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25th June 1934.

Mr. W.R. Chenoweth, Royal Victoria Hospital, Montreal.

Dear Mr. Chenoweth,

In connection with the corridor from the bridge of the Neurological Institute to the main corridor of the Hospital, may I enclose a brief summary of the facts in this connection for the use of the Committee which is to take this matter under consideration.

From the very beginning of the plans of the Neurological Institute it was hoped to make this as near as possible an integral part of the Royal Victoria Hospital, and it was on this basis that the proposal was made to the Rockefeller Foundation. The Foundation accepted the proposal with the understanding that the Institute was not to be a With this in mind and because of the separated entity. fact that patients, food, staff and laboratory services must constantly pass between the two institutions, it was considered essential from the beginning that the Neurological Institute should be connected directly with the main corridor of the Hospital. For that reason plans were drawn and costs determined to connect the Institute by a bridge directly to the corridor which connects the Ross Memorial Hospital with the Royal Victoria.

On September 22nd 1932 at a meeting in Sir Arthur Currie's office Mr. Chenoweth proposed that the bridge should end opposite the there it loor of the outpatient Department and that a corridor should then be constructed directly from it through the present Outpatient Department and the Pediatric Ward to the main corridor of the Hospital. From the point of view of the Neurological Institute activities this compromise was somewhat less desirable than the first proposal because

## Letter to Mr. Chenoweth continued.

of the long course through the Outpatient Clinic and the much greater distance from the Ross Memorial Pavilion.

It was, however, agreed to abandon the latter passage and with the understanding that there would be a direct passage through the present Pediatrics ward the position of the Institute was determined and money was set aside for the construction of such a passage.

On October 6th 1932 Mr. Chenoweth wrote to the Medical Board proposing the abolition of the Pediatric Service in Ward N. and proposing that the corridor above mentioned be carried throughfrom the bridge of the Neurological Institute directly to the main corridor of the Hospital.

On October 11th 1932 a memorandum was addressed to Mr. Chenoweth which was approved by the Medical Board and which strongly opposed the abolition of the Pediatric ward. This memorandum, however, made no mention of the passing of the corridor through that floor.

No further action was taken in regard to the corridor. Had any suggestion been made that the bridge could not be connected directly as planned to the main corridor of the Hospital, other plans would have been proposed by the University and certainly no bridge would have been built as at present.

## Letter to Mr. Chenoweth continued.

At present the bridge passage is connected with the Hospital by means of an elevator in the Outpatient Department, downward to the Main Assembly Room of the Outpatients. It is necessary to pass through this, then up in the Medical elevator to the main corridor. This would correspond actually to the removal of the Neurological Institute at least one hundred yards away from the Hospital. Neither of these elevators are at present manned throughout the day make the crowd of patients in the Assembly Room of the Outpatient Department during the day makes this an improper corridor to say the least.

In regard to the Pediatrics activity in Ward N.
it is our desire, of course, not to interfere with that in any
way. With this in view, a corridor through that Ward has been
planned according to the blue print which is in your hands. If
it is felt that noise of those passing through the corridor
would be objectionable, this corridor can be roofed over with a
sound absorbing board. This will avoid any possible interference
with ventilation. It will not cut down the number of beds which
can be accommodated, in any way, and it should not interfere with
the clinical activities there any more than a corridor through a
private ward interferes with those activities. It would furthermore make it possible to use one or two of the cubicles for semiprivate or private patients when such need arises.

. It may be pointed out further that there will be no need for friends or visitors of the patients in the Neurological Institute to pass through that corridor. These people will enter through the Outpatients and up the elevator to the passage-way beyond the Pediatries Ward, just as new admissions to the Neurological Institute will enter.

## Letter to Mr. Chenoweth continued.

Thus it is my earnest hope that this corridor will be a help rather than a hindrance to clinical activity in Ward N. and I must point out that it was one of the conditions upon which the Neurological Institute was built and was promised by the Hospital to the University for that Institute.

Yours very sincerely,

WGP/HL.