



The *Great* Canadian  
Catholic Hospital History Project

Documenting the legacy and contribution of the  
Congregations of Religious Women in Canada,  
their mission in health care, and the founding and operation of Catholic hospitals.

---



Projet de la *Grande* Histoire  
des hôpitaux catholiques au Canada

Retracer l'héritage et la contribution des  
congrégations de religieuses au Canada,  
leur mission en matière de soins de santé ainsi que la fondation et l'exploitation des hôpitaux catholiques.

---

**Ottawa General Hospital  
1845-1980**

Source: Library of the  
Catholic Health Alliance of Canada

Copyright: Public Domain

Digitized: July 2005

**Ottawa  
General Hospital  
1845                      1980**





**Ottawa  
General Hospital  
1845                      1980**

*Collaborators (photos) :*

Oblates of Mary Immaculate  
Medical Communications — Ottawa General Hospital  
The Citizen  
Le Droit  
Al Patrick Photography Ltd.  
Public Archives of Canada  
Mother House Archives — Sisters of Charity at Ottawa

*Benefactors :*

City of Ottawa  
National Capital Commission

*Design :*

Graphico

*Printing :*

Gauvin Press Ltd.

This text is based upon documents written with great talent by Sister Paul-Emile, doctor of letters, laureate of the "Académie française", whose works include a history of the General Hospital which she researched extensively and rigorously.





*Bytown at the time of Mother Bruyère — 1850*

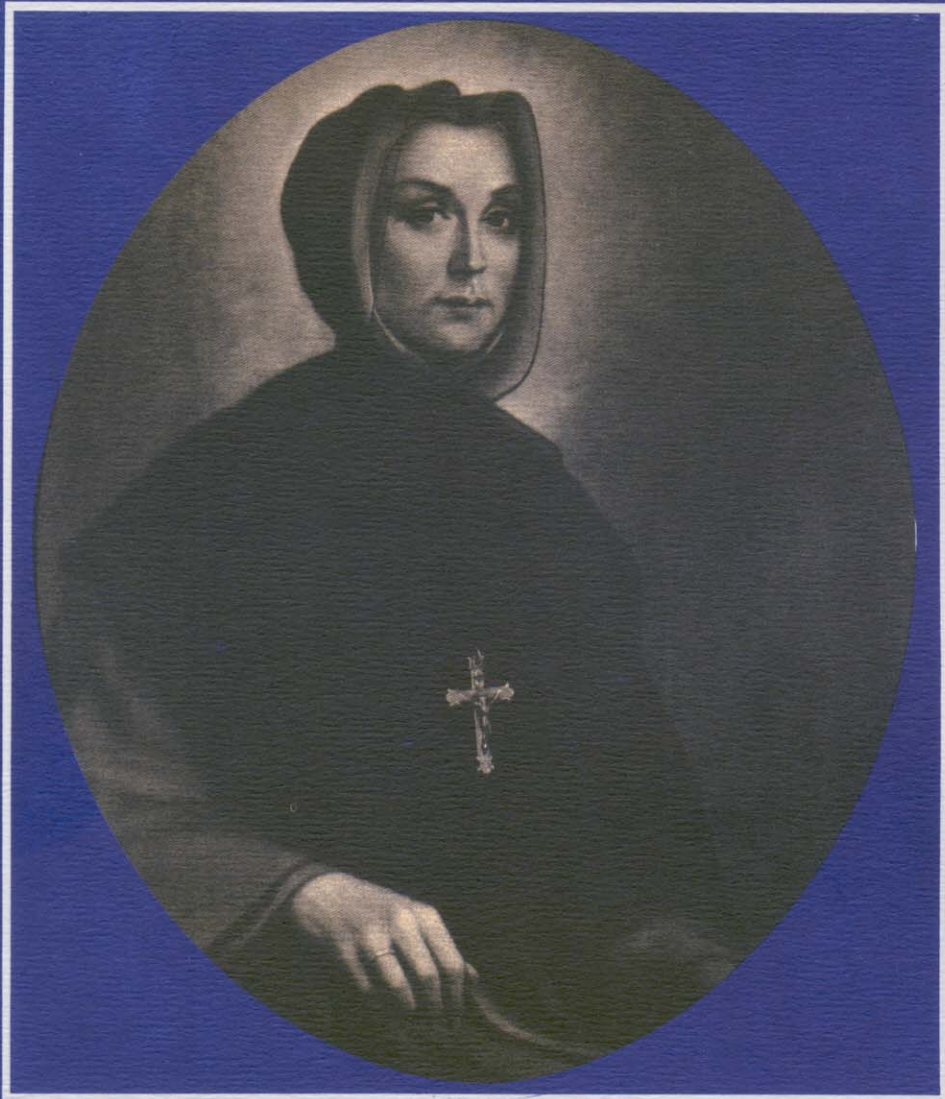
## *Introduction*

February 20th, 1845

The whims of winter — severe cold one day, torrential rains the next — have turned the roads into mud-pits. Nevertheless, a lone sleigh pushes on towards Bytown having left Montreal thirty-four hours earlier.

It was under such unfavourable conditions that the foundress of the General Hospital arrived in Bytown under *Father Telmon's* care. *Mother Elisabeth Bruyère* was 27 years old. She, along with *Sisters Thibodeau, Charlebois* and *Howard*, had agreed to help *Monsignor Phelan*, the Kingston coadjutor bishop. Yielding to the pleas of *Father Telmon*, of the Bytown Oblate mission, he had spoken to the Grey Sisters of Montreal of plans to set up in Bytown an institution which would be used both as a school and as a hospital.

These four young nuns found themselves in a village whose primary “raison d’être” had been the building of the Rideau Canal. It had been a flourishing era during which labourers, merchants and salesmen were plentiful. But following the completion of the canal, jobs had become scarce. On the other side of the river, Wrightville, now known as Hull, had the monopoly of the lumbering



