“We know who we are with the Sisters. We don’t know what we’d be without them.”
— W. Eugene Mayberry, M.D.
Chair of the Board of Governors
Mayo Clinic, 1976-1987

“Mayo Clinic is built on gratitude. Everything we have received is a gift. Everything we can offer each other is a gift.”
— Sister Generose Gervais
Administrator and Executive Director
Saint Marys Hospital, 1971-1986

The Mayo Clinic Values are a living legacy – transmitted across generations by the Mayo family and the Sisters of St. Francis, as well as by patients, colleagues and friends from diverse walks of life. Written as a field guide, this book shows how the values have been expressed at key moments of our history. You are part of the story as well, and the book includes places for you to write your own reflections about Mayo Clinic and our mission of service to humanity.
At Mayo Clinic, plants and flowers are part of the healing process.
It is a pleasure to thank the people who supported the creation of this book.

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archivist emerita of the Rochester Franciscans. Judith Osborne and Ronald Ward devoted expertise to the production process. Kenna Atherton and Christopher Frye secured ISBN and Library of Congress numbers. To these individuals and all “friends of the project,” whose encouragement has sustained us, we express gratitude for helping us share the story of Franciscan-Mayo collaboration across the generations.
Sister Ellen Whelan, Ph.D.

Sister Ellen Whelan, Ph.D., followed in the footsteps of four of her aunts when she joined the Sisters of St. Francis of Rochester, Minnesota. An educator, she received a doctorate in history from Syracuse University. Sister Ellen has been associated with Saint Marys Hospital and Mayo Clinic in a wide range of roles, among them serving as chair of the Saint Marys Hospital Sponsorship Board, predecessor of the Mayo Clinic Values Council. Sister Ellen is the author of the *The Sisters’ Story: Saint Marys Hospital – Mayo Clinic*. Volume One covers the period from 1889 to 1939; Volume Two covers 1939 to 1980.

Matthew D. Dacy

Matthew D. Dacy received the B.A. in history from Ripon College and the M.A. in journalism from the University of Missouri. He was a Rotary Foundation scholar in Jerusalem, Israel, prior to joining Mayo Clinic in 1984. Matt serves as director of the Heritage Hall museum, chair of the Heritage Days program and executive producer of the Heritage Film series. He is the author and editor of books about the history and culture of Mayo Clinic as well as the website *history.mayoclinic.org*.
About the Illustrator

James E. Rownd

James E. Rownd earned a degree in commercial art from Hennepin Technical College. He worked for more than 20 years in the fields of advertising and editorial art in the Twin Cities. Since joining Mayo Clinic in 2001, he has specialized in editorial art in the medical setting, using his skills to bring institutional concepts and strategic initiatives to life through visual expression. Among his signature projects were Mayo Clinic’s vision for leadership in the year 2020 and the exterior of a mobile exhibit that traveled to cities throughout the United States as part of the Mayo Clinic Sesquicentennial.
For more information
history.mayoclinic.org
The tornado headed straight for Rochester!
Chapter One

The Needs of the Patient Come First

“Thereir duty was to alleviate human suffering ...”
— Sister Joseph Dempsey

The Mayo-Franciscan story begins like many good stories. Once upon a time, a group of Catholic Sisters, working with a family of Protestant physicians, built a hospital in a cornfield. The hospital grew into a place of healing for people from all over the world. A handshake, not a legal document, sealed the partnership of the Franciscan Sisters and Mayo physicians. Working together, these unlikely partners faced daunting challenges with unwavering dedication to their primary goal of placing the needs of the patient first.
Saint Marys Hospital, “The Miracle in a Cornfield,” had its origins in tragedy. A devastating tornado struck Rochester, Minnesota, on August 21, 1883. “Rochester in ruins” was the feeble message tapped on a rigged telegraph line to Governor Lucius Hubbard. “Twenty-four people killed. Over forty seriously injured. One-third of the city laid waste. We need immediate help.”

William Worrall Mayo, M.D., Rochester’s leading physician, took charge of medical efforts and turned the downtown dance hall into a temporary hospital. His sons, Will, a fledgling physician, and Charlie, a student, worked at his side. Dr. Mayo’s first concern was the nursing staff. “Volunteers were willing enough, but they had homes and families to look after.” The Mayos needed nurses who could give their entire time to the job. Dr. Mayo went to the convent of the Sisters of St. Francis. “There ought to be a Sister down there to look after those fellows,” he told the mother superior. Mother Alfred Moes readily agreed and appointed two Sisters. From that
time until the makeshift relief facilities closed, Sisters supervised the nursing.

Later, Mother Alfred assessed how care of the sick and injured could be improved. Intelligent and pragmatic, she typically used life experiences to solve practical problems. She was well acquainted with Sisters’ hospitals in Europe and America. Her homeland, Luxembourg, indeed most of Europe, had a history of Sisters’ hospitals that went back to the Middle Ages. Now a missionary on the American frontier, Mother Alfred witnessed the extraordinary contribution of Sisters’ hospitals to pioneer communities. Yes, Rochester must have its own hospital. She would build one.

Mother Alfred went to Dr. W.W. Mayo with her idea and asked him to head the medical staff. “Mother Superior,” he told her, “this town is too small to support a hospital.” He reminded her that the public shunned hospitals as pest houses where people went to die. Further, it would be a costly undertaking with no assurance of success. Mother Alfred insisted she could build a hospital that would succeed if Dr. Mayo would take charge of it. Reluctantly, he agreed.

The Sisters earned and saved every cent they could. By constant labor and sacrifice, they raised
the needed funds. Dr. W.W. Mayo and Mother Alfred chose the site, nine acres, just west of the city. Saint Marys Hospital opened September 30, 1889, with 27 beds, six Sisters and two physicians, the sons of Dr. W.W. Mayo. The father, now 70 years of age, served as consulting physician. Mother Alfred appointed Sister Joseph Dempsey, a Rochester native, as superintendent. The Sisters opened the hospital “to all sick persons regardless of their color, sex, financial status or professed religion.”

The Franciscans had little money to furnish wards and private rooms. They started with a few iron cots, a dozen unbleached muslin sheets and some rough gowns. Mattresses didn’t fit the cots and slipped around on the springs. Just keeping the patient on the bed and the bed on the springs was a challenge. The Sisters got up at 3 or 4 in the morning and worked until 11 at night. When there was laundry to do, they got up at 2 a.m. The hospital had three floors. The kitchen was on the first floor. They carried patient meals to the upper floors as the dumb waiter was broken most of the
time. All the water for the building had to be pumped by hand from the basement reservoir. They carried the water used for cooking, baths and every other need from the basement to the upper floors. When the number of patients exceeded the cots available, the Sisters gave up their beds, pulled out mattresses and slept on the floor.

