Hospital for Joint Diseases
1905 – 2005
The Hospital for Joint Diseases came into existence shortly after the turn of the Twentieth Century, at a time when advances in technology, medicine, and sociopolitical thought were on the verge of transforming every aspect of society. The years leading up to and including 1905 witnessed extraordinary events, including the first heavier-than-air flight and the publication of Einstein’s Special Theory of Relativity. Orthopaedics was poised to emerge from general practice into a medical and surgical specialty.

New York was spilling over with the frenetic energy of waves of newly arriving immigrants. The family of the founders of the Hospital for Joint Diseases, the brothers Henry and Herman Frauenthal, had arrived from Germany half-a-century before, in 1849, settling in Wilkes-Barre, Pennsylvania. Henry and Herman were the sons of Samuel and Henrietta Lowenstein Frauenthal. Like their father Samuel, a shoemaker, they strived to become part of the fabric of a country as it invented itself.

The brothers Frauenthal both attended Lehigh University in Bethlehem, Pennsylvania. Henry joined the football team and took a degree in analytical chemistry in 1886, while Herman majored in electrical engineering and graduated two years later. Henry went on to attend Bellevue Hospital Medical College in New York City, graduating in 1890. In June of that same year he became assistant to Lewis Albert Sayre, M.D., New York’s most prominent orthopaedic surgeon and Bellevue’s Chairman of Orthopaedics—in fact, the first Chairman and Professor of Orthopaedics in the United States. Henry remained at Sayre’s side for 11 years and later worked as well with Reginald Hall Sayre, M.D., who succeeded his father as Chair. Herman Frauenthal followed his brother to Bellevue’s medical school and graduated in 1897.

In 1891, Herman married a socially prominent New Yorker, Minnie Rothschild (1874-1933), who later dedicated herself to guiding the Hospital’s Ladies’ Auxiliary. Minnie Rothschild’s older brother, Louis F. Rothschild (1874-1933), who later dedicated herself to guiding the Hospital’s Ladies’ Auxiliary. Minnie Rothschild’s older brother, Louis F. Rothschild, founded the Wall Street
brokerage firm of L. F. Rothschild, would become the Hospital for Joint Diseases' first Treasurer, remaining in that position until his death. Henry Frauenthal had new ideas about orthopaedics and about the type of new orthopaedic hospital that was needed, ideas that he had formulated during his assistantship with Lewis Sayre and during his many visits to hospitals around the city, and in 1904 he established an orthopaedic clinic at 588 Lexington Avenue and 50th Street. (Members of the Frauenthal family today recollect that the clinic was a Rothschild home, remodeled as a dispensary.) The clinic could be considered a "feasibility study" for the Hospital-to-be.

On October 18, 1905, a charter was granted by the New York State Board of Charities to the Jewish Hospital for Deformities and Joint Diseases. Two months later, at the offices of the Frauenthals' private practice on Lexington Avenue at 61st Street, the Hospital's Directors—less Board of Trustees members were called—elected as their President Emanuel M. Gattle (1856-1933), the owner of a large Fifth Avenue jewelry store. Henry W. Frauenthal, AC, MD was to be Physician-in-Chief; he was also a Director. Herman C. Frauenthal, EE, MD was to share duties with his brother as Chief of Clinic and was also Director of Visiting Orthopaedic Surgeons and of the Electrical Department. Among the Hospital's first advisors and consulting staff were Reginald Sayre, MD, Professor and Chair of Orthopaedic Surgery at Bellevue Hospital Medical College, and Abraham Jacobi, MD, who came to be heralded as the "Father of Pediatrics" in America and was also known as the "foster father" of the Hospital. On November 4, 1906, the new Hospital opened its doors in a remodeled three-story brownstone at 1917 Madison Avenue between 123rd and 124th Streets across from Mount Morris Park in Harlem. The building had been purchased for $18,500 and remodeled to accommodate seven beds. The Hospital's original mission was to treat and conduct research in acute and chronic joint conditions in children and adults, with an emphasis on new types of treatment. The decision to accept chronic patients into the wards was innovative and diverged from the general hospital practice of the day. Within six months, the building next door to the north, 1919 Madison Avenue, was added to the Hospital. By then the Hospital's name had been slightly altered—something that would happen several times over the next century—to the Hospital for Deformities and Joint Diseases. By year's end, the Hospital's Dispensary (outpatient clinic) had treated over 1,200 patients and provided approximately 9,500 treatments. One of its first Attending Orthopaedic Surgeons was Harry Finkelstein, MD famous for the Finkelstein test in de Quervain's tenosynovitis. Finkelstein was
The Fruehenthal Family

The Fruehenthal family, central to the founding and early years of the Hospital for Joint Diseases, have in fact been involved in its operations and activities throughout its history. When Henry W. Fruehenthal (1862-1937) and Herman C. Fruehenthal (1866-1942) founded the Hospital in 1905, they assumed its chief medical duties. Herman’s children, Marian and Herman, Jr., continued the tradition: Herman C. Fruehenthal, Jr., a financial analyst and broker, served as a Trustee from 1940 until his death in 1976, 29 of those years as Board Secretary. Herman Jr.’s older sister, Marian Fruehenthal Sloane, MD (1904-1940), Herman Jr.’s older sister, graduated from Smith College (1926) and New York University School of Medicine (1930), served her residency at the Hospital for Joint Diseases, and became an attending orthopaedic surgeon there as the first woman in New York State practicing orthopaedic surgery. She was also a Fellow of the American Medical Association and a recipient of the Henry W. Fruehenthal Travel Scholarship (1933-1934), studying in Europe. Marian and her husband, David Sloane, MD (who had also completed a Hospital residency), shared a surgical practice before her untimely death at age 35. Their elder daughter Hermine Patricia Sloane (1934-2001) wrote a memoir of the Fruehenthal family that is the source of much of this information. Their younger daughter, Elaine Sloane Roemer, was an important pediatric patient: at 4 years of age, she became seriously ill with spinal meningitis and was successfully treated with sulfur.

Minnie Rothschild Fruehenthal, wife of Herman and President of the Ladies Auxiliary from 1912 until her death in 1933. Photo circa 1925.

Marian Fruehenthal Sloane, Herman Fruehenthal’s daughter, the first female orthopaedic surgeon licensed to practice in New York State. Photo circa 1935.
On One Hundred Years of Excellence

The expanded Hospital, which by 1930 included the numbers 1915, 1917, and 1919 Madison Avenue.

1914 Dispensary was the largest of its kind in the country and included long-awaited pathology, bacteriology, and chemistry laboratories, ensuring that every type of focal infection could be investigated.