*Mother Marguerite d'Youville*

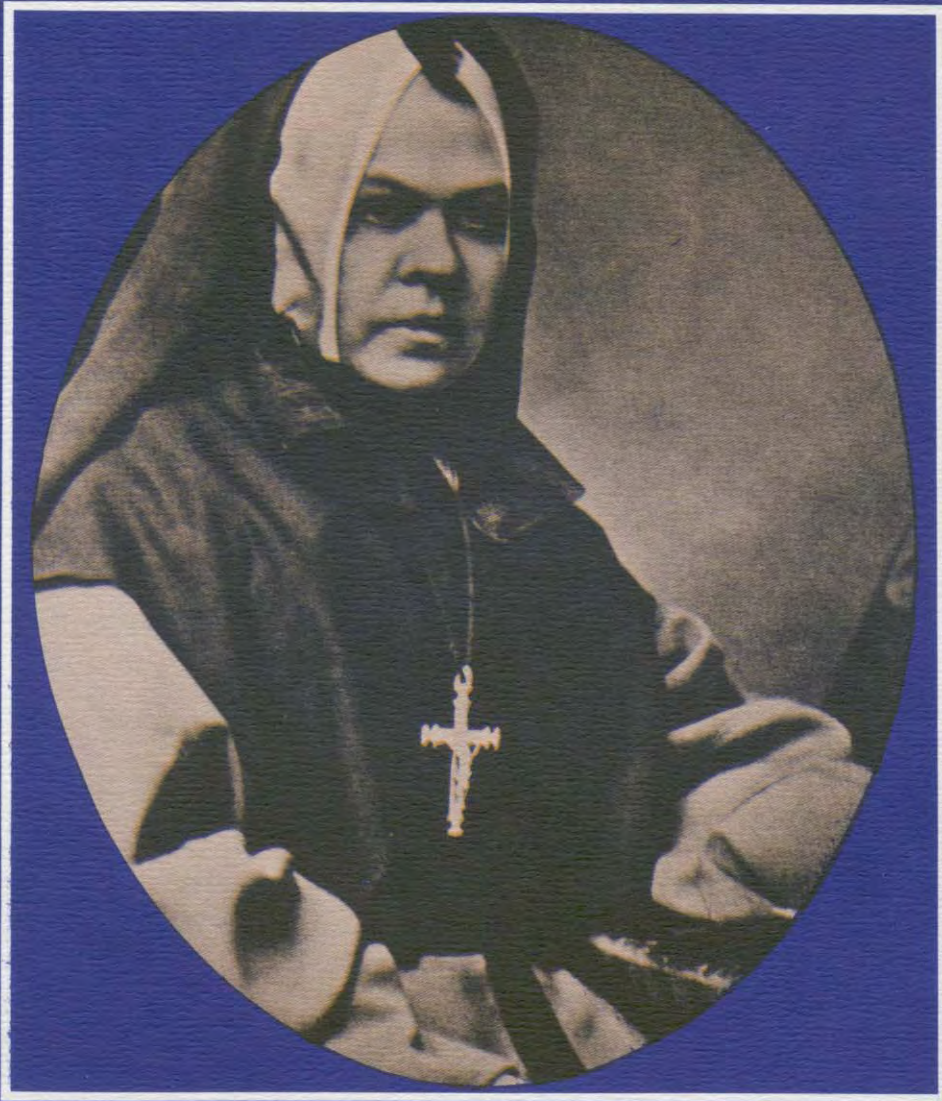


activities, and the only prosperous industry in Bytown was the blanket factory owned by *Thomas MacKay*. This was not much for the 2,000 inhabitants of the village, and soon, with unemployment, came alcoholism and violence. Bytown thus acquired a very bad reputation throughout Canada. As *Father Alexis de Barbezien* said in his "Histoire de la province ecclésiastique d'Ottawa" (I,116)

In the midst of its forests, Bytown was Canada's scarecrow. When a family from Québec was without any news from a son who had gone to work on the building sites, they cried as if he were dead and they whispered: he must have been killed in Bytown.

Various diseases also afflicted the people of Bytown: it had been built on very swampy ground and still waters stagnated in the ditch that drew water off the Rideau Canal.

Such was Bytown when *Mother Bruyère* arrived. The task that awaited her seemed very heavy for such young shoulders to bear. However, she belonged to the new generation of the sisters of *Mother d'Youville*. Originally, the Sisters were almost as isolated as cloistered nuns, throwing open their doors to the poor, the orphans, the old people and the crippled, but going out only in emer-



*Mother Elisabeth Bruyère*

gencies such as famines or epidemics. Since 1840, however, the Grey Sisters had enlarged their charitable activities through the creation of institutions such as the Maison de Saint-Hyacinthe and a mission in Rivière Rouge. *Mother Bruyère* knew and understood well the missionary spirit which led the Grey Sisters to answer generously the calls for help they received, and to become pioneers, usually in the worst conditions. She knew, for example, that she would have to commit herself to the preservation of the spirit of the first Sisters — just like *Mother Marie-Michel Archange Thuot* who was the first to establish such an institution in Saint-Hyacinthe — and that she would be entirely responsible for her institution which would be spiritually and secularly independent from the General Hospital of Montreal. She knew also that she could count on the support of the members of the religious community already settled in Bytown who had first launched the idea of the project: the former parish priest of Bytown, *Monsignor Phelan*, and in particular the Superior of the Oblate Community of Mary Immaculate, *Father Pierre-Adrien Telmon*, who was responsible for the evangelization of “Babylon on the Ottawa” and quite determined to fulfill his plan with the help of anyone who would join his cause.

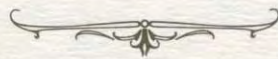
On the one hand, then, we see violence, illness, alcoholism, poor hygiene, and a 27 year old nun faced with

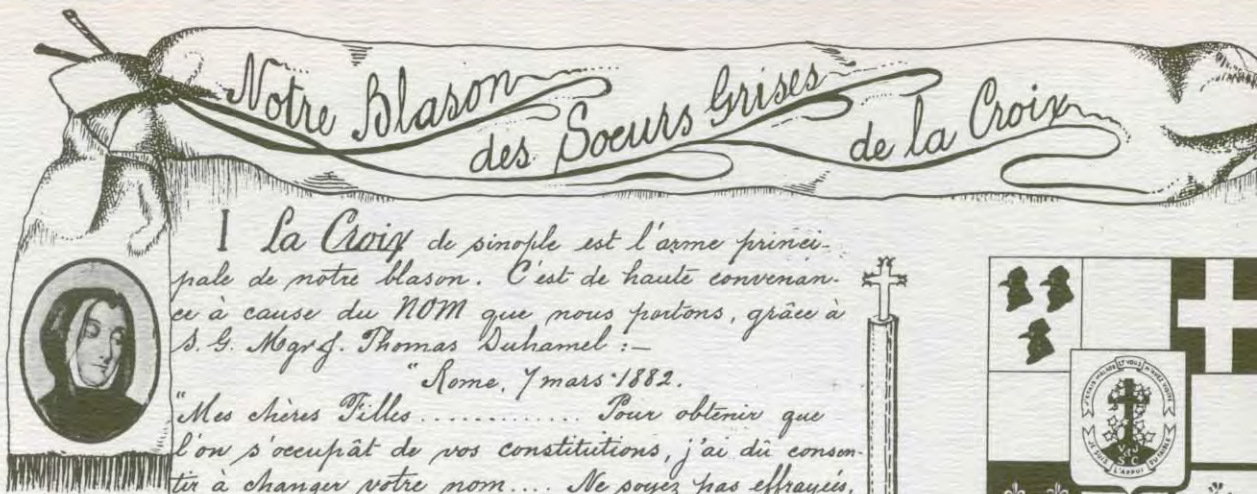


*Ottawa General Hospital Chapel (1924)*

a tremendous task and all the spiritual and material responsibilities that go along with it; on the other hand, the determination and the devotion of a few men and women of good will.

The history of the General Hospital is not made up solely of facts. In order to understand why the venture succeeded in spite of unfavourable conditions, in order to identify the corner-stone of its success, it is essential to get a better insight into the men and women who made it possible: in them grew a spirit, a tradition, without which nothing could have happened.





