

Mr. Cheneveth

MANI Building

August 24th 1932.

Sir Arthur Currie,
McGill University,
Montreal.

Dear Sir Arthur,

Thank you for your letter of August 17th in regard to the conference held in your office on August 16th concerning the proposed new neurological building.

You have taken up certain changes which appear in the present plans for the Institute as compared with the sketch plans made for presentation to the Rockefeller Foundation.

In my work upon these plans with Mr. Macdonald I have steadfastly adhered to the principle that the cost of the new building could not exceed the original estimate, a principle which Mr. Macdonald has likewise accepted. It is difficult for me to understand how the mark could have been so far overshot. May I take up the points that you have enumerated one by one.

1. Animal Experimentation. The present space can be reduced, but not to the size which was possible in the original plans, for in them the animal rooms formed a part of the animal rooms belonging to the Department of Medicine.

2. X-ray. The accommodation is at a minimum. The room marked "Encephalography" is to be used also for a second operating room in case of emergency and should not be considered as X-ray space in the ordinary sense. This emergency room would not have been necessary had our operating room been attached to the general operating suite. In regard to equipment, I hope to secure a certain amount of money for additional X-ray equipment from the scientific budget for this year.

3. Amphitheatre. The enlargement of the amphitheatre so as to include two floors instead of one was made by including space in the basement which was not needed for any other activity. This large amphitheatre is not indispensable to the neurological work. The hospital however in general is greatly in need of an additional amphitheatre for University students. This is particularly true in the Medical Department.

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The size of the room could well be diminished so as to seat only one hundred students or less. The space that would be thus liberated would not be usable space. If the amphitheatre is converted into a lecture room on the ground floor, more space will be liberated for storage which is not needed.

4. Elevators. The additional passenger elevator is desirable but not indispensable. I would agree to eliminate this, but suggest that space be left so that an elevator could be added at a later time, particularly if an addition should be made to the building.

5. Accommodations for patients. In the original estimate three floors were given over to patients, not two, as you suggest in your paragraph on this subject. The fourth and fifth floors were for sixteen public patients each, and the sixth floor for five private and six semi-private patients. The original estimate was therefore for thirty-two public beds, five private and six semi-private beds, as against a present proposed accommodation for thirty-two public beds, ten private and six semi-private beds. If it is the desire of the Hospital authorities, we would be willing to have the five additional private rooms closed for an indefinite period.

In order to avoid having any private patients in the Institute, I suggested building the Institute immediately back of the Ross Memorial Pavilion, with a direct entrance into the Ross and an entrance by tunnel into the Ross tunnel. Mr. Chenoweth however informed me that this did not meet with Sir Herbert Holt's approval because of other plans which had been made for that ground. The further the Institute is removed from the rest of the Hospital, the more necessary it becomes to increase the number of patients in it. The building site for which we drew up our estimates was directly over the Ross tunnel.

6. Physical Re-education. This term describes the special training exercises which are given to paralyzed patients. We have made no provision for finishing or equipping this room. The name was merely placed in an undeveloped basement space. You may consider this struck out. The time will come, as "medical neurology" develops, that this will become a necessary adjunct.

It seemed altogether wise to excavate the whole basement, but it need not be developed and need not be equipped. It may be called undeveloped storage space if you prefer.

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The squash-racquet court is an entirely different matter. I feel that it is essential as the research fellows are most important in the whole scheme of the things. The Institute would be supplying a defect in the Hospital equipment by providing one, and inasmuch as it can be placed in space adjacent to the elevator machine room, I feel that it would be a great mistake not to include it, particularly as it does not displace any scientific activity. This was included in the original plans and was heartily approved by Dr. Gregg.

7. Operating space. The necessity for increase of operating space is, of course, obvious because of the distant location of the Institute from the main operating room. This represents a considerable increase in space. I believe, however, that we have reduced the amount of space given over to this activity to a minimum.

Another thing which you do not mention is the fact that the rooms in the original plan were in general smaller than the corresponding rooms in the eventual plans. I am afraid I shall have to take the blame for this. It was apparently due to the effect upon me of living and working in the tiny subdivided laboratories which we at present inhabit. Mature consideration made it evident to Mr. Macdonald and myself that the rooms were planned too small. This was all the more evident during our trip to other Institutions. The rooms at present are still considerably smaller than those found in other institutions used for similar purposes.

8. Architect and engineer's fees. I was given to understand that such fees were included in the estimate. You mention the fact that in our statement to the Rockefeller Foundation, architect's fees are stated to be included. You will also find in the statement prepared by Mr. Chenoweth for the special meeting of the board of governors of the Royal Victoria Hospital for November 26th 1931, that the statement is made on the first page that "a architect and engineer's fees are included in the figures received from Ross and Macdonald." Mr. Macdonald agrees to this now, I believe.

In considering the item of \$27,900.00 for covered passageway as an additional figure, would it not be fair to check against this the items of tunnel work, \$12,720.00, and road work, \$4,240.00 which appear in the original estimate.

In my opinion we could hardly go to the Rockefeller

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Foundation for any additional sums at the present time. I am quite sure, after discussing the matter with Mr. Macdonald that it will be possible to reduce the costs to the original figure. I have proposed material decrease in the size of the floor used for the animal experimentation, if necessary, and also a reduction in the number of rooms for Fellows' quarters from eight to the original number of five. Further changes can be made in the basement as well.

Yours respectfully,

WGP/MD