The Dispensary offered spacious accommodations for treatment areas, laboratories, and surgical suites:

1. The first floor had an assembly-type waiting room, a drug department and rooms for applying plaster splints and jackets:
2. The second floor contained examination rooms;
3. The third floor had rooms for treatments of massage and electricity for polo;
4. The fourth floor was for Zander treatments (passive mechanical motion) for stiffened joints and feet and “bakers” for chronic joints;
5. The fifth floor contained rooms with mirrored walls for exercises devoted to muscle education for spinal curvature, paralysis, and other joint stiffening, nerve transfers, and nerve shortening, muscle and tendon transfers for paralysis.
6. The top floor contained the new suite of laboratories for bacteriology, and chemistry laboratories, ensuring the country and included long-awaited pathology, and the X-ray Department, plaster grafting.
7. The bottom floor had rooms for interviewing patients, the Hospital was being heated by fur
8. The second floor contained examination rooms;
9. The third floor had rooms for treatments of massage and electricity for polo.

The profusion of patients afflicted with infantile paralysis in New York City placed great demands on the Hospital's resources. Henry Frauenthal's first report as Physician and Surgeon-in-Chief reflects his concern and his commitment to the Hospital's closely directed treatments, which included (1) massage and passive movement; (2) galvanic and faradic electricity treatments with sinusoidal and high-frequency currents for muscular atrophy; (3) children over three years saw a teacher of Physical Culture, for mind-body exercises to improve brain functions, terminal nerve supply, and increase muscle strength; and (4) breathing exercises to address diaphragmatic paralysis.

While the overwhelming majority of polio patients received nonoperative treatment, between 1907 and 1908 the hospital performed 120 surgeries, such as, tendon lengthenings/shortenings, muscle and tendon transfers for joint stiffening, nerve transfers, and nerve grafting.

The Hospital’s treatments were described in Annual Reports and, in 1914 publication, A Manual of Infantile Paralysis, by Henry W. Frauenthal and Jacollm Van Vliet Manning. The book was a compendium of all that was known about polio treatment at the time and included the Hospital’s experience with 3,000 cases. It received worldwide attention and was considered a classic of infantile paralysis literature.

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The Hospital’s resources to their limits; 25% of the ac
tive staff, both physicians and nurses, were called
up to active military service. In addition, the feder
al government requested Hospital staff to instruct
army surgeons in bedside and outpatient ortho-
paedic care. The Dispensary, particularly, with its
large numbers of presenting cases, was ideal for
training in the principles and construction of ortho-
paedic appliances. A Red Cross unit met at the
Hospital regularly, knitting over 2,000 garments
for soldiers overseas.

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The new hospital building, on the original site, dedicated and opened October 5, 1924.

I have hopes for the development in our hos- pital, of a laboratory devoted to a system- atic and concentrated study of diseases of bone. The field is a vast one, the possibilities for adding to our knowledge are unlimited.

In 1925, Alfred M. Heinsheimer, the brother of Henry Frauenthal's wife Clara, bequeathed to the Hospital once again. In 1925, the Hospital operated a night clinic for the first time, making it easier for working fami- lies to seek and receive treatment. Approximately 20,057 new Dispensary patients were treated during that year, 4,000 more than in 1924. Previously, the greatest annual number of surgeries performed in the Hospital had been 599; in the first year of the new building, that number jumped to 2,017.

Between 1919 and 1925, physicians who had been appointed by Henry Frauenthal and whose names are fondly remembered to this day began to appear regularly on Hospital and Dispensary rosters, including Leo Mayer, Samuel Jahss, and Henry Jaffe, who later honored Frauenthal by dedic- ating to him his 1972 Metabolic, Degenerative, and Inflammatory Diseases of Bones and Joints. As the Hospital evolved to include the exigencies of the community and the size of the staff increased, the Hospital changed its name, yet again, to Hospital for Joint Diseases and Medi- cal Center. This represented a broad expansion of services and objectives in response to conditions that would resurface in the 1970s and redefine the Hospital once again.

At the quarter-mark of the Twentieth Century, the Hospital Board elected its third President, Frederick Brown. Brown's inaugural address at the Hospital's 50th anniversary ceremonies on October 5, 1924, no fewer than 16 speeches were made. The Hospital conducted an open house, inviting the public into its new home, including its dazzling new surgical and laboratory facilities. Dr. Reginald Sayre spoke of his father, Dr. Lewis Sayre, America's first Ortho- paedic Chair.

In short, every field of specialism is required for adding to our knowledge are unlimited.

Funding orthopaedic basic research had been dif- ficult, but greater things were now expected. In 1924, the Board hired Henry L. Jaffe, MD as Di- rector of the Department of Pathology and Labo- ratories. Jaffe, a doctor who would achieve great distinction in orthopaedics and pathology, wrote in his first Report to the Board and Attendees:

“Ladies of the Surgical Dressing Department.” Photo mid-1920s.

“A Section of Female Department, showing Carbon Arc Light and Portable Teletherm.” Photo mid-1920s.

“A Section of Male Department, showing Mercury Vapor Quartz Light and Water Center Kromine Dis- pensary.” Photo mid-1920s.

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try Home” in Far Rockaway, which opened in 1925 and the Bodansky unit measuring a specific quantity and joint disease. The next year Jaffe hired Aaron endowment was meant to support a well-armed university and, more recently, Stanford University. The teriologist John E. Blair, PhD from Brown Univer- nable backgrounds: the chemist Anna Mus-...
In the wake of the death of the Hospital's found- er and guiding light Henry Frauenthal, MD in 1927, no simple solution had presented itself to the problem of how to structure a new leadership. Eventually it was decided to organize Orthopaedic Surgery around four independent Services, each with a Chief and staff of Associates, Adjuncts, and Clinical Assistants. The first four Service Chiefs in this new era were Harry Finkelstein, MD, Leo M. Kleinberg, MD, Henry Milch, MD, Harry D. Sonnenschein, MD, Samuel A. Jahss, MD, Emanuel B. Kaplan, MD, and quintessential volunteer Minnie Rothschild, who traveled to Dresden to study with Professor Georg Schmorl at the Institute of Pathology of the Krankenhaus der Friedrichstädter and continued his cadaveric arthroscopic studies. Burman returned to write his classic 1931 paper “Arthroscopy, or Direct Visualization of Joints: An Experimental Cadaver Study,” for the Journal of Bone and Joint Surgery. He continued his work at the Hospital on arthroscopic examination of joints with Henry Finkelstein, Leo Mayer, and Charles J. Sutro, publishing classic articles from 1931 to 1936. In 1931, Sidney Bernstein, MD (Resident class of 1931) was named the 1931-1932 Frauenthal Travel Scholarship recipient, the same year Edward Haboush and Charles J. Suto also were or- thopaedic residents. The Medical Advisory Board that had been established in 1929 had a new President, Leo Mayer, MD. In his 1931 address to the Board, Mayer praised the original organization of the Hospital that “pioneered hands on with the branches of medicine and surgery” as an orthopaedic ideal. Mayer's address set the tone for the Hospital's belated twenty-fifth anniversary celebration the next year. The Hospital’s twenty-fifth anniversary had come and gone in 1930 without official celebra- tion. Whatever the reason—perhaps the Depres- sion (although charitable contributions from New York’s wealthiest had not diminished)—in 1932 the Hospital made up for it. A celebration of “Clinical Week” of lectures and case study presentations were held at the Hospital, hosted in conjunction with the New York Academy of Medicine; the first day’s presentations included cases by S. Kleinberg (reconstruction arthroplasty), J. Buchman (chronic osteosarcoma treated with maggots), I. Zadek (tendon transplantation for dorsal paralysis), L. Mayer (tendon transplantation), and H. Ranchoff (Krukenberg amputation). There was a memorable dinner at the Plaza. A silver and blue anniversa- ry dinner program that survives tells us that the Hospital's “wealthiest” (albeit spenters, not in circulation), and the dinner menu included, among other delicacies, Green Turtle Amontillado Soup and Brook Trout Belle Meuniere. The centuries-old application of maggots to clean open wounds, while in common use on the battle- field, was not seriously accepted in the clinical setting until the twentieth century. Among the pioneers in this practice were Johns Hopkins in Baltimore and the Hospital for Joint Diseases in New York. The Hospital performed research on this technology and installed a laboratory for cultivating the maggots for postoperative wound care. Joseph Buchman, Maurice Pomerantz, and John E. Blair published on the successful applica- tion and treatment of chronic osteomyelitis using maggot therapy.
Throughout the years of the Great Depression, the hospital kept pace with its goals and completed a successful long-term fund drive to complete a three-phase building and renovation plan. A large Out-Patient Department Building was constructed to extend from 123rd Street (four stories), the first floor included a modern lobby, pharmacy, of the old Dispensary, after the past Director of the Board. The building acquired the practical new name of Professional Services Building, in memory of the daughter of Board member John Polachek. The building now housed clinical services, correlating them for study and publication.