I La Croix de sinople est l'arme principale de notre blason. C'est de haute convenance à cause du NOM que nous portons, grâce à S. G. Mgr J. Thomas Duhamel :-

"Rome, 7 mars 1882.

"Mes chères Filles..... Pour obtenir que l'on s'occupât de vos constitutions, j'ai dû consentir à changer votre nom.... Ne soyez pas effrayées, mes Filles; vous êtes et vous resterez "Soeurs de la Charité"; vous êtes et vous resterez "Soeurs Grises", et vous aurez un nom nouveau. Je ne me suis pas mis à la torture pour trouver le nom que vous porterez à l'avenir. J'ai ouvert le cahier de vos saintes Règles et, en apercevant les armes de votre Congrégation, j'ai eu comme une inspiration: La croix est dans vos armes comme sur votre poitrine; la croix est aussi dans mes armes particulières.... Devinez-vous le nom que je vous ai choisi? Le voici:

"Soeurs de la Charité dites communément Soeurs Grises de la Croix. N'est-ce pas un beau nom? Il a été approuvé par la Propagande. "Soeurs Grises de la Croix" signifiera que vous êtes grises, c'est-à-dire enivrées de la croix; il signifiera que vous aimez la croix, que vous la portez avec courage, et que vous vous y attachez jusqu'à la mort.....

" + J. Thomas, évêque d'Ottawa.

La forme rayonnante de la croix vers les quatre parties du monde, est le signe du dévouement de notre Communauté qui se porte, à l'instar du divin Rédempteur, à toutes les bonnes oeuvres approuvées par l'autorité.

La couleur sinople signifie, d'après Biadelli, héraudiste célèbre, activité, espoir, gaieté; et vraiment telle est bien la caractéristique de la Soeur Grise: active, confiante en la Providence et gaie au milieu des épreuves.

II Les Cantons de la Croix sur l'écu écartelé: -

au 1, d'argent à trois têtes de coq de sable crétes et barbelés de queues;

L'argent, toujours d'après le même auteur, signifie beauté et pureté; le coq marque la fierté et le courage. De ces données nous tirons la fière devise des Duprost de Lajomerais: "Purité, fierté et courage!"

au 2, de queues à la croix d'or;

Le queues, c'est la grandeur et la vaillance; l'or



marque l'éclat, la justice, donniez tirons la devise de

"La foi constante éclaire Les devises ci-dessus se trouvent incrustées dans le carreau premier fruit de l'union

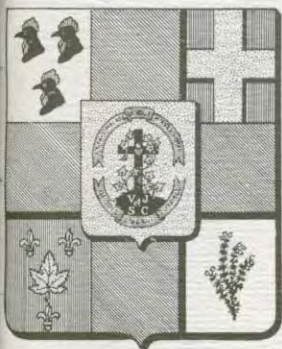
"La fierté et le courage éclatent en ceintes pleines

au 3, de queues à la croix d'or

La feuille d'érable, France. C'est dire que la Canadienne-Française, compagnes, toutes nées titulaires juridiquement le jété sur les bords du Canada. Canadienne-Française ses origines et de par l'a

"Ma chère Mère, (Mère)

"..... Mgr parlissions toutes l'année avait voulu une Commission de Soeurs Grises; ca lions le français, et que tout les mêmes usages Soeurs, en parlant un ne conserveraient pas l'état non plus que se



— au 4, d'argent à la branche de bruyère.  
La bruyère a le feuillage doux, fin et persistant; sa fleur pourpre attire les abeilles. Ce gracieux symbole rappelle donc le nom bini de notre Mère, sa tendresse maternelle et sa parole onctueuse, chère de ses Filles. (Lire ses circulaires.)

III Sur le tout notre **Cachet officiel**  
D'or pour marquer la justice des actes authentiques. Croix élevée, rappelant l'Invention et l'Exaltation, fêtes titulaires de notre Institut. (Constitutions, art. 205)

Q Crux! ave, spes unica... notre hymne matinal.

Croix de sable au coeur de gueules.  
C'est le sacrifice jusqu'à l'immolation avec le Coeur de Jésus:  
"Il faudra faire votre dernier sacrifice sur l'autel de la Croix."

(Cérémonial de Profession, fait par Mgr Guigues.)

Le lierre, c'est notre faiblesse appuyée sur l'arbre de la Croix.  
Le rocher, la stabilité de l'Institut, si Dieu le veut.

<sup>V. 9.</sup>  
<sup>S. 10.</sup> Vive Jésus et sa croix!

Devise donnée, 4 sept 1852, par Mgr Guigues, 1<sup>er</sup> Ev. de Bytown.  
C'est le doux pendant de celle des Oblats, nos fondateurs:

<sup>V. 9.</sup>  
<sup>M. 3.</sup> Vivent Jésus et Marie Immaculée!

Les banderoles sont d'azur en l'honneur de l'Immaculée, première patronne de l'Institut, depuis le 8 des. 1878. (Ord. de Mgr Duhamel.)

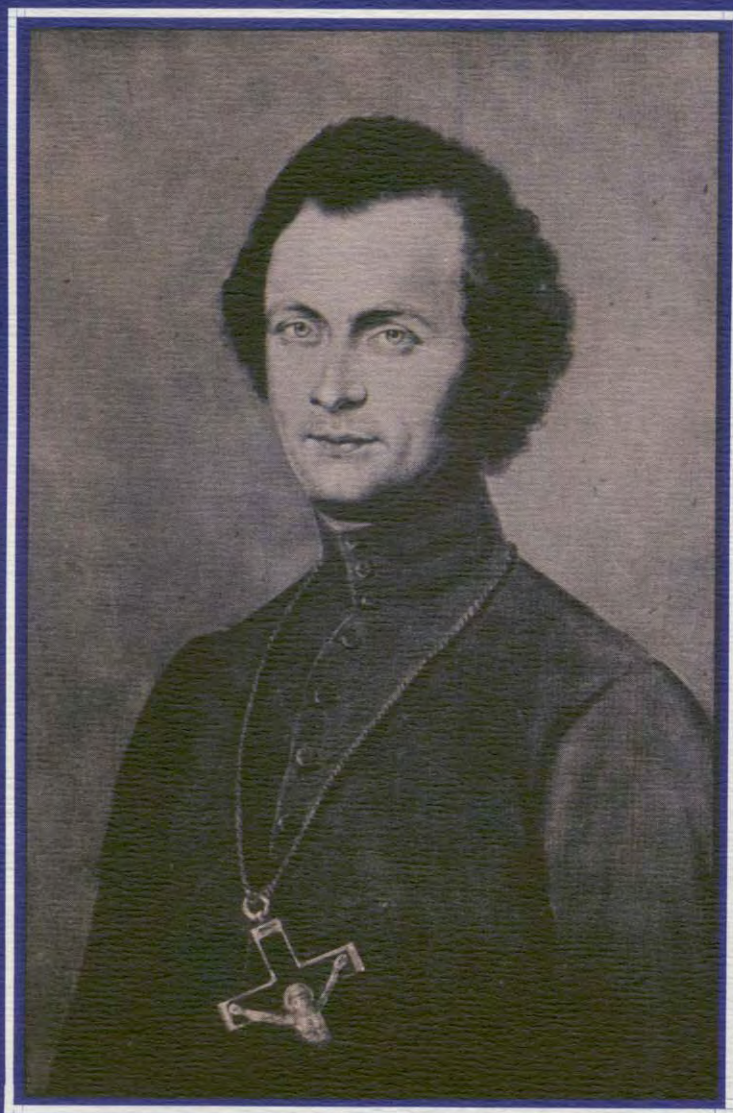
"j'étais malade et vous m'avez visité" Matt. xxv, 36.