Demands on the Mayo brothers were equally rigorous. For the first three years, there was no male orderly. In addition to demanding surgical and medical loads, the young physicians nursed male patients who needed special attention. They each took turns on night duty.
Sister Joseph later recalled the spirit of Saint Marys’ nurses and doctors: “Their duty was to alleviate human suffering and to save human lives — and they did it.”

ENDNOTES:


Pages 6-8: Clapesattle, pp. 252-253, describes the opening of Saint Marys Hospital. Annals of Saint Marys Hospital includes the speech by Dr. William Worrall Mayo and early accounts of the hospital.
Chapter One: The Needs of the Patient Come First

Check Your Compass

The Needs of the Patient Come First

The primary value of Mayo Clinic in our mission to contribute to health and well-being by providing the best care to every patient through integrated clinical practice, education and research.
Visiting surgeons filled the observation gallery.
Chapter Two

Innovation

“We were a green crew and we knew it.”
— Dr. Will Mayo

The hospital must be the best and the most modern that means allowed.” With these words Dr. W.W. Mayo set his personal standard for building Saint Marys Hospital. To that end he took his older son, Dr. Will, on a tour of Eastern hospitals to study floor plans, lighting arrangements and administrative organization. His younger son, Dr. Charlie, visited hospitals in Europe where he observed new developments in surgical procedures and practice. In consultation with the Sisters, the Mayos pooled their findings and gave the architect instructions “once and twice and thrice” until they got exactly what they wanted.

The Mayo brothers avidly sought innovative ideas and methods. They reserved application, however, to those changes that furthered their primary purpose. Dr. Will put it succinctly: “To get the patient well with as little loss of time as possible: whatever contributes to this end is adopted; whatever does not is eliminated.”
In the early years, Dr. Charlie used his mechanical skills to solve hospital problems ... albeit with varying degrees of success. The hospital had no paging system. Dr. Charlie and a neighbor boy installed an electric announcing system. As the story goes, these amateur electricians got some wires crossed. “The bells would start ringing and would not stop.” The Sisters carried shears with them as a precaution. If a bell kept on ringing, swish! went the wires. The next morning Dr. Charlie would have to resurrect the whole system again.

The hospital desperately needed an elevator. Good fortune brought an unlikely helper to the door. The Sisters always offered hobos a good meal. One day, a well-traveled hobo described a hydraulic elevator he had seen in Paris. Hearing this, Dr. Charlie and a local machinist dug a 40-foot hole and lowered several sections of pipe into it. When water from the basement reservoir rushed into the pipe, it pushed the elevator upward like a giant syringe.
Saint Marys Hospital opened as a new era of surgery began. Infection was a surgeon’s greatest nemesis and the reason for the public’s fear of hospitals. Even after successful surgical procedures, septic infections invaded the patient’s wounds, causing high fever and, many times, death. In 1867, Scottish surgeon Joseph Lister demonstrated that bacterial microorganisms caused surgical infection and that antisepsis could kill them. Wherever surgeons practiced antisepsis, operations increased in volume and scope. The Mayos incorporated antisepsis in their surgery with astonishing results: of the 1,037 patients admitted in the first two years, the number of deaths was 22, as low as at any time in the hospital’s history. Patients went home cured and, in turn, told others about their experience. Such a low mortality rate, which brought recognition for the abilities of the Doctors Mayo, also brought increasing numbers of patients to Saint Marys Hospital.

Fired with ambition to create a surgical center on a level with Eastern hospitals, the Mayos kept abreast of new developments. In Dr. Will’s words, “We were a green crew and we knew it.” Yet, it was their consuming
The Mayo brothers traveled to teach and learn.
desire to overcome inadequacy that helped build the Mayo team of surgeons. One at a time, over several years, they made extended visits to leading surgical centers in Baltimore, Boston, Philadelphia and Chicago to observe the work of selected surgeons. The Mayos were determined to bring back from every trip some specific improvement that could be applied in Rochester, even if it was only a new kind of soap or antiseptic. When one of them returned from a trip, Sister Joseph Dempsey, the superintendent of Saint Marys, would remark, “Now I wonder what new things we will need to do.” The Sisters were as committed to improving in their areas of practice as the Mayos were in surgery.

Working in their remote location, far from urban centers and nearby competitors, the Mayos performed some operations by the hundreds, and even by the thousands. Indeed, by 1906 the Mayo surgeons had performed 4,770 operations, more than any hospital in the United States.
As the Mayo brothers acquired prominence, large numbers of surgeons, both national and international, came to Rochester. They were fascinated that two unheralded surgeons, native sons of the Midwest, should have developed a center of surgery in an out-of-the-way village. The large number of surgeries daily in many fields permitted demonstration of all the newer surgical procedures in the course of a few days. Visitors could not only witness the technical skills of the Mayos, but they could hear them discuss surgical problems in their operating rooms. Their simple, informal remarks reflected the personalities of the Mayos themselves who were frank, unassuming and honest men.

**Endnotes**

Page 12: A firsthand account of the hobo who described an elevator he saw in Paris is covered in a dictated note entitled “Elevator” from Sister Sylvester Burke to Sister Mary Brigh Cassidy, *Saint Marys Hospital Archives.*


Page 15: Early statistics can be found in the *Annals of Saint Marys Hospital.*
Check Your Compass

Innovation

*Infuse and energize the organization, enhancing the lives of those we serve, through the creative ideas and unique talents of each employee.*

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Patients came to Saint Mary's from near and far.
Chapter Three

Integrity

“The cause of suffering humanity knows no religion.”
— Mother Alfred Moes

The partnership of the young Mayos and the Franciscan Sisters began tentatively. At first glance, they appeared to have little in common. The Protestant Mayos may have viewed religious life with some admiration, but it was clearly outside their experience. Despite the diversity of backgrounds, the Mayo brothers and the Franciscan Sisters trusted each other’s commitment to a common goal, the care of suffering humanity. Such commitment inspired unstinting effort, tapped creative resources and transcended religious differences. They forged a permanent partnership and in the process overcame formidable obstacles. Anti-Catholicism, however, was an obstacle that even high spirits and great resolve could not overcome.

Three years after the hospital opened, the Franciscans and Mayos faced a critical challenge. Saint Marys opened to serve all sick persons regardless of their color, financial resources or professed religion.
Mother Alfred put it clearly: “The cause of suffering humanity knows no religion ...” When Dr. W.W. Mayo, at Mother Alfred’s request, tried to organize a staff, he met with evasion and outright refusal. The physicians he approached wanted no part of a venture that was sure to fail because of rising anti-Catholicism.