• The current six Services of the Hospital should be reduced to four, as it was now recognized that a larger number of Services prevented any new research trail; the Medical Advisory Board considered this recommendation the necessary complement to that part of its mission.

The year 1940 witnessed the inaugural issue of the Bulletin of the Hospital for Joint Diseases, whose stated purpose was to "serve as a medium for placing skeletal disease within its proper framework of medical science a whole, " at the Columbia University College of Physicians and Surgeons can gather and group cases from all Services, correlating them for study and publication. Because orthopaedic, a young specialty, was ripe for pioneering work, the Hospital should seek to cultivate and physically for its staff from among its own graduates.

It is possible that nurse shortages prompted the new dispensary, Registration booths, examining rooms, and more semiprivate and private rooms. In 1939, the Medical Advisory Board, taking stocks of changes in medicine, made the following recommendations "speaking to the future":

• A new method must be devised whereby surgeons can gather and group cases from all Services, correlating them for study and publication.

...
Society of Medicine of London.

He was named an honorary member of the Royal

on the main classics of orthopaedic pathology. In 1952, he published a book titled *Metabolic, Degenerative, and Inflammatory Diseases of Bones and Joints*, a general internship at Montefiore Hospital and a

After graduating from the New York University School of Medicine in 1920, Henry Jaffe completed a general internship at Montefiore Hospital and a surgical internship at Bellevue Hospital. At the age of 28, he left a junior position at Montefiore to become Pathologist and Director of Laboratories at the Hospital for Joint Diseases, a post he held for 40 years.

Jaffe brought unprecedented clarity and organization to the field of orthopaedic pathology, publishing over 130 articles. Two of his books, *Tumorous Conditions of the Bones and Joints* and *Pathology of the Joints*, are still in demand today. He was also a pioneer in the field of clinical and pathological translation and made significant contributions to the diagnosis of orthopaedic disease. In 1951, on the occasion of his twenty-fifth anniversary as Directors of Laboratories, the Bulletin of the Hospital for Joint Diseases published a living tribute to him, a dedicated volume of 55 essays written by those who knew and admired him. The Editor of the Bulletin, Samuel Kleinberg, MD, wrote:

**To Dr. Jaffe, pathologist and pathologist-physiologist, we are mainly centers from which light is shed on the total disease picture presented by the patient.**

When in 1964 Howard Dornman, MD succeeded Jaffe (who continued to come to the Pathology Department daily), there were two pathology fellows being trained by Jaffe: Peter Bulloughs, MD and Giannan Steiner, MD. Steiner is currently Chairman of Pathology and Laboratory Medicine at the Hospital; Bulloughs is Chief of Pathology at the Hospital for Special Surgery.

**Harry D. Sonnenschein, MD (d. 1950)**

Harry Sonnenschein actively contributed to residency training and initiated a popular lecture series for residents so well received that the talks were bound and published annually in book form. He considered this a progressive in his orthopaedic thinking and was President of the Medical Advisory Board in 1947 and 1948. In a memorial tribute printed in the Bulletin of the Hospital for Joint Diseases, he was portrayed as a physician with an intense interest in newer methods of operative treatment, a man who could bring humor to a serious discussion, and a surgeon who "uttered many wise words at the Service conferences, where he will be missed."
Leo Mayer joined the Hospital for Joint Diseases in 1924 as an Attending. At 40 years of age, he was already widely recognized as a master surgeon and well known for his surgical procedures and contributed extensively to the scientific literature. He is responsible for the surgical procedures and contributed extensively to the scientific literature. He is responsible for

Paul W. Lapidus (1893-1981)

In his lectures, which were typically standing-room-only, Dr. Mayer displayed the gift of a great teacher and oversaw, with Dr. Henry Jaffe's support, the intensification of teaching program for residents that co-ordinated the talents of the entire staff as program leader. He strongly encouraged specialization in orthopaedic specialties both existing and emerging, including selection as the Moynihan lecturer at the Hospital of Joint Diseases. The esteem in which he was held was reflected in the creation of the Leo Mayer Professorship in Orthopaedics at the Columbia University College of Physicians and Surgeons (1924) and the University of Vienna (1925-1926), and he authored the University of Iowa for his orthopaedic training (1932). Milgram had been a visiting surgeon (Adjunct at the Hospital for Joint Diseases in the 1930s under the Service of Herman Frauenthal). Jahss subsequently joined the Hospital staff and was promoted to Associate in 1929, joining the Service of Herman Frauenthal and working with Melvin Jahss. In 1930 Lapidus became an Attending and one of five Service Chiefs. Lapidus's first publication on the foot. It was also the year of Dr. Lapidus's first publication on the foot. It was also the year of

Samuel A. Jahss, MD (1891-1943)

At the invitation of Basil O'Connor, President of the National Foundation for Infantile Paralysis and later the March of Dimes, Mayer served as medical advisor on the Foundation's Committee for the Prevention and Treatment of Affar-Effects from 1939 to 1948. Large because of Dr. Mayer's involvement, the Hospital received $28,059 in Foundation grants in 1939 and 1940.

Leo Mayer, MD, FACS (1884-1972)

Samuel Jahss graduated from the College of the City of New York and Long Island College Medical School. While serving as an intern at New York's Knickerbocker Hospital, he met Lewis A. Sayre, MD, who guided him to the Hospital for Joint Diseases to become an assistant to Henry Frauenthal. Jahss subsequently joined the Hospital staff and was promoted to Associate in 1929, joining the Service of Herman Frauenthal and working with Drs. Joseph G. Wrismer and David Sloan. In 1936, he became an Attending and one of five Service Chiefs. Under Henry Jahss's tutelage, Jahss pursued a systematic study of bone pathology in the laboratory. Among his other contributions to the literature is his descriptions of two orthopaedic techniques that achieved excellent outcomes: an application of the principle of levers to compress or separate bones in pelvic fractures and a simple, effective treatment of the vast majority of proximal phalanges and metacarpals. According to a tribute in 1943 issue of the Bulletin of the Hospital for Joint Diseases residents, particularly appreciated Jahss's attention to detail and his instructional style.