"Je suis l'appui du faible."

Ces devises indiquent les oeuvres confiées à notre Congrégation: service des pauvres, soin des malades, éducation de la jeunesse. (Mandement d'Institution, Mgr Phelan.)

**Lecture du Blason:** Écartelé, au 1, d'argent à trois têtes de coq de sable, crêtées et barbelées de gueules; au 2, de gueules à une croix d'or; au 3, de gueules à une feuille d'érable d'or accompagnée de trois lis du même, 2, 1; au 4, d'argent à une branche de bruyère au naturel; à la croix de sinople brochante. Sur le tout, d'or à la croix latine de sable, chargée d'un coeur de gueules, mouvante d'une terrasse du second lettrée <sup>V. 9.</sup>  
<sup>S. 10.</sup> d'argent, soutenant deux tiges de lierre au naturel grimpanes autour de la croix, et accompagnée de deux listons d'azur, lettrés de sable, l'un en chef: j'étais malade et vous m'avez visité, l'autre en pointe: Je suis l'appui du faible.

et la constance. De ces  
oble famille de Varannes:  
deur et en vaillance!"  
vent en une seule formu-  
re notre Vén. Mère d'Youville,  
nilles Duprost et de Varannes:  
à la foi robuste  
andeur et de mansuetude!"  
feuille d'érable d'or accom-  
Canada; le lis, c'est la  
nigation des Soeurs Grises est  
Madame d'Youville et ses  
s; de par Louis XV qui l'ins-  
1753. "Dernier lis de France  
Laurent." Chan. S. Corbeil.  
notre Maison d'Ottawa, de par  
de la fondatrice, Mère Bruyère.  
5 avril 1845.  
ullen, Hôpital-Vén. (Montreal.)  
n aurait voulu que nous  
là-dessus je lui dis que, s'il  
té anglaise, il n'aurait pas  
nous, à Montréal, nous par-  
town nous pourrions en  
le crois sincèrement que les  
e langue que le français,  
temps l'esprit de leur  
ges  
"Soeur Bruyère."



*Father Pierre-Adrien Telmon, O.M.I.*



## Part One

*Father Telmon* was an energetic man. Following his appointment to Bytown, he wasted no time in determining what would enable him to take care of the most pressing matters.

In a letter written to *Mother McMullen*, Mother Superior of the General Hospital in Montreal, on October 20th, 1844, he said :

The city of Bytown is in great need of good schools... The instruction and education of the children are the most urgent needs of all. And the adults have as great a need for the good example and prayers that a few nuns would be able to give. I will do all I can in order to obtain them.

Fully determined, sustained by an unwavering confidence in Divine Grace and prepared to make all the necessary personal sacrifices in order to achieve his goals, *Father Telmon*, who had arrived from France in 1841, was a true missionary. He was also the lynch-pin of the Bytown project. In *Mother Bruyère*, he would find the partner he needed so greatly, who would understand his vision and devote herself to making it come true, even beyond his wildest hopes. In fact, no one else could have



*Sister Thibodeau*

understood better his desire to help the poor and suffering. She herself knew what it was like to go without: had her mother been less poor, she would not have had to be sent away to obtain a good education. It was, indeed, because of her mother's great sacrifice that Elisabeth succeeded in becoming a teacher.

Her character, tempered by adversity, revealed itself to be ruled by both determination and modesty. Her determination to refuse the easy way was demonstrated by her decision to become a Sister of Charity rather than join an order in which she could also have taught, combining the pursuit of her own education with her vocation. Her modesty showed in her choice of an order which would put her at the service of the less fortunate. Later on, upon accepting the role of foundress in Bytown, she said:

I was never against this project, but I don't feel I have a vocation for it. If my superiors feel that I have no valid reason for refusing, I will leave the decision up to their good judgement. As for me, I can but abide by their order.

We can wonder, upon looking back, what she might have done if she had felt a vocation for the task, for as soon as *Mother Bruyère* had arrived things began to run smoothly !



*The first Ottawa General Hospital 1845-1850*

On February 22nd, 1845, eighty-five children were registered at the primitive school on Saint Patrick Street.

Classes began on the 3rd of March.

On May 10th, a tiny hospital was opened in a house adjoining the Sisters' on Saint Patrick Street. The ground floor had a sick room that held three beds and three small rooms used as a kitchen, a dispensary and a bedroom for the nurse on duty; on the second floor, under the roof, were two small two-bed rooms.

In less than two months, the foundations of the enterprise so vital to Bytown, and later to Ottawa, were solidly in place. The speed with which *Father Telmon's* dream came true is the perfect criterion by which we can measure how important to its success were those who participated in its launching. Without *Father Telmon's* energetic determination, *Mother Bruyère's* humble devotion and her will to overcome any and all obstacles, and the faith that possessed them both — faith in Divine Grace and in their project — the Bytown project could not have so quickly become a reality.

It must also be said that the nuns who accompanied *Mother Bruyère* were all guided by the same spirit of perseverance and devotion, and had a most appropriate range of talents to offer; *Sister Thibodeau* had a great



