

Ruth Lilly Special Collections and Archives

Oral History Interview

**with
Jessie Groves**

**Conducted by
Jeannette Morrow Matthew
University Archivist**

**on
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TAPE ONE, SIDE ONE

Matthews: Jessie Groves, September 22, 1975, originally she came to the medical center but her early life and her journey to become a nurse is quite interesting. Miss Groves would you enumerate how you became a nurse?

Groves: After leaving high school in my junior year I went to Crawfordsville, the L.L. Crawford Union High School Training School for Nurses and which had a 3-year course and completed my three years training there. Do you want me to tell anything about the . . . Which consisted of lectures and class work by the doctors and by the superintendent of nurses which it was called then, it was a small school. Then at the completion of this training I went to the university, Indiana University School of Nursing, which was opened in June 1915, no 1914. And at that time they were giving what they called it was more like a general duty course, but we were allowed and did attend the classes and I was there for 6 months, 4 months in the operating room and 2 months on the medical and surgical wards. At the end of that time I come back to Crawfordsville and returned then to the Indiana University on June 28, 1915, where I was to relieve the night supervisor at Long for one month's vacation when she married Dr. Molt. I always felt that I got the best of the bargain. And I retained that position for 2 years at a salary of 50 dollars a month with general duty nurses on the wards and an occasional student nurse. At that time we didn't have too many student nurses. I went on duty at 7 o'clock and was off at 7 o'clock. I had one evening a week, Saturday evening until midnight.

Matthews: You worked seven days a week.

Groves: Yes, six and a half days a week, and umm I worked for one year without a vacation or a night off. At that time we had one month's vacation. And I had a month's vacation at the end of my year. And the next, then I completed another year before I had a vacation. And I had one night off on Christmas Eve on in my second year that Miss Funk who was then the operating room supervisor who lived in Maryland and she couldn't go home so she worked the night for me and I had that night off. Then I left my next position at the university was head nurse on the female wards, which included surgical, medical, and obstetrical . . . nursing. I had that position for one year and at the end of that year, Miss Funk left and I took the operating rooms, as supervisor of the operating rooms for sixty dollars a month. Did I mention my salary as?

Matthews: Yes. And who was then the dean of the school of medicine?

Groves: Emerson, Emerson was the name of the medical school and Gatch was the head of surgery. And Dr. Barnhill was head of ENT, J. F. Barnhill. Dr. Oliver was head of orthopedics. Dr. Morrison was the head of eye.

Matthews: And who was the head of medicine?

Groves: Emerson was the head of medicine, he was dean of the school and head of medicine. And Dr. Frank Wynn was professor of medicine. Dr. Burkhardt was the head of, Dr. Louie Burkhardt, was the head of obstetrics.

Matthew: Who was orthopedics person?

Groves: That was Dr. Oliver. Dr. Wishard was head of urology. . . . I can't think if there were anymore.

Matthew: Who was supervisor of nursing?

Groves: The first year, the first from the . . .from November until November 1915 until the first of July or the last of June . . .November 1914 to the last of June 1915, Miss Fitzgerald was the director of nursing, the school of nursing, and her assistants was Miss Inman and Miss Bailey, was instructor of nursing. And Miss Roser, I don't know her last name, but she done the drugs, the drug room came under the

Matthew: Where was the drug room?

Groves: It was on the third floor.

Matthew: of?

Groves: of Long. There was a little room just across from what was then the delivery room that we had the drugs in.

Matthew: Who was the head Pharmacist? We have a picture that we would like to find out who the pharmacist is?

Groves: Well, we had no pharmacist at that time. Well, on the second floor was the laboratory.

Matthew: Now you are in the operating rooms at this time. What procedures are different now then then? Science has made great advancements today.

Groves: Alright we made all of our dressings, all of our sponges, and all of our applicators. We cut our gauzes with scissors. We had a suction machine for the ENT. We had the gas machine for anesthetics. We had cauteries. We made our own intravenous solutions, our normal saline, we all made that from our distilled water and we had a still in the operating room, eer, the work room and we made and sterilize all intravenous that was given. That was in the beginning. Then we finally got an electric gauze cutter, and we had what we call then maids that helped us with the dressing. And during the war, this was Second World War though; some of the married graduate nurses come in and helped us tighten our dressing in the ward, when we were so short on personnel.

Matthew: Was Dr. Gatch the person with whom you worked in surgery?