Samuel A. Jahss, MD (1891-1943)

Paul W. Lapidus (1893-1981)

In his course of his distinguished career at the Hospital, Dr. Paul Lapidus earned the title "Father of Foot Surgery." Born in Russia, the son of a physician, he took his medical training at the University of Odessa (1916). On graduation, he entered the Russian Medical corps, emigrating to the United States in 1923 where he began an internship at the Hospital for Joint Diseases less than two months after arriving in the country. In 1936, as a resident, Lapidus was assigned to the Dispensary examination rooms under the supervision of Samuel Jahss. In 1930 Lapidus became an Associate Professor of Surgery and served as chief of the Foot Service—the first in the United States—in the mid-1930s. He held a professorship at New York Medical College, was a founding member of the American Orthopaedic Foot Soci-ety, and was internationally honored for his many contributions to the field of foot surgery, among them articles on hallux valgus with metatarsus primus varus, peroneal spastic flatfoot, claw hallux, and inconstant bones of the foot. Several proce-dures bear his name. His course on lesions of the foot was given in 1941 at the Politechnic Circles, repre-sented the first time a postgraduate course on the foot had been offered anywhere. At the highest respect of his colleagues during his 40-year career at the Hospi-tal. The esteem in which he was held was reflect-ed in the high quality of his clinical work and in a commemorative issue of the Bulletin of the Hospital of Joint Diseases six years after his death.

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Samuel Kleinberg was the first Editor of the Bulletin of the Hospital for Joint Diseases, and Emanuel Kaplan essentially defined the field of hand surgery, insisting for years that it be recognized as an independent specialty. The Hand Service that he organized at the Hospital was the first in New York City and made him, as Henry Marink, MD, wrote in a tribute in the Bulletin of the Hospital for Joint Diseases, “one of the patron, and the saints of every Hand Service in the world.” The New York Society for Surgery of the Hand continues to honor his efforts in the Emanuel B. Kaplan Award for an outstanding anatomical or scientific paper on the subject of his life’s interest.

To a Hospital blessed with an abundance of distinguished surgeons there came in 1950 a resident who quickly distinguished himself from the rest. Emanuel Kaplan, MD, wrote in a tribute in the Bulletin of the Hospital for Joint Diseases, “An orthopaedic surgeon is one who has unlimited patience and optimism.”

In 1952, the Hospital for the first time initiated talks with another institution, Mount Sinai Hospital, to explore the idea of establishing a formal affiliation—something the Medical Advisory Board had previously suggested as a way for the Hospital to add to its academic and teaching functions while maintaining its identity as a specialty hospital. After lengthy discussion, the Board and Hospital staff recommended against the move, the Trustees accepted their recommendation, and the negotiations were ended.

The previous four administrative Chiefs of Service had been Joseph Buchman, Henry Mith, Isadore Zadek, and Emanuel Kaplan. Hospital Executive Administrator J. J. Dolis, MD, had retired in 1951 and was ably succeeded by Abraham Rosenberg, but the challenges of an inflationary economy, staggering increases in hospital costs, shortages of both nurses and physicians, and the Hospital's need for a state-of-the-art therapy program. The answer came with a gift from the Lila Motley League and Trustees and friends of the Hospital, which provided a 2 million volt X-ray therapy machine for the cancer program. To house the unit, a two-story annex building of the Dubin Out-Patient Building, and several stories were added to the Dubin building itself. The annex was dedicated as the Lila Motley Building, and the new complex included offices, the new William Blau Lecture Hall, and educational facilities for the Helen Fuld School of Nursing.

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man), Clubfoot (C. M. Hanisch and J. Alper), Hand (E. B. Kaplan), Poliomyelitis (W. Green), Scoliosis (J. J. Graham), and Joint Orthopaedic/Neurological for the Study of Low Back Pain (A. Kaplan). There was also a newly formed Resident Clinic, operating under Milgram’s personal direction.

A report to the Medical Advisory Board by its President Joseph Buchman, MD on the eve of the Hospital’s semicentennial in 1955 expressed enthusiasm over the new operative suites in the Main Building, including their “conductive floors” (to prevent static electricity from igniting anesthesia gases), soundproof walls and ceilings, shad- owless illumination, and built-in view boxes. Buch- man gave due credit to Albert Betcher, MD, Chief of Anesthesiology, for his direction of the new recovery rooms and coordinated operations with the surgical suites, which contributed so greatly to “the patient’s comfort and the lessening of the surgeon’s burden.” Beginning in 1949, the Hospital accepted two anesthesia residents annually. Buchman’s report also mentioned the new postgradu- ate course of the Rheumatology/Arthritis Service, established in 1949 under the direction of Otto Steinbrocker, MD, as well as the progress of the Department of Rehabilitation, which was awaiting a federal government contract for personnel and equipment. The scientific activities of the medical staff in the mid-1950s were represented in Annual Reports of that era by three to five pages of cita- tions: books, articles, exhibits, presentations, and guest lectures. The Hospital was accomplishing its work and engaging the scientific community in an ongoing practical and academic dialogue.

I n a special gold-covered issue of the Bulletin of the Hospital for Joint Diseases, Executive Director Abraham Rosenberg commemor- ated the Hospital’s first fifty years, comparing the single-brownstone Hospital that had opened with seven beds and eight patients to the existing 300-bed capacity Hospital that occupied two-thirds of a city block and treated 20,000 outpatients annually. The net capital assets of the Hospital had also grown, from $12,404 to $8 million, and it enjoyed an annual operating budget of $2 1/2 million. Sev- enty percent of the beds were devoted to ortho- paedic cases. Whereas the original medical staff had consisted of 40 physicians and surgeons, in 1956 there were over 300 physicians, surgeons, and dentists and 40 residents. The Departments of Orthopaedic Surgery, Radiology and Radiation, and Pathology were widely recognized for their original and continuing contributions to the medi- cal and scientific literature.

As part of the Fiftieth Anniversary celebration, the Main building was redecorated the Frederick Brown Pavilion in recognition of the past Presi- dent’s service and generosity for 23 years (1925- 1948). A Fiftieth Anniversary Scientific Program was conducted, and a dinner was held at the Waldorf-Astoria attended by 800 guests and featuring as speakers Dr. Detley W. Bronk, President of the Rockefeller Institute for Medical Research, and Dr. Paul C. Colonna, past President of the American Orthopaedic Association, both of whom praised the Hospital for its stellar contributions to the com- munity and the nation. Members of the Frauenthal family in attendance included co-founder Herman C. Frauenthal, Sr., MD as well as Board member Herman C. Frauenthal, Jr. along with his wife Ros- lyn and their sons Stephen and James.