*Dr. Edward Van Courtland*

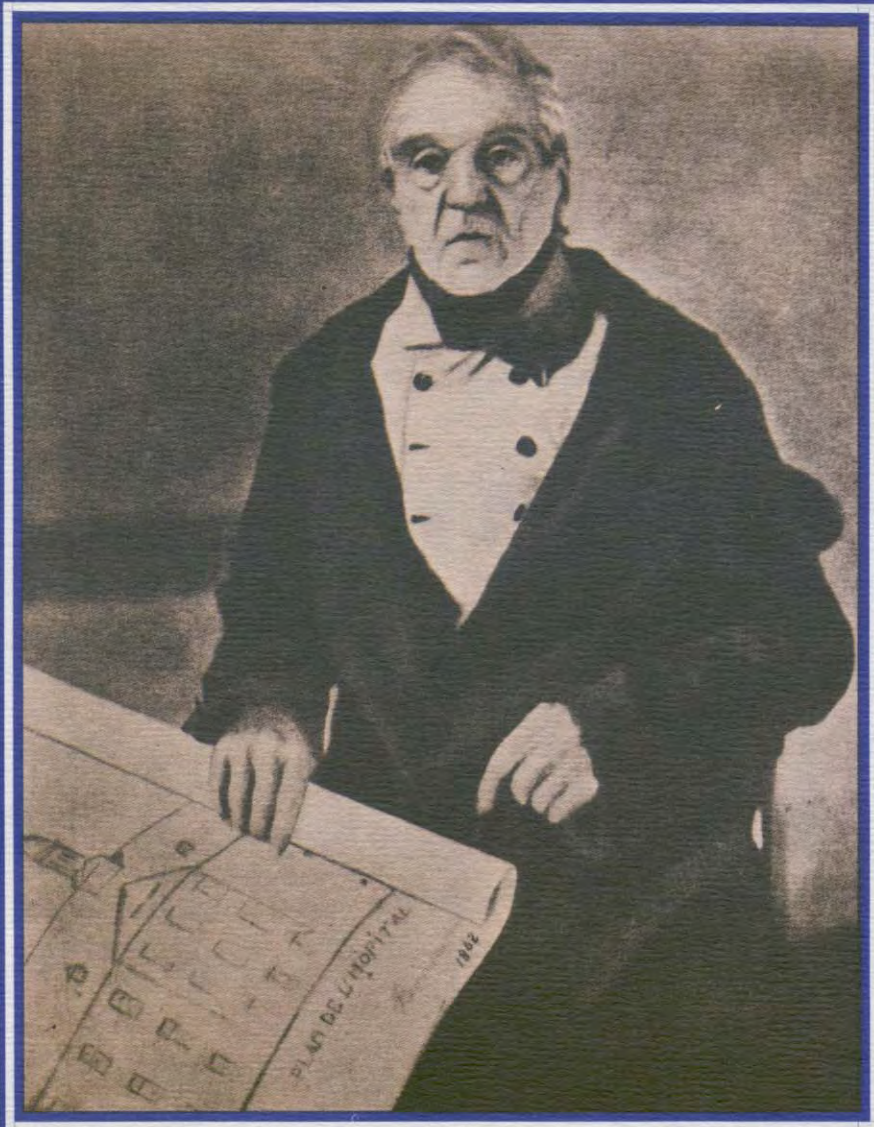


*Monsignor Joseph-Eugène Guiges, O.M.I.  
First Bishop of Bytown*

knowledge of pharmacology, while *Sister Howard-Rodriguez* specialized in the teaching of anglophone children.

It is also true that the foundation benefited from tremendous support. The hospital, for example, could not have functioned so well and efficiently without the help of *Dr. Edward Van Courtland*, a former Londoner, who was responsible for the health of all the engineers working in Bytown and who had been appointed to the Bytown Artillery. When *Mother Bruyère* arrived, he offered her his services free for one year. He was not the only one who helped with the project. Through the years, every great historic moment in its development can be linked to the name of someone who offered generous assistance.

One such person is *Monsignor Guigues*, Bishop of the diocese. In 1850, he purchased and gave to the nuns a building erected during the typhus epidemic of 1847 and known as the "Emigrants' Hospital", so that the Sisters might better meet the needs of the population. Ten years later, when that building became inadequate and plans were drawn up for the construction of a stone building, he contributed generously to the efforts made to obtain the necessary funds for the work.



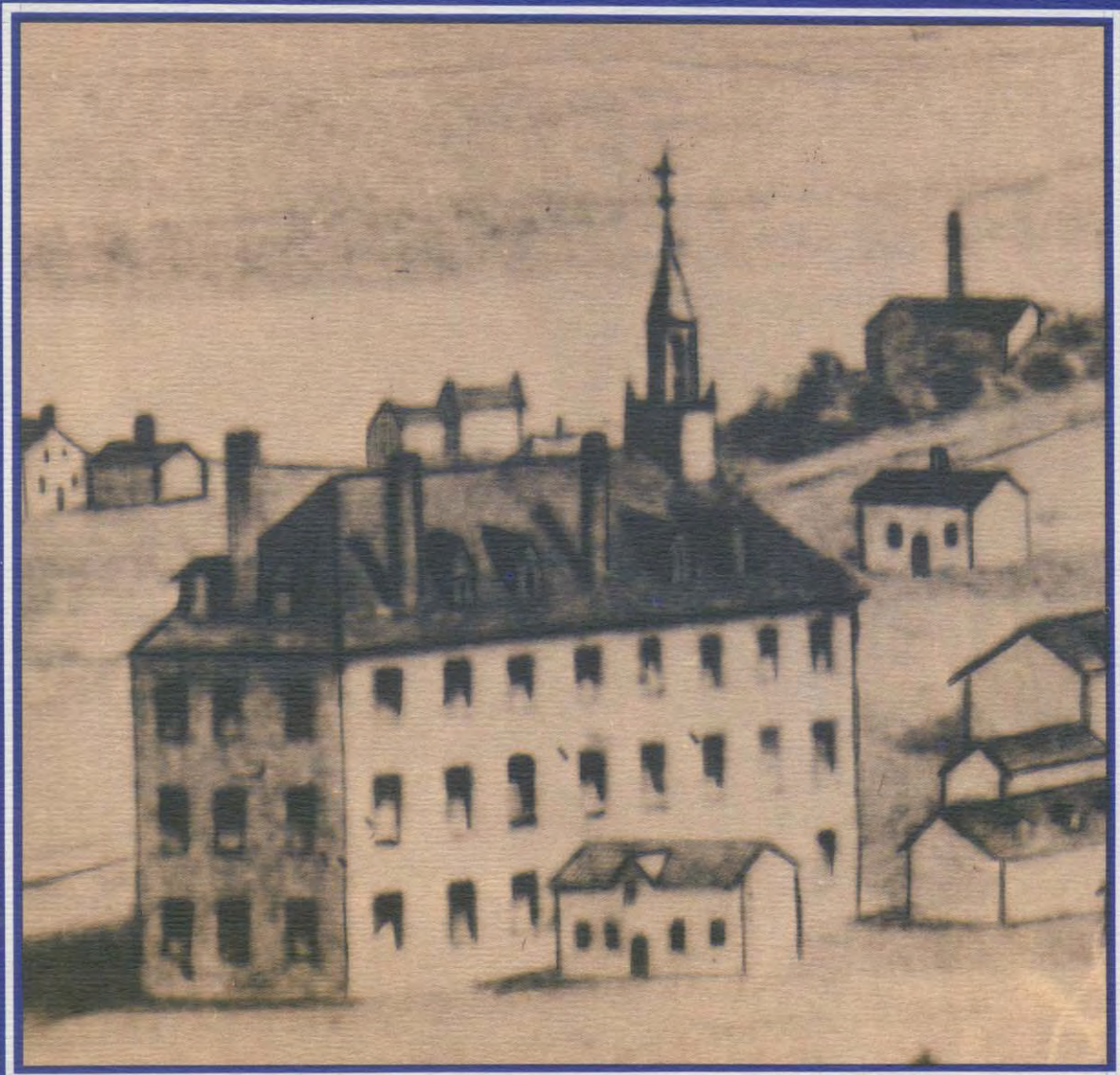
*Joseph Félix Larocque*



Construction of the hospital, on land bought by the nuns at the corner of Water and Sussex, was completed on March 19, 1866. That very day, the first surgical operation was performed. This fact is worthy of mention because the patient who thus "inaugurated" the operating room, in such an unusual fashion, was *Mr. Joseph-Félix Larocque*, a long-time benefactor of the hospital who justified his generosity towards the nuns by saying: "I will have heirs, but once I'm in Hell, they won't come and deliver me !"

