

A New Era Of Progress – 1959-1970

A Challenging Situation

A new dean faced enormous challenges in the 1960's. Accreditation standards had to be met. To do this the medical school needed more full-time faculty, more space to accommodate them, and more money to pay for it all. The school buildings at 14th and Davenport were becoming increasingly antiquated, as well as inadequate, and had to be replaced. Dean Gillick had begun the effort to acquire some full-time clinical faculty in the 1950's, but with his resignation July 1, 1959, the greater tasks fell to his successor, Dr. Richard Egan (M.D. 1940).



Richard L. Egan (M.D. 1940), Dean 1959-1970.

For more faculty and new buildings the sources of funds seemed meager. To make matters worse, the threats to Creighton's accreditation made some hesitant to give to what they feared would be a lost cause. Dr. Egan himself described the situation:

We could compare our budget against the minimum/maximum average budget published in each annual education number of JAMA [*Journal of the American Medical Association*] and we were at the bottom. We had a faculty that was small by any standard . . . And so the issue really was, was the medical school viable? And that was the problem in 1959. . . . We realized that we had to get money and that other schools were getting money by sponsored research and so we encouraged some of the faculty to submit applications for research grants. And they were rejected. On inquiry, we found that they were rejected because the NIH [National Institute of Health] study sections were under the impression that Creighton was going to close the medical school.¹



Father William Kelley, S.J.

Dr. Egan and Creighton University Academic Vice President Father William Kelley got busy. They traveled to Washington, D.C. and spoke to various members of the National Institute of Health staff to convince them that Creighton was *not* going to close its medical school. Those efforts paid off, for an increasing number of grants came to the Creighton School of Medicine, both to faculty members for research and to the school itself for other educational expenditures. The grants were small at first, but as the decade moved on, they became more substantial.

Some statistics tell the story. The annual School of Medicine operating budget climbed from \$382,000 in 1954 to \$2,281,000 in 1963.² Dean Egan reported having received 96 grants in 1964, up from 80 in 1963. There was a corresponding increase of 40% in 1964 in the school's research expenditures. Of the full-time faculty members 80% were participating in research at the time.³ By 1967 almost one million

dollars per year was received by Creighton medical faculty members in federal grants for research. These grants were used to meet University overhead costs, amounting to about 20% of the total. But, as *The Creightonian* said, “the grants also supplied a percentage of the salaries of the faculty members involved, and helped in meeting the upkeep costs of the medical school.”⁴

Using research grant money to partially fund faculty salaries did not sit well at first with some Creighton administrators, as Dr. Egan described it. Some of the older, more conservative members of the administration were uncomfortable with this, fearing that if the grants were not renewed for some reason, Creighton might be in a bind financially from an obligation to pick up that portion of the salary. Father Carl Reinert came to the rescue when he argued, successfully, that this source of financial support must be used to advantage like any other. If the medical school was to remain extant, it must not only use part of its research grants to support faculty but also use the money freed up to obtain more grants.⁵

The largest private foundation grant in the University’s history was announced on July 30, 1965. This was a five-year grant of \$486,765 from the W.K. Kellogg Foundation. It was used to aid in faculty development, especially in Microbiology, Psychiatry and Preventive Medicine, and to create a new administrative position, that of Associate Dean in the School of Medicine. The first person to fill this position was Dr. Joseph M. Holthaus (M.D. 1947 and future Dean). His duties included supervision of curriculum development and assisting in the financial affairs of the School of Medicine.⁶

Obtaining this grant also involved some special effort by Dean Egan. He and Father Kelley called upon the Chief Executive of the Association of American Medical Colleges, Ward Darley, who became interested in Creighton’s financial plight, and put them in touch with the Kellogg Foundation. The Foundation encouraged them to submit an application for a small initial planning grant of \$5,000 with which to hire consultants. They submitted the application, the grant was awarded and the School of Medicine hired Glen Leymaster and Ken Kenrod as consultants. After many visits to the school and many interviews with everyone from Jesuits to faculty to students, the consultants recommended that Creighton apply for the Kellogg Faculty Development Grant, which was approved.

This was a tremendous breakthrough for Creighton. As Dr. Egan said, “[Almost] \$100,000 per year at a time when \$20,000 was at least the beginning of an attractive salary for a clinician!”⁷ Also important was the role of the Kellogg Grant in encouraging others to support the School of Medicine by means of grants, gifts and endowments.

Dr. Egan, with the aid of these federal and private grants, was then able to increase the size of the full-time faculty. Numbers, pieced together from various sources, once again help tell the story. In 1958 there were 23 full-time faculty members (most of them pre-clinical). By 1960 the number had increased to 37; by 1963 it stood at 51. (The biggest increase at the time came in the areas of pre-clinical science, internal medicine and pediatrics.) During the 1965-66 school year, the School of Medicine employed 77 full-time faculty, and a report indicated that this was double the number it had been five years previously. By 1969 the listing of full-time faculty stood at 100. Therefore, during his tenure, Dr. Egan had more than quadrupled the number of full-time faculty.⁸

Federal Money, Applicants and Enrollment

The Federal Government at that time held the conviction that there was a nationwide shortage of medical personnel, especially physicians. Therefore, federal encouragement (money) was given not only to aid in establishing new schools, but also to prevent closure of extant medical schools. At that time, Creighton was seen as one of ten medical schools in such grave financial straits that it was in danger of closing its doors. Dr. Egan was able to work with the Advisory Council of the Federal Bureau of Health Manpower to develop the legislation which provided matching construction funds for medical school expansion; to provide special project funds; and for capitation funding. In fiscal year 1966-67, the Federal Government authorized direct support to medical schools, with a \$25,000 base grant and \$500 extra per student, allowing an increase in class size of five percent a year. These so-called capitation grants, based on head count, not so subtly made an increase in class size, and therefore total enrollment, a financially attractive goal for medical schools.

Once again, numbers tell a story. *The Creightonian* reported in September 1967 that for the first time since 1948, the freshman class of the School of Medicine was increased from the previous standard of 76 to 82 for that school year. "Federal aid and grants to medical schools all over the nation have been made contingent on enrollment increase," Dr. Egan said. "Most medical schools have expanded the enrollment of their freshman classes this year."⁹

Enrollment figures from the Creighton University Registrar tell a similar story, not only for the rest of the decade but also through the 1970's, concurrent with the continuation and some increase of capitation funding. Enrollment in the School of Medicine in 1967 was 290; for 1968 it was 302; for 1969, 320. By 1979 total enrollment was 449. Creighton was doing its share to correct the perceived physician shortage (and also receiving its share of the capitation grants).

In the early 1960's, one of the alleged causes for the perceived physician shortage was the "brain drain," the siphoning off of the brightest undergraduate candidates away from medicine into newer "glamour" professions such as atomic research, electronics and aerospace engineering.¹⁰ Yet Creighton was able to report ever-increasing numbers of applicants from which to choose its freshman class. In 1964 the *Omaha World Herald* reported that the Creighton School of Medicine had 1,345 applicants for an entry class of 76, over 17 applicants for each available student slot. By January 2, 1966, this same publication reported over 1,400 applicants for the same number of slots, over 18 applicants per place. The newspaper article compared this to a Creighton "low point several years ago" of about 800 applicants (still over 10 applicants/space). By comparison, at the same time, the University of Nebraska had 321 applicants for a freshman class of 86, or 3.7 applicants/place. Finally, by 1968 Dr. Egan reported a 25-30% increase in applicants to the School of Medicine during the period 1955-1960, and with 1,570 applicants for the 1968 entering class, the Admissions Committee now had over 19 applicants to choose from for each available freshman class position.¹¹

Although stated admissions requirements did not change appreciably during the decade of the 1960's, in reality this great number of applicants meant that acceptance standards became increasingly stringent. During Dr. Egan's entire deanship, the admission prerequisites remained as follows:

- 3 years (minimum 90 semester hours) of undergraduate college credit, to include 8 hours Biology, Inorganic Chemistry and Physics and 6-8 hours Organic Chemistry and English;
- The MCAT Examination, with acceptable scores;
- 3 letters of recommendation;

Twelve to sixteen hours of a foreign language and a broad liberal arts education were strongly recommended. Preference was given to those having obtained an undergraduate four-year degree. In 1966 a 1-2 page autobiography of the applicant was added to the admissions requirements (presumably to ascertain with certainty that applicants could construct coherent English sentences). And in 1968 encouragement was given to credit earned in undergraduate Physical Chemistry and Math, up to and including the dreaded Calculus.

On the plus side, the excellence of students accepted by the School of Medicine had never been higher. In January 1966 Dean Richard Egan was quoted as saying, "Not only has there been an increase in the number of applicants . . . but the quality is up."¹² Dr. Joseph Holthaus, then Associate Dean, gave some statistics about the entering class of 1966: The average freshman had an academic average of above "B" and had completed 128 semester hours of college work. Of the class of 76, 54 had Bachelors' degrees, 2 had Masters', 1 had a Law degree, 1 a Pharmacy degree and one was a Doctor of Optometry. Seventeen had attended Creighton University before entering the School of Medicine.¹³

The New Criss Buildings – "Coming Home"

It is obvious from the statistics that enormous strides had been made in attracting grants to the school, increasing full-time faculty, and therefore solidifying the school's accreditation. At the time, however, the most palpable outward symbol of progress at the School was the construction of new buildings to replace the antiquated complex at 14th & Davenport. Dr. Egan spoke of the decision to build new medical facilities on the main campus. He said that at the beginning of his deanship, there was the realization that if the Medical School was to continue its existence, faculty development was necessary. There was no space for this with the existing physical constraints. The Interstate Highway system was on the drawing boards at the time and hoped to have an exit ramp which would run close to or through the 14th Street building. Furthermore, in medical education circles, including the two consultants Creighton had hired, the conviction prevailed that a medical school belonged as a part of its university, in proximity as well as administration. All of these factors interacted to produce a consensus opinion that the School of Medicine should "come home" to the main University campus. Matching funds were available for research facilities so, according to Dr. Egan, "We concentrated on Basic Sciences because that's where the money was for the building, and that's where the money would be to support the faculty."¹⁴

Thus, planning began first for a research facility, and an application was made to the National Institutes of Health for matching funds for this much-needed construction. Just prior to the grant's approval, in August



Portraits of Mabel and C. C. Criss which hang in the Medical School.