In the late 1950s, the Hospital’s four-year resi- dency program accepted five to six residents per

Class and consisted of one year each of general internship and surgical internship and two years of orthopaedic training. Joseph Milgram’s reorganization of the Department in 1953 had been well received, as he energetically supported the talents of his prominent staff (including those who had retired as consultants but still remained active): Leo Mayer, in tendon surgery and polio; Samuel Kleinberg, a longtime Chief specializing in orthopaedics at the time when other New York medical institutions were concerned only with diagnosis. Henry Mankin, whom Milgram thought scoliosis might suit but it would prove to be Barry Kleiger, recalls that Milgram thought scoliosis might suit but it would prove to be Barry Kleiger, and knew every patient in the hospital “day and night,” came to know each other very well, and knew every patient in the hospital by name. The residents spent time teaching one another. Four were on call every night. Informal teaching extended from the residents into the cafeteria lunch “conferences.” The library doubled as a nighttime hangout, and everyone went to follow-up conferences held by Sidney Bernstein, who advanced the development of pediatric surgery as a full subspecialty of orthopaedics: Mayer, Kleinberg, Kliger, C. Hanish, Kaplan, Lapidus, Milch, Robbins, Mankin, and Grant.

Robert Leffert, MD performed resident studies in the clinical application of maggot therapy and one annual memorial lecture series continues to this day; Martin Posner, MD (Resident Class of 1967) and Richard Smith, MD (1960) were both mentored by Emanuel Kaplan and later became partners in a hand surgery practice. Smith would later succeed his mentor as Chief of the Hand Service and in 1972 moved to Massachusetts General Hospital to become its Chief of Hand Surgery, a position he holds today. Posner would later as well become Chief of the Hospital’s Hand Service, a position he still holds.

There were also (voluntary) night classes, at midnight or later, with master anatomist-surgeon Herman Robbins, who came to teach the residents for several hours after his hospital and private practice duties were finished. In such a manner, he became the Hospital’s first Director of Pediatric Surgery, and would later succeed Milgram, also developed a strong interest in pediatric orthopaedics. Melvin Jahn, MD (1950) was mentored by Paul Lapidus in foot and ankle surgery and would become a brachial plexus expert, with particular emphasis on brachial plexopathies and mononeuropathies. Paul Lapidus was a nightoff on the 1950s are as shrouded in mystery as the proceedings of some of the dinners. There were also (voluntary) night classes, at midnight or later, with master anatomist-surgeon Herman Robbins, who came to teach the residents for several hours after his hospital and private practice duties were finished. In such a manner, the direction of Joseph Milgram the Department of Orthopaedic Surgery was developing a close-knit staff that included some of the finest future leaders in orthopaedics, an even stronger academic program, and an even more diversified institution.

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Also in 1984, the Helene Full School of Nursing established a second 15-month program for Licensed Practical Nurses. Graduates were eligible for Registered Nurse licensure on completion of a state examination. In 1979, the school received a charter from New York State granting it the authority to confer the AAS (Associates) degree in nursing. In 1974, the school received a distinction from Elaine and Raphael Malsin in 1980, and an additional gift from Milton Petrie became part of the Hospital’s Department of Radiology. A Plasmapheresis Unit was created through donations to the Rose Wolfson Foundation. Shortly thereafter, the Hospital was designated a National Arthritis Center by the National Arthritis Foundation. A supplement.

Henry J. Mankin, Chairman of the Department of Orthopaedic Surgery at the University of Pittsburgh, Mankin furthermore arrived with him both an intimate knowledge of the Hospital and administrative experience as departing Chairman of Orthopaedic Surgery, he brought with him both an intimate knowledge of the Hospital and administrative experience as departing Chairman of Orthopaedic Surgery, he brought with him both an intimate knowledge of the Hospital and administrative experience as departing Chairman of Orthopaedic Surgery. Pomeranz then became part of the Hospital’s early commitment to research in systemic lupus erythematosus. In the following decades, the Department of Rheumatology would expand to become a premier center of clinical research and scientist training.

With regard to radiology, Maurice Pomeranz, MD, was the Hospital’s second roentgenologist (beginning in 1924) and was succeeded by Alex Norman, MD, appointed Chairman of the Department of Radiology in 1960. Each served as President of the New York State Radiological Society and the American Roentgen Ray Society (beginning in 1924) and was succeeded by Alex Norman, MD, as Chairman of the Hospital’s Department of Radiology in 1960. Each served as President of the New York State Radiological Society and the American Roentgen Ray Society (beginning in 1924) and was succeeded by Alex Norman, MD, as Chairman of the Hospital’s Department of Radiology in 1960. Each served as President. A new and expanded Educational Center was opened through a $100,000 grant from the Jaffe Foundation that permitted computerization of the Radiology Department, which greatly facilitated patient registration, scheduling, medical reporting, and medical indexing.

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Herman Robbins received his medical education in Europe, first at the Andersson College of Medicine in Scotland (1935-1939). When war broke out in Europe while he was in the United States on a visit, Robbins found himself banned from returning to Great Britain. Eventually he was able to transfer his course credits to the Université de Lausanne in Switzerland, from which he graduated in 1941. Robbins next experienced several detours before entering the orthopaedic residency program at the Hospital for Joint Diseases. His internship and initial surgical training were at Harlem Hospital on 131st Street, immediately following which he entered the Army with the rank of captain, serving as battalion surgeon in the European Theatre of Operations and accompanying the second French Army Division in the liberation of Paris. His combat service was distinguished by receipt of a Purple Heart and the Bronze Star—Heroism.

On his return to the United States, Robbins entered general practice in an office across the street from the Hospital, on 124th Street, and cemented technique. With characteristic modesty, Dr. Robbins gives credit to Hospital orthopaedic surgeon Mark G. Lazansky, MD, who had worked with Dr. Charnley for a year, as the physician most instrumental for bringing Charnley’s total hip surgical technique to the United States and the first in this country to perform the surgery. Robbins published extensively on such subjects as procedures for congenital deformity, dislocation of the patella, glomus tumor, mood form of chronic rheumatic heart disease, and bone graft replacement. In 1975, he published a glossary of orthopaedic eponyms—signs, lines, and tests—with Michael S. Zeide, MD. In addition to his position as Chairman of the Department of Orthopaedic Surgery, Dr. Robbins served as Editor of the Bulletin of the Hospital for Joint Diseases and, prior to 1972, Director of Pediatrics. The Hospital’s Herman Robbins Medical Library is named in his honor. In addition to his position as Chairman of the Department of Orthopaedic Surgery, Dr. Robbins continues his passion for orthopaedic surgery and his patients’ well-being in the Star for Heroism by receipt of a Purple Heart and the Bronze Star—Heroism.