Groves: Yes, and Oliver, of course I worked with all of them, but he was the head of surgery. There was the exception that two or three years there where he was not there, and Dr. Oliver was the head then.

Matthew: I see. As a nurse in surgery, what procedures did you use to help the nurses or your assistants to do a good job?

Groves: Well, I . . . we had a class or a session every morning that brought up the different diseases that we were going to work with and their pathology, symptoms, and development, and procedure, and then I wrote procedures for all the different operations, and all the procedures that we would use in the operating room and we had practice sessions, for we went through the operations just for information. And then I had books made for all the departments with pictures of the different setups, and it took some time to do all of that. And as you change doctors, your procedure changed.

Matthew: How about the instruments that were used in surgery?

Groves: Well the instruments that were used in surgery were furnished by the university, and we were responsible for the condition of the instruments, the repair of the instruments, I mean see if they were repaired and kept in good condition, and for the sterilization of it.

Matthew: You did the sterilization?

Groves: Yes, we've done the sterilization of everything. And we saw that everything was kept, and we had an orderly, and a maid. And as the department grew, we had a department for the supplies. We furnished the dressings for the wards, the sterile dressings, we done all of that, we made all of those, and for now they have for central supplies.

Matthew: You mention that you put the instruments on the tray when we were talking previously, to help the nurses that came in.

Groves: Well we had a tray in the operating room that was the instrument tray. We also had a reserve table. Well the nurse that was going to help the doctor had her procedure for preparation of her hands and her gown and her mask and her head covering, and then she had what we call, drums, that we opened and they had different . . . one had gowns, one had towels, one had supply for all sponges and things like that, then she would drape her tables, first they all had to be clean, and then she would drape her tables and put out all her supplies and then get her instruments from the sterilizer, and put them on the reserve table, and on the tray that went over the patient . . . then when the patient come in she was responsible for helping drape the patient, furnishing the materials, and the doctor would help her drape the patient, prepare the skin, drape the patient . . . the doctor prepared the skin. She didn't because she was glove-handed but the nurse, there was

always a circulating nurse, as we called her, who waited upon those that she waited on those who were already scrubbed and could not touch anything and then she proceeded to hand him the instruments, see that he had the sponges, see that he had the suture material on the proper needle, and so forth until it was. Then the circulating nurse helped with the anesthetic. She was responsible for all sponges that dropped on the floor or dropped in the basement and the two of the nurses were responsible for the sponge count.

Matthew: You, to make it easier for some of those you arranged the instruments on the tray, did you not?

Groves: Mmh Mmh

Matthew: And this was . . . inservice teaching you were given.

Groves: Yes, and in the beginning we didn't have students for awhile, you see, until . . . for the first . . . because we didn't have the students and we had general duty nurse but then as students come along Why I would have a graduate scrub with a student until she was ready to be on her own.

Matthew: Supervised teaching right from the start.

Groves: Yes. She never would take a case just on her own and she started with minor surgery, what we called then minor surgery which was tonsillectomy and small operations and then advanced to big operations.

Matthew: You were at the medical center thirty five years, am I right - correct.

Groves: Yes.

Matthew: Well you saw Ball Residence built.

Groves: Oh yes. There were only first and second cottages when I . . .

Matthew: Where were those cottages?

Groves: They were on Michigan Street.

Matthew: About where on Michigan, what's standing there now, do you know or can you recall?

Groves: Is . . . Where is Hiawatha Street now, is it taken in to the . . .

Matthew: No it's still there, but it's sort of hidden I think.

Groves: Well is it in the back of General then?

Matthew: Possibly so, I've seen it when I've been driving.

Groves: Well . . . maybe it's up that far, maybe isn't, but that was where second cottage was

Matthew: Oh it was in the radius of the Center.

Grove: Oh yes there was,

Matthew: What did they call cottages where the nurses stayed downtown.

Groves: Oh that was fourth cottage, and third cottage, then first cottage was just a . . well . . it's just east of the driveway there that goes into Long, on Michigan the first and second cottages and then third cottage was back on, is there North Street back there?

Matthew: Yes

Groves: Back of North Street

Matthew: Yes.

Groves: Back of Long.

Matthew: Now they had an old jitney, was that used for just for the ones that were downtown? Or did the nurses get hauled around from all the cottages in that jitney?