1961, a magnanimous windfall came to the School of Medicine in the form of a gift of over four million dollars, given by Mrs. Mabel L. Criss, widow of Dr. C. C. Criss (M.D. 1912), founder of Mutual and United of Omaha, giants in the insurance field. Given in memory of her husband, the gift was designated for The Dr. C.C. and Mabel L. Criss Medical Center, to include research and office facilities, an out-patient department, a classroom-laboratory building and the School of Pharmacy.

Mabel Criss, born Mabel L. Chambers on May 1, 1881, in Cedar Rapids, Iowa, grew up in Pender, Nebraska, in modest circumstances. Through a mutual friend, she met Clair Carlton Criss, and they were married on December 1, 1901. The couple lived in Bloomfield, Nebraska, where they purchased half interest in a clothing store. A son, Harry Mantz, fell ill and died in March, 1906, at age four.

The Crisses then moved to Omaha where Mr. Criss and his brother Neil began selling health and accident insurance. Mrs. Criss attended business school and set up an office as a public stenographer. The Criss brothers decided to go to medical school together so as to share textbook expenses. They enrolled in the Creighton College of Medicine.

To help finance their medical education, the three Crisses together purchased the charter of Mutual Benefit Health and Accident Associates in January 1910. Mabel managed the insurance office while the brothers pursued their medical studies, earning their M.D. degrees in 1912. They set up a medical practice in the City National Bank Building, where the insurance office efficiently managed by Mrs. Criss was located.

Within a year, Dr. C.C. Criss found that he was spending more time in the insurance business than in his medical practice and made a decision to devote all of his energies to the insurance business. Four years later, Dr. Neil Criss made the same choice. Mrs. Criss continued to be an integral part of the ever-expanding business, serving as office manager.



C. C., Mabel and Neil Criss breaking ground for the Mutual of Omaha Building

The business grew at a phenomenal rate. By 1920 it was operating in twenty states. In 1940 the cornerstone was laid for the present Mutual of Omaha Building. Mrs. Criss supervised all space layout, furnishings and color schemes for the new building, and was official supervisor of construction. In 1928 she was made Second Vice President of Mutual of Omaha, then resigned to become Vice President of United of Omaha when it was organized in 1948. During her lifetime, she saw the small insurance business begun by the three Crisses become the world's largest health and accident insurer. She maintained an office there and continued some activity with the company until the final year of her life.

Dr. C.C. Criss died in 1952. In his memory, Mrs. Criss made a gift of more than \$4 million to Creighton to build the Dr. C. C. and Mabel L. Criss Medical Center. Further donations through the years enabled the entire Criss Health Center complex to become a reality. Her contributions in stock to Creighton eventually totalled over \$7 million. Mrs. Criss received a symbolic gold shovel with a dated medallion when she took part in the ground breaking ceremony for Criss I in 1962. By the time ground was broken for the Bio-Information Center in 1975, she had filled the shovel with six medallions.



Mabel Criss, Foundress of Creighton University and the Wisconsin Province of the Jesuit Order.

Creighton University and the medical community were grateful. In 1961 the Board of Regents passed a resolution expressing deepest gratitude to her. At the 1962 commencement, Mrs. Criss was awarded an honorary Doctor of Business Administration degree, the university's highest academic honor. And on June 20, 1963, Mabel Criss was named a Foundress of Creighton University and the Wisconsin Province of the Jesuit Order, the fifth American and the first woman to be so honored. In 1970 she also received a Friend of Science award from the Nebraska Academy of Science in recognition of her contributions to medical science. After a long and very busy life, Mrs. Criss died in Omaha on March 19, 1978, at age 96.¹⁵

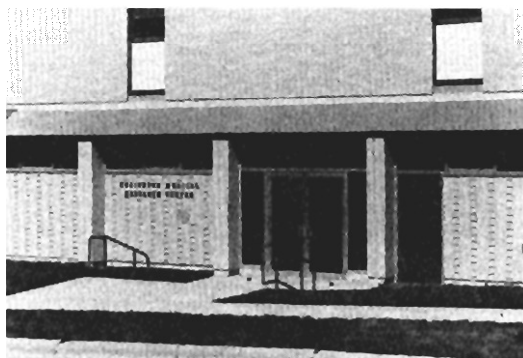
Shortly after the announcement of the Criss donation came approval, in September 1961, of the matching grant which had been submitted to the NIH. The grant provided \$574,500 for construction and fixed equipment and \$43,223 for movable equipment, for a total grant of \$617,723. This was to be Unit I of the new Criss Medical Center (forever-more to be known as Criss I). With the University portion of the matching funds, Criss I would cost at least \$1.25 million. Preliminary plans called for a 6-story structure housing research facilities for Anatomy, Biology, Biochemistry, Microbiology, Physiology, Medicine, Pediatrics, Obstetrics, Gynecology, Pathology and Surgery.¹⁶

The medical building expansion to the main campus fit well with Creighton University development in general. The 1960's and 1970's were times of tremendous expansion for the University. As a direct result of several successful fund-raising development plans in the 1960's, including the Greater Creighton Development Program and the New Goals program, the appearance of the campus was constantly changing as new buildings were completed and construction got underway on others. In addition to the Criss complex, new buildings on campus during the late 1950's and 1960's included the Brandeis Student Center; four student dormitories; a central air conditioning plant; the Alumni Memorial Library; the Eppley College of Business Administration; Becker Dining Hall; and a new science building. The new Interstate system further changed the looks of the campus from the late 1960's onward, as motorists now whizzed by the edges of the campus, gaining new familiarity with a long-time community landmark.

Ground was broken for the new Criss I on June 5, 1962, with an anticipated completion date of September 1963. Its location on the northwest corner of the main campus necessitated razing the Creighton Stadium, long in disuse, but still an object of nostalgia. The Stadium had been built in 1925 and had cost about \$335,000. This amount,



Mabel Criss and Father Carl Reinert, S.J., ready to break ground for Criss I.



Criss I.

phenomenal at the time, was financed in part through “Buy a Brick” and “Buy a Bag of Cement” campaigns. At the time (1925) football was a major sport at Creighton, and Blue Jays were extremely proud of both their gridgers and their new stadium, which seated 15,000. Its capacity was larger than any other structure in the area, and therefore it played host to a long list of religious and community affairs, as well as sporting events. In later years the playing area was used for track competition and ROTC drill.¹⁷ Progress and the need for more space dictated removal of the Stadium, and it, along with Creighton football, became part of history.

Work continued on schedule for the next 15 months, and in August 1963, researchers began to move into the new Criss I. This building was to be devoted solely to research facilities, exclusive of classroom instruction. All School of Medicine research, except for projects associated with St. Joseph Hospital patients, were to be located within its walls.

The final planning for the new building made it five stories high, housing 86 research laboratories and providing 37,370 square feet of space. This building alone had two-thirds as much space as that available in the entire 14th & Davenport complex. Highlights of the building included a penthouse area complete with a sun porch to house animals for research, and a “cold room” to prepare cultures at proper temperatures.¹⁸

Much was made of the “luxury of space” afforded researchers by the new building. Headlines in the *Omaha World Herald* (“C.U. Medical Researchers Enjoying Luxury of Space”) and *The Creightonian* (“Exit of Attic Labs Marks Research Growth”) help tell the story.¹⁹ Research had increased six-fold at Creighton since World War II (encouraged by federal research grants). Yet space remained virtually static at the old medical school, with labs stuffed into attics and converted closets. This all changed in 1963 as researchers moved into the new quarters of Criss I. As an example, on-going cardiovascular research by Dr. Alfred W. Brody had been conducted at 14th & Davenport in a converted fourth floor attic space of 842 square feet. Dr. Brody’s lab in Criss I, specifically outfitted as such, now contained 1,400 square feet.²⁰

Financing the Criss complex was still a prime concern. Although a matching federal construction grant had come to Creighton’s aid, there was still the necessity of providing that *other half* to match the grant. This being the case, every extra dollar counted. Dean Egan recalled how he and Walter Jahn, Creighton’s Vice President for Financial Affairs, spent a full week pouring over architectural drawings. It seems the architect had gone over budget slightly, and Dean Egan decided to eliminate as many built-ins, such as bookcases and storage cases, as he could. His reasoning was that these items, if needed later, could be provided with funds from research grants as integral needs of the research. This was accomplished, and Dr. Egan remembers that overall Criss I, and indeed the entire Criss complex, was constructed on a very low cost/square foot basis. Economy was maintained without sacrificing quality.²¹



Dr. Alfred W. Brody

September 24, 1964, was another red-letter day for the Creighton School of Medicine. On that day, the guest of honor, Mrs. Mabel Criss, wielding her gold-plated shovel, broke ground for Unit II of the Dr. C.C. and Mabel L. Criss Medical Center. The new building, a major segment of the New Goals Development Program begun in 1963, was located at the west end of the old Stadium area, just north of the Criss I Research Building, and also facing 27th Street. Its northernmost edge skirted Burt Street. Its construction cost was estimated at \$3 million, and completion was expected to take about 18 months.²²

Creighton University President Rev. H.W. Linn, stated, "The expansion program will make the difference between a school of medicine in Omaha which merely exists and one which truly leads."²³ He was also quoted, in opening remarks at the groundbreaking ceremony, read by the Rev. R.C. Harrington. Father Linn was absent due to illness.

The Dr. C.C. and Mabel L. Criss Medical Center is not a collection of buildings – although we must depict it in that manner for clarity. Rather, it is a society of students and scholars, seekers and learners, bound together in a quest for knowledge, which will alleviate the world's pain and sufferings.²⁴

Criss II, a five-story structure, was to house the School of Medicine's administrative offices and all classrooms and labs for first and second year medical students. When completed, this would leave third and fourth year students, along with the Clinic and School of Pharmacy back on 14th & Davenport. Plans called for all of these to be eventually housed in Criss III, whose target for completion was initially 1968.²⁵

Construction proceeded on Criss II at a pace slightly slower than anticipated. As Father Reinert explained, "The Center was given a longer completion time to keep costs down . . . Building was allowed to follow weather patterns which prolongs construction somewhat."²⁶ The building came \$235,000 closer to reality when general agents nationwide of Mutual and United of Omaha donated that amount to furnish the first two floors of Criss II. They did this in memory of Dr. C.C. Criss, and a check for that amount was presented to Creighton in December 1964.²⁷

Finally, despite delays caused by cold weather and a construction worker strike the summer of 1965, *The Omaha World Herald* was able to report the official opening of Criss II on August 31, 1966. The new building contained 70,000 square feet on five levels. In the basement was the Anatomy Lab, another Lab, lecture room, locker rooms and service facilities. The main floor housed administrative offices, lobby and reception area and a temporary medical library. The entire second and fourth floors contained multi-discipline labs and classrooms for freshman and sophomore students, respectively, while the third and fifth floors contained departmental offices and labs. On top of the building was a specially designed 6,600 square



Criss I and II, 1969.