In 1969, now a Hospital attending, Dr. Robbins traveled to Wrightington, England, with several colleagues, including Paul Glicksman, MD, and became one of the first Americans to observe surgery that employed Sir John Charnley’s pioneering technique for low-friction arthroplasty of the hip (total hip replacement). The procedure involves using a high-density polyethylene socket and cemented technique. With characteristic modesty, Dr. Robbins gives credit to Hospital orthopaedic surgeon Mark G. Lazansky, MD, who had worked with Dr. Charnley for a year, as the physician most instrumental for bringing Charnley’s total hip surgical technique to the United States and the first in this country to perform the surgery. Robbins published extensively on such subjects as procedures for congenital deformity, dislocation of the patella, glomus tumor, mood form of chronic rheumatic heart disease, and bone graft replacement. In 1975, he published a glossary of orthopaedic eponyms—signs, lines, and tests—with Michael S. Zeide, MD. In addition to his position as Chairman of the Department of Orthopaedic Surgery, Dr. Robbins served as Editor of the Bulletin of the Hospital for Joint Diseases and, prior to 1972, Director of Pediatrics. The Hospital’s Herman Robbins Medical Library is named in his honor. In addition to his position as Chairman of the Department of Orthopaedic Surgery, Dr. Robbins continues his passion for orthopaedic surgery and his patients’ well-being in the Star for Heroism by receipt of a Purple Heart and the Bronze Star—Heroism.

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Orthopaedic Surgery, serving in that capacity until 1981 and guiding the Department through the Hospital’s most significant transformation in its history: the relocation to 17th Street in 1979.

In 1975 the Hospital was in the midst of planning and negotiations for a major relocation. Neither the 1980 nor the 1981 Annual Report makes mention of a Seventy-fifth Anniversary, perhaps because everyone was preoccupied with settling into their new home. The 1975 Alumni Meeting program reprinted the addresses delivered on the occasion of the opening of the Hospital’s new 1924 building by Henry W. Frauenthal and President of the Board Lewis Strauss as well as photographs of the first, second, and third hospitals. Within five years, the Hospital would have a new home on 17th Street—a fourth edifice that would, as the others, become inextricably connected with its name and image. The 68th Annual Meeting and Dinner took place on the roof of the St. Regis Hotel with, as usual, a sumptuous repast: Filet of Beef Bordelaise followed by a private, prerelease screening of the film Funny Lady at the Rizzoli Screening Room on Fifth Avenue and 55th Street. The Annual Alumni Meeting program spoke about new beginnings similar to the promise that the prior generation of Hospital luminaries had for the new 1924 Hospital.

While the Hospital’s move downtown is usually associated with the official opening of its current building in the autumn of 1979, in actuality the new Hospital for Joint Diseases Orthopaedic Institute began many years prior, as the subject of endless discussion and debate, and ultimately momentous decisions. In the early 1950s, when there had been discussions of entering into a full affiliation with Mount Sinai Hospital, the decision was made to remain a standalone specialty hospital. In 1966, the issue of moving the hospital or seeking another affiliation arose again, motivated by a variety of factors, including the need for greater opportunities in advanced clinical and research activity to keep pace with the changes then occurring in medicine as well as fiscal issues, such as the chronic and increasing difficulty of keeping orthopaedic beds filled uptown. The Board decided once again to pursue formal affiliation and initiated preliminary talks with the Albert Einstein College of Medicine, Mount Sinai Medical Center, and New York Medical College. Between 1967 and 1970 there were discussions with Mount Sinai regarding several types of affiliation, the most ambitious of which included the plan to build an orthopaedic pavilion on the Mount Sinai campus. By 1970, lack of progress regarding construction plans with Mount Sinai set in motion the exploration of development options further downtown, and by 1973 Mount Sinai and the Hospital concluded their formal discussions.

Between 1973 and 1974, talks were held with Beth Israel Medical Center that resulted in the agreement that the Hospital for Joint Diseases would become the orthopaedic provider for Beth Israel, with the latter providing necessary general medical access to and provision for the Hospital’s orthopaedic patients and the former providing a new building. In 1974 the State Board of Health...
granted preliminary approval for the plan, archi-
tects were engaged, and the purchase price of
land was determined. In 1976, while discussions
were still in progress, the Gramercy Park com-
nunity expressed concern when it was made public
that another hospital would be constructed nearby
in the mainly residential area next to the sprawling
Beth Israel complex. These and other concerns
of the difficult process of bringing a new hospital
downtown Manhattan were eventually allayed
with the help of public officials such as Mayor Ed
Koch and Senator Jacob Javits.

Groundbreaking for the downtown site took
place on February 3, 1977. Throughout 1978 con-
struction of the new Hospital for Joint Diseases
Orthopaedic Institute progressed uneventfully,
with the exception of some small problems, such
as the need to carve out of the lobby an auditorium
that had inadvertently slipped away from the archi-
tectural plan.

On July 25, 1978, New York Governor Hugh
Carey gave the principle address at ceremonies
in which he placed a time capsule inside the corner
stone containing documents concerning the Hos-
pital's history. Dignitaries of the new Hospital for
Joint Diseases Orthopaedic Institute, Beth Israel
Medical Center, and Mount Sinai Medical Center
were in attendance. Among those representing
the Hospital were President Paul Kohnstamm,
past President Alfred Rice, Executive Director Har-
voy Machaver, Chairman of the Building Commit-
tee Bernard Aronson, Chairman of the Develop-
ment Committee George M. Jaffin, Chairman of
the Department of Orthopaedic Surgery Herman
Robbins, MD, and Robbins's predecessor Henry
Markin, MD.

The Hospital's new building, which for the first
time housed all its clinical, teaching, and research
facilities, was dedicated on September 19, 1979
as the Samuel H. Golding Building, in grateful rec-
ognition of Golding's gift that had been essential
to its realization. Samuel Golding, a prominent fig-
ure in New York's, real estate, banking, and phi-
anthropic communities, was not only a long-time
Trustee of Beth Israel Medical Center but also a
founder of the Albert Einstein College of Medi-
cine. A special 12-page color supplement to the
New York Times, which hailed “A New National
Center for Orthopaedics” included a of cutaway
drawing of the Hospital showing its facilities and
an introduction to the Hospital’s physicians and
administrators.

New York Governor Hugh Carey speaking at the Dedication cere-

Cover of the supplement to the New York Times an-
nouncing the new Hospital building.

Above: Illustrations from the supplement to the New York Times announcing the new Hospital building. Note the placement of Loeb Auditorium (relocated during construction.)

Right: Private room in the new Hospital.
The hospital entered its fourth quartercen-
tury with a new building at a new location, a
centralized staff—and equally important, an
illuminous history and rich traditions upon
which to grow. The next 25 years would be in
many ways a period of unprecedented change in chal-
leging and often difficult times—a period when
the Hospital would once again prove its resiliency
and achieve levels of accomplishment befitting its
past.

The Hospital had focused on the treatment
of children from its inception and had become
renowned for pioneering the admission and or-
thopaedic treatment of infants from birth to four
years age. Surgeons who treated clubfoot, po-
ascoliosis, and tubercular joints in children
at the turn of the century were skilled practitioners
of the “strap and buckle” method of orthopaedics,
which to grow. The next 25 years would be in many
ways a period of unprecedented change in chal-

grant fondly remembers how First Chance “took
over” a small building in Mount Morris Park that
had been used by the City to store sports equip-
ment and turned it into a school to teach disabled
children reading or writing or arithmetic, but
behaviors that other children develop as a matter
of course to sit up, stand up, recognize language,
and develop a sense of their surroundings. This
type of education/treatment plan for development-
ally disabled children was the first of its kind ever
undertaken in the field of orthopaedics.

