

## **Spec/Text Sheet**

**Hand and machine stitched bed coverings. Machine embroidered text.**

**Antique metal hospital doll bed with wheels hand crank mechanism**

14 1/4” (W) x 24” (L) x 7 1/2” (H) (mattress to floor height),  
17” headboard, 13” footboard (H) (floor the bed rails height)

**Pillowcase 1** (*vintage white cotton pillow cover*)

8” (W) x 5” (L)

**Pillow 1** (*vintage striped blue, white pillow ticking, cotton batting stuffing*)

7” (W) x 4 1/2” (L)

**Pillowcase 2** (*vintage white cotton pillow cover*)

9” (W) x 5” (L)

**Pillow 2** (*vintage striped blue, white pillow ticking, cotton batting stuffing*)

8” (W) x 5” (L)

**Blanket 1 – *folded at end of bed*** (*vintage blue cotton baby blankets with striped flannel blanket trim*)

22” (W) x 27 1/2” (L)

**Blanket 2** (*vintage tan wool blanket front, vintage white cotton blanket back, with blanket binding*)

23” (W) x 27” (L)

**Top sheet** (*vintage white cotton bed sheet, with blue piping*)

23 1/2” (W) x 31” (L)

**Bottom sheet** (*vintage white cotton bed sheet with original blue ink “Linen service” stamp*)

22” (W) x 31” (L)

**Mattress Cover/Bed Pad** (*vintage Medline Pinnacle blue polyester/white quilted cotton bed pad*)

15” (W) x 23 1/2” (L)

**Mattress** (*vintage blue striped cotton ticking fabric, stuffed with cotton batting stuffing*)

14” (W) x 24” (L) x 2” (H)

**Hospital Robe** (*vintage Medcrest cotton polyester sear-sucker blue striped hospital gown, digitally printed daisy image with machine embroidered flower lining and text*). Original Medcrest Label

12” (W) closed at belt loops x 14 1/2” (L).

22” (W) opened

9” Sleeve (L)

## BIBLIOGRAPHY

### Florence Nightingale Stories:

- *Ever yours, Florence Nightingale: Selected Letters*, edited by Martha Vicinus and Bea Nergaard, 1989
- *Notes on Hospitals*, by Florence Nightingale 3rd edition, 1863

### Other Stories:

*A Day At A Time: The Diary Literature of American Women from 1764 - Present*, edited by Margo Culley, 1985  
Abigail Lewis (pseudonym of Otis Kidwell Burger), "An Interesting Condition: The Diary of a Pregnant Woman", 1950 – on the birth of her 1<sup>st</sup> child April 4, 1948

### ***Brought to Bed Childbearing in America, 1750 – 1950***

1930's hospital story (no name/mother with no recollection...)

### ***Essays on Women, Medicine and Health***, Ann Oakley, 1993

1986 story of nurse being important to her survival

### ***Immaculate Deception: A New Look at Women and Childbirth in America***, Suzanne Arms, 1975

- Anon story with doctor with white shoes
- Melinda Barbee story with gold star

### ***Mother's Letters: Essays***, Elizabeth Hampsten, 1993

After the death of her mother in 1979, [Elizabeth Lockwood] Elizabeth Hampsten's father gave her a hatbox full of letters she had never known existed. These dated from 1928 -1950 and were written to Lockwood's own parents, about life as a student at Wellesley in 1928 through the birth of her 4 children, and her life as the wife of a foreign-service officer.

### ***Safe Deliverance***, Frederick C. Irving, 1942

Became Chief of Staff of The Boston Lying in Hospital, grandfather of writer John Irving

Bridget Logan story - 1883 is told by Frederick Irving, Chief of Staff of the Boston Lying-In Hospital. The hospital on McLean Street was closed due to the fact that one of every two women who entered its door became infected with puerperal fever and one in every twenty died. It was said:

*...upward of a thousand women had been in peril in five short years within the walls of one small hospital... Twice already the hospital had been closed; but in spite of the isolation of sick women with special nurses and house officers to care for them, in spite of the destruction of mattresses and pillows, of disinfection, of washing and painting of the walls and floors, and ceilings, in spite of individual utensils for each woman, each time the doors were opened to admit new patients, in a few days or weeks the pestilence was at work again.*

The Hospital re-opened in 1873.