Between 1860 and 1890 the Catholic population in America tripled and continued to grow. Waves of immigration alarmed native-born Protestants who feared for the country’s stability. Nativism centered in the Midwest through the American Protective Association (APA), a secret society, successor to the Know-Nothings and forerunner of the Ku Klux Klan. “Ardent Protestants would have none of an institution that was managed by black-robed nuns and in which there was a chapel set aside for the exercises of popery.”

A rival physician, Dr. W. A. Allen, built a competing hospital that offered an alternative to one owned by Catholic Sisters. The new institution,
Riverside Hospital, opened for patients in November 1892. Local Protestants pointed to the rival Riverside as an institution that Protestants and patriots could enter “without doing outrage to their convictions by furthering an agency of the hated and alien Catholic Church.”

At this juncture, two important members of the Presbyterian Church fell ill and were taken to Riverside Hospital. They called on the Doctors Mayo to attend them. The Mayos faced an important decision. To accept patients at the rival hospital would have disastrous consequences for Saint Marys since most of their patients would then choose the non-Catholic hospital. After deliberating, the Mayos refused to attend patients or to operate in Riverside Hospital. “To divert a share of their practice to another hospital seemed wrong,” writes their biographer, “a poor return for loyalty and confidence. Moreover, the Mayos felt a strong moral
obligation to the Sisters of Saint Francis. And, finally, the Mayos were not men inclined to knuckle under to the public clamor or the pressure of opposition.”

As anticipated, their decision brought highly emotional censure and criticism from a segment of the Protestant community. In the midst of these contentious times, the Mayos quietly focused on their practice and cared for patients. When critics attacked them and waited for a response, they chose to ignore the abuse and appeared unperturbed.

Riverside Hospital was in operation for over two years when Dr. Allen made a startling announcement. For unknown reasons, “at the peak of prosperity and popularity,” he was leaving
his practice and moving to St. Paul. Shortly after he left, the hospital closed and sold its beds and other moveables to Saint Marys.

Presumably, this was an extraordinarily difficult time for the Sisters, particularly since they were powerless to do anything about pervasive anti-Catholicism. They wanted their institution to succeed, but in truth, they believed the success of the hospital was not up to them; it was in God’s hands. And so, as was their custom in times of difficulty and decision, they fasted and prayed that God would bless the work of their hands.

The strident competition over Riverside Hospital cemented the relationship between the Doctors Mayo and the Sisters at Saint Marys. Despite inexperience, hardship and hostility, they had learned to depend upon each other. The Sisters would never forget how the doctors endured public abuse with steadfast courage on their behalf. The Mayos’ unswerving loyalty had almost certainly saved the hospital. The Mayos, forced by circumstances, found they could furnish all the patients needed for the
hospital. In turn, the Sisters demonstrated they could provide all the doctors needed in a hospital and nursing care. Each made the decision to rely solely on the other. The Mayos’ decision centralized their surgical practice and became a primary factor in their phenomenal success. The Sisters’ decision moved Saint Marys Hospital beyond perceived parochial boundaries and into the mainstream of America.

ENDNOTES

Pages 20-24: The story of Riverside Hospital is included in Clapesattle, pp. 264-267, and Whelan, Volume One, pp. 71-73. In addition, the Annals of Saint Marys Hospital, 1892, provides contemporary information.
Check Your Compass

INTEGRITY

Adhere to the highest standards of professionalism, ethics and personal responsibility, worthy of the trust our patients place in us.
MAYO PROPERTIES ASSOCIATION
ORGANIZED FOR HUMAN WELFARE;
NO CAPITAL STOCK; ALL CLINIC
PROPERTIES IN MAYO'S GIFT

A transformative gift.
Chapter Four

Stewardship

“... contributions to the general good of humanity.”
— Deed of Gift

In a singular act of renunciation and dedication, the Mayo brothers took a series of steps in the years surrounding World War I that would alleviate sickness and suffering for future generations of patients. By transforming Mayo Clinic from a private partnership into a not-for-profit organization, they “made the medical experience of past generations available for the coming one.” In the words of Dr. Will, “Each new generation shall not have to work out its problems independently, but may begin where its predecessors left off.” The brothers solidified their commitment by donating the majority of their life savings, as well as all the physical properties and assets of Mayo Clinic. At the time, the total value of their generosity was more than $10 million; the equivalent sum today would be many times greater.

According to the Deed of Gift signed by both brothers and their wives, along with other related documents, the Mayos, their partners
and all future Mayo Clinic personnel would receive a salary and not profit personally from the proceeds of the practice. All proceeds beyond operating expenses would be contributed to education, research and patient care. This was a bold step and insured that Mayo would survive beyond its founders’ retirements and deaths. From this initiative Mayo Clinic emerged as a distinct institution and a new model of private group practice.

The decision grew out of the Mayo brothers’ shared surgical practice that began 30 years earlier. At first the brothers operated together because they found their combined technical skills produced the best results. Each took turns serving as the other’s first assistant. The brothers discussed every feature of their operations and pooled knowledge and ingenuity to meet a crisis when it came. Together, they faced and fought through problems, shouldered responsibilities and won successes. In the process they forged a bond of mutual love and admiration, “a bond so strong that nothing could ever break it.”
Despite outward differences, their personal respect and commitment to each other was unshakable. When talking about themselves, they rarely used “I” or “me,” but preferred to say, “my brother and I.” A colleague in later years remarked, “Your great success was not as surgeons. It was as brothers; there has never been anything like it.”

The Mayo brothers’ unqualified trust in each other extended to their finances. Indeed, they shared the same checkbook. Ten years into their surgical practice, when Dr. Will was 33 and Dr. Charlie 29, the brothers took stock of their finances. Over the course of several discussions, they agreed that half of their earnings was sufficient for themselves and their families. The remaining funds, in their words, “should be returned to the people from whom it came in a way that would do them the greatest benefit.” The brothers made a solemn vow to set aside half of their income that year and as much each year thereafter as they could. “They would invest it and increase it to the best of their ability, and someday they would find a way to return it to the people.”
By 1917, the brothers’ plans moved toward fruition, “but not without a struggle.” The brothers transferred funds to the University of Minnesota in order to support advanced specialty training for physicians and scientists using Mayo Clinic facilities and staff in Rochester. Affiliated with the university, their moneys would help establish “the first American graduate school in clinical medicine.”

News of the proposed affiliation with the university infuriated many Minnesota doctors. For some, their motive was a long-standing fear and jealousy of the Mayos’ success. Others held valid criticisms of the plan as it stood. “None of those elements, however,” writes biographer Helen Clapesattle, “can account for the personal spite and malice, the disgraceful misrepresentation.” Opponents lobbied the Minnesota legislature to pass a bill against the affiliation. When a public hearing was announced, friends and colleagues urged Dr. Will to speak to the legislative assembly. He hesitated, then responded, “I’m a good soldier. If you gentlemen think it’s necessary, I’ll do it.”