When Grant accepted the invitation to join
the downtown Hospital full-time, he brought with him
the nucleus of a neuromuscular and developmen-
tal pediatrics program, a team that formed the
new Center for the Neuromuscular and Develop-
mentally Disabled, including Isaac winter, MD
as the medical director. When the Hospital
moved to the downtown Hospital, it drew upon
the expertise of specialists in over twenty disci-
plines, including neurological and psychiatric
specialties, genetics, genetic counseling, early
childhood education, special education, physical
and occupational therapy, and psychology—and
provided a model for multidisciplinary pediatric
and occupational and industrial orthopaedics
which included the Center for Child and Adoles-
cent Sports Medicine, Fractures, Clubfoot and
the Elly Hammerman Center for the Treatment of
Neuromuscular Disorders; the New York Institute
of Physical Medicine. Among them, the Hospital’s centers
for orthopaedic and neurological condi-
tions are in fact now treated in four Centers
of Excellence in the Hospital: the Wallace B. Lehm-
gold, MD (Resident class of 1962), practiced at Long
Island Jewish Hospital as well as Soroka Hospi-
tal in Jerusalem.

1979, two former residents accepted the invita-
tion of Chairman of Orthopaedic Surgery Herman
Robbins to join the Faculty as the core of a new De-
partment of Pediatric Orthopaedics to be formed
at the downtown site. One, Wallance B. Lehman,
MD (Resident class of 1962), practiced at Long
Island Jewish Hospital as well as Soroka Hospi-
tal in Beersheva, Israel before being appointed
Medical Director and Chief of the Department of
Orthopaedic Surgery at Alyn-Or Orthopaedic Hospital in Jerusalem.

The Hospital had focused on the treatment
of children from its inception and had become
renowned for pioneering the admission and or-
thopaedic treatment of infants from birth to four
years age. Surgeons who treated clubfoot, po-
ascoliosis, and tubercular joints in children
at the turn of the century were skilled practitioners
of the “strap and buckle” method of orthopaedics,
who followed—Samuel Kleinberg, Charlie Hanish,
pioneers and the several generations of surgeons
specialists benefit from today. The early Hospital’s
lacking as they did the tools and techniques that
of the turn of the century were skilled practitioners
of the “strap and buckle” method of orthopaedics,

... In 1983 a unique ergonomics program, the Occupa-
tional and Industrial Orthopaedic Center (OIOC),
was established by Department of Orthopaedic
Surgery Chairman Victor Frankel and Margareta
Nordin, DrSc, CIE, OIOC’s Director since its in-
ception. OIOC staff perform clinical analyses of
worksite injuries and conditions affecting worker
health as well as serving as a research and educa-
tion center, offering a course in ergonomics and
workplace analysis at the NYU Graduate School of
Arts and Sciences. Founded originally in the Hospital,

Dysplasias and Growth Disorders and is Director Emeritus of the Center for the Neuromuscular and Developmentally Disabled.

In 2003, the Hospital would open a premiere Center for Children under the direction of David S. Feldman, MD. A centerpiece of the Center for Children is its child and parent-friendly interior design, including a dedicated elevator to its floors and a unique flow of interior space that allows one to view through a variety of traditional hospital pediatric settings of contained rooms and small endicoures. The Center was built at a cost of $10 million realized through a five-
year fundraising plan and owing to the generosity
of many people, most particularly Elly and Steve
Hammerman, MD, the support of KIDS New York.

Pediatric orthopaedic and neurological condi-
tions are in fact now treated in four Centers
of Excellence in the Hospital: the Wallace B. Lehm-
gold, MD (Resident class of 1962), practiced at Long
Island Jewish Hospital as well as Soroka Hospi-
tal in Jerusalem.
One of the most revolutionary and fascinating—surgical techniques ever championed by Hospital for Joint Diseases orthopedists is the Ilizarov limb-lengthening technique introduced to North America by Victor Frankel in the 1980s. Attempts to lengthening injured or congenitally shortened limbs go back at least to the late nineteenth century. In the early 1950s, Hospital for Joint Diseases resident Edward J. Haboush, MD published results of studies on the subject that were con sidered ahead of their time. It was Gavril Ilizarov, however, who after World War II ultimately solved the problem of how to mechanically stimulate and control new growth in long bones.

Gavril A. Ilizarov, MD, PhD, DSc (1921-1992) was born in the isolated mountain village of Dagestan, in the then Soviet Union. He trained as a physician at Moscow Medical School, he set up practice in the Kurgan region of western Siberia, where he was the only phy sician in his region. In the mid-1950s, while treating World War II veterans suffering from limb-threatening unhealed fractures and infections, he discovered it was possible to stimulate bone growth by the principle of fractional distraction, or pulling apart, of bone segments, not just by using compression, as had previously been believed. Building on this paradigm, Ilizarov created external fixation devic es in the 1960s that allow the correction of bone deformities and promote healing in fracture non-unions. It also represented a new treatment for complications of osteomyelitis.

At a biomechanics meeting in Barcelona in 1984, Victor Frankel observed Ilizarov’s external fixator technology for the first time. In 1986, Fran kel traveled to Kurgan to learn about this apparatus directly from the inventor and sub sequently introduced the technology to the United States. To aid him in this undertaking, he invited Vladimir Golyakhovsky, MD, PhD, DSc, an expert in the procedure who was trained in Russia, to join the Hospital staff. Frankel was the first to perform surgery in the United States using this technique, and Alfred Grant was the first to perform a pediat ric Ilizarov procedure in this country.

In 1987, an International Conference on the Ilizarov method held in New York and sponsored by the Hospital was held with a prestigious inter national faculty headed by Dr. Frankel, includ ing physicians from France who had introduced his method to Western Europe. Today the Hospital’s Center for Limb Lengthening and Reconstruction, whose long-term treatment goals in the country applying Ilizarov’s techniques, the New York Institute for Limb Lengthening and Re construction, whose long-term treatment goals in the management of limb length inequalities and upper and lower extremity deformities are to im prove function, decrease pain, and prevent or control new growth in long bones.

The Hospital's mission—indeed, the mission of any hospital that aspires to greatness—includes three indispensable components: patient care, education, and research. The three are intricately connected; each supports the other. Central to the mission of the Hospital for Joint Diseases ever since its found ing in 1850 has been orthopaedic research: the search to discover, techniques, and substances that have the promise to eradicate or at least ameliorate the conditions that afflict millions the world over.

In 1996, the Department of Orthopaedic Surgery’s research arm, the Department of Bioengineering, was established to expand the Hospital for Joint Diseases and the Harkness Center for Dance that would build an integrat ed program of clinical services, research, and education, creating a dance medicine center staffed by a team of multidisciplinary professionals well versed in the health needs, performance, and fi nancial issues faced by many of the dance com munity. Philanthropic support from the Jacob and Alena Langeloth Foundation and the Luderer T. Mertz Charitable Trust were important to the en dowment of the Special Assistance Fund, created to help injured dancers receive treatment regardless of their ability to pay.