In part because of his maxim, the building, designed by architect *Victor Bourgault*, was finally erected. It was indeed a very important step: its inauguration marked the success of a project undertaken some twenty-one years earlier in the most modest of circumstances. *Mother Bruyère* had reached one of her objectives: the hospital was no longer in any way "temporary"; instead, it was solidly implanted in the community it served. The only thing that remained to be done was to give adequate administrative statutes to the institution, a task which would be carried out in 1874.

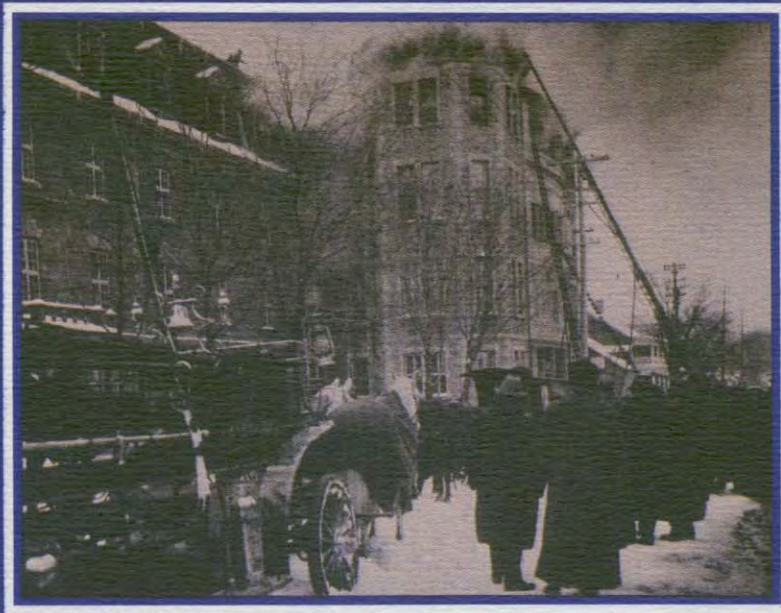
*Mother Bruyère* died on April 5, 1876. It was the end of an era, the end of a chapter in the history of the hospital. This chapter is, no doubt, the most important of all: it was written by men and women of good will, and



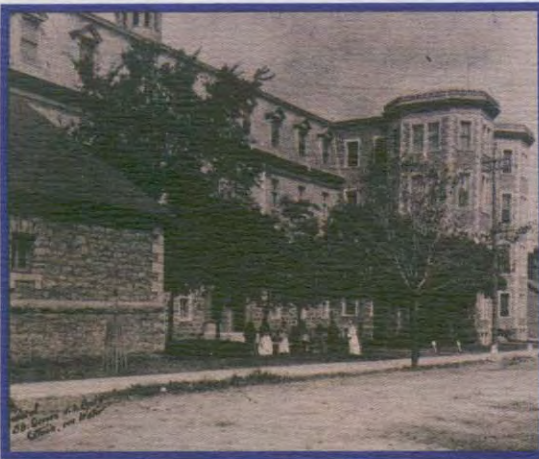
*Ottawa General Hospital 1850*

of such unfaltering faith and relentless devotion and determination that what they handed down to their successors — and to the entire community — is priceless. They gave a spirit, a tradition of self-sacrifice for the well-being of those who are in need and who suffer, without which the magnificent stone building would have had no soul and the foundations of the institution could not have been so firmly set. Those who follow in the footsteps of these pioneers and their numerous benefactors, realize that the most precious element of the heritage left to them is this tradition, from which every generation is fed so that *Mother Bruyère's* achievement continues to thrive.





*Fire at the Ottawa General Hospital, January 10, 1918.*



*Ottawa General Hospital built in 1866.  
To the right, wing erected in 1897.*



*Annex of the Ottawa General Hospital on Parent  
Street (1929)*

## Part Two

The pioneer period had been devoted to only the most urgent matters, to solve the important problems with only the means at hand, one day at a time. Determination and courage won over difficulties and a new era arrived. It was possible and indeed necessary, so as not to lose all, to begin to think about the future. It is very clear, when consulting the General Hospital's records, that *Mother Bruyère's* successors saw things this way. Indeed, all the facts that tell of the institution's growing prosperity point to a double preoccupation: foreseeing the new needs of the community and trying to meet them as well as possible with the help of the most modern equipment and the most competent personnel.

For this reason the buildings were added to and modernized several times. The years 1898, 1909, 1929, 1949 and 1953 were very important in the history of the hospital and marked either the construction of new buildings or the transformation of the existing structure, by adding extra floors or carrying out major renovations to render it more functional. These undertakings were dictated by two closely linked factors: the desire to make the best possible services available to patients implied the



Laboratoire - Laboratory



Crèche - Nursery



Salle d'opération  
Operating room



Laboratories 1924

Nursery 1924

Operating Room 1924

Fall 1924

Nurse Mildred Brinman,

Sr. Alice de Marie,

Dr. Perras — Hull doctor,

Dr. R.K. Paterson — Chief Radiologist,

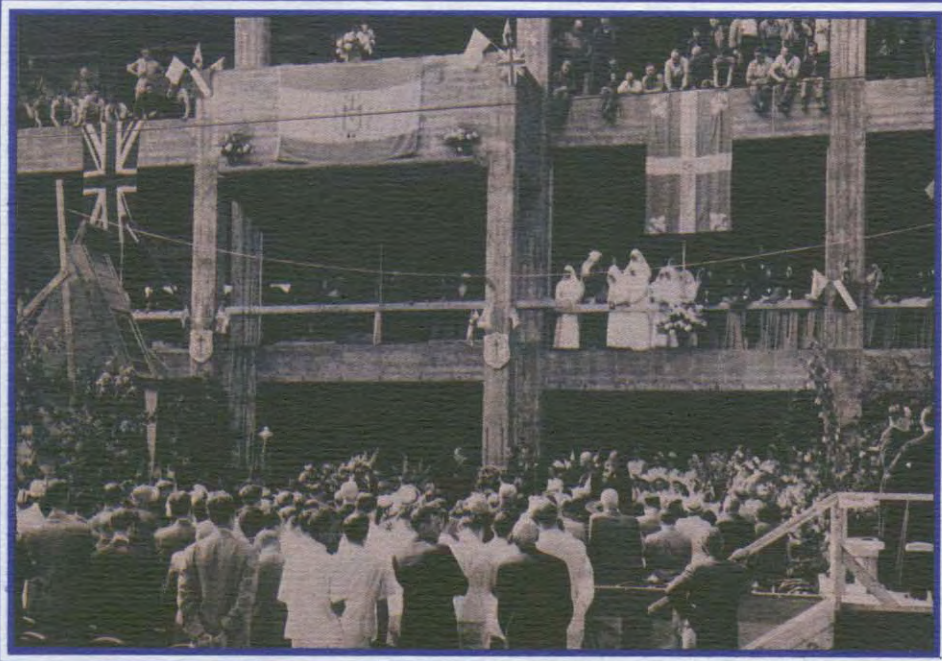
Sr. Marthe du Sauveur — Technician

use of more modern techniques, which, in turn, meant buying large equipment; on the other hand, the availability of specialized and well-equipped services attracted greater numbers of patients. For each of these reasons, it became necessary to have more space.

