The Hospital for Special Surgery Affiliates with Cornell University Medical College and New York Hospital, 1951; Philip D. Wilson Retires as Surgeon-in-Chief, 1955

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Abstract When World War II ended in 1945, the Hospital for Special Surgery (HSS), the oldest orthopedic hospital in the country, was entering its eighth decade. Only 5 years previously, its name was changed from the Hospital for the Ruptured and Crippled (R & C). In 1934, Dr. Philip D. Wilson (1886–1969) had been recruited to fill the office of the fifth Surgeon-in-Chief with a key charge to restore the hospital as the leading orthopedic institution in our country, a role it originally held for over half a century since its founding in 1863. Wilson believed that a close affiliation with a university center having a medical school and hospital, while maintaining independence, was vital to achieve this objective. In 1948, negotiations between representatives of the Board of the New York Society for the Relief of the Ruptured and Crippled and representatives of the Society of the New York Hospital and Cornell Medical Center began and a preliminary written agreement was reached in March, the next year. The affiliation called for construction of a new building to house approximately 170 inpatient beds for orthopedics and arthritis. The land on the East River between 70th and 71st Streets, owned by New York Hospital, was to be given, without monetary exchange, to the Hospital for Special Surgery for construction of its new hospital. Finally, on November 1, 1951, a new *non-proximate agreement* was ratified. On May 25,

1955, after 43 years at 321 East 42nd Street, the Hospital for Special Surgery moved to its new six million dollar building at 535 East 70th Street where it formally became affiliated with New York Hospital–Cornell Medical Center. Two months later, on July 1, 1955, Philip D. Wilson retired as Surgeon-in-Chief to become the Hospital for Special Surgery's new Director of Research and Surgeon-in-Chief Emeritus.

Keywords Philip D. Wilson · Hospital for Special Surgery · Hospital for the Ruptured and Crippled · New York Hospital · Cornell Medical Center · Virgil P. Gibney · William T. Bull · William B. Coley · Eugene H. Pool · Frank Glenn · Robert F. Wagner, Jr.

Introduction

When World War II ended in 1945,¹ the Hospital for Special Surgery (HSS), the oldest orthopedic hospital in the country, was entering its eighth decade. Only 5 years previously, its name was changed from the Hospital for the Ruptured and Crippled (R & C) [1].

In 1934, Dr. Philip D. Wilson (1886–1969) had been recruited to fill the office of the fifth Surgeon-in-Chief, with a primary charge (from the Board of Managers of the New York Society for the Relief of the Ruptured and Crippled), to restore the hospital to its position as the leading orthopedic institution in our country, a role it originally held for over half a century after its founding in 1863. During World War II, in spite of a professional and hospital staff depleted by military service, Wilson led the hospital through very challenging times. He continued to maintain the highest standards of

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¹ V-E (Victory in Europe) Day ended the war in Europe when Germany surrendered on May 7, 1945. Japan surrendered on August 10, 1945 after the USA dropped its second atomic bomb, then on the city of Nagasaki.

service and succeeded in restoring HSS to its pre-eminent place in the USA.

In 1935, during Dr. Wilson's first year as Surgeon-in-Chief, the hospital's Board of Managers had established a Developing and Planning Committee to formulate long-range plans for the hospital. In 1945, at a special session of this committee, a number of prominent New Yorkers were invited to participate in discussing future plans for HSS (Table 1).

In addition to patient care, the need for teaching and research led to the conclusion that a close affiliation with a medical school and teaching hospital was vital. Considered of prime importance was that this affiliation must be structured to allow the Hospital for Special Surgery to retain its own autonomy [2].