The chamber was crowded the night of the hearing. People hushed as Dr. Mayo began to speak. He
talked without notes, earnestly, simply, colloquially. “Every man has some inspiration; with my brother and I, it came from our father. He taught us that any man who has physical strength, intellectual capacity or unusual opportunity holds such endowments in trust, to do with them for others in proportion to his gifts.” His voice rose. “Now let’s call a spade a spade. This money belongs to the people and I don’t care two raps whether the medical profession of the state likes the way this money has been offered for use or not. It wasn’t their money.” Lowering his tone, Dr. Will recalled the words of Abraham Lincoln, “... that these dead shall not have died in vain.” He said this line “explains why we want to do this thing. ... What better could we do than take young men and help them to become proficient in the profession so as to prevent needless deaths?” The bill failed.

The ultimate success of Mayo Clinic, “past, present and future, must be measured largely by its contributions to the general good of humanity.” Inspired by their founders’ pledge in 1919, future generations at Mayo Clinic went on to greater levels of accomplishment and service.
ENDNOTES


Pages 30-31: The “Lost Oration,” as Dr. Will’s informal speech to the Minnesota Legislature was called, is described and quoted in Willius, F: Aphorisms. Rochester, Minnesota: Mayo Foundation for Medical Education and Research, 1990, pp. 85-92.

Page 31: Mayo Clinic Archives contain the Deed of Gift from William J. Mayo and Charles H. Mayo to Mayo Properties Association, October 8, 1919. The deed’s purpose in serving “the general good of humanity” is stated on page 3.
Chapter Four: Stewardship

Check Your Compass

Stewardship

Sustain and re-invest in our mission and extended communities by wisely managing our human, natural and material resources.
Meeting the challenge of the Great Depression.
A successful team enlists the right partners, even when they are unlikely collaborators. In the middle of the Great Depression, Sister Adele O’Neil, an intrepid little Franciscan in Rochester, Minnesota, stepped forward to help save her congregation from bankruptcy.

The Great Depression had drastic consequences for Saint Marys Hospital and the Rochester Franciscan congregation. Large debts for an extensive building project in the 1920s came due in the early 1930s. In 1933, the Sisters elected a new mother superior, Mother Aquinas Norton, known for her “organizational ability and financial genius.” On her first day in office, the sheriff came to Mother Aquinas’ door to inform her that she was liable for a debt of $5 million owed to 5,000 note holders. Unknown to her, the congregation’s business agent in Chicago, charged with the debt repayment, had absconded with $350,000 of the Sisters’ money.
Mother Aquinas’ first order of business was to extricate the congregation from threatened bankruptcy. She immediately appointed Sister Adele O’Neil as congregational treasurer. Young, lively and petite, Sister Adele possessed disarming financial expertise and dogged determination. Like Mother Aquinas, she learned about finance from working with her family’s business before entering the congregation.

Mother Aquinas asked the Bishop of Winona, Minnesota, Francis M. Kelly, and his advisors to meet about the financial crisis. To their surprise, the diminutive Sister Adele spoke up and suggested that she serve as broker rather than pay a large commission to a hired agent. Given the desperate situation, they agreed. Later, Sister Adele told the astonishing story of how she repaid the note holders and “no one lost a dollar of principal.”

Sister Adele chose Sister Rita Rishavy, the business officer of Saint Marys Hospital, as her assistant. With 80 percent of their creditors in Chicago, Sister Adele sought assistance from a large Chicago bank. As she put it, “We made friends with the Continental Bank of Chicago and
found the vice president very helpful.” He gave them regular use of a conference room with telephone and typewriter. The room opened on the office of the bank’s legal officer, who offered his services as needed. Thus began the financial odyssey of Sister Adele and Sister Rita to and from Chicago, twice weekly, over the next several months.

The Chicago Northwestern Railroad, which served Rochester, gave free passes to religious Sisters. Since there was no day train, the Sisters traveled at night. Upon arrival in Chicago, they stopped at a downtown church for Mass, then went to the Continental Bank. They worked the full day, asking creditors to renew their notes at a lower percentage. “Any one of them could have thrown us into bankruptcy,” Sister Adele reflected, “but they gladly agreed in order to save their principal.” Returning to Rochester, the Sisters went directly to the motherhouse and wrote to the creditors, often until midnight, without benefit of any office machines but a manual typewriter. After a day, sometimes two, they went back to Chicago and repeated the
process. “Through it all,” Sister Adele was quick to say, “we never missed our prayers.”

Six years later, when Saint Marys Hospital needed $8 million to build a medical wing, Sister Adele again approached the Continental Bank of Chicago. The bank, she recalled with a smile, “made the loan without a commitment fee.” Next, Sister Adele contacted many of the same creditors who had helped save the congregation from bankruptcy. “Almost 100 percent were willing to reinvest.” Her eyes sparkled. “From then on, we were our own brokers.”

ENDNOTES

Pages 35-36: Description by Mother Aquinas Norton of the sheriff at her door and subsequent meeting with Bishop Francis Kelly are included in an interview with Sister Bibiana Lewis, May 10, 2001. Archives of the Sisters of St. Francis, Assisi Heights, Rochester, Minnesota.

Check Your Compass

Teamwork

Value the contributions of all, blending the skills of individual staff members in unsurpassed collaboration.
Serving on the battlefield and the Home Front.

DECEMBER 7, 1941
“During World War II the Mayo Clinic and Saint Marys Hospital staff served wounded military personnel overseas and ill patients in Rochester with selfless heroism. Almost 300 Mayo physicians volunteered for the armed forces. In Rochester, their colleagues worked round the clock caring for record numbers of patients. Harry Harwick, Mayo’s chief administrator, described the war years. “The Clinic contributed heavily in manpower, perhaps a third of our consultants, including ranking members in many specialties, a good third of our Fellows, and, it sometimes seemed, almost every able-bodied man of military age in the non-medical sections. With this depleted staff, we were faced with registrations that reached record numbers.” Deferring their retirements, many senior physicians “took on work loads more suitable to men half their age, and handled them superbly.”

—I have never forgotten her kindness and concern.”
—Sumiko Ito, R.N.
Like his colleagues, surgeon O. T. Clagett, M.D., “carried the extra burden with a spirit that has never been excelled in the history of the Clinic.” He recalled, “I believe my longest surgical list in one day was 23 major operations.” “Lists of 15 to 20 operations daily were almost routine. I remember one day I had a list of 19 operations. A visitor in the gallery spoke to me in the course of the day and said, ‘I am the medical officer who examined you at Fort Snelling and turned you down as unfit for active military service. I think I made a hell of a mistake.’”