### ***The New York Times: Finally, a Wedding. It Was About Time***, Amanda McCracken, June 13, 2020.

Amanda spoke about that time with her grandmother, in some ways, was like "birthing her death." At the time she wrote the story in 2020 about her wedding the year before in 2019, Amanda was pregnant with her first baby, Moorea Velda, who was born August 6, 2020. Amanda's mother Patrice, nominated the Mercy Health "Nurses of 3A" involved that day, for The Daisy Award [The DAISY Award For Extraordinary Nurses]. In December of 2019, these nurses received the award at the Fairfield Hospital in Ohio. It is her letter of recommendation that is embroidered on the back of the hospital gown.

**Pillowcase 1 front**

Do you know what I think when I look  
at that row of windows?

**Pillowcase 1 back**

I think how I should turn it into a hospital,  
and just how I should place the beds.

*Florence N.*

**Pillow 1 front**

You know that I always believed it to be God's  
will for me that I should live and die in Hospitals.  
When this call He has made upon me...

**Pillow 1 back**

and I am no longer able to work...  
I should wish to be taken to St. Thomas' Hospital,  
and to be placed in a bed in a 'general' ward...

*Florence N.*

**Pillowcase 2 front**

*"Well, I expect you'll be out of here by midnight."*  
Since it was then shortly before eleven, I was  
astonished and asked her what made her think  
that. *"Oh, redheaded women always have babies  
quickly,"* she said. IT was the first of many  
peculiarities anent childbearing I was to discover  
were attributed to my coloring.

**Pillowcase 2 back**

The whole business, from my entrance into the hospital to  
the birth of the baby, had taken slightly less than two  
hours... It certainly didn't seem even that long;  
I guess there had been too much going on....

*Abigail L., 1948*

**Pillow 2 front**

Such was obstetrics in the days  
before antiseptics...  
when the best luck that could be wished on

**Pillow 2 back**

our mothers and grandmothers was to hope  
that they would have their babies so quickly  
that the doctor could not arrive in time to infect them.

*Frederick I., 1942*

**Blue Blanket 1 top side** [folded/end of bed]

It was necessary to say thus much to show to what hospital diseases are not necessary due to the following defects in site, construction and management. As we think, they are mainly to be attributed:

*The Agglomeration of a large number of sick under one roof.* ...every patient has long since acquired the right to their own separate bed.

*Deficiency of Space per bed.*—Wherever cubic space is deficient, ventilation is bad. ...give to each bed a territory to itself of at least eight feet wide by twelve or thirteen feet long.

*Deficiency of Ventilation.* —The want of fresh air may be detected in the appearance of patients sooner than any other want. Unless the air *within* the ward can be kept as fresh as it is *without*, the patients had better be away.

*Deficiency of Light.* — Second only to fresh air, ... I should be inclined to rank light in importance for the sick.

*... from experience, as quite perceptible in promotion recovery, the being able to see out of a window... It is generally said that the effect is upon the mind. Perhaps so; but it is no less so upon the body on that account.*

*The axis of a ward should be as nearly as possible north and south, the windows on both sides... There should be a window to at least every two beds...*

**Blue Blanket 1 back side** [folded/end of bed]

**Principles of Hospital Construction: Bedding**

No bedding but the hair mattress has yet been discovered that is fit for hospitals. Hair is indestructible. It does not readily retain miasma. And, if it does, heat easily disinfects it. It may be washed. There have been repeated objections to the use of horsehair on account of the current expense. But this, under careful administration, is much less than is generally supposed...

All bedstead for hospital use should be of wrought iron, frequently painted of a light cheerful colour. Just in proportion to the discrepancy between the spacious, cheerful ward and its shabby dirty-looking furnishing, is the air of general discomfort which it presents. A head shelf to the bed is useful.

Sacking bottoms are preferable to iron bottoms, which are stated to harbour vermin between the interlacings, and it is said that the edges of the iron bands cut the bed-ticks...

Every hospital should have dropsy and surgical bedsteads for raising a patient when he cannot be moved, for inclining him at a certain angle, &c., also water and air beds. For many purposes different forms of new spring bedsteads will be found very useful.

*Florence N, 1863*

**Cream/Off-White Wool Blanket 2 front side**  
[made up on bed]

The object of reading these diaries from month to month is of course to see how each probationer improves in keeping her “sheet” from month to month. This is satisfactory as to process—but not so satisfactory as it should be.

Another remark I would make almost universally—no one gives you the *progress* of the *cases*. One cannot make out from anyone’s diary whether the case is going well or ill. Surely for one interested in her cases, this is of the first interest.

This cannot apply of course to the first day in Ward.