Symposium speakers at the Criss Dedication, October 1966. From left: Drs. Maurice B. Visscher; John W. Rebuck; Horace W. Magoun and Merton Utter.

foot deck to quarter research animals. The third, fourth and fifth floors were connected by enclosed bridges to the Criss I building just to the south of it.²⁸

Formal dedication was held for both Criss Buildings on October 29 and 30, 1966. The two-day salute began with a four-hour medical symposium on "Frontiers in Basic Medical Science," conducted by four nationally-known scientists, Drs. Maurice B. Visscher, John W. Rebuck, Horace W. Magoun and Merton Utter. It continued with a blessing and dedication of the buildings by the

Archbishop of Omaha, Gerald T. Bergan, followed by a dedication banquet that evening, at which Mrs. Criss was the guest of honor. There followed an Open House the next day at both buildings.²⁹

The *Omaha World Herald*, in a two-page feature article entitled "Medicine Comes to the Campus," focused on the new buildings and their significance, not only to Creighton, but to the community as well.³⁰ The School of Medicine had truly, finally, "come home" to the campus.

Students who made the move to campus in the late 60's might remember the consternation that medical students with automobiles felt at having to park their cars in "The Swamp," that unpaved area across from the school. There were complaints of getting stuck and needing tow jobs, and of other repairs necessitated by the abysmal ground conditions.

Finally, in time for the school year of 1969, the area directly in front of the two new Criss Buildings was paved for student use. Then, the complaint was heard that faculty and staff were parking there, instead of in their own designated spots.³¹

Plans for Criss III remained just that, plans on paper, for the remainder of the decade. Again, money problems forced the School of Medicine to put its expansion plans on hold. This was true in spite of another generous beneficence given to Creighton by the Criss family. Dr. Neil L. Criss, brother of Dr. C.C. Criss, brother-in-law of Mabel Criss, was also a medical graduate of 1912 and a chief administrator in the family insurance business. Upon his death in April 1966, he left a bequest to the School of Medicine of over a million dollars. The story goes that when the two Criss brothers graduated from the School of Medicine in 1912, they owed the school \$125. They received their diplomas anyway, the school trusting them to repay the debt, which they did some two months later. But Dr. Neil Criss never forgot this act of kindness and trust on the part of the University, and upon his death, showed his appreciation to his Alma Mater.³²

Clinic Moves

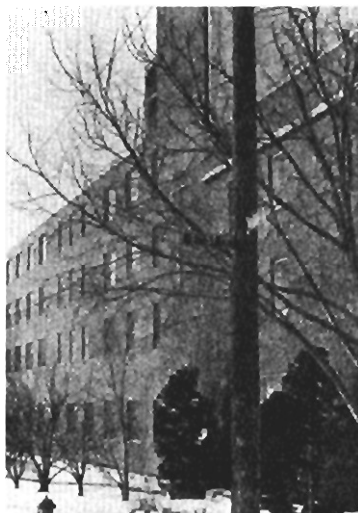
Several other integral components of the School of Medicine were affected by physical changes during this decade of growth and change. The Creighton Clinic (Dispensary) remained as one of the prime areas of practical experience for junior and senior medical students, and one of the major vehicles of community service to Omaha. In 1965, patients numbered more than 38,000 annually, and the clinic staff consisted of 20 full-time staff members, in addition to medical students and volunteer faculty.³³ Yet the Clinic's future was decidedly hazy for awhile.

While the Clinic was still located at 14th & Davenport, plans were constantly being touted for its inclusion in the proposed Criss III building. Yet Criss III, due to financial considerations, was itself having difficulty in progressing past the plan-

ning stage. In the early-to mid-1960's, plans for the Interstate Highway system were firmed up and definitely included demolition of the entire 14th & Davenport complex. Where would the Clinic go?

Further complications arose in 1967 when the City-County Department of Health first broached the subject of publicly-supported free neighborhood health centers. Widespread patronage of such clinics would, of course, deprive medical school clinics, both Creighton and the University of Nebraska, of the needed volume of patients for medical education purposes. Creighton eventually cooperated with the Health Department and the Greater Omaha Community Alliance (GOCA) in submitting an application to the Office of Economic Opportunity for the health center. Preliminary plans, still very much premature as of April 1967, called for location of the center in Omaha's Near North Side, an area of public and low-value housing where many potential patients would need clinic services. Immediately, however, endless disputes developed as to just where it should be located in that area, and consequently, no such center ever came about.³⁴

In March 1968, in cooperation with the City-County Health Department, and in line with the efforts to make health services more accessible to the poor, the Creighton Clinic extended its pediatric hours to 8:00 P.M. This was done to serve children who were in school during the daytime hours and to accommodate the needs of working parents, especially single mothers.³⁵



Temporary Clinic quarters at the St. Catherine's Nursing Dormitory.

Finally, with the Clinic building scheduled for demolition only a few months down the road, there was no time to spare. An agreement was reached on January 1, 1969, whereby the former nurses' dormitory at St. Catherine's Hospital, 9th & Forest Avenue, would house, temporarily, the medical and pharmacy clinics. St. Catherine's had discontinued its three-year nursing program, and the five-story, 10-year-old structure, with some remodelling proved quite adequate for clinic use. Most remodelling consisted of simple partitioning and accommodation of technical instruments, such as lead lining of walls around X-Ray units.

The new location afforded approximately 15,000 square feet of floor space and actually enabled the Clinic to expand its operations. Major clinics were held every day, rather than on an alternating schedule as previously. Waiting time for patients was reduced and extension of night hours from Pediatrics to other areas was considered. The working and storage areas of the Pharmacy Dispensary were tripled by the move.³⁶ Fortunately the new Clinic was located near several major bus lines, giving it convenient patient access by public transportation.

On Friday, March 21, 1969, at 8:00 P.M., the Creighton Medical Clinic on 14th & Davenport closed its doors for the last time. This marked not only the end of the Clinic at this location, but also the symbolic end of an era. The Clinic was the last of the Creighton School of Medicine operations left at the downtown location. The School of Pharmacy would remain until the end of the 1968-69 school year, at which



At the Creighton Clinic.

time it moved to temporary quarters on the main campus, awaiting construction of Criss III. The Medical Clinic reopened on March 31, 1969, in the newer, bigger quarters on 9th & Forest Avenue, but never again would the School of Medicine operate from 14th & Davenport. An *Omaha World Herald* article by Mary McGrath helped capture the mood that last day:

Its ceilings are too high to be fashionable. Paint and patching fail to hide the scars from years of wear. Thousands of feet have worn down the floors and steps.

Indeed, you had to look hard Friday to see anything of beauty – a graceful arch or well-turned wood – in the building at Fourteenth and Davenport Streets which has housed some aspect of Creighton University's medical program for 72 years.

Patients came and went as usual, right through the evening hours for pediatric patients. Staff members left with boxes or armloads of belongings.

Most of the 3,700 students who have been graduated from Creighton's medical school have met their first patients and listened to many a lecture here.

Probably at least half of Omaha's pharmacists learned to prepare prescriptions in this building.

Thousands of Creighton students have stood in long lines during the heat of "freshman week" for their pre-entrance examination and wondered if that man in white was a doctor or a medical student.

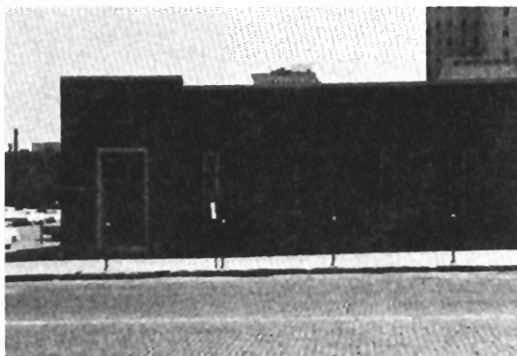
No one knows how many thousands of persons have come here for care.³⁷

The feelings of many were summed up by Mary Woodyerd, Clinic Director, who said, as she observed the rapidly emptying building that last day, "I'm happy to move, but I have to admit I have feelings for the 'old joint'."³⁸

The Medical Library Moves. . . Twice

Another component of the School of Medicine which was physically moved not once, but twice, during this period was the Medical Library. It had been located for years on the third floor of the south building on 14th & Davenport. But as the collection burgeoned and needs changed, this space became increasingly inadequate. The same complaints were valid for the School of Pharmacy Library, which had been located on a different floor of the downtown complex.

In February 1960 Creighton University purchased a building at 1401 Davenport Street, directly across the street from the Medical and Pharmacy Schools. It had housed Warner Brothers Pictures and, with only minor modifications, fit the bill



The Medical/Pharmacy Library at 1401 Davenport.
(Courtesy Stephen Gibbs, M.D. 1970.)



Interior, Medical/Pharmacy Library.



Dr. S. J. Greco, Pharmacy Dean and Dr. R. L. Egan, Medical
Dean with Librarian Marjorie Wannarka, preparing for the
move.



Helping in the move to the Davenport
Library are, on left, George Dowell, son
of D. Arnold Dowell (M.D. 1931) and
James O'Neill, son of J. J. O'Neil (M.D.
1943).

beautifully for a professional library. Creighton announced its intentions of integrating the libraries of the Schools of Medicine and Pharmacy into one unit. Such consolidation of all healing-arts materials was a nationwide trend, and made sense not only from an academic standpoint but a financial one as well.

In addition to location, the building had many advantages. First, it was large. It was estimated that these new quarters would result in a 100% increase in usable library facilities, with twice the study space and four times the storage area. It was fireproof, had an automatic sprinkler system and had specially insulated vaults, all of which were plus factors for security purposes. It would be easily accessible for professionals located in the downtown area. Also, it would help relieve the pressure of space limitations being felt so sorely in the Medical School complex.³⁹ (This was pre-Criss)

The physical move across the street took place in June 1960. The combined library numbered approximately 27,000 volumes, and with the aid of Creighton University and Creighton Prep students and a few professional movers, was accomplished with a minimum of problems.

