancy Eksterowicz  documents pertaining to her nursing experience as an Acute Pain Service Coordinator as well as vintage nursing photographs, instructional pamphlets, books, and artifacts  
Ann McKennis  material pertaining to her student nursing experience and to nursing at Pearl Harbor  
JoAnne Peach  additions to the JoAnne Peach Collection  
Joan Rinehart-Green  books pertaining to nursing and nursing history  
Patricia M. Quill  additions to the Patricia M. Quill Collection  
Loretta Spittle  vintage nursing texts and photographs  
Donald Traser  transcription of the diary of Carrie Lee Chapman Traser, UVA SON DIPLO 1936  
Beverly Williams  photographs, documents, and artifacts pertaining to her mother’s experience in the Army School of Nursing during World War I  
Pat Wood  UVA School of Nursing Diploma Class of 1947 Recollections  
Sandra J. Wood  additions to the Society for Education, Practice and Research in Nursing Collection  

Ambulance and team, c. 1917.

Commencement address, Philadelphia School for Nurses, 1904.

Metropolitan Life Insurance pamphlet, 1918.