There is an immense deal of zinc rubbing but I have not met with a single observation as to whether there was danger of bed sore.

Miss Bird... writing a very full diary, is rather disappointing. She makes “the beds in the usual way,” but “three of the patients” are “helpless.” Had the beds to be made with the patients *in* them? She does not describe the process.

She washes a patient “all over” in bed—but does not describe this process.

There is rarely or never any notice given by which one can tell whether any critical disease is doing well or ill. This is a capital fault.

*Florence N, August 1881*

**White Cotton Blanket 2 back side**  
[made up on bed]

Ordered to keep my room, being threatened with pneumonia. Sharp pain in the side, cough, fever, and dizziness. A pleasant prospect for a lonely soul five hundred miles from home! Sit and sew on the boys’ clothes, write letters, sleep, and read; try to talk and

keep merry, but fail decidedly,

as day after day goes, and I feel no better.

Dream awfully, and wake unrefreshed, think of home, and wonder if I am to die here, as Mrs. R., the matron, is likely to do. Feel to miserable to care much what becomes of me. Dr. S. creaks up twice a day to feel my pulse, gives me doses, and asks if I am at all consumptive, or some other cheering question...

They want me to go home, but I won’t yet.

...

On the 21st I suddenly decided to go home, feeling very strangely, and dreading to be worse. Mrs. R. died, and that frightened the doctors about me; for my trouble was the same—typhoid pneumonia...

Miss Dix brought a basket full of bottles of wine, tea, medicine, and cologne, besides a little blanket and pillow, a fan, and a testament.

She is a kind old soul, but very queer and arbitrary.

Was very sorry to go...

Quite a flock came to see me off; but I was too sick to have but a dim idea of what was going on...

*Louisa A., 1863*

### Top sheet with blue seam *top side*

January 23 in the year 1883...

That afternoon, at forty minutes after three, Bridget Logan dies of childbed fever.

Two months before, frightened and ashamed, she had entered the hospital to await the birth of her baby... She found that the other girls in the hospital were mostly unmarried; and she thought that some of them were more wicked than herself, for she had sinned but once.

At five o'clock, while it was still dark, her child was born—a boy, weighing five pounds and three quarters....Her labor had been long but not exhausting...

Later in the day of her delivery she was awakened and given a douche of weak carbolic acid because the doctors believed that it was a preventive against childbed fever. The next morning it was repeated... more douches were given; more quinine and spirits of nitrous ether were administered in an attempt to reduce her fever, but on the following morning there was no doubt that she was rapidly growing worse....

Toward evening, however, when the fever came on again, her mind wandered... when the nurse had momentarily left the room, she sprang out of bed and ran downstairs and out of the hospital. After the house officer had carried her back, struggling and screaming, they secured a restraining sheet over her chest, tied her wrists with bandages to the side rails of the bed, and sent a nurse to watch her constantly. Morphine and chloral were given...

In her plain pine coffin she lay in the front hall of the hospital... a poor immigrant girl of sixteen years, whose death to the world of her day was an event of no importance... Bridget Logan is a pitiful small figure in a dark chronicle for she was the youngest of the fifty women who in five years had died of childbed fever in the hospital on McLean Street.

*Dr. Frederick I.*

### Top sheet *back side*

Arriving at the hospital she is immediately given the benefit of one of the modern analgesics or pain-killers. Soon she is in a dreamy, half-conscious state at the height of a pain, sound asleep between spasms... She knows nothing about being taken to a spotlessly clean delivery room, placed on a sterile table, draped with sterile sheets...

She does not hear the cry of her baby when he feels the chill of this cold world...

She is, as most of us want to be when severe pain has us in its grasp – asleep.

Finally she awakes in smiles, a mother with no recollection of having become one.

*c. 1930's*

*I experienced the sensation which  
has always seemed to me worse than any pain –  
of struggling for consciousness,  
going down in blackness, coming up only to know  
that something big and dreadful is happening,  
to feel fear, to hear oneself moaning,  
to sense strange people, with offensive professional  
voices... it became obvious to me that  
an important thing had happened to me  
and I knew nothing about it...  
then to go way under and to revive hours later,  
clean and dizzy, in a strange bed, and be told that one is  
all right and a boy has been born.*

*Lenore P.F., c. 1930's*

**Bottom sheet top side**

Then suddenly, while I was in the middle of a pain,  
the doctor appeared, looking rather different from his  
dapper office self in a white mask and coat. I'm afraid  
I greeted him rather grouchy too; I was so convinced  
by this time that I was doing pretty well by myself that

I still resented outside interference.