The move was excellent practice, for just six years later, in the summer of 1966, the Library moved again. This time it relocated to the newly-built Medical Basic Sciences Building on the main campus, Criss II.

The new location was on the north side of the first floor of Criss II. Once again the library was cramped, but assurances were made that this was only temporary. New facilities were to be made available for the Library at a later date when Criss III was constructed. As it came about, the wait was longer but the payoff greater, for when new facilities were provided to the Library, they were in the form of a very modern, much larger and separate Bio-Information Center, eventually located between the new Dental School and the Medical School.

The Medical Library collection continued to grow, in part as a result of several grants. In 1965 the Markel Foundation of New York City gave a \$45,000 grant to the Creighton Med-Pharm Library, earmarked for the purchase of back issues of scientific journals. The National Library of Medicine likewise gave Creighton \$17,777 to augment its medical collection.⁴⁰ With these and other additions to the collection, the Medical-Pharmacy Library was well on its way to needing the space which would finally be afforded them with the construction of the Bio-Information Center Building.

What Ever Became of the Old School?

With the flurry of moving transpiring in the 1960's, what became of the old medical complex on 14th & Davenport? When the move began into Criss II in the late spring and summer of 1966, the north building at 304 North 14th Street became the Department of Fine Arts, housing a relatively new University division. This was the portion of the medical complex built in 1909 as an addition to the original medical school, and connected to it by bridges. The lower level of this North building was now used for sculpture, welding, plaster work, wood carving, and for studios of painting, etching and lithography. The main floor now housed drawing studios, seminar rooms, offices and a small gallery. The second floor provided storage and additional exhibition space when needed.⁴¹ The Fine Arts Department chairman was enthusiastic, indicating that the old medical school building provided a doubling of space. Furthermore, he stated, "The high ceilings and large rooms make excellent studios".⁴²

Later in 1966 the building at 1401 Davenport that had housed the Medical-Pharmacy Library for six years became The Creighton University Nebraska Centennial Arts Gallery. Its first show opened in December 1966, with a showing of the works of Tom Bartek, a member of Creighton's Art faculty.⁴³

But its residency was brief, as the specter of Interstate development plans again reared its head. Late in 1967, government officials announced definite plans to raze the entire 14th & Davenport complex, and the Fine Arts Department began looking for new quarters. In early spring of 1968, Creighton University sold all of its buildings in the 300 block of 14th Street to the State of Nebraska for \$380,000. (This did not include the former library building at 1401 Davenport Street.) The Fine Arts Department (former north building of the Medical School) had to be vacated by June 1968. The School of Pharmacy and Clinics at 302 North 14th Street were given until June 1969 to relocate.⁴⁴

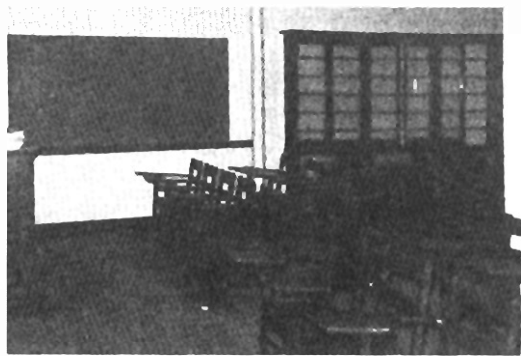
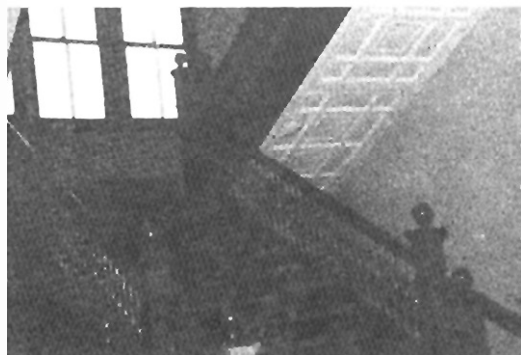
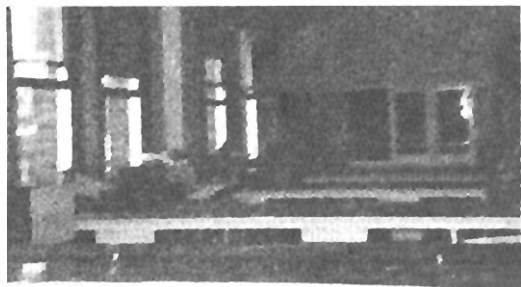
The Fine Arts Department moved across the street to the Art Gallery (former Library) in May 1968, where it remained until the winter of 1972, at that time moving back to the main campus. On September 13, 1968, its former home, the north building of the Medical complex, went under the wrecking ball and was entirely razed to make way for the Interstate. The Medical School Clinic vacated the original Medical School building at the end of March 1969 and moved to the old St.



Beginning of the destruction of the old Medical School.



Half gone! (Courtesy Stephen Gibbs, M.D. 1970.)



Interior views just before destruction. (Courtesy Stephen Gibbs, M.D. 1970.)



In the rubble. (Courtesy Stephen Gibbs, M.D. 1970.)

Catherine's nursing dorm. The School of Pharmacy left its quarters in the summer of 1969, moving its offices to a small brick duplex on campus and its classrooms and labs to various locations all over the campus, awaiting the construction of Criss III. The original medical building on 14th & Davenport then met the same fate as the north building, and almost one year later, in September 1969, the last downtown building was demolished in Omaha's need to finish its leg of the Interstate system.⁴⁵

One of the areas of the demolished Medical School building that students of the early 1960's may remember with special fondness was a small, unpretentious room on the second floor of the old School of Medicine: St. Luke's Chapel. The chapel had been in existence at the



St. Luke's Chapel, taken July, 1961.

school for only five years when the move was made to Criss II in 1966, but during that time it gained a special place in the hearts of many School of Medicine students.

Named for St. Luke the Physician, the chapel was established as a memorial to Michael LaMendola of Amsterdam, New York, a senior medical student killed in an accident in 1958 just days before he was to receive his medical degree from Creighton. The chapel, located near classrooms and labs, quickly became a refuge for hard-working medical students, and a source of religious inspiration at the daily Mass offered by Father James Quinn, the School of Medicine's religious counselor. This area of the school, along with many others, would live on in the memories of Creighton medical graduates.⁴⁶

In 1897 the John A. Creighton College of Medicine had proudly opened the doors of its showplace medical school building at 14th & Davenport Streets. Now 72 years later, in September 1969, only a large pile of rubble remained. Today, at 14th & Davenport, there is an Interstate exit ramp emptying into an unpretentious area of the city.

There is nothing left to indicate that in this spot thousands of young men and women, full of hopes, dreams and ambitions, labored intensely to launch medical careers. The only thing now left of the former medical school buildings, besides the fond memories in the hearts of its many graduates, is the rescued name of the old school which had been carved in stone over the old entrance: The John A. Creighton College of Medicine. When Criss III was constructed, this was mounted on the wall on the first floor of that building near the east entrance, and many a visitor has stood silently before it, recalling the bygone years of medical school.

75th Birthday

The year 1967 was a special one for the School of Medicine, for that year marked the 75th Anniversary of its founding. Timing was good for a celebration. Criss I had opened in 1963, Criss II in 1966, and plans were underway for construction of Criss III. Dr. Egan was making great strides, both in hiring increased full-time faculty and in attracting grants and other financial aid to the School. There were still problems, but overall the picture was one of optimism.

Two main celebrations were observed for the occasion. September 27, 1967, was the official commemoration, for it was exactly 75 years before, on that date, that the first classes commenced at the John A. Creighton College of Medicine. A large birthday cake, complete with 75 candles, helped make this diamond jubilee special. The Governor of Nebraska, among many others, sent congratulatory messages. His read, in part:



75th Anniversary. Father Linn cuts the anniversary cake. Looking on, left to right are Dr. Joseph Holthaus (M.D. 1947); Dr. J. Raymond Johnson; Rev. Richard C. Harrington, S.J.; Dr. Richard Egan (M.D. 1940) and Rev. Carl Reinert, S.J.

How well Creighton is fulfilling that need [the state's medical need] is amply demonstrated by the roster of its graduates who are practicing their profession in Nebraska, and by the large number who have distinguished themselves in the field of medicine and medical research in the state, nation and internationally.

To John A. Creighton we owe our thanks for his foresight in founding your school. To all of the faculty members, workers, supporters and boosters who followed him we owe our thanks for a job well done.⁴⁷

In October 1967 another special observance of the school's 75th year was held, this time in conjunction with the annual meeting of the Omaha-Midwest Clinical Society. A Creighton Medical Diamond Dinner was held, and reunion classes were highlighted. Creighton School of Medicine did, indeed, have a lot to celebrate. It had come a long way, overcoming along the path adversity and financial difficulties, but continuing through the years in its primary mission of producing competent physicians.

Curriculum Changes

During this decade of growth and change, the curriculum at the School of Medicine took several new turns as well. Beginning with the freshman class of the 1959 school year, the basic course work for freshmen was revised. Patterned after similar changes at Western Reserve and Stanford University Schools of Medicine, the new system was known as the "core" method, and was a true innovation in medical education. Rather than study the material from several basic science disciplines as separate entities, the new system used an interdepartmental-integrated approach. The body of information to be included was categorized into six physiologic divisions, or cores: cell structure and metabolism; cardiorespiratory system; gastrointestinal system; renal system; endocrine; and central nervous systems; Each of these cores, then, was studied separately as to its normal anatomy, physiology and biochemistry. The normal growth and developmental changes from the newborn through childhood, adolescence, adulthood and old-age were also included in the core approach. Class attendance was not obligatory. One exam was given at the end of each core segment, and a final exam covering all of the cores was given at the end of the year. Furthermore, "the general philosophy is to study all aspects of a given portion of the body simultaneously and to integrate these studies with one another to their fullest extent."⁴⁸ The entire first year curriculum came under the label Normal Human Biology.