At Saint Marys Hospital, Sisters and staff met wartime shortages with equal spirit. A sentence in the hospital newsletter captured their resolve. “We must learn the true meaning of sacrifice, of more work, faster work and of one more job.” Prayer was an essential part of the Sisters’ day. Whether in chapel or catching a minute on the floors, they prayed for the armed forces and those who bore the burdens of war at home. “Healing in body and spirit” was their prayer and their practical means of support to help the displaced persons of Japanese descent living on the West Coast. Feared as enemy
agents, 120,000 Japanese-Americans were forcibly removed from their homes, jobs and schools to live in “war re-location camps.” Following the Japanese attack on Pearl Harbor, armed soldiers herded adults and children into tar-paper barracks without running water and adequate heat.

The plight of Japanese-American nursing students troubled Sister Antonia Rostomily, director of Saint Marys School of Nursing. A formidable teacher and disciplinarian, Sister Antonia was a woman of good heart and common sense. Aware that many nursing schools would not accept Japanese-American students, she believed Saint Marys Hospital with its experience in serving international patients would be a desirable setting. With strong support from hospital administration, the nursing school faculty and student body, her proposal went forward. The admissions committee selected 15 Japanese-American applicants, “for their scholastic ability, educational, and social background.”

For the young Japanese-American nursing students, the welcome opportunity came at a wrenching cost. They
left beloved parents and siblings imprisoned in primitive barracks, surrounded by armed guards and barbed wire. It is difficult to imagine their thoughts as they boarded trains that took them to Rochester, a 2,000-mile journey into a Minnesota winter and an unknown future.

Fifty years later, in 1994, one of the students, Sumiko Ito, wrote a letter to the nursing school’s alumni office. She shared a life-changing experience that happened early in her student days. “It was with a thankful heart and a fierce determination to succeed that I entered my probationary period,” she recalled. “Toward the end of my probation, a bunch of us were invited to a get-together at a friend’s house. Time got away from us. We feared we would miss our curfew and ran all the way back to the nurses’ home.” They missed the curfew by minutes. The next morning a note on the bulletin board summoned the offenders to Sister Antonia’s office.

“With great trepidation,” Sumiko wrote, “I entered her door. To my vast astonishment, Sister Antonia did not admonish or discipline us. Instead, she said she wanted to talk with us. Knowing we were undergoing many adjustments and were subject to racial intoler-
ance, she asked how we were doing and if everyone was treating us well. She used this episode just to talk to us. I have never forgotten her kindness and concern.”

Sister Antonia and many of the Sisters who prayed for Japanese-Americans did not live to read Sumiko’s letter. Yet surely long before, they were confident that their prayer brought healing and solace for Sumiko and her people.

“I have never forgotten Sister Antonia’s kindness and concern.”
Endnotes


Page 42: The statement “carried the extra burden with a spirit that has never been excelled in the history of the Clinic” comes from Donald C. Balfour, M.D., and is found in the *Balfour Papers, Mayo Clinic Archives*, Rochester, Minnesota.


Page 42: “We must learn the true meaning of sacrifice …” is found in *Saint Marys Hospital Bulletin*, Vol. 1, No. 1, May 1942, p. 3.


Page 43: Information about admitting students to Saint Marys is found in the entry “American-Japanese Students,” *Annals of Saint Marys Hospital*, 1943. Americans of Japanese ancestry were hired for several positions at Saint Marys Hospital, including nursing instructor, night supervisor, dietitian, head nurse and secretary for the school of nursing.

Check Your Compass

Healing

Inspire hope and nurture the well-being of the whole person, respecting physical, emotional and spiritual needs.
Expansion in the post-war era.
Chapter Seven

Excellence

“Do all the good you can ...”
— John Wesley

The end of World War II held great promise. Patients arrived in record numbers. Plans took shape for an extensive new facility: the Mayo Building. Saint Marys Hospital prepared for an increased workload. “Only the downtown hospitals ... flawed the hopeful Rochester medical center picture.”

“Downtown” hospital care has a story that is distinct from and complementary to the relationship between Saint Marys and Mayo Clinic. Starting in the early 1900s, Saint Marys could not meet all demands, even with frequent expansion. In addition, patients needed a place to recover after surgery and their families needed lodging.

Rochester businessman John Kahler stepped forward. In 1907, he opened a remodeled house near the Mayos’ office. A newspaper reported: “The institution has the novel aspect of being a home, a hospital, a sanitarium and an infirmary, all in one.”
For the next 47 years, the Kahler Corporation developed a network of hotels and hospitals, along with other amenities, to serve patients and visitors. At the dedication of the Kahler Hotel in 1921, Dr. William J. Mayo praised John Kahler: “He had the vision, the ability, to see and think and act. He has made possible the Clinic expansion.”

With changes in medical technology and economics after World War II, however, the Kahler Corporation turned exclusively to hospitality. The search began for a new model of downtown hospital care.

On January 1, 1954, Rochester Methodist Hospital came into being. Like Saint Marys, it was a not-for-profit organization founded by faith-based activists who worked with Mayo physicians. Harry Blackmun, J.D., Mayo Clinic attorney, future justice of the United States Supreme Court and a prominent Methodist, wrote the articles of incorporation.

Unlike Saint Marys, the new hospital was not part of a church hierarchy. It was a stand-alone initia-
tive, which compelled innovation. For a dozen years, the staff worked in Kahler facilities constructed decades before. But from the start, they were committed to developing the best methods. Later generations would talk about “Six Sigma” and “Quality Planning.” For Rochester Methodist Hospital, the mantra was “Dedicated to Excellence.”

In 1955, the hospital earned global acclaim when John Kirklin, M.D., pioneered open-heart surgery with a heart-lung bypass machine. The pharmacy created the unit dose of dispensing medication, setting a new standard for the medical profession. Recognizing the unique ministry of hospital chaplains, Rochester Methodist established a nationally renowned training program for clergy.

Befitting its name, Rochester Methodist Hospital engaged the community. It started a community-based board of directors and auxiliary, later adopted by Saint Marys. While Mayo Clinic and Saint Marys passively accepted gifts, most often for charity care, Rochester Methodist took a proactive approach: setting a vision,
stating a case and seeking support, which defines philanthropy at Mayo Clinic today.

Rochester Methodist also pioneered the respectful way that new management works with established employees ... a spirit that proved essential many times over in the coming years. Rochester Methodist set a bold new path, but welcomed the skills and dedication of former Kahler staff. The revitalized Methodist-Kahler School of Nursing looked ahead while honoring roots of nursing education that went back to 1918.