Since the early years of the institution, many of the staff had medical school appointments. In 1884, Dr. Virgil P. Gibney, the second Surgeon-in-Chief (1887–1924), had been appointed the first Professor of Orthopedic Surgery at Columbia University College of Physicians and Surgeons [3]. As Surgeon-in-Chief, Gibney had persuaded William T. Bull, one of the leading surgeons of the country, to accept the position of Attending Surgeon to the Hernia Department at R & C. Bull had been on the staff of New York Hospital since 1883 and was the Professor and Chair of Surgery at the College of Physicians and Surgeons since 1899 [4]. The third R & C Surgeon-in-Chief, William Bradley Coley, MD (1925–1933), who had trained under Bull at New York Hospital, also had an appointment at the College of Physicians and Surgeons [5]. The fourth Surgeon-in-Chief, Eugene H. Pool, MD (1933–1934), had trained as an intern under Bull at the New York Hospital in 1900. Pool eventually became associated in practice with Bull, rising through the ranks of the faculty to become Professor of Clinical Surgery at the College of Physicians and Surgeons in 1915. On staff at the New York Hospital, Pool assumed the position of Chief of the Second Surgical Division at Bellevue Hospital in 1932 when the hospital moved uptown to join the Cornell University Medical College² (Fig. 1). Simultaneously, he was appointed Clinical Professor of Surgery at the Cornell University Medical College [6].

Dr. Pool, a general surgeon, had accepted the Surgeon-in-Chief's appointment at R & C with a specific charge from the Board of Managers of the New York Society of the Relief of the Ruptured and Crippled to seek out the best orthopedic surgeon in the country to assume the position of Surgeon-in-Chief of the Hospital for the Ruptured and Crippled.

Philip D. Wilson of Boston was selected in 1934 and became the fifth Surgeon-in-Chief the next year. At that time, a loose affiliation was made with the College of Physicians and Surgeons of Columbia University, which Dr. Pool stated: "...affords opportunity for contact with

Table 1 Five prominent New York citizens invited to discuss the future plans of the hospital at a 1945 meeting of the Planning and Development Committee

Dean Willard C. Rappleye, Dean of Columbia University College of Physicians and Surgeons
Dr. Alan Gregg, Director of the Medical Division of the Rockefeller Foundation
The Honorable Edwin A. Salmon, Chairman of the Mayor's City Planning Commission
Dr. Leverett D. Bristol, Executive Director of the Hospital Council of Greater New York
Dean Donald Sheehan, Dean of the Medical College of New York University

students and at the same time opens the way to cooperative use of the facilities of the two institutions which should prove of mutual benefit." Dr. Wilson was given the appointment of Clinical Professor of Orthopedic Surgery in the College of Physicians and Surgeons (1934–1950) [4]. In 1940, he was influential in convincing the Board of Managers to change the name of the hospital from The Hospital for the Ruptured and Crippled (R & C) to The Hospital for Special Surgery (HSS) [1].

This affiliation must have been less than formal, as there was little mention written in the HSS Annual Reports until 1943, when Dr. Wilson wrote:

An innovation at the Hospital during the year was the assignment to us of medical students from the third year class of the College of Physicians and Surgeons, Columbia University. These men come to us in groups of three for a period of two months under an elective course in surgery. They are assigned in rotation to the Children's and Adult divisions of the Orthopaedic Service and to the Surgical Service.

They spend five days a week at the hospital and assist in operations and in the treatment of patients. The course has proved popular and is booked full throughout the year. We enjoy the stimulating influence of these young men [7].

The hospital would often hold special teaching seminars and classes, and though not closely affiliated with a university, it always proclaimed to be a teaching hospital. At the end of World War II, the United States Navy requested that a course in rehabilitation be held for the benefit of Navy personnel. This course was held in June and July 1944, in cooperation with Hunter College. One hundred and fourteen Waves³ and medical corpsmen attended lectures by the HSS orthopedic staff three mornings per week (Fig. 2).

In October of that same year, a program of new developments from war injuries was held in cooperation

² In 1913, the New York Hospital became affiliated with Cornell University Medical College. It did not relocate from West 15th–16th Streets to East 68th Street until 1932 when it became known as New York Hospital–Cornell Medical Center [6] (during the years 1912–1955, the Hospital for the Ruptured and Crippled was located at 321 East 42nd Street between 1st and 2nd Avenues).