The Creightonian interviewed freshmen medical students in October 1961 to register their feelings toward the core system. Responses were generally favorable. Opinions included the following:

"It allows you to do more reading on your own. Also it gives an overall picture rather than a seemingly unrelated group of courses." (Joseph Cesare, M.D. 1965)

"The core system has taken the pressure off the student by neatly arranging the material in schedules. It eliminates surprise tests and allows one to study at his own pace." (John McGill, M.D. 1965)

“You’re not constantly under pressure. However, the one exam at the end is tremendously important.” (Ron Simone, M.D. 1965)⁴⁹

In 1961 the new system was extended to sophomores under the title Abnormal Human Biology. The cores in Abnormal Human Biology included: Introduction to Abnormal Human Biology; Infectious Diseases; Cardiovascular and Respiratory System; Gastro-intestinal System; Renal Reticuloendothelial System; Skeletal, Collagenous and Endocrine Systems; and Central Nervous System. For this portion, attention was focused on Pathology, Microbiology, Physiology and Pharmacology and Preventive Medicine and Public Health. As described:

The role of the major clinical departments is somewhat increased in the second year, laying the foundation for future clinical work by the student, but the subject matter is again presented in correlation with that currently being studied in preclinical department work.⁵⁰

Begun concurrently with the core program in 1959 was a clinical observation program, whereby freshmen medical students spent four hours per week observing patient treatment in hospitals. This was an attempt not only to expose students to the realities of medicine sooner than the junior year clinical clerkships, but also to integrate and synthesize the basic science materials that students were learning with the exigencies of real medical practice.⁵¹

In 1968 this goal was again addressed by the addition of a new, five-hour course entitled Human Biology (not to be confused with the entire first-year curriculum of Normal Human Biology). In this course, students were exposed to the whole man, in clinical settings, home visits and community-organization groups (PTA, churches, etc). Lectures ranged from standard clinical subjects to such disparate topics as theology, philosophy, birth control, abortion and pollution. Students themselves manned a speakers’ bureau, worked with medical personnel teams and were involved in a variety of possible physician-patient interactions.⁵² Student Dennis Martin (M.D. 1973) said the course “included a lot of interesting topics, guest speakers and good flicks, like ‘Emergency Childbirth’.”⁵³

The 1966 opening of Criss II enabled the School of Medicine to adopt another innovative approach to curriculum, that of Multi-Discipline Laboratories. Creighton became one of only five medical schools in the nation using this concept at the time. Each freshman and sophomore medical student was assigned a lab unit for his exclusive use that year. All lab courses were presented there, and the student had access to his area day and night. Each student’s area contained lab work space, storage space and a desk area for study. Criss II had five, 16-man laboratories for freshmen on the second floor and five similar units for sophomores on the fourth floor.⁵⁴

Dr. Egan noted that this method had the advantage of more efficient use of space, and helped to correlate all of the basic sciences being studied. Furthermore,

In the multi-discipline type of laboratory facility, emphasis is on special project work rather than routine experiments. There is less lecturing to large groups and more discussion in small groups. Students are encouraged to develop research projects of their own requiring extensive use of the laboratory and library.⁵⁵



Creighton Naval Reserve Medical Company. At the head of the table are Commander E. Slowinski and Lt. A. Earle. The medical students, Lts. JG are, left to right: W. Leadbetter (M.D. 1970); J. Sharkey (M.D. 1970); T. Collins (M.D. 1969); J. Soha (M. D. 1970); P. Heifron (M.D. 1970); and F. Albani (M.D. 1970).

Two small changes took place in 1966 which were of interest to those concerned with grades and awards. In that year a grade of “C+” was added to the list of evaluative symbols it was possible for medical students to earn. Also, that was the year in which students could earn diplomas inscribed with the academic honors of summa cum laude (QPA of 3.85 or above), magna cum laude (QPA of 3.70), or cum laude (QPA of 3.50).⁵⁶

A military first occurred at the School of Medicine when the School’s first Naval Reserve Medical Company was established in 1967 under the command of Dr. Eugene J. Slowinski, Chairman of the Department of OB/GYN and a commander in the Naval Reserve. The unit, having a strength of fifteen student ensigns, gave students the opportunity for special active-duty research clerkships between their freshman and sophomore years, and also allowed them to participate in Naval hospital clinical clerkships as electives during their senior year. The Reserve meetings were held twice monthly and integrated some naval medicine into the regular curriculum. Students received promotion to Lieutenant Second Grade upon graduation from the School of Medicine.⁵⁷

Money Matters

What were students paying for medical education at Creighton University during this decade? Tuition increased more than 2.5 times between 1959 and 1970, reflecting the ever-increasing cost of medical education in general and the cost of the many improvements being effected at Creighton. Until 1960 tuition remained \$900 per year, with an estimate of \$4,686 for total expenses during four years of medical education. September 1960 witnessed a tuition increase, the first of many during the next decade, to \$1,000 per year. Following this there were seven additional tuition increases until September 1970, when the new tuition rate was \$2,400 per year. An estimate of four-year total medical education expenses topped the \$10,000 mark for the first time, at \$10,830.⁵⁸ This figure seems quite low by today’s standards, perhaps, but no doubt seemed daunting to prospective students in 1970.

Yet the actual cost of educating new physicians rose even faster than tuition rates. As the 1960’s opened, it was estimated that the actual one-year cost for medical education amounted to \$1,834. By 1969, the figure stood at \$8,172. In roughly the same time period in which tuition increased over 2.5 times, the actual costs rose well over four times.⁵⁹

As a result of increasing tuition, more scholarships and more loans were being offered to medical students than ever before. In 1960 the National Defense Student Loan Program was first mentioned in the annual *Bulletin*. There were more funds available from sources both public and private, including a mysterious \$10,000 scholarship, given two years in a row by an anonymous philanthropist whose anonymity was a condition of the donation. By 1970 the list of loans and scholarships available to medical students totaled two full pages in the annual *Bulletin*. Increasingly, students were forced to rely on these sources of revenue as their education

costs skyrocketed. All of this, of course, reflected a change which was taking place all over the country, and despite the great increase, Creighton's medical school tuition remained, and still remains, among the lowest for private medical schools.

Postgraduate Programs

There were some changes of note at a more advanced level of training and education as well. In 1962 a grant from the NIH helped Creighton establish a research training program, designed to prepare doctors for careers in academic medicine. Trainees had to have the M.D. degree and at least one year of training in their special field. The two areas of research specifically offered were cardiovascular work, under Dr. Richard W. Booth, and metabolic disease research, supervised by Drs. Thomas Skillman and Robert Heaney, of the Department of Medicine.⁶⁰ But the Annual *Bulletin* stated that "other postdoctoral programs may be arranged to meet the specific needs of the applicant."⁶¹

In April 1969, the North Central Association of Colleges and Secondary Schools granted accreditation to Creighton for Ph.D. programs in the departments of Anatomy, Biochemistry, Microbiology and Physiology. These were the first degree programs beyond the Masters' level to be offered at Creighton University, and were to be conducted in the School of Medicine. Dr. Egan credited their introduction to the recent advances made in faculty development, and to the construction of the new Criss I and II Buildings.

'Establishment of these programs,' continued Dr. Egan, 'recognizes a need, both locally and nationally, for these kinds of specialists. Graduates with these degrees teach and do research in their specialties which emphasizes the scientific basis of medical practice.'⁶²

Although they were certainly offered previously, 1966 was the first year that mention was made in the annual *Bulletin* of internship programs following graduation. Internships had always been the business of hospitals only, but now medical schools were becoming more concerned and involved in postgraduate training. The University in conjunction with her affiliated hospitals, primarily St. Joseph, offered a choice of two types of internships: a rotating program or a straight mixed internship, one in which only one or two clinical areas were emphasized. Although it certainly existed prior to this, this was also the year that the first mention was made of the intern selection process by the National Intern Matching Program, variations of which are in use to this day.⁶³

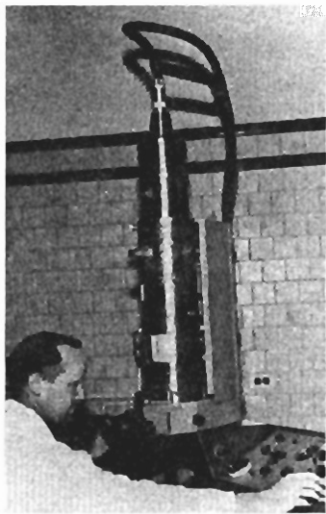
In the 1960's, a good number of graduates stayed on in Omaha to do their internship through Creighton University and St. Joseph Hospital. For example, in 1964, of 72 graduating seniors, a record number, 25, (35%) received intern assignments at St. Joseph's here in Omaha. In 1965, 30% of graduates did likewise. "The large enrollment is a vote of confidence in the high standards of the teaching program at St. Joseph's," according to Dr. John M. McKain, then Chair of the Intern-Resident Committee at St. Joseph's.⁶⁴

Furthermore, by 1970 approved residency programs were offered in Medicine, OB/GYN, Pathology, Radiology, Surgery and Pediatrics. These attracted a fair number of Creighton graduates, in addition to others from a nationwide pool.

Statistics show that up to this period, once the formal training of internships and residencies were completed, the majority of Creighton medical graduates were entering general practice. In fact, in 1962 *The Creighton Alumnews* quoted figures from *The Health Manpower Source Book*, published by the Department of Health, Education and Welfare, indicating that the Creighton School of Medicine tied for second place among the nation's medical schools for number of graduates (1925-1950) in general practice.⁶⁵

These graduates were dispersed widely. In 1965 a study of all Creighton alumni indicated that just over 14% of total medical graduates were practicing in the state of Nebraska. (About 10% were in the Omaha area. This meant that 46% of all practitioners in the greater Omaha area were Creighton medical graduates.) The rest of the medical graduates were distributed to every state in the Union except Delaware, Georgia and Vermont, and in far-flung locales all over the globe. The largest concentration of Creighton M.D.'s was in California, where nearly 25% of all medical graduates had located to practice.⁶⁶ The California Connection, noted earlier, was clearly evident in these statistics.

In 1967 Creighton began participation in the Nebraska-South Dakota segment of the Regional Medical Program. This program, in large part federally financed, was an attempt to disseminate medical knowledge concerning cancer, stroke and heart disease, from urban medical centers to rural areas. It was an attempt to narrow the gap between advances in medical knowledge in these areas of specialization and what filtered down to actual patient treatment. It included teams of medical personnel visiting rural communities, and offering, among other services: assistance with diagnoses; consultation on treatment plans; continuing medical education; and assumption of patient loads for brief periods of time, freeing small-town physicians to attend more formalized training sessions.⁶⁷ The first director of the Creighton segment of the program was John B. Herman, who was succeeded in 1969 by William W. Wood.



