

JAMES DECKER MUNSON HOSPITAL

"Men find themselves tearching for things that will endure . . . eternal realities that will last beyond the limits of this life." — Richard L. Evans Needs Your Help
To Complete the Job . . .

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Dr. Irwin H. Zielke Dr. J. G. Zimmerman SUPERINTENDENT A. Kent Schafer The lamp on the cover of this brochure is symbolic of Florence Nightingale and her devotion to the great mission of bealing. Even as the, we too have a cause to which we must devote hearts and minds...so that others might live.

Every dollar contributed in this campaign will go toward construction and equipment. Expenses of the campaign, including costs of this brochure are being separately provided.

THE JAMES DECKER MUNSON HOSPITAL CAMPAIGN HEADQUARTERS
Control High School (cafeteria) . . . Traverse City, Mich., P. O. Box 227, Phone 3303

# Crisis . . .

The Grand Traverse Region is only a few week's construction away from obtaining hospital facilities which would relieve crowded conditions now at a dangerous level and allow us to take full advantage of the tremendous advances made in medicine.

Even under normal conditions, the present James Decker Munson Hospital is filled to overflowing, so that it becomes necessary to place patients in corridors and in buildings such as the Nurses' Home, which never was intended for patient use. This under normal conditional

Munson Hospital, with a normal bed capacity of 120, long has been averaging 140 patients daily. Yet, hospitals are considered to be crowded with 75% of their beds in use. In other words, hospitals must always have beds in reserve to meet emergencies such as disasters or epidemics.

Tomorrow it could be one of us. Will there be room?

In recent years, the incidence of polio—the dread of every parent—has been heavy throughout this region. Will we helpletsly have to stand by while our children are denied protection? Do we ever want to hear: "Sorry, there's no room?"

Nearly every department of the hospital is overtaxed: surgety, X-Ray, dietary—all carrying loads far above normal. Furthermore, construction of the new wince, now nearly completed, has caused some curtailment of service in the present plant. To make way for the new addition, the present laboratory, for example, had to be cut to nearly half its original size, thus pardig considerably its operating efficiency.

Ironically, we have the answer to our problem nearly within our grasp. We can have adequate hospital protection, but we must obtain additional funds necessary



to complete the new wing. We are now at the point where construction must soon cease until those funds are forthcoming.

With the new wing, we need not fear that our loved ones will be forced to go without modern medical help. With it, our capable doctors and nurses no longer will be forced to work under adverse conditions; nor will patients need to be placed in noisy, drafty cortidors.

Without the new wing, the health of the community is endangered and the crisis will continue to mount.

# Courage . . . and Faith in the Future

The need for added facilities has been with us for many years, but today the need is so acute that we dare not delay another hour in meeting and overcoming this crisis.

In 1946, the people of the community joined hands in a great crusade to overcome the problem in its incipiency, raising nearly \$600,000 in lepicings through public uppeal. But several factors, each a deterrent to the projected building plan, were to deny the community the facilities it must have.

One factor was the unforescenble rise in building costs. Another was the heavy and unexpected shrinkage in pledges. It was apparent then that plans would have to be cut to the barest minimum. This was done, but the minimum plans fell below the requirements that would have to be met if the hospital was to have help from the government under the Hill-Burton Act. Thus, some of the features cut from the projected plan had to be replaced, with a resultant rise in costs.

Despite the fact that adequate funds were not available to see completion of the project, the Board of Directors, confident of community support, ordered construction to start late in 1990. The Board's confidence stemmed from its faith in the American way and its knowledge that the people of this community would demand that everything possible be done to issure better medical facilities for all.

Our problem is not new nor is it unique, for, since the Korean War, hospitals throughout the nation likewise have been faced with rising costs and have been forced to go back to the people for additional funds.

Like most of America's hospitals, the James Decker Musson is a voluntary, non-profit institution, dedicated to the service of the side and the injured, regardless of creed or religion, or the ability to pay. Our hospital belongs to all of us, and to the degree which we meet the obligations it imposes upon us, to that degree will it be able to serve us and our loved ones, for whom we extertain sacing zear houses.

These future citizens demand better facilities,

The first voluntary, non-profit hospital in the United States in some founded by Benjimm Franklin. This wite mas solicited funds for a hospital from the general public and become the first in this constray to conduct a daspital building fund cambridge. He believed that hospitals should belong to the people below years. Since those it has been the custom in our lead to hand together to provide for the ill and the injured according to our means.