³ The WAVES were a World War II era division of the US Navy that consisted entirely of women. The name of this group was an acronym for "women accepted for volunteer emergency service." Established in 1942, it ceased to exist with the passage of the Women's Armed Services Integration Act (Public Law 625) on June 12, 1948 when women gained permanent status in the armed services.

Fig. 1. The site of the future New York Hospital-Cornell Medical College in 1929, looking north on York Avenue at 70th Street (courtesy of Medical Center Archives of New York-Presbyterian Hospital/Weill Cornell)

with the New York Academy of Medicine's *Annual Post-Graduate Fortnight*. Some of HSS staff participated included Cdr. Thomas I. Hoen, Lt. Col. Peter Rizzo, and Lt. Col. T. Campbell Thompson. There were many other educational activities at the hospital, including a program in cooperation with the office of the Coordinator of Inter-American Affairs of the Department of the State, educating orthopedic physicians from South American Republics [8].

In 1945, with return of staff from the military, the hospital expanded many departments, including the laboratories, Radiology, and Physical Therapy. Orthopedic residents were eligible to take courses in basic medical sciences at the College of Physicians and Surgeons, Columbia University, and did so, when time permitted. Opportunities for anatomical dissection were also available to residents and attending staff at the medical school.

However, Dr. Wilson had strongly believed that a close affiliation with a medical school and university hospital would provide reciprocal advantages for both the hospital and the medical center. Although previous Surgeons-in-Chief and R & C staff had appointments at the medical school of Columbia University, Dr. Wilson believed there were some obstacles in affiliating with that university. Major among them was that Columbia was not about to allow the Hospital for Special Surgery to retain its independence (Wilson PD Jr., personal communication).

At about this time, Columbia–Presbyterian Medical Center and the New York Orthopaedic Hospital (NYOH) merged resulting in NYOH becoming the orthopedic department of the medical center. This merger was ratified in 1945, and NYOH moved into the medical center in 1950, at which time it lost its independence [9].

Dr. Wilson's remarkable foresight promoted the affiliation with New York Hospital–Cornell Medical Center. Negotiations proceeded under his careful guidance (Wilson PD Jr., personal communication). Fully supporting Wilson, the Planning Committee of the Board of Managers of the Hospital for Special Surgery started meeting with members of the Joint Administrative Council of the Cornell Medical Center. In order for the two institutions to have a close affiliation, it was decided that HSS would need to construct a new hospital adjacent to the medical center [10].

During 1948, negotiations between representatives of the Board of the Hospital for Special Surgery and representatives of the Society of the New York Hospital progressed and a written agreement was executed in March 1949. The affiliation, which had the approval of the Hospital Council of Greater New York and was to be subject to the approval of the court, called for construction of a new building to house approximately 170 inpatient beds for orthopedics and arthritis. The land on the East River between 70th and 71st Streets was owned by New

Fig. 2. At the end of World War II, WAVES and medical corpsmen from the United States Navy attended a 2-month course on rehabilitation at the Hospital for Special Surgery. Lectures were provided by orthopedic staff who were already overburdened with work because of many having been deployed to the military. On the back wall hangs the original portrait of James Knight, MD, the founder and first Surgeon-in-Chief (from Hospital for Special Surgery Archives)

York Hospital and was to be given, without monetary exchange, to the Hospital for Special Surgery for its new hospital.

Samuel S. Duryea (Fig. 3), President of the Board of Managers of the New York Society of the Relief of the Ruptured and Crippled, in his 1948 Annual Report, wrote:

Although the hospitals will continue as independent corporations meeting their own operating costs and expenses, each will avail itself of the experience and facilities of the other; general surgery and internal medicine (other than arthritis) will be conducted in New York Hospital, and orthopedics and arthritis in our Hospital. We believe that we have something to contribute for we are proud of our past and our present work. We know, however, that New York Hospital can help us because more and more it becomes apparent that a voluntary hospital with special interests such as ours must be closely identified with a great center of teaching and research in order to maintain the highest professional standards. For us to try independently to develop a new center would not make sense with a great center in existence a mile or so away. We doubt whether being “closely identified” means being anywhere other than “there”—as part of the center. But we could not move to the New York Hospital–Cornell Medical Center if it were not for what New York Hospital is doing for us. We are