Dr. Dossel, Anatomy Professor, at the electron microscope.

Technological Advances

Keeping pace with constantly improving technology is a real task for all medical schools. A few technological highlights for the Creighton School of Medicine in the 1960's included the following:

- In 1961 acquisition was made of an electron microscope, to be used in cellular research by Dr. W.E. Dossel, Associate Professor of Anatomy.⁶⁸

- In 1963 the School of Medicine produced a six-program TV series entitled *Space and Medicine*, which aired at noon on Saturdays. Members of the School of Medicine faculty dealt with special medical problems engendered by space travel, and with space research which had dual applications for general medicine.⁶⁹ Dr. Hugh J. Phillips, Associate Professor of Physiology and Pharmacology was the series' commentator.

– In October 1963 a unique program was established by Dr. Richard W. Booth, Director of Cardiology at St. Joseph's Hospital, in collaboration with Northwestern Bell and Bell Laboratories. An electrocardiogram could be transmitted through phone lines and special equipment, from two hospitals in sparsely populated areas which did not have regular access to a cardiologist. By this means, a seven-days-a-week, 24-hours-a-day service was first established for long distance E.K.G. readings. These two hospitals, in Spalding, Nebraska and Chamberlain, South Dakota, would be advised within minutes by a cardiologist from St. Joseph's or, after hours, from the homes of Dr. Booth, Dr. Vincent Runco, Jr. or Dr. Hugh S. Levin, the cardiologists involved in the project.⁷⁰

– In 1968 the School of Medicine purchased a portable color videotape recorder through funds made available by Network for Continuing Education, a New York-based organization sponsored by Roche Laboratories. With this equipment, the school could incorporate demonstration tapes furnished by other medical schools into its instructional plans and could also record its own programs for similar dissemination.⁷¹

– Early in 1969 the Department of Pathology added a \$61,000 multiphasic screener to its equipment at St. Joseph's Hospital. It was the only one of its kind in Omaha; it was able to conduct twelve tests on one blood sample and process 60 blood samples per hour.⁷²

The School of Medicine continued during the 1960's to provide annual lectures and post-graduate assemblies which had become as familiar as old friends to alumni and physicians of our area. The Omaha-Midwest Clinical Society continued to draw many Creighton exhibitors and speakers, and class reunions continued to be scheduled concurrently with these fall gatherings. The annual Eben Carey Memorial lecture, co-sponsored by Phi Chi fraternity, likewise persevered into the 60's with distinguished speakers of national renown. The younger but now traditional Adolph Sachs Memorial Lecture, sponsored by Phi Rho Sigma fraternity, continued annually and made headlines for its 1967 speaker, world renowned heart surgeon Dr. Michael DeBakey, who spoke here on March 15, 1967.

The 60's Revolution – Changing Times

Many of the events taking place at the School of Medicine during the 1960's mirrored the prevailing revolution occurring society-wide during this decade. This was the Swinging 60's and everything from fashion to sexual mores was undergoing rapid revision. Individualism, students' and minority rights, protests (radical or otherwise), attention to the needs of society's urban poor, more vocal participation of individuals in their own destiny – whether related to political, educational or military affairs – all of these were typical interests of this decade. Many found expression in events at the School of Medicine. Medical students, as a group, are probably more conservative by nature than students as a whole. Yet they too couldn't help but be influenced by the maelstrom of change that the 60's brought with it. Although probably not reaching its full intensity until the next decade, the attitudinal complexion of the medical student body began to change during the 1960's. Indeed, many happenings of the 1960's may be viewed as signs of the times.

Minorities gained encouragement to enter medical school. Prominent notice was given in *The Creightonian* beginning in 1961 of National Medical-Sloan Foundation Scholarships available to ten qualified "Negro" men for four-year full medical school expenses. Of a more immediate nature, the School of Medicine, beginning in

1967, sponsored a pilot program called “Saturdays for Science.” This was a five-week program designed for black high school students and conducted by School of Medicine faculty. Its purpose was to stimulate an interest in science in young blacks who otherwise might never have considered college, let alone a career in a scientific field such as medicine. The organizers of the program were Dr. Donal F. Magee and Dr. Henry H. Gale, both from the Department of Physiology and Pharmacology; Dr. Robert P. Heaney, Department of Medicine; and Dr. William T. Niemer, Department of Anatomy. Later, in addition, other medical faculty members staffed the program.⁷³

In Washington Lyndon Johnson announced his War on Poverty, and in Omaha Creighton medical students waged their own campaign to aid the poor within the context of medicine. In late 1967 Creighton students organized the Student Health Organization (SHO) to promote involvement in community health affairs. Not only medical students, but also those in Dentistry, Pharmacy, Medical Technology and Nursing were encouraged to become volunteers. Some early programs conducted by SHO included presenting a cancer detection film at community centers in financially depressed areas, and a lecture series for young, unwed mothers at a junior high school in the inner city.⁷⁴

Another local battle fought against “medical poverty” began in January 1969 with the opening of the Willis Avenue Health Center. This community action project was operated out of a converted home in the Near North side of Omaha. The home was donated by a Jesuit, the medical supplies were provided by the Omaha-Douglas County Health Department, and the reconstructive work and medical staffing was done by Creighton medical students. Although open at first only a few hours on Wednesday evenings, many worthwhile programs were conducted, including vaccinations, youth programs, dental screening and health education films and discussions.⁷⁵

Medical students became dissatisfied with the status quo in student government, which, in return for activity fees, gave them representation on the university-wide Student Board of Governors. One of the main complaints included their inability to attend the majority of affairs financed by their required activity fees. Their more demanding and time-consuming academic requirements interfered, and their interests were divergent from those of the undergraduate mainstream.

After a lengthy time of agitation and discussion, a system was finally established by which all students, undergraduate and professional, paid a \$25 activity fee, but after a \$4 cut to support basketball and a \$6 general fund fee, a \$15 kickback was made to student bodies in professional schools. It was this kickback which provided the financial base that enabled medical students to form their own student government body, The Creighton Medical Student Government (CMSG), in 1968. The constitution for the new CMSG was presented to the medical student body in April 1968, and with a ballot return of 85% was unanimously approved. With modifications and updates, the CMSG is still in existence.⁷⁶

In this period of student protest, students were also dissatisfied with, and protested the requirement for, a medical student retreat, albeit with less success than in the area of student government. Despite a variety of student complaints



Henry H. Herrera (M.D. 1970), a winner of the Spirit of Creighton Award, 1970.

throughout the decade, the retreat was still compulsory at the beginning of the 1970's. However, many genuine attempts were made at revising the retreat to enhance its meaning and applicability to medical students. For example, a team approach was adopted for presentation of the 1966 retreat.⁷⁷ And in 1968, more relevant topics were chosen (sex education and the involvement of the physician in society), and a discussion format was adopted.⁷⁸

Other events at the School of Medicine can also be viewed as an outgrowth of the overall societal demand for self-expression, innovation and renewed interest in personal responsibility. For example,

- In 1966 the School of Medicine Executive Committee adopted an Honor Code. For years following, upon entry, the incoming freshman signed a statement vowing for his own personal academic integrity. Procedures were outlined for him to follow if he had reason to doubt that of a fellow student. Involvement of peers in adjudicating the situation was integral. Previously, action had been subjective with administrators.

- In 1967 a new publication, *The Beat*, was inaugurated. This was a newspaper published by and for medical students.

- The incoming freshman class of 1967 included the first nun admitted to the School of Medicine, Sister Ann Katherine Zielinski. (She was also the first member of her order, the Daughters of Wisdom, ever to attend medical school.) Dr. Zielinski (M.D. 1971) has gone on to become a well-known surgeon, adept at kidney transplants.

- In 1967 medical students demanded and won the right to conduct faculty evaluations. Members of the teaching faculty were ranked by students in ten categories, ranging from organization of lectures and class preparation to concern for and willingness to help students. The professor and administrators were later advised of the overall QPA and rank of the individual faculty member in relation to other faculty members. Students were *not* told of these rankings. However, students held the hope of improved teaching as a result of these evaluations. As Ralph Kramper (M.D. 1971) noted, "At least some of the professors evaluated were stimulated to reevaluate themselves and to produce better lectures with better organization".⁷⁹

- Beginning in 1968 two School of Medicine Associate Professors of Physiology, working with the American Friends Service Committee, provided draft counseling to all Creighton University students.

- Early in 1970 the Educational Policy Committee at the School of Medicine was considering a plan to put the senior year in medical school on an all elective, pass/fail system. By this time, many undergraduate courses in institutions nationwide were on such a basis. Despite strong support from a few, the plan was not adopted.

Trends in Medical Education

Just as many events occurring in medical student affairs mirrored the larger societal picture of the 1960's, so too events in medical education were a microcosm of national trends. In the late 1960's, medical schools nationwide, including Creighton, had a problem securing enough anatomical material (human cadavers) for their Anatomy courses. At the height (or depths) of the 1930's Depression, Creighton had more cadavers than it could use. But as economic conditions improved and welfare programs providing burial benefits increased, the source of

bodies was greatly reduced. Furthermore, the state of Nebraska, besides having a relatively small population, had two medical schools which needed to be supplied.

The shortage became quite critical. Medical education experts recommended that no more than four students should study one body. Yet in 1968 133 freshman medical and dental students used 22 cadavers, a ratio of six to one.⁸⁰ By 1969 the situation was even more grim. That year the school had a total of only ten cadavers for all medical and dental students.⁸¹ This was a problem with no quick resolution and which continued on for years to come.

Several other national medical trends were in evidence at Creighton. One medical historian notes that primary care services were deficient in the U.S. at the time.

One approach to the problem developed in the sixties was the idea of a new academic discipline, "family medicine". Family medicine grew out of general practice, dropping surgery and in some cases operative obstetrics to concentrate on providing medical care for adults and children. Family medicine also provides an identifiable academic discipline with which those thousands of general practitioners around the country who have been increasingly isolated by the increasing specialization and research orientation of most medical schools can identify.⁸²

In 1969, the year after the AMA approved establishment of the American Board of Family Practice, the School of Medicine established the Family Practice Division of the Department of Preventive Medicine, headed by Dr. Michael J. Haller (M.D. 1961). In August 1970 an approved program began for training residents in family medicine. Also in August, a Family Practice Clinic was opened at 3374 South 13th Street, in South Omaha. The Clinic was staffed by interns and residents and served not only to help alleviate the shortage of primary care physicians but also as a developing ground for the new specialty of Family Practice. The Division of Family Practice went on to become a Department in its own right in 1973.⁸³



Family Practice Clinic on 13th Street.