# A Challenge . . .

It becomes obvious, then, that we must take immediate action, if construction on the new addition so desperately needed is not to be halted. It is equally clear that the necessary funds can only be obtained by public subscription.

Bear in mind that when we go to a non-profit hospital, such as the James Decker Munson, and pay our hill, we are paying only a portion of the actual costs necessary to give us care. We do not pay the costs of providing the building and the fixed equipment. To bill the patient for this entire cost would put the price beyond the reach of most of us.

Although our hospital does have a modest endowment, this fund cannot be used for building purposes, nor are there sufficient funds available for such purposes from the operation of the hospital.

Thus, all of us will be asked to give our whole-hearted effort, as well as our contributions, to raise the money necessary to complete that which we started and need immediately.

For many, this will be an additional call, a call for even greater effort and generosity. For others, it will be a call to complete and add to pledges made in the past. For all of us, it will be a challenge to unite in one common cause so that all may benefit.

Remember, on the average, one out of every eight of us will need hospitalization sometime during the year! It could be you, or one of your loved ones. That is why we must accept the challenge and see the new addition through to immediate completion.

Picture shows patients in corridor, a usual condition.

### CAN WE AFFORD IT?

Over a 10-year period, about 17 per cent of the total annual income in the United States was spent on luxury items.

Only about FOUR per cent was spent for all medical care — hospitals, doctors, deatists, medicines, etc.

Can We Afford Not to Meet Our Hospital Needs?



### WHAT IT WILL TAKE

ESTIMATED cost of new building and remodeling.....\$1,400,000

RECEIVED from 1946 campaign and in subsequent

gifts ......\$450,000 EXPECTED from U. S. government .....\$650,000

\$1,100,000

We Must Raise \$300,000



## All This . . .

As recently as a generation ago many hospitals were little more than boarding houses for the sick. Today hospitals are wast laboratories, offering a multitude of services for diagnosis and treatment, most of which never are seen by the patient. The new wing, although somewhat scaled down from the original plans, will

give the community modern facilities which should be adequate in size for many years to come. With the opening of the new wing, all of the present buildings will continue in use, although new and more efficient assignments will be possible for many of them. The new building will mean greater economies and more efficiency in the operation of the hospital.

These are the things we must have and can have by uniting in effort and purpose to complete the job that has been so well started:

Above: New kitchen will be spacious, ultra-modern.

Below: Present kitchen is seldom free from convestion.

A 200-BED HOSPITAL, the new wing to consist of a basement, ground floor and two upper floors. Capacity is to be boosted from 120 beds by the addition of 80 beds, all in beautifully situated rooms, many of them private.

MODERN, EXPLOSION-PROOF operating suites with all the latest equipment at the disposal of a surgical staff considered to be among the finest in the mid-West.

X-RAY DEPARTMENT will have entirely new and more spacious quarters in which to carry on a vast program of diagnosis and treatment. Last year thousands of patients received X-Ray services, far over-taxing the present facilities.

# . . . Can Be Ours

TWO NEW NURSERIES will mean better care for the many newborns handled at the local institution each year. The new facilities will reduce the possibility of cross-infection and will insure that each infant gets a maximum of the advanced two of care now available to newborns.

THE NEW DIETARY facilities will include a large kitchen to replace the cramped quarters where meals presently are served. A food conveyor system will mean more economy in the kitchen, both in time and money. A large dining room also is included in the new building.

TWO MODERN ELEVATORS will give quicker access to upper floors for those patients who need to be moved. These elevators also will do much to speed

up meal service.

Don't let it stop here!

CENTRAL STERILE SUPPLY will get new and larger space and will be more favorably located in respect to the departments it serves.

LAUNDRY no longer will have to be sent out. An ample, fully-equipped laundry department is included in the new building.

HEATING, long supplied by the state hospital on a contractual basis, now will come from three, new 250 hp boilers located in a large boiler room.

AMPLE STORAGE SPACE will relieve a condition which long has plagued the hospital.

RESULT: a hospital adequate to our community needs.



### All This . . . At 69c an Hour

Yes . . . the average patient bill is \$16.58 a day or 69c an hour — including meals, X-Ray, laboratory, pharmacentical and surgical services as well as 24-bours-day nursing care. Seldom does it amount to more. Can you get a painter to paint your house or any other skilled criffsman for as little?