Fig. 3. Samuel S. Duryea (1893–1979), a New York attorney, served as President of the Board of Managers of the Hospital for Special Surgery from 1948 to 1958 and also as a Governor of the New York Hospital. He successfully led the negotiations of affiliation between the two hospitals (from Hospital for Special Surgery Archives)

intensely interested in the care, treatment and rehabilitation of patients afflicted with crippling conditions including orthopaedics, poliomyelitis, cerebral palsy and arthritis. It's a broad field, but not an isolated one. If we have something to offer New York Hospital and if it has something to contribute to us, this pulling together without a merger but with our becoming in effect the orthopaedic service of New York Hospital while retaining our identity is a hostage to the vitality of voluntary hospitals [11].

Although the architectural firm of Rogers and Butler was engaged in 1949 to begin designing the new hospital, plans needed to be revised many times. Execution of the signing of the formal agreement was also delayed. Merging the two hospital staffs was complicated, as those on the New York Hospital staff needed appointments to the HSS staff and conversely HSS staff required appointments to New York Hospital. Arrangements for exchange of surgical and orthopedic residents were facilitated by Dr. Frank Glenn, Chief of Surgery at New York Hospital. Staff reciprocity included the Departments of Pediatrics and Medicine at New York Hospital with the Rheumatology Department to reside in the Hospital for Special Surgery. The two institutions' record committees were confronted with selecting between a uniform record system for both hospitals or continuing independent record rooms at each hospital.

Finally, on November 1, 1951, a new *non-proximate agreement* was ratified, and as of that date, the HSS Orthopaedic Department assumed the responsibility of staffing five orthopedic outpatient clinics at New York Hospital. Weekly orthopedic lectures for the third year medical students were provided by HSS staff. A 12-bed inpatient orthopedic service was established at New York Hospital. Since the prior year, surgical residents rotated for 4-month periods at the Hospital for Special Surgery and pediatric residents rotated there for 2-month periods. Three senior orthopedic surgeons from New York Hospital, Doctors Frederick Liebolt, Thomas J. Dring, and John T. Croft, were brought on staff at HSS [12].

In the same year, the Board of Managers of HSS, fully supporting Dr. Wilson's vision of a building devoted to research, purchased an additional plot of land on the East River Drive between 71st and 72nd Streets for \$400,000.

Estimates of the cost of building the new hospital were about \$6 million, which were to be funded by the sale of the old building on 42nd Street for \$2.5 million, a legacy of Mrs. Matthew Astor Wilks and other capital funds of \$2 million, and by \$1.5 million in new money [12]. Excavation of the land proceeded in September 1953 with pouring of the concrete foundation in February 1954 (Fig. 4). The cornerstone was laid by Governor Thomas E. Dewey, Dr. Wilson, and Board President Samuel Duryee on May 17, 1954. Erection of the steel framework began in June, and the building was closed in by December 1st (Fig. 5). The building was completed in January 1955, and the new hospital opened in May 1955. The final cost of the building

and equipment came to what was originally estimated at \$6 million in round figures.

That year, Dr. Wilson, at age 69, stepped down as Surgeon-in-Chief to assume a new role of Director of Research and Emeritus Surgeon-in-Chief at HSS. Having made remarkable achievements in the first decade (1935–1945) in the office of Surgeon-in-Chief, Philip D. Wilson continued to restore the hospital to one of the leading institutions in the orthopedic world. In the latter decade (1945–1955), besides establishing a university affiliation and moving the hospital into a new building, he continued to receive many professional awards and honors, including the King's Medal (England) in 1947; Chevalier, Legion of Honor (France) 1947; Honorary Commander, Order of the British Empire in 1948; and eventually, Docteur Honoris Causa, Sorbonne in 1966 (Table 2). Throughout these years, with all his excellent organizational skills, he was often asked to serve on many local and national medical committees, lending his expertise in public service to health insurance, children's problems, and government agencies at all levels [13].