Groves: No, no, just for the ones that lived downtown.

Matthew: Was it a pretty big dormitory so to speak downtown?

Groves: Not any bigger than the others, it was a big house.

Matthew: There's just one cottage that's still standing.

Groves: Well now that is the Stucco Building

Matthew: Yes

Groves: That was built after.

Matthew: Oh, none of the cottages are still in existence?

Groves: No.

Matthew: What type of costume do you nurses wear at that time? They were long-skirted and . . .

Groves: Do you mean in the operating room?

Matthew: Yes

Groves: Well we wore gowns just a straight gown . . .

Matthew: Scrub gown or whatever they called it.

Groves: Well no we had a gown that went over that. This was just a straight dress, you know, with a tie on it.

Matthew: Were they different colored like white? Where was the operating room at the time you speak of?

Groves: It was on the 4th floor of Long.

Matthew: Did it cover a great deal of space, a whole wing?

Groves: It covered the north wing and across from the elevator was one room there that the interns' quarters. They lived there.

Matthew: Who were some of the interns during those days?

Groves: In the beginning?

Matthew: Yes.

Groves: The first intern I met there was Laurel Lingeman when I went to the university and he was later an ENT man, he went in . . . and Bob Moore, Robert Moore, those were two of the first two interns that I knew, Robert Moore was a heart specialist eventually.

Matthew: Was Dr. Ritchie was in that period?

Groves: I think he's in 1918, it tells us there on some of the pictures.

Matthew: Oh I see

Groves: yes he was in 1918 I believe. An then there was . . .before him was Dr. Kime Edward Kime, and Dr. Ullrich, Dr. Kent, and . . .

Matthew: And Dr. Wynn's son, would he have been in that?

Groves: Yes, he was the head of that. Was Dr. Kim there? Dr. Gardner I think was the head of that.

Matthew: That's the residency?

Groves: Yes, no, that was the interns, Gardner was an intern. I have sent a great deal of my things about the Wynns to Barbara, Jim's wife and the granddaughter.

Matthew: Where do they live?

Groves: They live in California, in San Diego, I have their address.

Matthew: Now . . . Over the years that you were in the operating rooms, how many different deans were there for the school of medicine, could you name them?

Groves: There was Emerson, Oliver, no, no, Emerson and Gatch and Van Nuys

Matthew: Now back to the school of nursing. In your early days when you decided to become a nurse what were some of the endeavors that you had, goals that you had to reach in order to enter the school or a program of nursing. You were a graduate of I.U., were you?

Groves: No. Not ever.

Matthew: Okay. Now take it back to the time when you were high school.

Groves: I left high school my junior year.

Matthew: From what high school?

Groves: Waynetown, and after entering as a nursing position at the medical center I saw the need of finishing my high school. The Waynetown High School was not accredited. So therefore I would not be eligible to enter the university so I picked up that, those credits later through night school and equivalency examinations.

Matthew: Where did you go to night school? By mail?

Groves: No. No, no they had for certain things, they had, the board, had classes and I can't . . . it was in one of the schools. Night classes, I done all this at night.

Matthew: Was that in this town or Crawfordsville?

Groves: No, no Indianapolis. That was after I went to IU. Then Extension was Indiana University Extension was there in Indianapolis, you see, and we, all of us started going to Extension, We took courses. I took English, History and Dr. Simbar come up from Indiana University and taught English to the students and we were allowed to take classes

through him in English and his was English composition. And then I had 5 hours in history, and Chemistry 10 hours, and head nursing, supervision and there was something else . . . Psychology.

Matthew: Did you have to take Anatomy?

Groves: No, I already had anatomy in my school curriculum. See we had all the nursing essentials like . . .well obstetrics, surgical nursing, orthopedics, the basics, we had all the basics but this was graduate nursing. And I accumulated 60 credits while I was going to night school. All of this was night school.

Matthew: Was your night school at IU?

Groves: At IU. We went downtown to a night school.

Matthew: Where was that building? There on Michigan? The Downtown Campus?

Groves: The downtown campus.

Matthew: Who taught you when you took Chemistry you say?

Groves: I can't tell you the . . .

Matthew: Was it Dr. Welshman? Or Welcher?