By 1970 about two-thirds of University medical schools had established one position which incorporated administration of all healing arts disciplines. In May of that year, the Creighton University Board of Directors created a comparable new position, that of Vice President for Health Sciences, and formed a search committee to fill it. The new Vice President was to be the chief administrative officer for Medicine, Dentistry, Pharmacy, Nursing, Radiologic Technology and Medical Technology. He would also represent Creighton with the seven affiliated hospitals that Creighton used for clinical training.

Dr. Robert P. Heaney (M.D. 1951), soon to become the first incumbent to the position in 1971, spoke of how his ideas on administrative organization helped shape the decision to create such a new position. This was an innovative time, and Dr. Heaney's view of the need for such a position was in the mainstream of medical education trends. At his father's urging, Dr. Heaney formalized his ideas in writing.

In the absence of any other well-defined ideas, he feels that his suggestions filled a vacuum.⁸⁴ The Board made the decision that another level of administration was indeed necessary, and created the new Vice Presidency. This was a move that was to cause much comment and controversy in the next decade, both due to the nature of the office itself and to personality issues.



Dr. Richard Booth.



Dr. Vincent Runco.

What About a New Hospital?

From the mid-1960's onward, there was a need acknowledged by all that more modern physical facilities were needed for hospital teaching. St. Joseph's had kept pace with advances in technology and equipment. In fact, in 1961 when Drs. Richard Booth and Vincent Runco founded the Creighton University Cardiac Center, the first of its type in the region, the hospital became an acknowledged leader in the area of Cardiology. During the first year of its operation, a cardiac catheterization laboratory was opened and a cardiology fellow-

ship program was established. In 1963 with funds from Omaha philanthropist and businessman Carl Renstrom and several other sources, a two-story wing, the Carl W. Renstrom Heart Research Unit, was added to St. Joseph's Hospital. In 1966 the Hospital opened its first intensive coronary care unit, and in 1967 a second unit was established to provide an intermediate level of coronary care. Patients here were monitored more closely than regular patients but were allowed to move around.⁸⁵ Yet the main building at the Hospital had opened in 1892 and was well over a half-century old. New facilities were badly needed.

There were, on the parts of campus administrators, medical administrators and community members of the Creighton University Board of Directors, differing viewpoints on the hospital issue. One group held the position that the University should help modernize, update and, if necessary, rebuild St. Joseph's, but that St. Joseph's should definitely be *the* main teaching hospital of the School of Medicine, in perpetuity. A second view held that what Creighton University needed was a new hospital, smaller than St. Joseph's and university-owned and controlled.

On April 22, 1966, an agreement was signed which seemed to place the first group in ascendancy. The agreement, between Creighton University President Rev. H.W. Linn and St. Joseph administrator, Sister M. Antonette, stated that "Creighton Memorial St. Joseph's Hospital will continue to be the School of Medicine's principal affiliated teaching hospital as long as the University engages in medical education."⁸⁶ Yet Creighton did not entirely rule out the possibility of a new, university-owned teaching hospital as part of the inclusive Criss Medical Center, stating that "if Creighton did build a teaching hospital, it would not abandon its affiliation with St. Joseph's."⁸⁷ At the same time, the Leo A. Daly Company of Omaha was hired by St. Joseph's to make a comprehensive study of the hospital's long-range future as a teaching hospital.

This was in line with recollections by Dr. Egan. He remembers that in 1968, for the first time in its history, Creighton University had a majority of lay members on its Board of Directors, and these lay members were community leaders. They

included presidents of banks, chairmen of boards and owners of businesses which were giants in the Omaha community.⁸⁸ These community leaders perceived it in the best interest of all – St. Joseph Hospital, Creighton University and Omaha – to preserve and strengthen St. Joseph’s Hospital, rather than to move into new territory with a university-based hospital.⁸⁹

In 1969 several new developments occurred on the clinical scene. In February a five-year agreement was reached between the School of Medicine and Immanuel Hospital, by which some undergraduate and post-graduate teaching in the Department of OB/GYN would be conducted at that facility. Immanuel is a Lutheran hospital, and this agreement was the first in the country between a Catholic medical school and a hospital affiliated with another faith. There had been an indication by St. Joseph’s Hospital that its obstetrical floor would have to be either reduced or entirely eliminated. Therefore, negotiations that ultimately lasted a year and a half were conducted between Immanuel and OB/GYN Department Chairman Dr. Eugene Slowinski. By terms of the agreement, OB/GYN patients would be divided between St. Joseph’s and Immanuel.⁹⁰



Students of the 60’s. Left to right: John Ferry (M.D. 1964); Phil Happe (M.D. 1964); Joe Jarzobski (M.D. 1965); and Mike Dunn (M.D. 1964). (Courtesy Milton Rowley, M.D. 1964.)

By mid-1969 a consensus had been reached, in line with the Daly study, that St. Joseph Hospital would remain the teaching hospital for the Creighton School of Medicine; that it would be rebuilt at a new location, on or near the main campus; and that it would be enlarged in scope to a regional health care center. Influencing the choice of location were several factors. The Interstate Highway System put Creighton at a highway hub for the entire region. There was an identified need for a teaching hospital to serve Northeast Omaha, including but not limited to, low-income areas of the city. The location also demonstrated a belief in the future of downtown Omaha. And finally, having all health science divisions of the University within easy access of one another would be very convenient for all involved.⁹¹

A regional health center was very expensive, and raising the necessary funds for such a project was a task of immense proportions. A major step forward was taken when a grant of \$1,000,000 from the Eugene C. Eppley Foundation to Creighton University and Creighton Memorial St. Joseph’s Hospital was announced in August 1969. It was awarded specifically “to assist and encourage the replacement of the present hospital with a new 500-bed regional teaching hospital and health care center.”⁹² In accepting the award, then chairman of the Creighton Board of Directors A.F. Jacobson indicated that funding for the new facility would be a combination of federal matching grants, long-term loans and a new fund campaign.

A Bright Future

This new campaign, the Creighton Centennial Thrust, was announced in February 1970, and had as two of its Phase I goals a new teaching hospital, estimated at a cost of \$35 million, and the new Criss III, estimated at \$4.5 million. Other buildings planned for this stage included a new dental school, a professional office

building, an apartment building to house interns, a parking ramp and an overhead mall or building spanning the interstate, connecting both segments of the Creighton University campus. The target completion date for all of Phase I was 1975.

Also announced in January 1970 was the first of three applications to the Department of HEW for federal grants. This first application was for \$4 million to construct Criss III. The second grant was for a new dental building, (awarded in June, 1970 in the amount of \$6,549,661). The third and largest would be for the new teaching hospital.

In June 1970, a Washington Post Service Report was published which indicated that 43 of the 107 medical schools in the nation were in grave financial danger. Creighton was one of these, according to the report, and it further stated that the Creighton School of Medicine was among several in danger of closing within three to five years.

The University flatly denied this allegation. A.F. Jacobson, President of the Board of Directors, stated to the *Omaha World Herald*:

Creighton's School of Medicine is in no danger of closing its doors. . . .

The facts are that our direct medical school expenses are less than the annual income, overall deficits are declining and the school is operating in an economically manageable range.⁹³



Rev. Richard C. Harrington, S.J., Dean Richard Egan (M.D. 1940) and Rev. Carl Reinert, S. J.

He also cited unusually widespread community support for the University and the lay leadership of the Board of Directors, whose prominent community members were determined to ensure a bright future for the health sciences at Creighton University. Leo Daly, Board member and Chairman of the Centennial Thrust campaign, noted, "We are not concerned about closing. Our concern is for Creighton's future, which has never been brighter."⁹⁴

The many exciting new developments making for such a bright future for the School of Medicine did indeed come about. These included construction of Criss III, a new St. Joseph's Hospital and a Bio-Information Center. But these developments would have to be played out under different leadership in the School of Medicine

within the new decade of the 1970's. For in August 1970 Dr. Richard Egan was given the newly created position of Assistant to the President for Health Sciences, and a new Dean of the School of Medicine was named. He was the former Associate Dean, Dr. Joseph M. Holthaus (M.D. 1947). As with any major administrative personnel change, many factors influenced this one. It can be noted that Dr. Egan had views on the new hospital which did differ, in major respects, from those prevailing with University administrative and Board leadership. This was no doubt a deciding factor in Dr Egan's resignation and reassignment.

The fact that Dr. Egan's Deanship ended before all of the School of Medicine's goals for new facilities were achieved and before all of its financial difficulties could be ironed out should in no way obscure the achievements of his tenure. The School of Medicine had started the decade with antiquated cramped facilities, a small

faculty, less than full accreditation and few financial resources. It ended the 1960's quite differently. It now had two new buildings, a full-time faculty of moderate size which was being increased at a steady rate, and full, unconditional accreditation. It had many federal and private grants, bequests and gifts. It also had concrete plans for a new teaching hospital and the final Criss building to complete the triad, all of which were backed by strong community support and encouragement. And as if all of this weren't enough, the School had a student body whose quality had never been higher, and a teaching program, spirit and tradition second to none. The Creighton School of Medicine had indeed come a long way in a short time. Dr. Egan was and is to be commended.