Could you have your baby at home, and pay a graduate nurse for round-the-clock care of mother and baby ... and feed all three for 69c an hour?





# Good Stewardship

From that time 37 years ago, when the James Decker Musson Hospital was stabilished through the untiting efforts of that pioneering dector whose name is now bears, our hospital has given outstanding service to thousands of patients. Many of our children were born there, and so, too, will generations to come have reason to mark this great memorial to the living.

The James Decker Menson Hospital is singularly blassed with outstanding medical and surgical men. Its record of service is among the very finest in the state. Our hospital is one of the few with up-to-dates therapy equipment for polic cases, equipped as it is with a substantial exercise pool and heree shop. It is stantial exercise pool and heree shop. It is more than just a hospital—over the years

it has become a great medical center with a service area covering many counties.

Good teamwork, from top down, keeps hospital functioning.

> Our hospital is entrusted to a Board of Directors, a group representative of the community, serving without pay, its only privilege being to give freely of effort, time and money. This Board is charged with the management of a large polysical plant representing an investment of several millions of dollars. The payrell is nearly a million dollars annually. Tulks his business.

> The James Decket Munson Hospital is fully approved by the American College of Surgeons, such approval being the stamp of quality for voluntary hospitals. More than 225 specialized workers, including a competent nursing staff, administer to patient needs.

> Our hospital is approved for the training of interns. It is a member of the American Hospital Association and is affiliated with Blue Cross.

> Doctors of the staff serve without recompense from the hospital. In return for the privilege of bringing their private patients to the hospital they give their services in the care of charity patients and in teaching practical nurses and interns.

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# Living Memorials

This is immortality . . . for the good one does here lives through generations to come.

There is no greater opportunity to test our religious sincerity and to translate our fithin into living reality than through the mission of healing. Service to our hospital transforms into inanceliate action our religious philiosophy. A glotious opportunity to create living memorials exists in our hospital—for what could better prepretute the memory of a lowed one than a floor, room, or piece of equipment given in his to the ranses.

And, to create such living memorials is to transform a civic obligation into a profound satisfaction. Those who establish them will be paying a cribate to the past . . . honoring the present . . . and safeguarding our children's rightful heritage of health in the future.

From this region, hundreds of fine men have gone forth to serve this country in its hour of need. They have fought and died that we might live as free people. To these . . . there can be on finer tribute than a memorial in our hospital . . established in their names.

And to the living . . . ss a memorial of esteem from friends to the belowed individuals, there can be nothing more fitting, in bonor of his life of devotion and service to his fellow men, than a bronze plaque marking a room given to the hoopital in his bonor.

In the following pages are many memorials—from simple plaques to substantial gifts. Each floor, room or piece of equipment given will be marked by a plaque inscribed as the donor desires.



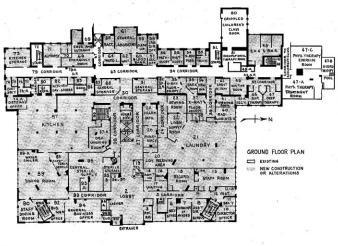
### GIFTS ARE TAX DEDUCTIBLE

Now, more than ever, provisions of the Nederal Income Tax laws make it possible for people of means to contribute generously at compansitively small cost. Because such gifts are deductible, the government is actually encounging us to contribute to projects such as this, by reducing what we otherwise would have to pas in taxes.

One need not have a large income to experience a substantial saving. Individuals are permitted to deduct up to 15 per cent of their adjusted gross income for gifts to charitable purposes.

### DIVIDED PAYMENTS

To raise \$300,000 will not be easy. To raise it in cash would be formidable indeed. It therefore is suggested that subscriptions may be paid in 12 hi-monthly payments over a period of one year and nine months, touching three income tax years.