He continued to publish orthopedic and other medical articles, edited or co-authored three books, and participated in numerous professional organizations in various ways. He was a born leader and was known by his colleagues, friends, and those whom he had trained (he called "his boys") as the "Boss." His family referred to him as the "Skipper" because of his love for sailing. Postgraduate training was very important to Wilson, and in 1951, he increased the length of the orthopedic residency to 3 years by providing two extra 6-month rotations, one at the Kingsbridge Bronx Veterans Administration Hospital and the other a rotation on the fracture service of New York Hospital [14].

A Bone Bank, one of the earliest in the nation, was established in January 1946. Sterile healthy bone taken at the time of certain orthopedic operative procedures was stored under refrigeration at temperatures ranging from -10°C to -20°C for extended periods of time. The staff reported their results at scientific meetings and published bone bank results in orthopedic journals, attracting many visiting physicians to the hospital [10].

During this era in 1947, the first mention of a scoliosis clinic, directed by Dr. John R. Cobb, was reported in the 84th Annual Report. Also noted was the reactivation of the cerebral palsy clinic under Dr. William Cooper. At that time, the New York City Board of Education made provisions for a special school for cerebral palsied children under the medical supervision of the Hospital for Special Surgery, the first public school unit in the city of its kind. A clubfoot clinic was under the direction of Dr. David Horwich.

In 1951, a hand clinic was established under Dr. Lee Ramsay Straub. In 1953, after Dr. Cobb was forced to restrict his practice because of illness, Dr. Philip D. Wilson, Jr. became Chief of the Scoliosis Clinic [14].

As Surgeon-in-Chief, Dr. Philip D. Wilson was known especially for his judgment, sound principals, and truthfulness. Yet, with all these extraordinary qualities, he was

Fig. 4. The site of the new hospital was bounded between 70th and 71st Streets and the East River Drive (from Hospital for Special Surgery Archives)

compassionate, thoughtful, and considerate. He was known to have great respect for those around him, whether they were family, friends, peers, students, or office staff.⁴

His reputation, as one of the most prominent orthopedic surgeons in the world, attracted patients from many parts of the globe. Some were famous; some had unusual con-

ditions; and some could hardly afford to pay any fee for his advice and/or treatment. Frida Kahlo, the well-known Mexican artist, fit into all three categories when she consulted Dr. Philip D. Wilson in 1946; not only famous in her own right, she had been through a publicly tumultuous marriage and divorce (1929–1944) to the famous Mexican artist Diego Rivera; she suffered from chronic, severe pain from a fractured spine and multiple injuries resulting from a horrific bus accident in Mexico City in 1925. She had minimal funds. In June 1946, Dr. Wilson performed a four-level lumbar spinal fusion on her, inserting a steel plate. She was in the Hospital for Special Surgery for 2 months postoperatively. Even though her back pain persisted, she considered Dr. Wilson to be “marvelous” [15].

President John F. Kennedy suffered chronic back pain most of his adult life, even until his assassination in 1963. Having had a previous spinal laminectomy in 1944 at the Lahey Clinic, he consulted Dr. Philip D. Wilson in 1954 who recommended a spinal fusion. On October 21, 1955, Kennedy, who at the time was a United States Senator from Massachusetts, underwent a posterior spinal fusion with a

⁴ Near the end of Dr. Wilson’s career, after I finished my orthopedic residency at HSS in 1964, I was honored to be asked to join the office of Dr. Wilson, Dr. Ramsay Straub, Dr. Philip D. Wilson, Jr., and Dr. Harlan Amstutz. Our office had a number of secretaries who were originally hired by the boss and so loyal that they rarely left for other employment. On Friday afternoons, after all patients were seen, Dr. Wilson invited all of us, including our office staff, for a social hour. During January 1966, when I returned from California, after finishing my scoliosis fellowship, the annual meeting of the American Academy of Orthopaedic Surgeons was held in Chicago. Only Dr. Wilson and I remained to cover the hospital. A plastic surgeon’s wife sustained a transverse fracture of her patella, and I performed the surgery—one of my first operative cases as an Attending. It was a great comfort for me to discuss the planned approach with Dr. Wilson. He treated me like a colleague who had been around for years. In fact, during the years in his office, the five of us often took equal night calls.