References

1. Audiotape Interview, Richard Egan (M.D. 1940), July 15, 1990.
2. *Omaha World Herald* October 29, 1964, p. 2.
3. "Medical School Reports Federal Grant Increase," *The Creightonian* February 4, 1965, p. 2.
4. "Financial Troubles Shake Future," *The Creightonian* April 7, 1967, p. 3.
5. Interview, Egan.
6. "Report From Your Creighton University School of Medicine," Fall 1965. (Brochure, Courtesy of the Creighton University Archives.)
7. Interview, Egan.
8. Note dated March 25, 1963; "Report From Your Creighton University School of Medicine," Fall 1965; Report, The C.U. School of Medicine to Province Director of Education dated March 2, 1966; (All Courtesy of the Creighton University Archives); *P.S. Magazine* October 1969, p. 15.
9. "Enrollment Jumps Higher in Medicine, Dentistry," *The Creightonian* September 22, 1967, p. 2.
10. "Bumper Crop Seeking to Enter Med Schools," *Omaha World Herald* January 2, 1966, p. 20-B.
11. *Omaha World Herald*: "Six 1914 Medical Grads Honored," October 29, 1964; "Bumper Crop Seeking to Enter Med Schools," January 2, 1966, p. 20-B; "Demand Up for Doctors," February 11, 1968; "Medicine Reports Rise in Applications for '68," *The Creightonian* March 11, 1968, p. 2.
12. *Omaha World Herald* January 2, 1966.
13. "Frosh Entering Medicine Sport Flashy "B" Averages," *The Creightonian* March 3, 1967, p. 6.
14. Interview, Egan.
15. Frances McCoy, "Mrs. Criss A Living Legend in the Insurance Business," *Omaha World Herald* August 1, 1971, p. 6E; "Foundress Mabel L. Criss Dies, Supported Much of Campus Growth," *Creighton Alumnus* April 1978, p. 2; "CU's Highest Honor Went to Mrs. Criss, Kiewit," *The Midlands Business Journal* August 19, 1986.
16. "Med. Center Grant Okayed," *The Creightonian* September 29, 1961, p. 1.
17. "Stadium Razing Revives Nostalgia," *The Creightonian* September 21, 1966, p. 4.
18. "Exit of Attic Labs Marks Research Growth," *The Creightonian* November 8, 1963, p. 6.
19. "Attic Labs;" "C.U. Medical Researchers Enjoying Luxury of Space," *Omaha World Herald* September 4, 1963, p. 49.
20. "Luxury of Space."
21. Interview, Egan.
22. "Groundbreaking Signals Move for Doctors," *The Creightonian* September 18, 1964, p. 1; *Omaha World Herald*: "C.U. to Start 2d Medic Unit on Thursday," September 18, 1964, p. 1; "Medicine to Replace Ball Field," September 25, 1964, p. 31.
23. "Ceremony Advances School's 'Golden Era,'" *The Creightonian* September 25, 1964, p. 1.
24. "Turn of a Spade," *P.S. Magazine* November 1964, p. 5.
25. "Construction Measures Progress of 5-Year New Goals Program," *The Creightonian* May 15, 1964, p. 1.
26. "Campus Building Reaches Sky," *The Creightonian* May 7, 1965, p. 7.
27. "Medical Center Receives Agents' \$235,000 Boost," *The Creightonian* December 11, 1964, p. 6.
28. *The Creightonian* September 18, 1964.
29. *The Creightonian*: "Medical Center Dedication to Feature Science Talks," October 21, 1966, p. 3; "Grace, Inspiration Asked at Criss Center Blessing," November 4, 1966, p. 1; "Dedication Set for Units Costing \$6.8 Million," *The True Voice* October 28, 1966, p. 1.
30. "Medicine Comes to the Campus," *Omaha World Herald Magazine of the Midlands* October 23, 1966, p. 20-21.
31. *The Beat*: "Medical Swamp to be Paved," May-June 1969, p. 3; "For Student Parking Only," September-October 1969, p. 1.
32. "Criss's Gifts Largest Ever," *Omaha World Herald* May 1, 1966, p. 1-B; "Neil L. Criss Repays University's Kindness," *The Creightonian* May 6, 1966, p. 2; "Dr. Neil Criss Leaves Medical Gifts," *P.S. Magazine* July 1966, p. 16.

33. "C.U. Med School Features Education, Research, Clinic," *The True Voice* October 22, 1965, p. 12.
34. "Medical Dean Says Health Clinic Plan would Hurt Teaching," *Omaha World Herald* January 8, 1967, p. 1-B; "Med School Will Cooperate in North Side Health Clinic," *The Creightonian* April 7, 1967, p. 1.
35. "Clinic Keeps Night Hours," *The Creightonian* March 1, 1968, p. 7.
36. "Clinics Nearly Ready to Move," *Creighton Alumnews* February 1969, p. 1; "Creighton U. Has New Facilities," *Nebraska State Medical Journal* 54 (March 1969), p. 187; "Creighton U. Med School Clinic Now in New Home," *The True Voice* May 16, 1969, p. 1.
37. Mary McGrath, "Creighton Bids Adieu to 'That Old Joint'," *Omaha World Herald* March 22, 1969, p. 13.
38. McGrath.
39. "New Building to Serve as Med-Pharm Library," *The Creightonian* February 26, 1960, p. 1.
40. "Development Report," *P.S. Magazine* September 1967, p. 12.
41. "Art Department to Move to Old Medical School," *The Creightonian* May 6, 1966, p. 6.
42. "Med School Changes Look in Artists' Hands," *The Creightonian* September 30, 1966, p. 6.
43. "Old C.U. Library Goes Arty, Offers Taste of Everything," *Omaha World Herald* December 26, 1966, p. 60.
44. "Interstate to Evict Art Dept.," *The Creightonian* April 5, 1968, p. 2.
45. "Progress Wrecks Old Med School," *The Creightonian* September 5, 1969, p. 3.
46. "Small Chapel 'Special' for CU Med Students," *The True Voice* January 21, 1966, p. 12.
47. "Medical School in Diamond Year," *Creighton Alumnews* November 1967, p. 5.
48. Leanne Iwan, "Creighton University School of Medicine," *The New Physician* 10 (February 1961), p. 63.
49. "Medicine Freshmen Favor Core Program," *The Creightonian* October 20, 1961, p. 7.
50. *The Creighton University Bulletin of the School of Medicine, 1964-1966*, p. 40.
51. "Med Alters Program," *The Creightonian* October 23, 1959, p. 6.
52. "Creighton Medical Freshmen Now Exposed to 'Whole Man'," *Omaha World Herald* February 15, 1969, p. 13.
53. "Human Biology Offers Practical Approach to Medical Freshmen," *The Creightonian* September 25, 1970, p. 7.
54. Jim Smith, "Creighton University: Yesterday, Today, Tomorrow," *Phi Chi Quarterly* 63 (Fall 1966), p. 104.
55. "Criss Medical Units Dedicated," *P.S. Magazine* January 1967, p. 5.
56. *The Creighton University Bulletin of the School of Medicine, 1966-1968*, pp. 38-40.
57. "Naval Reserve Company Formed," *Nebraska State Medical Journal* 52 (July 1962), p. 327.
58. *Creighton University Bulletin of the School of Medicine: 1957-1960*, p. 51; *1960-1962*, p. 50; *1970-1972*, p. 39.
59. "Medicine's Changing Demands," *P.S. Magazine* October 1969, p. 15.
60. "C.U. Prepares Doctors for Teaching," *The True Voice* June 10, 1966, p. 2.
61. *Creighton University Bulletin of the School of Medicine, 1968-1970*, p. 26.
62. "Doctoral Programs are Approved," *Creighton Alumnews* May 1969, p. 1.
63. *The Creighton University Bulletin of the School of Medicine, 1966-1968*, p. 26.
64. "25 to Intern in Omaha," *The Creightonian* March 20, 1964, p. 6.
65. "Most Creighton Graduates in General Practice," *Creighton Alumnews* July 1962, p. 6.
66. "Creighton Alumni," *P.S. Magazine* March 1965, p. 17.
67. "'Medical Mountain' to Rural Areas," *Omaha World Herald* January 29, 1967, p. 14-B.
68. "Electron Microscope to Aid Researcher's Cell Study," *The Creightonian* May 5, 1961, p. 6.
69. "Med Faculty Starts TV Space, Medicine Show," *The Creightonian* February 8, 1963, p. 3.
70. "Special Heart Analysis," *Creighton Alumnews* January 1964, pp 8-9.
71. "C.U. Gets Color TV Recorder for Medicine," *West Omaha-Dundee Sun* February 22, 1968, p. 24.

72. "Pathology Dept. Purchases Multiphasic Blood Screener," *The Creightonian* January 10, 1969, p. 6.
73. Gary Johansen, "Science on Saturdays. . . and Maybe for a Lifetime," *Omaha World Herald Magazine of the Midlands* June 4, 1967, p. 19.
74. "SHO Promotes 'Right to Health,'" *The Creightonian* March 29, 1968, p. 3.
75. "New Willis Ave. Health Center," *The Beat* March 1969, p. 5.
76. James F. Dorethy, "Birth, Infancy and Into Adolescence," *The Beat* September-October 1969, p. 2.
77. "Retreats for Med Students Scheduled this Weekend," *The Creightonian* February 4, 1966, p. 1.
78. "Upper Classmen Hold Renewal," *The Beat* March 1968, p. 1.
79. "2-Year Med Evaluations Gets No Faculty Objections," *The Creightonian* December 5, 1969, p. 1.
80. "Cadaver Shortage Strikes," *The Creightonian* April 5, 1968, p. 3.
81. "Med, Dent Schools Seek More Cadavers," *The Creightonian* November 7, 1969, p. 2.
82. Steven Jonas, *Medical Mystery: The Training of Doctors in the United States* (New York: W. W. Norton Co., 1978), p. 258.
83. "Family Practice Clinic Offers Unique Service," *The Creightonian* September 18, 1970, p. 3; James Hurley, "Where the People Are," *P.S. Magazine* October 1970, p. 10-12.
84. Audiotape Interview, Robert P. Heaney (M.D. 1951), August 31, 1989.
85. *Omaha World Herald* (Magazine of the Midlands): Judy Hamilton, "Newest in Cardiac Care," April 13, 1975, p. 16; Leonard Johnson, "Heart Attack," September 28, 1986, p. 12.
86. "Two Renew 74-Year Tie," *Omaha World Herald* April 22, 1966, p. 1.
87. "74-Year Tie."
88. "13 Laymen to Join CU Directors," *The Creightonian* October 25, 1968, p. 1.
89. Interview, Egan.
90. "C.U. Shifts Medical Ties to Immanuel," *Omaha World Herald* February 3, 1969, p. 4; "Two Med Departments to Move to Immanuel," *The Creightonian* February 7, 1969, p. 2; Wayne Leadbetter, "OB-GYN Delivers New Program," *The Beat* March 1969, p. 1.
91. "Hospital Gap, Interstate Influence Building Site," *Creighton Alumnews* August 1969, p. 7.
92. "Eppley Makes Grant for Hospital," *Creighton Alumnews* August 1969, p. 1.
93. "Med School is Self-Supporting," *Omaha World Herald* June 21, 1970, p. 1.
94. "Self-Supporting."