The Center’s clinical services represent an im portant contribution to the dance community and the lives of young dancers; its education program helps to ensure the future health of the dance community; and its research program includes the Human Performance Laboratory—one of only a handful of facilities worldwide that aspires to greatness—includes three indispensable components: patient care, education, and research. The three are intricately connected; each supports the other. Central to the mission of the Hospital for Joint Diseases since its found ing over $8 million dollars in funding, including several prestigious grants from the National Institutes of Health, the Arthritis Foundation, and the Orthopaedic Research Foundation. The Center, with a team approach to tackling musculoskeletal disorders, stands uniquely positioned to address ever-changing needs of patients,舞者 while they are dancing.

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Surgeon and Teacher Extraordinaire

Fixation, commonly abbreviated AO) and a leading

by Rosen’s academic and teaching legacy. His con

Howard Rosen's legacy is assured through

Howard Rosen, MD

Howard Rosen graduated Phi Beta Kappa

experience and surgical talents, he established a

Rosen's academic and teaching legacy. His con

In 1985, the International Board of Trustees of the

A master surgeon-educator, erudite, slight of

As a master surgeon-educator, erudite, slight of

ambulatory AO and a leading

While outstanding surgical skills do not neces

H

Howard Rosen graduated Phi Beta Kappa from

NYU School of Medicine, where he was elected

He had performed the cases that most only knew

Howard Rosen's legacy is assured through

Howard Rosen, MD

Howard Rosen, MD

Academic and teaching legacy. His con tributio

The Hospital immediately instituted a series of

often experience delayed medi cal care for any of several reasons. The Initiative for Women with Dis abilities has to date assisted more than 5000 clients to achieve their

Howard Rosen was a

Howard Rosen developed an interest in the

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Howard Rosen's legacy is assured through

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Howard Rosen, MD

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Vic tor Frankel graduated from Swarthmore College in 1946 and from the University of Pennsylvania School of Medicine in 1951. He completed his orthopedic residency at the Hospital for Joint Diseases (Resident Class of 1958), where he was the first resident to be awarded a scholarship grant by the Pfizer Company, in 1956. On graduating from the Hospital’s residency program, he was awarded two year’s funding (via the Henry W. Frauenthal Travel Scholarship and a March of Dimes Fellowship) to pursue his international residency. After accepting the Chairmanship of the Department of Orthopaedic Surgery at Case-Western Reserve University in Cleveland. In 1975 he was appointed Chairman of the Department of Orthopaedic Surgery at the University of Florida, Frankel founded the Musculoskeletal Transplant Foundation, now the world’s largest bone bank.

Dr. Frankel returned to the Hospital in 1981 to assume the post of Chairman of the Department of Orthopaedic Surgery. With his boundless enthusiasm for advancing orthopedics and exceptional devotion to the Hospital, he revitalized the Department’s program. Three Department members have been recipients of the Frauenthal Medal (see page 45).

The Department’s research and clinical programs have led to the establishment of the Cent for Arthritis and Autoimmunity, led by Solomon and Smilie, MD, and the Osteoporosis Center, led by Stephen Honig, MD. Investigato rs at both institutions have received increasing recognition in the area of translational research in both autoimmune diseases and osteoarthritis. Major discoveries, particularly in the area of t umor suppressor genes, have been made possible through a generous gift from Rob and Michael Belmont.

Hijinks at a 1980s Beefsteak Dinner: Hospital luminaries include Melvin Jahss (standing second from left), Executive Director Harvey Machaver (standing third from left), Margaret Nordin (standing at far right), Allan Strongwater (seated at left), Howard Rosen (seated second from right), and Victor Frankel (seated far right).
The emphasis on resident education increased throughout the 1980s. A year-round didactic program was instated, including morning presentations five days a week, which involved active participation of all staff. By the end of the 1960s, the Hospital’s Orthopaedic Research Program was being recognized as a competitive and highly sought-after training program.

When Victor Frankel was appointed Chairman of the Department of Orthopaedic Surgery in 1970, it was being recognized as a competitive and highly sought-after training program. The Department’s productivity. The initial mem-

1997 Howard Rosen, MD
1996 Victor Frankel, MD
1995 Neil Kahanowitz, MD
1994 Victor Frankel, MD
1993 William Jaffe, MD and Jill Buyon, MD
1992 Martin Flom, MD
1991 Stephen Abramson, MD
1990 Wallace Lehman, MD
1989 Wallace Lehman, MD
1988 Victor Frankel, MD
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The concept was that the hospitals together would represent a full-service medical center, with orthopaedics focused at the Hospital for Joint Diseases. Although this approach was utilized through the mid-1980s, it was often an uneasy relationship. At the same time, HJD was dissatisfied with its academic affiliation—a limited affiliation at best, as Mount Sinai’s affiliation with Beth Israel, which was also an academic affiliate of the Hospital, represented a full-service medical center, with orthopaedics specializing in musculoskeletal disorders. In 1988, a significant administrative change, HJD Executive Director Harvey Machaver was replaced by Reuvon Savitz, who assumed the position of Chief Executive Officer of the Hospital at the time. The Board of Trustees appointed Victor Fran kel President of the Hospital while allowing him to retain his post as Chairman of the Department of Orthopaedic Surgery. Under this restructured leadership, the Hospital implemented widespread changes in response to the altered landscape of healthcare in New York State. Since a large portion of orthopaedic surgery had become ambulatory, it was no longer feasible to fill a 200-bed hospital with acute care orthopaedic patients. In response, the Hospital established a Diagnostically Related Group-exempt rehabilitation program that over time would grow to a maximum of 76 beds and thereby to integrate clinical programs. In the late 1980s became a Sponsored Organization of NYU Medical Center. The epilepsy program would in particular prove beneficial for both institutions and enhancing the ability of both to succeed in a formidable health-care environment. The leadership of the Department of Orthopaedic Surgery changed once again in the early 1990s. In 1993, Victor Fran kel announced that he would not seek reappointment as Chairman of the constituent hospital centers, and thereby to further discussions on ways to enhance the relationship between NYU and HJD has grown stronger ever since. When NYU merged with Mount Sinai Medical Center in the late 1990s, the Hospital was a part of that merger. Although the NYU–Mount Sinai Hospital mergers did not fulfill expectations, the orientation between NYU and HJD has grown stronger ever since. The success of that relationship between NYU and HJD has grown stronger ever since. The success of that relationship has been played by Robert Glickman, MD, Dean and President of NYU, and a multitude of other individuals who worked hard to bring this merger to fruition. The merger will be complete and official on January 1, 2006. At that time, the name of the hospital will change yet again, officially becoming NYU Hospital for Joint Diseases. The Hospital will begin its second century as part of a world-class academic medical center poised for continued growth and success.

William A. Perlman, Board of Trustees member since 1973 and Chairman of 1984, which ably guided the Hospital through challenging times.
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