Fig. 5. Looking northwest from the East River Drive in November 1954, the external structure of HSS was nearly completed (from Hospital for Special Surgery Archive)

Wilson plate at the Hospital for Special Surgery. His operative management was somewhat challenging, as he had been diagnosed with adrenocortical insufficiency (Addison's disease) 7 years before. His postoperative course was complicated by a wound infection. Four months later in

February 1955, he underwent removal of the plate with wound irrigation and open packing [16, 17].

Among many of the other celebrates consulting Dr. Wilson was Marlene Dietrich, the German-born cabaret singer of the 1920s and famed movie star of later years. In 1947, during World War II, she received the US War Department's "Medal of Freedom," for entertaining American troops and for her strong stand against Nazism (Fig. 6).

During the years 1941–1954, the Director of the hospital was F. Wilson Keller, who was well respected by the staff and a loyal supporter of Dr. Wilson. Keller, a graduate of Ohio State University, had been appointed to this position after having accrued a fund of experience, first as Assistant Director of the Lenox Hill Hospital and then as Director of the Lawrence Hospital in Bronxville, New York. Wilson described him as a "real genius for organization and hospital leadership" [18].

During the period after the hospital signed the agreement of affiliation with the New York Hospital–Cornell Medical Center, Mr. Keller immediately undertook a study of the space requirements for the new hospital. He based his conclusions on the current space and volume of depart-

Table 2 Selected organizations and appointments of Philip D. Wilson

Member

Medical Advisory Board of the Nemours Foundation and Alfred I. Dupont Institute
Board of Regents, American College of Surgeons
Board of Orthopaedic Research and Education Foundation (OREF)
Congress of the International Society of Orthopaedic Surgery and Traumatology (SICOT)
Chairman—1960
President—1963

Founding Member

American Academy of Orthopaedic Surgeons (AAOS)—President 1935
American Board of Orthopaedic Surgeons (ABOS)—President 1943
Orthopaedic Research Society (ORS)—President 1957

Honorary Fellow

Royal College of Surgeons of Edinburgh

Fig. 6. Marlene Dietrich is seen visiting a patient with Dr. Philip D. Wilson at the Hospital for Special Surgery during the 1940s (from Hospital for Special Surgery Archives)

ments, growth of such, and predicted requirements for assuming expansion of the Orthopaedic Department of New York Hospital. He instituted the first hospital newspaper, the *Record and Chronicle*, which served not only the hospital staff but those in military service around the world. Unfortunately, he acquired an illness, which led to his death at the age of 57 years on May 7, 1954 before he could see the completion of the new hospital.

On May 20th, the Board of Managers appointed T. Gordon Young, who had been a young assistant to Mr. Keller, as the new Director of HSS. Theodore Gordon

Table 3 Specialty clinics in the Department of Orthopaedics, established in previous years, continued under their current chiefs

Cerebral Palsy—Dr. William Cooper
Club Foot Clinic—Dr. Alexander Hersh
Scoliosis Clinic—Dr. John R. Cobb
Fracture Clinic—Dr. Robert Lee Patterson, Jr.
Hand Clinic—Dr. Lee Ramsay Straub
Amputee Clinic—Dr. T. Campbell Thompson, Dr. Jerome Lawrence

Table 4 The 1954 professional staff listing included the following departments besides the Orthopaedic Department headed by the Surgeon-in-Chief