Groves: I can't remember the name. It was 10 hours and we found it difficult. Mary Heckard and I decided to do this together and that was after they put Chemistry in the basic nursing program see. We thought if they were going to have in the basic nursing we should take it. Well, we found it difficult in the beginning but Dr. Greist, you know Dr. John Greist, well he was a resident and he told us he would coach us. So we would both get Bs out of our Chemistry due to Dr. Greist. And he was . . . he said give him a good review. Well he coached us every week.

Matthew: Well that another precious little name that we do not have these days too much. Now Mary Heckard, was she at Riley at the time you were first?

Groves: No she was a student.

Matthew: She was a student as you were?

Groves: As I was. No, no she was . . . you mean at that time. She was . . . when we were taking Chemistry? I don't remember is she was at Riley or where she was on third floor. She had charge of the private floor before she went to Riley.

Matthew: I see.

Groves: And . . . I think it was after that. She was Riley when she took that.

Matthew: Looking back over it what was some of the rewards that you feel being a nurse was important to you? That nursing today possibly does not always have the same opportunity. For instance, were you close to the patient?

Groves: We were very close to the patients. I remember, especially, a professor, a French professor who died. I stayed with him the night, or practically the night when I was night supervisor. And I felt I meant a great deal to him during his exit out of this world. We were close to people and we were close to one another. And I sure felt that well the service as a whole was rewarding. The service you were giving. And I felt even if you were not as close to a patient in the operating room service, you were of great service and you got through without, if you were helpful in getting this patient through their ordeal.

Matthew: As an operating room nurse, did you find any team work among your colleagues?

Groves: Oh yes and there was

END OF TAPE ONE SIDE ONE

TAPE ONE SIDE TWO

Groves: Oh yes, and there was a loyalty there that was very rewarding.

Matthew: How many years were you in the operating room?

Groves: Thirty.

Matthew: Thirty. Then after you retired. Well you mentioned that on your 25th anniversary did they have a party or something for you?

Groves: Yes, I have a book.

Matthew: We can get it later.

Groves: Okay but that was in 1940 and that was a very rewarding experience too. It was complete surprise.

Matthew: It was!

Groves: A complete surprise by Miss Hoeflin.

Matthew: Miss Hoeflin. Oh mentioning her name. Did the school work very closely with the hospital in teaching its students at that time?

Groves: Yes.

Matthew: Was there so much clinical experience required as there is today? Of course the degree is different today.

Groves: Well they had more clinical experience with patients than they have today. They were on the wards more. They had more responsibility and if a head nurse did not have an assistant and she was off-duty, well the student was able to fill in and that gave her some experience to.

Matthew: Uh hm.

Groves: After the Clinical Building opened and after Miss Hoeflin came back.

Matthew: UH hm

Groves: I had an assistant in Riley operating rooms and 2 assistants in Long and ran both operating rooms. That is the procedures were the same in both operating rooms and the classes were the same. And I don't know how it is run now but then that is . . .

Matthew: What was the reason for building the Clinical Building as you saw it? When it went up it was in your era? Did you need it?

Groves: Oh yes

Matthew: Why?

Groves: They needed it for clinics if nothing else. Their outpatient department was growing so big that there was no space in Long Hospital for anything like that . And of course, when Riley opened the dining rooms and the kitchens all went over to Riley but yes I felt there was a need and there was a need for more patients, they needed for teaching purposes.

Matthew: You are in the era too of the epidemics – the polio epidemic for instance.

Groves: Well I didn't have too much to do with that.

Matthew: No but it was in that

Groves: But it was in that Rotary and the orthopedic department at Long was very . . . active in that field and Dr. Carl Martz could tell you a lot about that.

Matthew: Okay.

Groves: He was in the middle of that.

Matthew: There in history that I have a read there's a mention of it but it may have been before you there is a mention of a black plaque. What was it? Did you ever hear anyone say?

Groves: I heard of the Black Plaque but it was not my . . .

Matthew: There is a stone near the campus. I don't know where it is located now but mentions it. When the medical center was first planned it occurred within that era, back when Long was built or shortly before that.

Groves: Well I was not there until after Long was opened.

Matthew: And you were

Groves: When I arrived Long, at the University. There was only the two cottages, first and second, and Long Hospital built and that was all. No medical school.

Matthew: Did they have any roads or was it mostly paths or what?

Groves: No, they had drives. They had Long.

Matthew: Barnhill Drive is one I think we have today.

Groves: Well yes, that is just back of Long, I believe.

Matthew: How about the walks? Did they have cement walks?