He did a brief examination...

and told me to bear down with my next pain...

Then there came an enormous contraction;

I let go and hung on and pushed, and felt  
the baby come halfway out – and stop.

*"Wouldn't you like just a little whiff now?"*

the anesthetist pleaded.

*"No. Dammit, leave me alone,"* I said,  
waiting for the next contraction.

*"It's going to hurt,"* the doctor said

*"It feels fine,"* I said.

*"Take some gas."*

*I have to get this little girl out of her,"* he said.

*"But it doesn't hurt,"* I said

*"It will hurt,"* he shouted....

*"Take some gas – it's for the baby's sake,"*

the doctor said finally.

*"Just a whiff,"* said the anesthetist, slipping the mask  
over my face. Okay, I thought, if it will please you,  
just a whiff. As he clamped the mask down I knew he  
meant to put me out, and

I thought to myself, a real sell. I've been had.

...in the background something was screaming –  
something which, again, I recognized from a hundred  
movies but had never really heard before.

Then a nurse came by holding it – a small red-faced,  
neckless baby, its face contorted from screaming –  
and while it didn't seem to belong to me at all,

I felt very sorry for it...

I was still entirely fuzzy, but I began to wonder how I  
felt, especially in my stomach, and then I realized  
suddenly that I had been expecting it to hurt five  
inches above where it really was. That was the first  
time I believed that the baby had been born...

*Abigail L., 1948*

**Bottom sheet with linen co. stamp back side**

The baby started to be born  
and the nurse heard us shout excitedly.  
She ran in the room and grabbed the foot of my bed  
with one hand and ran out of the room with it and me.

Out of the door as fast as she could go,  
pushing and pulling...

And right then the baby's head and shoulders  
came out... She locked the delivery door.

And then made me move onto the delivery table,  
with that baby already half born.

I was really disoriented and irritated.

I kept saying,

*"I want my husband. I want my husband here,"*  
over and over.

The doctor stepped in and pulled the baby out...

The doctor reached up inside my uterus and  
manually explored me right there...

My husband wanted to hit him.

But he just stood there and looked at the baby  
on the next table.

The doctor finished and said,

*"Well, no stitches, no problems, three minutes.  
That's the quickest one I've done yet!"*

I remember he had white shoes.

*Anon., c 1970*

**Mattress Cover/Bed Pad *top side***

The hospital bed in my little room was so high I  
climbed up on a stool, stiff cold sheets,  
like porcelain.

Actually, I loved being taken care of.  
I was only afraid they'd send me home,  
that they'd say it wasn't really labor.

I lay there listening to women all around me scream.  
I wasn't in pain. As soon as the nurse left me alone I  
had my first real contraction and I screamed right  
through it.

She came back and asked if I was in bad pain.

I said, "*I don't know because I don't know  
how bad it will get.*"

She said,

*"We'll make you feel more comfortable"*  
and gave me two pills.

I don't remember another thing until I woke being  
shaken by a nurse. She wanted to show me my baby  
being born. I could have cared less; I just wanted to  
sleep. I woke again, being wheeled out.

They said I had a girl. She was fine...

I turned to Bob and said,

*"I did a good job, didn't I? I get a gold star."*

*Melinda B., 1975*

**Mattress Cover/Bed Pad *back side***

...

I remember silently crying in front of the consultant  
the day the tumour was diagnosed. All he said was,  
*"What are you crying about?"*

*The treatment won't affect your appearance."*  
My appearance was not what I was worried about.

After that I didn't cry again until the moment when  
I discovered the importance of nurses.  
I was lying in bed with a radioactive implant stitched  
into my tongue, and suddenly my resolve to face  
with a calm equanimity the experience of having  
cancer deserted me as I realized that I might,  
simply, not survive that experience.

A young nurse came into the room to fetch the remains  
of my lunch, and she saw that I was distressed. Instead  
of taking my lunch tray away, or offering me drugs  
for the pain I was in, she sat down on my bed and  
held my hand and talked to me.

I told her how I felt, and after a while she went away  
and read my notes, then came back and told me  
everything that was in them, and that, in her, of course  
unmedical, view, I would probably be all right.

She stayed with me for nearly an hour,  
which she should not have done. I was radioactive and  
no-one was meant to spend any longer than  
ten minutes at a time with me.

She was also, presumably, not supposed to  
tell me what was in my case-notes.