Department of Surgery—John E. Sullivan, MD—Chief
Thoracic Surgery—Charles W. Lester, MD—Attending
Neurosurgery—Thomas I. Hoen, MD—Attending
Otology and Laryngology—Paul H. Breuning, MD—Attending
Ophthalmology—David H. Webster, MD, Gordon Cole, MD
Gynecology—George L. Bowen, MD
Urology—Thomas Morrissey, MD
Department of Medicine and Pediatrics—Richard H. Freyberg, MD
Neurology and Psychiatry—Thomas E. Ramford, MD, Joseph Moldaver, MD
Pediatrics—Helen Harrington, MD
Dermatology and Syphilology—Royal Montgomery, MD—Attending
Department of Physical Medicine—Kristian G. Hansson, MD—Director
Department of Roentgenology—Harold G. Jacobson, MD—Director
Laboratory of Pathology and Research—Milton Helpert, MD—Director
Department of Anesthesiology—Charles H. Burstein, MD—Chief
Dental Department—Edward Stroh, DDS—Director
Department of Podiatry—Samuel Brezak, Pod.D—Director

Young came to the Hospital for Special Surgery in July 1942. Having received his B.S. Degree from New York University with a major in Personnel Management, he left the hospital for the infantry for a brief period in 1945 (originally classified as 4F, the Army had decided to draft some in that classification). T. Gordon Young was married in November 1942 to Nola Rowland, an obstetrical supervisor at Knickerbocker Hospital who had come to New York from farm life in Canada. When the hospital eventually moved up to East 70th Street in 1955, Gordon and Nola resided in the hospital on the 9th floor. Mr. Young continued as Administrator until his retirement in 1977 when Donald S. Broas replaced him as Executive Director.

The Annual Report for the year 1953 listed the specialty clinics of the Orthopaedic Department for that year (Table 3) [13, 20]. Various other support departments existed prior to the hospital affiliation with New York Hospital (Table 4). The signed agreement in 1949 with New York Hospital–Cornell Medical Center stipulated that the new hospital would be limited to the fields of orthopedic surgery and rheumatic diseases, unfortunately eliminating the R & C staff of the departments of general surgery and all surgical specialties. In many cases, some of the staff were given privileges at New York Hospital, while others had time to obtain privileges at other hospitals. Dr. Wilson reported that the loss of close affiliation with these fine and loyal members of the Medical Staff of the Hospital for Special Surgery would cast a shadow upon happiness of moving into the new hospital for many years to come [18].

On May 1, 1954, the Director of the Laboratories, Dr. Milton Helpem, was promoted to the position of Chief Medical Examiner of the City of New York by Mayor Robert F. Wagner, Jr. He would hold the position of Professor and Chairman of the Department of Forensic Medicine of New York University's School of Medicine from 1954 to 1974, as well as having an appointment at Cornell University Medical College. Over the years, he was often referred to as the greatest detective and foremost authority in forensic medicine in the world [1].

In 1955, the duration of the orthopedic residency program again was increased to three and one half years, from the 3-year training program instituted in 1951, with one resident starting every 3 months. The hospital was preparing for its move uptown to join the New York Hospital Cornell Medical Center on the upper eastside. Mary Jeanne Clapp, RN, was appointed Director of Nursing to replace Cleanthe E. Logotheton who was Directress of Nursing for 12 years beginning in 1942. Dr. Philip D. Wilson announced that he would retire as Surgeon-in-Chief on July 1st, 1955 to assume the new role as the Director of Research and as Surgeon-in-Chief Emeritus [19].

After 43 years at 321 East 42nd Street, on May 25th, 1955, the Hospital for Special Surgery moved to its new six million dollar building at 535 East 70th Street. It was in a time of relative international and domestic tranquility with low interest rates, low inflation, and plentiful and cheap oil, a period of post-bellum prosperity with life less complicated and slower moving than at the time of this writing. Dwight

D. Eisenhower, the 34th President of the USA, was 2 years into his first term of office. That year, the hospital's average length of stay was 25 days with 1,500 operative procedures being performed annually.

T. Gordon Young, the benevolent administrator who was known for his concern, compassion, and attention to detail, named the May 25th moving day, *The Manhattan Transfer*. Seventy-three patients were moved without incident before noon, in less than 2 1/2 hours, in time to have their lunch in the new building at 535 East 70th Street. The HSS nurses played a major part of this success story [20].

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