In 1957, leaders began studying the concept of a radial nursing unit, with a central desk encircled by patient rooms. A prototype nicknamed “the silo” proved its effectiveness. The radial unit became a highlight of the hospital’s new building, which opened in 1966, and inspired architects for years to come.

But with progress came sacrifice. Ironically, studies showed the best location for the new building was the site of First Methodist Church, the very congrega-
tion that was most deeply involved with the hospital. The congregation gave up their home for a state-of-the-art medical facility and resettled across town as Christ United Methodist Church.

More than 10,000 people thronged to the open house for Rochester Methodist Hospital. Its wide doors opened a new era ... programs in nutrition education ... car seats to give newborn babies a safe ride home ... “Come and See” activities to welcome school children ... the Life Run, an early effort to promote fitness ... the first FDA-approved artificial hip joint ... and Charter House, a new concept in retirement living.

Like Saint Marys, with its Franciscan tradition, Rochester Methodist Hospital was open to people from all walks of life. It took root and flourished with the values of John Wesley, the founder of Methodism, who said: “Do all the good you can, by all the means you can, in all the places you can, at all the times you can, to all the souls you can, for as long as you ever can.”

The staff at Rochester Methodist Hospital combined technical skills and compassionate care.
“Only the downtown hospitals …” is found in Holmes, W: *Dedicated to Excellence – The Rochester Methodist Hospital Story*. Rochester, Minnesota: Privately printed, 1984; revised, 1987, p. 44.

The 1907 newspaper article is quoted in Holmes, p. 41.

Dr. Will Mayo’s speech praising John Kahler at the 1921 dedication of the Kahler Hotel is quoted in *The Kahler Grand Hotel*. Privately printed, no date, p. 1.


“Do all the good you can …” is a saying widely attributed to John Wesley, founder of Methodism, in many print and online sources; wording varies (“souls” vs. “people,” etc.).
Excellence

Deliver the best outcomes and highest-quality service through the dedicated effort of every team member.
Saint Marys Hospital, Mayo Clinic and Rochester Methodist Hospital formed a unified governance structure.
Chapter Eight

Respect

“A trusteeship for health.”
— Governance Document

Sunlight streamed into the Mitchell Student Center of Mayo Medical School on May 28, 1986. It brought a warm glow to a milestone event: Leaders representing Mayo Clinic, Saint Marys Hospital and Rochester Methodist Hospital signed a document that formalized their “historic existing relationships, creating a more fully integrated medical center under a single trusteeship.” Building upon decades of collaboration, three separate organizations now came together as one.

Many factors drove the decision, which followed lengthy, wide-ranging discussions. Health care, always a personal relationship of patients with their physicians, nurses and other professionals, was increasingly drawn into economic and regulatory issues. Additional factors, including an aging population, advancing technology, competition from other health care providers and changes in American society, also played a role.
These forces would not abate. Indeed, they kept evolving and accelerating, a pattern that continues today. In response, Mayo’s leaders turned to Mayo’s values in order to set new directions that balanced the timeless commitment “to heal the sick and to advance the science” with the need for ongoing reinvention of how best to carry out that mission. Among the most important values was respect: placing the needs of the patient first and working to support the well-being of employees and colleagues.

Mayo’s value of respect stood in stark contrast to many practices in business and industry. In this era, takeovers, mergers, buyouts and acquisitions were common in the corporate world. The financial bottom line — for shareholders and for insiders who stood to reap huge profits — often was the determining force guiding decisions that affected multitudes of employees and consumers.

A respectful approach was vital when discussions
arose and decisions were made that were difficult and even painful. One early example was Mayo’s decision in 1956 to begin accepting research funds from the National Institutes of Health. A decade later, the topic of whether Mayo Clinic should establish a medical school was hotly debated.

Mayo’s consensus-based decision-making process ensured that individuals could have their say and diverse points of view could be explored. When the decisions were made, they were grounded in Mayo’s traditional values. In announcing the acceptance of federal grants, Samuel Haines, M.D., chair of the Board of Governors, described “a moral responsibility ... with giving the best in medical care, and with doing our best in medical education and research.” At the first convocation of Mayo Medical School in 1972, Dean Raymond Pruitt, M.D., said: “... the primary mission of our Mayo institutions, of our profession, of our science, of our new school is a mission on behalf of the humane.”

When other large organizations evolved in this era, it often was because they went on a “shopping spree,” acquiring business and entering industries far removed
from their original mission. Culture clashes and economic dislocations often resulted. Mayo’s leaders, by contrast, remembered Dr. Will’s words: “We never have been allowed to lose sight that the main purpose to be served by the Clinic is the care of the sick.”

This focus on serving patients kept Mayo Clinic grounded, but it also encouraged an entrepreneurial spirit that opened avenues Dr. Will never imagined. The early 1980s saw the start of “diversification,” which included fundraising, the commercial application of Mayo’s discoveries and intellectual property, the expansion of Mayo’s reference laboratory system and the publication of health information for consumers. After decades of avoiding the news media, Mayo began to share its message, as patients described their experience in receiving high-quality, compassionate care.
Across the generations, “Mayo Clinic” meant as “an outpatient practice in Rochester, Minnesota.” That definition changed as Mayo integrated with Saint Marys Hospital and Rochester Methodist Hospital in 1986 ... opened in Florida that year and in Arizona in 1987 ... developed Mayo Clinic Health System starting in 1992 and then Mayo Clinic Care Network in 2012. Respectful engagement was at the forefront. Quality of care, economic benefit and expansion of scholarly activities in medical research and education are consistent measures of the respectful way that Mayo Clinic works with each of its communities.

Respect continues to underscore the relationship between Mayo Clinic and the Franciscan Sisters. After the Second Vatican Council (1962-1965), fewer women entered religious life and some Sisters left Saint Marys Hospital. As administrators, Sister Mary Brigh Cassidy and Sister Generose Gervais graciously welcomed laypeople into positions of responsibility at the hospital.
This, in turn, helped pave the way for a closer relationship with Mayo Clinic and an extension of the Franciscan spirit to Mayo colleagues beyond Saint Marys Hospital.

Throughout the process that began with the “trusteeship for health” document in 1986, the Franciscan Sisters and the people of Mayo Clinic have articulated and attempted to live out a series of values that set Mayo Clinic apart — while also providing an example that inspires organizations and people throughout the United States and around the world.

ENDNOTES


Page 58: “To heal the sick and to advance the science” is quoted in Willius, p. 27.


Page 59: Raymond Pruitt, M.D., described the school’s “primary mission” in The Unending Adventure. Privately printed, no date, p. 25.