# Designated Gifts

GROUND FL	OOR	
Description	Each 1/12 Payment	
	Payment	Gift
To name Ground Floor,		
New Building		\$25,000
Entrance		1,800
Retiring Room	833	10,000
Janitor's Room		- 300
Corridor		900
Secretary's Office		900
Director of Nurses	100	1,200
Ass't Director of Nurses.	75	900
Stairs		300
Hospital Director's Office	167	2,000
Socretary's Office	75	900
Vestibule		900
Doctors Call Board	75	900
Staff Room		5.00X
Telephone		30X
Telephone		30X
Record Room		2.000
Social Services Office	75	900
Waiting Room		1,200
Admitting Office		900
		2,000
Doctors Call Board		1,200
Laundry Receiving Area.		300
Laundry		20,000
Lines Supply	25	- 300
Sewing Room	25	300
Corridor	25	300
Pharmacy Manufacturing	75	900
Pharmacy	1.67	2,000
Corridor	100	1,200
Elevator	1,250	15,000
Elevator	833	10,000

No.	Description	ach 1/12	Total
		Payment	Gift
31	General Storage	75	900
31a	To Name X-Ray Departme	ot 833	10,000
32	X-Ray Dressing Rooms X-Ray and Fluoroscopy	25	300
00	Room	416	E 000
34	Corridor	26	5,000
35	X-Ray Dark Room	25	300
36	Film Drying and Viewing		
37	X-Ray and Fluoroscopy	25	300
		416	5,000
38	X-Ray Dressing Room	25	300
39	X-Ray Dressing Room Corridor	25	300
40	Radiologist's Office	75	900
41	Viewing Room		600
41a	Secretary's Office	25	300
42	Chest X-Ray Room	333	4,000
43	X-Ray Waiting Room		1,800
44	Drinking Fountain		
45	Comittee	25	300
46	Corridor Superficial Therapy-X-Ray	25	300
40	Supericial Therapy-X-Ray	333	4,000
472	Deep Therapy-X-Ray	416	5,000
	To Name Physical Therapy		
476	Department Physical Therapy Treatmen	416	5,000
47.0	Room		
47-	Room	16/	2,000 GIFT
47d	Physical Therapy Exercise	EMORIA	GIFT
	Room	150	1,500
48	Stairway	25	300
49	Staitway Electrocardiograph and		200
	Basal Metabolism	150	1,800
19a	Storage	25	300
50	Storage Crippled Children's		
	ClassroomM	EMORIAI	GIFT
51	Occupational Therapy		
52	RoomM	EMORIAI	
53	Stairway Technicians' Rest Room	25	300
54	reconnectants Nest Room	- 50	600
54a	X-Ray Files To Name Laboratory Dept.	50	600
	To Name Laboratory Dept.	625	7,500
55	Histology Laboratory	83	1,000
56	Pathology Laboratory Secretary's Office	83	1,000
57	Secretary's Office	25	300
58	Laboratory Director's Offic	e 75	900
59	Clean Up	25	300
60	Blood Bank	125	1,500
61	General Laboratory	208	2,500
62	Waiting Room	125	1,500

Park 1/12 Watel

No.		Each 1/12 Payment	Total Gift
63	Corridor	50	600
64	Laboratory's Photography Room		
65	Noom	50	600
66	Bacteriology		1,000
67	Corridor	500	6,000
68		25	300
- 69	Emergency Room Emergency Ambulance		3,000
70	Entrance and Ramp Refrigerator — Autopsy		1,200
71	Room	25	300
72	Autopsy Room	83	1,000
73	Stairs	25	300
74	Kitchen Storage Room		300
742	Diet Secretary's Office	25	300
75			900
76	Compressor	25	300
	Deep Freeze-Walk-In	25	300
760	Meat Refrigerator Walk-is	25	300
77 78	Dairy Refrigerator Walk-i	n 25	300
	Corridor	25	300
79	Corridor		300
80 81	Garbage Disposal	25	300
81	Refrigerator Room	25	300
	Day Storage-Kitchen	25	300
83	Formula Preparation Room		600
84	Formula Cleanup Room	25	300
85	Janitor	25	300
86	General Storage Room	75	900
87	Main Kitchen	833	10,000
87a		50	600
88	Cafeteria Service	250	3,000
89	Dining Room	250	3,000
89a			300
90	Staff Dining Room	125	1,500
91	Stairs	25	300
92	Business Manager's Office.	50	600
93	Corridor		900
94	General Business Office		2,500
94a			1,200
946		25	300
95		25	
	Central Sterile Supply	250	3,000
93 a	Solutions	25	300
956	Sterile Storage	25	300
	Dumbwaiter		300
96	Telephone		300
97	Telephone	25	300
98	Corridor	25	300
99	Stairs	26	300