Groves: Yes, they had cement walks and they had walks past the first and second cottage.

Matthew: Uhhh What kind of city transportation did you have? You had jitneys.

Groves: We had bus that passed along, no, it was trolley car, trolley car, not a bus, trolley car that passed, oh I would say, every hour, going both ways on Michigan Street and 6 tokens for a quarter.

Matthew: Oh my. Now to Dr. Gatch. You worked with him. Could you describe your impressions of the gentleman. He was a very remarkable man from what I gathered. Give your opinion of him.

Groves: [inadible – end of recording]

END TAPE ONE SIDE TWO (not only recorded for 7:09 minutes.)

TAPE TWO SIDE ONE

Groves: As a teenager, I would say thirteen years old or fourteen, I had an aunt that was in Fletcher Center Sanitorium. She was in the sanitorium for a couple months and brought a nurse home with her for the summer. And this nurse was an influence and my being interested in nursing as a career. I entered Crawford Hospital in Montgomery County and obtained a diploma in nursing. Edna Opry who was with nursing registration at that time was . . . influenced me to go to Indiana University to take some post-graduate work which I did for six months. After my post-graduate work in June 1915 I become the night supervisor and for the next sixteen years my professional progress was dominated by Mrs. Ethel P. Clarke who was very influential

Matthew: She was director of . . .

Groves: She was director of nursing at the school at that time for those years. And then after she left Cordelia Hoeflin. I worked with her for . . . for I think about twelve years and maybe a little longer. She and I worked together very closely and she dominated some of my activities. And I was active in the Indiana State Nurses Association and the League of Nursing Education. I was secretary for the League for 4 years and treasurer of the Indiana State Nurses Association for 12 years.

Matthew: We haven't touched on the routine of the nurses at that era. How many hours did you work on the wards? How many hours a day?

Groves: Ten. We had a ½ day off each week which started at 1:00 o'clock. And let's see, we worked a 60 hours week, ½ day on Sunday we had.

Matthew: How about private duty nurses? What was their schedule?

Groves: Their schedule was a 20-hour day at that time. They were on with the patient for 20 hours and off from 1 to 5 in the afternoon, relieved, to give some private time with the family.

Matthew: How many days a week did they work?

Groves: Seven.

Matthew: What was their rate of? What was the cost for them?

Groves: When I became a nurse, first out of the school, it was \$25 a week.

Matthew: Well we have touched on many phases of history, what is your philosophy about nursing? What is most important to you in nurse practice?

Groves: Well, the patient is the most important and I think it is important that we keep up on all the new procedures and the progress that is being made. In my time we did not have all the mechanics that they have now. For example, we had no monitors for the

heart, we had no . . . devices that helped. It had to be. Of course, we had blood pressure and they had things like that but we did not have all the mechanics that they have now. They did not have . . . oxygen. We had oxygen machines later on in my career but we did not have them piped in like they have now. But I think it is important to alleviate your patient's fears and to be honest with your patient. And honesty is a great asset for a nurse. Anybody that is not honest does not have any business being in the profession. And I think it is important that . . . we know something of the family and what is influencing the patient . . . in many cases. Of course, there is a lot of testing going on now that we did not have . . . such as arteriograms, brain scans and all that. We did not have those things.

Matthew: When you were on duty what were . . . what was the nurse allowed to do for the patient that has changed a great deal today.

Groves: Well we were not allowed to do intravenouses, draw blood, or any of those kinds of things which they are allowed to do now. They give the intravenouses. The doctors gave the intravenous, we watched the intravenous but they didn't take blood pressure in those days, in the beginning.

Matthew: Did they do temperatures?

Groves: Oh yes, they did temperatures and all the treatments such as enemas and douches and all that kind of thing – all the treatments. They did not give intravenous at that time. And . . .

Matthew: And I suppose they drew the line in that you made no incisions?

Groves: No we did not make any incision.

Matthew: What would you say about looking back over your career? Would you trade it?

Groves: No, no I would not trade my career for anybody. I have enjoyed it. It has been hard. I have worked hard and I . . . there are things I would change but not in great . . .

Matthew: What is the reward?

Groves: The reward is looking back at what I feel is a job well done. And my reward is the people that I have associated with and the service that I have been given – able to give people.

Matthew: Well I thank you very much for helping us build our Archives.

END OF TAPE TWO SIDE ONE