
Information about clinic/hospital at Dorland-Bell School in Hot Springs:

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Then on June 12, 1920, Julia Phillips deeded her home, Breezy Crest, and the Bird Cage cottage to the school. The latter would continue in use as a faculty home, but it was Miss Phillips' wish that Breezy Crest be converted into a teaching hospital for Dorland pupils. When this became a reality, a trained nurse, Myrtle Umdenstock, was also added to the staff. Funding for the equipment and nurse's salary apparently came from the Board's medical department. A factor influencing the acquisition of this first hospital for Hot Springs (townspeople used it, too) was the earlier opening of the Presbyterian hospital at White Rock. Dorland's sister mission had secured, as early as 1914, a doctor, George H. Packard, and had made immediate plans for a hospital on Laurel. This dream of Presbyterian missionary Frances Goodrich, who had been an ardent worker in the Laurel field since 1897, began to materialize in 1916 when land was given for the hospital. In May, 1919 the completed twentybed unit received its first patient. (It also provided Madison County with its first hospital.) Financing did not come easy to the White Rock workers either. Many times between the years 1914 and 1919 they had to use make-shift equipment and facilities. One such occasion, considered to be the foundation for the Laurel hospital, was the following case described in a pamphlet published by the Board of National Missions: In a small frame house next to the Post Office the neighbors gathered to watch Dr. Packard perform a surgical operation upon an old Civil War veteran; of seventy who lay dying. He was a member of a prominent family and there was widespread interest in his illness. Few, if any, saw any chance for his life, and the doctor prayed as he got into position the gas light borrowed from the church from which he had also borrowed the minister [W. E. Finley] to give the ether. Skillfully, he extracted the diseased appendix and stayed beside the bed until the patient was out of danger. This case was the cornerstone for the hospital, because it established confidence in the doctor up and down the mountainside. The opening of the Laurel hospital fueled the long-time desire of Julia Phillips to start a hospital at Dorland; hence her gift of Breezy Crest, just a year later, for the purpose.

[In 1923] Canadian-born nurse, Miss Anne McGregor took Miss Umdenstock's place as resident nurse on the staff of Dorland-Bell.

Another old problem, which often went hand-in-hand with the students' poverty, were their health needs. Miss Taylor wrote that, "Almost invariably the girls are undernourished and need the attention of dentist, oculist, or physician. When they come they have the mountaineer's suspicious and unreasonable fear of hospitals, operations, and such health measures as inoculations and vaccinations!"

This attitude had changed, over the years, under the care of kind, old Dr. Peck, the local physician. But in June of the year before, the school's routine was interrupted when it was suddenly left without a doctor; Edward J. Peck had suffered a fatal heart attack. For over forty years he had practiced medicine in Hot Springs, vaccinating two generations of Dorland pupils, and he would be greatly missed by school and community. In less than a month, however, David Kimberly, Jr., a young Asheville physician, had opened his practice in Hot Springs (and would come to mean just as much to the school and vicinity). Miss Taylor then combined her efforts with those of Kimberly and Dorland's nurse, Ann McGregor, to give even better health care and education to the girls. The small hospital the town's first developed as Miss Phillips had hoped, into a modern facility which could handle most illnesses and minor surgeries. Taylor also devised a way to give great service to the community while providing the school with a teaching instrument. She opened the Dorland-Bell hospital to some of Dr. Kimberly's patients in town and a few local babies were born there, including one of Kimberly's sons. The health program became a source of pride to the superintendent, who wrote her friends that "Last Friday we had a baby arrive in our hospital and this week the girls of the Home Nursing Class are vying with each other in bathing the baby and caring for the mother.

Nurse McGregor also went to White Rock to vaccinate the area's children.

Closely allied to the Home Economics department was the Home Nursing program under the direction of the staff nurse. In this course students learned artificial respiration, applying bandages, reading thermometers, taking pulse readings and giving hypodermics. Upon completion they received Red Cross First Aid and Home Nursing certificates. If a girl expressed a desire to become a nurse she would be given an opportunity to "try-it-out" at the school's hospital. For these "majors" training was given by Dr. Kimberly, the local physician, and Miss McGregor, the school nurse, in actual operating room technique with post-operative patient care. The older nursing pupils were permitted to assist in the delivery of at least one baby per year