So she was breaking at least two sets of rules.

I never saw this nurse again after I left hospital,  
but I would like her to know that  
she was important to my survival.

*Anne O., c. 1986*

### **Mattress top side**

At 41 years old, after a year of dating...  
on July 2, I called my 100-year-old grandma to  
tell her I was engaged.

*"Well, it's about time!"* she declared.

She was right. It is all about time.

We planned a small wedding in October 2019 in  
Cincinnati for my two grandmothers and my fiancé's  
elderly mother to attend since it was unlikely they  
would be able to travel to Colorado for the July 2020  
wedding. Grandma Velda had planned to deliver  
the prayer at the October ceremony.

But, in late August, Grandma Velda was hospitalized  
with pneumonia. When we discussed possible  
outcomes with her, she rolled her eyes and told my  
mother she wasn't "leaving" until after the wedding.  
She recovered enough from the pneumonia to make it  
to a rehab facility where she progressed for a week,  
until congestive heart failure took over. On Sept. 18,  
she was rushed back to the hospital. Her heart rate  
was spiking 160 beats per minute, but it couldn't  
flush out the fluid increasingly filling her cavity,  
like an hourglass filling with sand.

Less than seven weeks before her 101st birthday,  
it became obvious she would not be able  
to beat death this time. When I arrived... she  
stretched out her arms, *"There's my girl!"*  
she said and hugged me tightly.

A day later ... with the help of hospital staff, we  
created a bedside ceremony. In a hospital office I  
changed into my mother's wedding dress —  
the only wedding dress we had on hand...

Until that Friday afternoon, it had been sealed in  
a dry cleaning box for 46 years...

### **Mattress back side**

One nurse took a video and pictures while the other  
played the processional... from her phone.

At 4:30 p.m., when I walked into her room and took  
her hand at her bedside, Grandma Velda  
immediately began delivering her prayer,  
unprompted and unscripted.

I watched the familiar choreography of her facial  
features in prayer. I listened intently to her chapped red  
lips wrap around the words that were drowned out by  
the whiz of oxygen. It was possibly the most precious  
25 seconds of my life. I kept my eyes on my grandma  
throughout the ceremony when I wasn't called to look  
at my husband. My left hand gripped hers and my right  
rested in his. When her head wasn't drooping, she  
gazed up at me two or three times and whispered,

*"You look beautiful."*

She was bright and present for us during that brief  
ceremony, but she was slipping away.  
Only 12 hours later, after painstakingly analyzing every  
possible direction, we decided to let her go  
and put her on hospice... Her heart stopped beating  
from under my palm at 5:40 p.m. on Sept. 23 —  
the first day of fall.

We are all on temporary loan to one another. And  
loving is just as much about holding on as it is letting  
go. The illusion of perfect timing permeates our lives  
all too often. Like her death, our wedding day is not  
how I imagined it as a 6 year old, but the most  
beautiful moments in life never are.

I imagine my grandma's spirit actively at work to  
nurture my pregnancy. At only seven weeks I heard her  
in the heartbeat — 160 beats per minute blossoming  
into life.

*Amanda M., 2020*

### **Mattress Edge:**

When I was in the labour ward I was told to pull the string  
above my head if I was going into labour.

I lay in bed frightened, felt another contraction coming so I pulled the string.

It had a bell on the end which I didn't know about, and  
I pulled half the ceiling down in my panic. *Anon.*

**Hospital Robe front**

**back**

*Birthing her death...*

At the birth of each child,  
I entered the hospital prepared to die.  
That sounds ridiculously melodramatic —  
all the pregnancies were uncomplicated  
and the resulting children uniformly healthy.  
The interest of doctors and nurses was the same  
as women have always complained of:  
counting pounds and centimeters,  
to the exclusion of the experience  
I felt I was going through.  
For me, each child became an ally  
in defying the odds of mortality and  
in surviving the oddities of hospitals.  
The nurse who brought in Sarah  
once she was born said I might look,  
but would not let me hold her.

*Elizabeth L. c. 1950*

**Hospital Gown inside**

*The nurses of 3A ... provided skill in the care of my mother's physical needs  
but also her emotional needs and ours. ...  
This will be a beautiful memory which we will carry with us forever.  
Thank you for having these particular individuals on your staff...  
They were tremendously patient and gracious in  
answering our questions and call lights.  
When hard decisions had to be made by me,  
they were informative and professional  
but in a compassionate manner.*

Patrice M., 2019