One cannot, therefore, consider the physical expansion of the hospital without examining the role played by the doctors and nuns who, by constantly working towards providing the entire community with the benefits of the most recent scientific discoveries, were the true architects of this phase of development. Examples abound of this unwavering desire to keep abreast of medical science's progress, and to put new discoveries at the service of the sick. Thus, the nuns and doctors of the hospital participated in the major conferences of many professional organizations. On such occasions, they learned a great deal and returned to their work enriched by the exchanges they had had with others specializing in the same field. The ideas they brought back were discussed and the best were adopted. This is how different specialized services such as clinics for the treatment of psychiatric and cardiological problems and cancer came into being. These various initiatives snowballed: the creation of the cancer clinic, for example, enabled *Dr. Paul Brodeur* to undertake work that won the clinic official recognition. Little by little, as new ideas and initiatives



*Ottawa General Hospital Nurses' Graduation 1905*



*Ottawa General Hospital — Laying of the D wing corner stone — 1951*



were carried out, the General Hospital's reputation grew. This is an important aspect of its expansion that was felt in all areas.

But the most modern techniques and the best-equipped rooms would be nothing without a competent and devoted staff. To ensure that future employees received the best possible training, a nursing school, known as the "d'Youville School", was created. In 1902, the first graduating class had fifteen nurses; in 1917, the d'Youville School's reputation was already such that twenty-nine graduate nurses were called upon to go and help in war-torn Europe. Little by little, the most demanding criteria were applied in order that the school be able to give its students excellent training. In 1926, the School affiliated itself with the Registered Nurses Association of Ontario and the students were tested according to provincially-set standards. In 1933, anxious to give nursing higher professional recognition, the hospital's administration decided to affiliate the school with the University of Ottawa, thus enabling the students to obtain a university degree. However, administrative and budgetary considerations forced the General Hospital to terminate this affiliation in 1962 and the hospital was solely responsible for the School for the next nine years.



*Residents' and Interns' Residence 1960*



*Pathology Laboratory 1948*



*Radiotherapy 1956*

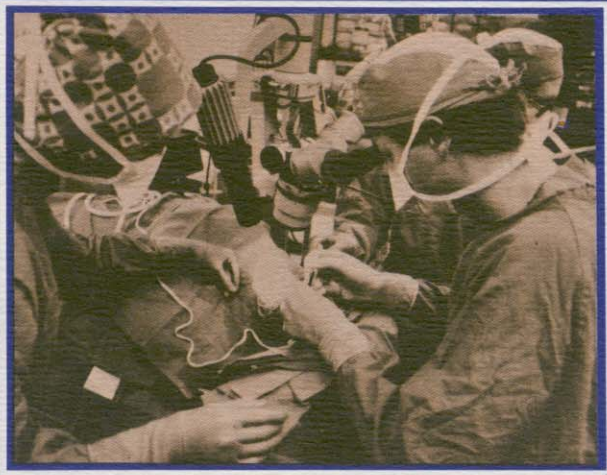


*Radiography 1956*

This desire to contribute to the training of a competent staff was also found in the measures taken to provide doctors with the most favourable environment in which to learn and practise medicine.

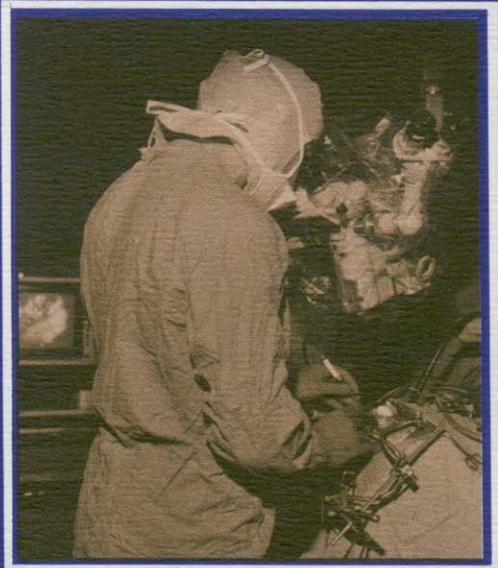
The hospital accepted interns as early as 1897. In 1945, when the University of Ottawa decided to set up the Faculty of Medicine, it seemed to be a matter of course that the General Hospital be asked to organize the clinical classes included in the programme. And so, in January 1947, the Clinical School of the University of Ottawa was inaugurated. In 1951, the members of the Board of the Medical Association of American Hospitals granted the University of Ottawa's Faculty of Medicine a standardization certificate, thereby recognizing that the General Hospital satisfied all the requirements for the teaching of clinical medicine, by providing valuable teaching and maintaining good standards.

The construction of extensions and new buildings, the setting-up of specialized services, the installation of equipment needed for the practice of an ultra-modern level of medicine, the staff-training programs following strict and demanding standards — these examples were not chosen to sum up a history so rich in happenings and events that only a detailed account could do it justice. They were brought together and mentioned in order to



*Doctors from the Retina Unit of the Department of Ophthalmology are performing a vitrectomy using the suction infusion tissue extractor.*

*Micro-Neuro Surgery*



illustrate this phase of the hospital's expansion, characterized by a constant desire to put the best material means and human resources possible at the disposal of the community in an effort to cure its ills. Progress is often made to the detriment of the past, of tradition: thus our architectural heritage is often sacrificed in the name of "progress", depriving us, and generations to come, of an opportunity to know and understand our roots better, and to acquire a feeling for our history that the best school books can never convey.

At the General Hospital this was never the case. There was progress and expansion in all areas, but the tradition of charity, devotion and determination was always respected, keeping *Mother Bruyère's* spirit fully alive. It is this spirit that drove all those who, risking their own health, treated the sick during the terrible Spanish flu epidemic that lasted through October and November of 1918. During that time, the hospital took in more than 1,000 victims, sometimes having to place them in the hallways. Many nurses and doctors were themselves ill, but those who remained carried on, stretching out their already long hours to treat the sick, with the help of nuns and volunteers who had answered the Mayor's plea for assistance. When the virus was at last under control at the end of November, two doctors had given their lives by their great devotion to their pa-



*Pediatrics — 1972*

tients, and the entire staff had given all it had in order to stay the course of the illness that had befallen the community. In *Mother Bruyère's* days, things would have been no different. The spirit of devotion that had sustained her and her sisters when they had to face the typhus epidemic in 1847-48 was the same nearly a century later.

The secret was facing up to the difficulty and pushing on to the limit of human capabilities, all the time believing in the old saying: "God helps those who help themselves." *Mother Bruyère* was most certainly convinced of the truth of this proverb while she lived and worked in Bytown in the conditions with which we are now familiar. Those who followed in her footsteps continued to believe in it, and it was that faith that carried them through the most trying of times.