Page 60: “We have never been allowed to lose sight …” is included in Willius, p. 45.
Check Your Compass

Respect

*Treat everyone in our diverse community, including patients, their families and colleagues, with dignity.*
Flood! Rochester, Minnesota, July 5-6, 1978.
“Values are caught, not taught.”
— Sister Generose Gervais

The rain began at 5:53 p.m. on Wednesday, July 5. Nearly seven inches fell in the next eight hours, inundating one-fourth of the city, causing $60 million in damage and claiming five lives. The flood of 1978 was the worst natural disaster to strike Rochester, Minnesota, since the tornado of 1883, which inspired the founding of Saint Marys Hospital.

By this time, Saint Marys was the largest private hospital in the United States. Filled with patients and staff, it also welcomed people who sought shelter from the storm and its aftermath. Fortunately, the hospital’s chief administrator, Sister Generose Gervais, was equal to the crisis. She spent that night and the days that followed managing the hospital — not from her office, but by walking the halls and, as needed, by mopping the floor.

The comfort and compassion that Sister Generose demonstrated were indicative of her hands-on commitment and spirit of servant lead-
ership, which have inspired generations of patients and colleagues alike. She received a Papal commendation served as the first woman director of the Federal Reserve Bank in Minneapolis and was one of two women in her Master’s in Health Administration Program at the University of Minnesota (earning straight A’s), but she equally enjoyed talking about the crops, her beloved Minnesota Twins baseball team or activities on the sprawling Saint Marys campus.

Sister Generose grew up in southwestern Minnesota during the Dust Bowl years of the Great Depression on a farm with no electricity or running water. She entered the Franciscan congregation at age 18 and taught school during World War II. She earned a degree in home economics and entered Saint Marys Hospital as a dietetics intern. Soon she was tapped to serve as co-director of the Saint Marys School of Practical Nursing, followed by service as superior of the Saint Marys convent and assistant to Sister Mary Brigh Cassidy, the hospital’s chief administrator.

In 1971, she became the fifth Franciscan Sister to lead the hospital. “Her insistence on economy and accountability kept Saint Marys financially strong during an era in which rising costs drained the coffers of
many hospitals.”

Indeed, these were years of expansion. The Mary Brigh Building, dedicated in 1980, was the largest hospital project in Minnesota’s history to date. “She was as comfortable with the complexity of blueprints as she was with canning fruit,” noted a colleague who worked closely with her. “She knew every corner of the hospital and how each space could best be used.”

The bankers and lawyers who were evaluating the issuance of bonds for the construction project asked to review Saint Marys’ contract with Mayo Clinic. “We don’t have a contract,” Sister Generose replied. “They couldn’t believe it,” she later recalled. They asked,
“What do you do when you have a problem?” Sister Generose explained: “Those who are concerned with the problem get together, discuss possible solutions, choose what seems best and set about doing it.” They commented: “This has to be the greatest living example of trust in the world, for two organizations of such size and complexity to work together like this.” For Sister Generose, however, this relationship is a natural extension of the handshake and mutual trust between Dr. William Worrall Mayo and Mother Alfred Moes in the 19th century.

At Mayo Clinic, one of the most frequently quoted aphorisms of Sister Generose is “No money, no mission.” But, she was quick to add, there is an equally important corollary: “No mission, no need for money.” For Sister Generose, in fact, mission came first.

One of her most significant contributions to that mission is the Poverello Foundation, whose purpose is “to ease the burden for patients who need financial support for the care they received at Saint Marys Hospital.” The foundation is named for Saint Francis of Assisi, who was known as “Il Poverello” or “the little poor man.” While the Poverello Foundation provides important financial support, Sister Generose believed that its enduring impact is
the sense of hope and renewal that recipients experience.

Sister Generose was the last Franciscan to serve as chief administrator of Saint Marys Hospital. In 1986, Saint Marys, Rochester Methodist Hospital and Mayo Clinic formalized their relationship by establishing a single governance structure, “a trusteeship for health.” Continuing this momentum, in 2013, the two hospitals united into a single legal entity called Mayo Clinic Hospital — Rochester. To honor the hospital’s heritage, its two geographic locations retain the historic names of Saint Marys Campus and Methodist Campus.

Dr. Charlie said his father “never really did retire,” and, like Dr. William Worrall Mayo, the same may be said of Sister Generose who remained active at Saint Marys until her death in 2016. She was one of the most sought-after speakers at Mayo Clinic, often address-
ing employees who were born after she stepped down as executive director of Saint Marys in 1985.

Sister Generose was pleased to accept these invitations, but she deftly turned attention away from herself. “Values are caught, not taught” was one of her frequent maxims, and she reminded colleagues of what a beggar said to Saint Francis many years ago: “Be sure thou art as good as the people believe thee to be, for they have great faith in thee.”

Bringing that message home to her audience, she gently urged: “Be sure you are as good as the people think you are, for they have great faith in you — and you are Mayo Clinic.”

ENDNOTES


Page 70: Sister Generose paraphrased the beggar’s admonition to St. Francis. Ibid.
Check Your Compass

Compassion

Provide the best care, treating patients and family members with sensitivity and empathy.
Chapter 10

Friends Along the Journey

“The glory of medicine is that it is constantly moving forward ...”
— Dr. Will Mayo

One of the important aspects of pilgrimage is the community of people you meet along the way, as well as those who accompany you on your path. Among the many people who have lived the values and shaped the history of Mayo Clinic, this book includes the following individuals. May you sense their presence and extend their vision in your own journey.
Harry A. Blackmun, J.D.

Born in Illinois, Harry Blackmun grew up in St. Paul, Minnesota, where a grade school classmate was Warren Burger, future member of the Mayo Clinic Board of Trustees and chief justice of the United States Supreme Court. Harry Blackmun attended Harvard College on a scholarship, followed by Harvard Law School.

After establishing a successful legal practice in the Twin Cities, he served as resident counsel of Mayo Clinic from 1950 to 1959, where he played a leadership role in establishing Rochester Methodist Hospital. Harry Blackmun often said “the happiest years” of his career were in Rochester. He was appointed judge of the Eighth Circuit Court of Appeals in 1959, followed by appointment to the United States Supreme Court, where he served from 1970 to 1994.
A consummate administrator for 22 years, Sister Mary Brigh was a warm, approachable woman who walked the halls of the hospital at the end of every day, visiting patients and encouraging staff. One colleague described her as being “a gentlewoman with quiet Irish chutzpah.”