A TIME TO EVERY PURPOSE: 1927-1942 The Catty-Cornered Door Hospital When Dorland-Bell alumnae are asked about their most vivid memories of the school, they frequently mention the hospital. Whether as a patient, nursing student, or entering student being inoculated, all had passed through the cater-cornered door of the building up on the hill. Even though Julia Phillips had deeded her home, Breezy Crest, to Dorland in 1920, it was not developed as an infirmary until after Nurse Ann McGregor joined the staff in 1923. A year later, a two-story addition containing several large windows made the building more suitable for use as a hospital. Since the immediate area offered no medical center, the Dorland-Bell facility answered the great need of the school as well as occasional cases from town. At times there would be minor 'flu epidemics or cases of mumps and measles all requiring isolation when the infirmary was a real boon. One year, immediately following Christmas vacation, there were so many sick pupils that Miss McGregor had to have assistance. Nurse Gail Isensee came from the White Rock mission to help. The illnesses seemed to be a combination of colds, 'flu and upset stomachs from "too much Christmas," said Miss Isensee. In addition to daily dispensary hours there were the physical examinations for each girl at the beginning of the school year plus smallpox vaccinations and typhoid and diphtheria inoculations. As one term opened The Broadcaster announced that, "So far one hundred girls have had examinations. The nurse found the following needed to be done: 11 needed oculist 23 " dentist 29 were underweight 59 tests for diphtheria 28 needed tonsillectomies 38 " typhoid inoculations 36 " smallpox vaccinations 98 urinalyses Typhoid precautions were taken especially during the drought years of the thirties. Even the teachers received their turns at "shots" when necessary. In an October 1935 letter to New York Board members, Miss Taylor related, "Just now we are finishing the painful process of 'sore arms' from inoculations for various things, such as typhoid, diphtheria, small pox. We've all had our share of it!" Simple surgeries such as tonsillectomies and appendectomies were also 230 .23 performed at the school hospital. For these, Dr. David Kimberly, the Hot Springs physician, was called in to operate, and an anesthetist was brought from Newport or Marshall (often Dr. McElroy). Students in the nursing class were permitted to "scrub-up" and help with these cases, which were numerous enough to give everyone ample opportunity. Miss Taylor wrote in a 1933 *Women and Missions* article that "Since we average yearly the removal of thirty pairs of tonsils, you will see how real this experience is." In retrospect, it might seem that Dorland-Bell removed tonsils needlessly. On the contrary, at that time, it was considered remiss for a physician not to recommend taking out enlarged or suspicious-looking tonsils. In the "preantibiotic" age, the rationale was that infection could set in anytime, causing colds, arthritis, rheumatic fever and various other diseases. Tonsils were thought to be potentially dangerous; hence, they were better "out" than "in." (As late as 1975, according to the American College of Surgeons, the removal of tonsils and adenoids was the fourth most frequently performed operation in this country; Public Health Service provided for removal of tonsils in the North Carolina school system through the fifties.) And in 1935 the November fifteenth issue of the Hot Springs Weekly Herald announced that a tonsil clinic sign-up would be held at the public school; the operation, which cost twelve dollars, would be performed by Dr. Kimberly, using the Dorland-Bell hospital and equipment. Diseased appendixes occurred fairly often on Dorland's campus, sometimes two or three at once. The operating room staff would be put together from those at hand, but the results were always professional under the guidance of Dr. Kimberly and Nurse McGregor. In one instance, student Rue Culberson was awakened in the early hours of the morning by Miss McGregor's asking for help. In an article for The Broadcaster, Rue described the emergency appendectomy of classmate Pauline Roberts. "When I came downstairs Miss Taylor, Miss McGregor, Mrs. Kimberly and June [another student] were all dressed in their nurse's uniforms. . . . Misses Taylor and McGregor acted as sterile nurses. Because of Dr. Kimberly's skill in handling his tools the operation was soon

over. June and I feel that this has been excellent experience for us. . . ." A different case, however, which did not go as smoothly, was that of student Ola Harris, whose appendix ruptured while Miss Taylor was trying to reach Ola's parent in rural East Tennessee for permission to operate. Peritonitis had developed and students were quickly tested for matching blood type; then, Jessie Walker was placed in a bed beside Ola for direct, arm-to-arm transfusion. A new device called an IV was rushed from West Virginia but it did not seem to help. Dr. Kimberly sat by the patient's bed night and day, despairing more each hour. Ola would sometimes drift from the morphine's delirium when the doctor's nodding head would strike her bed. Finally, Dave Kimberly, who had never before lost a patient, could see no hope of 231 recovery. Miss Taylor asked Mr. Raleigh to build a casket, because Ola's father was very poor and the body would have to be sent home. So on Sunday afternoon, even during Quiet Hour, hammer and saw could be heard in Dorland-Bell's shop activity which proved in vain. For prayers were answered and Ola recovered, slowly, but surely. When well, she promptly went to see "her" handsome walnut coffin which had been donated to the local funeral home for use in another needy case. With subsequent attacks of appendicitis at the school, surgery was not delayed for want of parental permission. Dorland nursing students also received valuable experience by assisting in the birthing of babies. Arrangements were made for one or two local mothers a year to deliver at Breezy Crest so that the seniors might participate. They looked after mother and infant for two weeks. As a result of these training involvements, girls became familiar with basic hospital technique and equipment, and many Dorland graduates made nursing their careers. The German student, Marianne Regensburger, recalled that the operation she watched made such an impression upon her that she pursued a medical course for a short time after leaving Dorland.