The Children’s Hospital of Philadelphia, the first and oldest in America, has enjoyed a remarkable reputation, the support of the wealthy community, the support of the community receiving care, and the admiration of colleagues throughout the world.

When I arrived there, in 1946 (much of the history of pediatric surgery will appear in this archive and elsewhere as segments of oral history I have prepared over the years in reference to pediatric surgery and the Children’s Hospital). In 1946, when I first went to the Children’s Hospital it was essentially a medical pediatric institution. Only urgent and emergency surgery was done at Children’s and there was no such term as “pediatric surgery”. If someone wished to designate what later became called, “pediatric surgery”, it was called “child surgery”. That meant people who practiced it were called, “child-surgeons”, which led to some confusion about who was the patient and who was the doctor. I came to that hospital with the strong backing of the provost of the University of Pennsylvania, the Chairman of the Department of Surgery of the University of Pennsylvania, I.S. Ravdin, of his protégé and my close friend to be, as well as my mentor, Jonathan E. Rhoads. I had the “apparent” strong backing of the Professor of Pediatrics of the University of Pennsylvania and the Physician-in-Chief of the Children’s Hospital of Philadelphia, Joseph Stokes, Jr., but it was a reluctant support born of necessity, and in a sense forced upon him, to avert a crisis over inadequate surgical care in that institution.

When I went there, it was the intent of those who sponsored me that I make it the best possible teaching service for children’s surgery in the land, and it was my own personal dedication that it would be my life’s work. I actually stayed there until the age when the University of Pennsylvania forces retirement (illegally) at the age of 65, which for me was 1981, but the expected difficult transition was avoided, because Ronald Reagan intervened early in the year of 1981 and designated me to be the Surgeon General of the United States and I was eventually confirmed for a four-year appointment and was reappointed for a second four-year term finishing my government career in 1989.

I am a doer and I like to think that I am innovative and creative and I fretted many times about the dilapidated state of the old Children’s Hospital in the midst of the Afro-American ghetto of South Philadelphia. I once became so upset of the apparent lack of understanding of the Board of Trustees of their responsibility of the children in our care, that I – with no authority – called a meeting of the Board of Managers, held it in mid-summer, in a non-air-conditioned room, in the basement of the old hospital and began my talk by reading the definitions of “Trustee” from several dictionaries and then expanded upon what that meant to the Children’s Hospital and what the deficiencies seemed to me to be.
I can say honestly that a new hospital was mentioned even on the day I arrived, January 4th, 1946 and continued until we eventually moved to the Campus of the University of Pennsylvania in 1974. One of the three papers that follows this introduction was written by me in 1971/1972 as a philosophical statement by the hospital's Surgeon-in-Chief and was delivered to the members of the Board of Trustees, the senior members of the staff, and was discussed in both board and staff meetings from time to time. It is an essential paper to discuss the future – apart from buildings and location – of the oldest children's hospital in America – and I covered such issues as cooperation with the underprivileged community that surrounded us, the suburban community and beyond, the decentralization of pediatric care and the moral obligation that a children's hospital of such reputation and such anticipated grandeur perhaps ought to serve all of the five medical schools in Philadelphia – not to mention the osteopathic medical college – rather than maintain its single affiliation with the University of Pennsylvania.

This paper was provocative, it was prophetic, and all of the things I raised were eventually discussed and adjudicated and in a sense the things that I called for were done with the exception of the last, which in spite of my concern, never was an issue raised by anyone other than I.