Sister Mary Brigh valued the broad perspective of lay colleagues. When the number of Sisters working at the hospital decreased and as Sisters retired from supervisory positions, she appointed laypeople in their place. Sister Mary Brigh created the hospital’s first Board of Trustees, consisting of seven laypersons and eight Franciscans. Her bold initiatives ensured the hospital’s growth and stability, and strengthened the Mayo-Franciscan partnership.
Sister Joseph began 50 years as a nurse and hospital superintendent shortly after Saint Marys opened. Her unusual ability as a surgical nurse prompted Dr. Will to choose her over a physician as his first assistant. They often worked before a gallery of visiting surgeons. Dr. Will explained the procedure while Sister Joseph went on with the operation. Dr. Will said, “Of all the splendid surgical assistants I have had, she easily ranks first.”

The hospital was the Sisters’ home and hospitality was the rule. Sisters treated each patient and employee with friendliness and respect. New employees received training from the Sister in charge of their area. They also learned about the hospital’s mission, most often translated as “the patient comes first.” A bond of shared dedication among the Franciscans and their lay colleagues made them in many respects like one family.
A national leader in nursing, Sister Domitilla became administrator of Saint Marys Hospital in 1939. The first American Sister to receive a nursing degree, she graduated from Columbia University. Her background in the basic sciences and administration served the medical center well.

As the nation braced itself for World War II, Sister Domitilla acted with dispatch to improve patient services and reorganize for greater efficiency. Her initiatives brought sweeping changes, from new departments to a state-of-the-art medical wing. When Mayo physicians requested laboratories in the new building for clinical trials, Sister Domitilla directed architects to design patient floors and research laboratories in close proximity. The legacy of these laboratories lives on in Mayo’s remarkable contributions to medical research, including the isolation of cortisone and its effective treatment of rheumatoid arthritis.
Sister Generose combined an openness to serve with the ability to master almost any assignment. From 1971 to 1986, she was the fifth Sister and last Franciscan chief administrator of Saint Marys Hospital.

One of her memorable contributions is the Poverello Foundation, which helps patients who need financial support for the care they received. Named for St. Francis of Assisi (“Il Poverello” or “the little poor man”), the foundation helps about 400 persons each year.

Until her death in 2016, Sister Generose was one of the most sought-after speakers at Mayo Clinic. With stirring examples, she told how ordinary and heroic acts of staff put the patient first and helped bring the medical center through dark times. “Their overriding goal was to give each patient the best care in the world,” she said. “Each of you has that same goodness and strength. Use it to serve every patient and each other.”
Harry J. Harwick

Harry Harwick joined the Mayo medical practice in 1908, on his 21st birthday. In the course of a 44-year career, he pioneered the profession of medical administration, uniting sound business principles with the medical ideals of the Mayo brothers. The collegial relationship that he shared with Dr. Will Mayo established the principle of physician-administrator collaboration, which is one of the enduring strengths of Mayo Clinic.
An entrepreneurial business leader and close friend of the Mayo brothers, John Kahler responded to acute demands for hospital beds and patient amenities to support the growing Mayo practice. Based upon his observations in Europe, in 1907 he opened a combined hospital-hotel where patients could recuperate and family members could stay, all in close proximity to the Mayo medical offices. His enterprise grew into a network of hospitals and related services. After World War II, the Kahler Corporation decided to focus on the hospitality industry. Rochester Methodist Hospital was established to provide hospital care in downtown Rochester.
Charles H. Mayo, M.D.

The younger Mayo brother, known as Dr. Charlie, was born in Rochester, Minnesota, in 1865. Known for his warm, affable nature, he graduated from what is now the medical school of Northwestern University and specialized in head and neck surgery. Dr. Charlie married Edith Graham, R.N., the first professionally educated nurse in Rochester, who taught nursing skills to the Sisters of St. Francis. Dr. Charlie and Edith made Mayowood, their country estate, a center of hospitality.
Dr. Will, the elder Mayo brother, was born in Le Sueur, Minnesota, in 1861, before his family moved to Rochester. A graduate of the University of Michigan, Dr. Will specialized in gastric surgery. Like his brother, he received honors from throughout the United States and around the world and served as president of the American Medical Association.

An excellent administrator as well as an acclaimed surgeon and educator, Dr. Will married Hattie Damon, his childhood friend. They often entertained guests on their riverboats as well as at their home. In 1938, they donated their residence to Mayo Foundation as a meeting place “for the good of mankind.” Dr. Will and Dr. Charlie as well as Sister Joseph Dempsey, their close colleague and longtime superintendent of Saint Marys Hospital, all died within a few months of each other in 1939. Their shared legacy is the spirit of teamwork and service at Mayo Clinic.
Born near Manchester, England, in 1819, W.W. Mayo immigrated to the United States as a young man, earned two medical degrees when most physicians had no formal education, and settled his young family in Rochester, Minnesota, during the Civil War. Active in civic affairs and possessed of a strong social conscience, he was one of the leading physicians in Rochester when a tornado devastated the frontier community in 1883.

The collaboration of Dr. Mayo with Mother Alfred Moes in the aftermath of that tragedy led to Mother Alfred’s bold vision that the Sisters of St. Francis would fund construction of a hospital and serve as nurses if he and his sons would provide the medical care. The handshake that sealed their agreement symbolizes the Mayo Clinic Values.
Mother Alfred, born in Luxembourg, founded two teaching congregations and a score of schools across the Midwest. In 1883, a tornado in Rochester convinced her that the community needed a hospital. Dr. W.W. Mayo and his sons agreed to collaborate. As medical science moved forward with new momentum, the Franciscan Sisters and the Doctors Mayos shared the resolve to incorporate medical advances.

At Saint Marys Hospital, the Sisters created an inviting, homelike environment and served meals of highest quality. Sister Joseph Dempsey recalled that Mother Alfred “sometimes worked continuous shifts of one day and night and another day. She carried water from the basement to the upper floors, delivered trays of food to patients’ rooms, shoveled coal and pinked oilcloth to make covers for the washstands in patients’ rooms.” Inspired by her extraordinary dedication, “Values are caught, not taught” became the maxim for patient care at Saint Marys Hospital.
Check Your Compass

Friends along the journey

Who are your “role models and soul models” at Mayo Clinic? How have they inspired you?

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________________________________________________________________________________
“We know who we are with the Sisters. We don’t know what we’d be without them.”
— W. Eugene Mayberry, M.D.
Chair of the Board of Governors
Mayo Clinic, 1976-1987

“Mayo Clinic is built on gratitude. Everything we have received is a gift. Everything we can offer each other is a gift.”
— Sister Generose Gervais
Administrator and Executive Director
Saint Marys Hospital, 1971-1986

The Mayo Clinic Values are a living legacy – transmitted across generations by the Mayo family and the Sisters of St. Francis, as well as by patients, colleagues and friends from diverse walks of life. Written as a field guide, this book shows how the values have been expressed at key moments of our history. You are part of the story as well, and the book includes places for you to write your own reflections about Mayo Clinic and our mission of service to humanity.