If the history of the progress made at the hospital can — and should — speak of great triumphs accomplished through the years, it would be unjust not to mention the difficulties that had to be overcome. Financial difficulties, for example, became greater as the hospital went more and more into debt, in order to meet the new needs of a growing institution, and led to an impasse in 1966. Would it not have been wise to limit expansion as long as financial resources were small? But that would have meant having the means govern the end, which is



*Mrs. William Bingham — wife  
of Mayor Bingham — Member  
of the Ladies Auxiliary*



*Sir James Alexander Grant —  
First Chief of Staff at the  
Ottawa General Hospital —  
Founder of the Ladies Auxiliary  
(1898)*



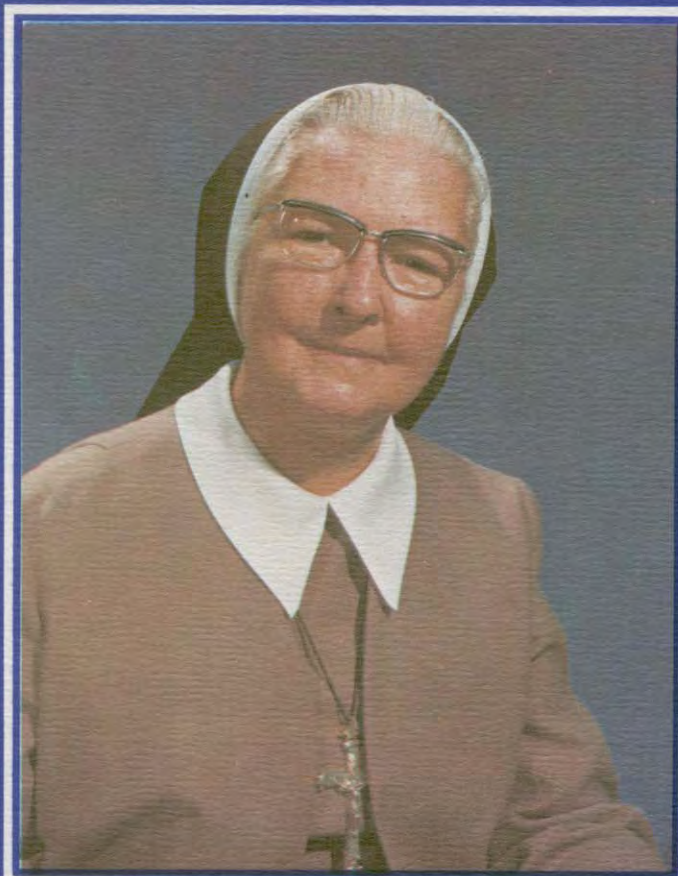
*Lady Zoé Laurier — wife of  
Sir Wilfrid Laurier — Member  
of the Ladies Auxiliary (1898)*



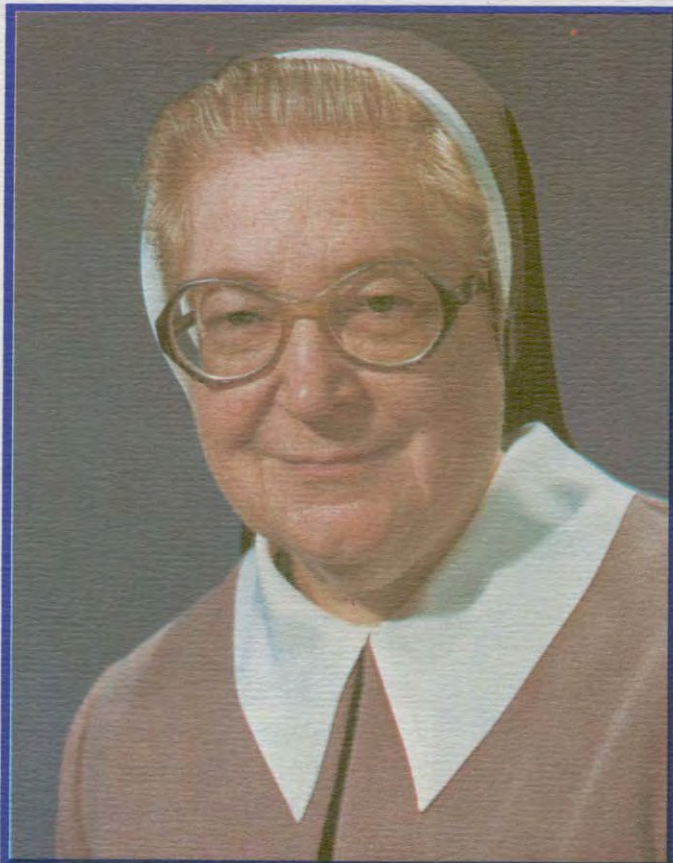
something *Mother Bruyère* had certainly never done. Her successors could not bring themselves to do it either and, once more, history decided in their favor. Every effort was made to help an institution whose value, importance and reputation would have justified much greater assistance, had it been necessary.

To illustrate the survival of *Mother Bruyère's* heritage, it must be added that her successors were supported in their task by benefactors who, with the same generosity as *Mr. Larocque's*, contributed unstintingly to the development of the institution, and to the well-being of the sick treated there. The Ladies Auxiliary, created in 1898, and the Volunteers' Services, set up later, deserve special mention. Those who, like *Mr. Larocque*, were convinced of the immeasurable value of the work accomplished by the hospital and who gave so generously of their time and talents, contributed towards keeping alive the memory of its foundress and the tradition of devotion that she established one hundred and thirty-five years ago.





*Mother Marcelle Gauthier, s.c.o.  
Superior General*



*Sister Gilberte Paquette, s.c.o.  
Executive Director*

## *Conclusion*

One hundred and thirty-five years.

The history of the General Hospital, woven little by little, year after year, is a tapestry made of the strongest thread. It was embroidered by men and women who made every effort to remain faithful to the example set by a twenty-seven year-old nun and who, in their most humble chores and their gravest decisions, were able to work towards the realization of a vision and to paint it in the richest of colours.

1980 marks the beginning of a new chapter in the history of the hospital — the realization of a project which was approved by the authorities in 1971 and which will open the way to a new phase of expansion. The building situated in Lower Town will be used for the treatment of chronically ill and ambulatory patients, all other services being transferred to the Ottawa Health Sciences Centre General Hospital. Another scene will thus be added to the tapestry; the vision and the mission remain the same: to do everything within one's power, with the help of the best available means, to cure the ills of the community.



*Ottawa General Hospital (1979)*

The Chairman of the hospital's Board of Trustees wrote in the 127th Annual Report that when the Ontario government and the Sisters of Charity at Ottawa undertook joint operation of the hospital, it was able to participate further in the regional development program for hospital services.

The Chairmen who followed one another at the head of the Board all recognized the debt owed by the hospital to the Sisters of Charity at Ottawa, for their enlightened cooperation with doctors, administrators, and trustees, for their unfaltering devotion towards making the hospital function well and for their priceless contribution to its material and moral survival.

At the dawning of a new era, this is the kind of contribution that should be remembered in order that the spirit that has always characterized the General Hospital, and by which the Sisters of Charity most convincingly lived, should continue to flourish, so that the chapter about to begin stays in keeping with the same tradition.

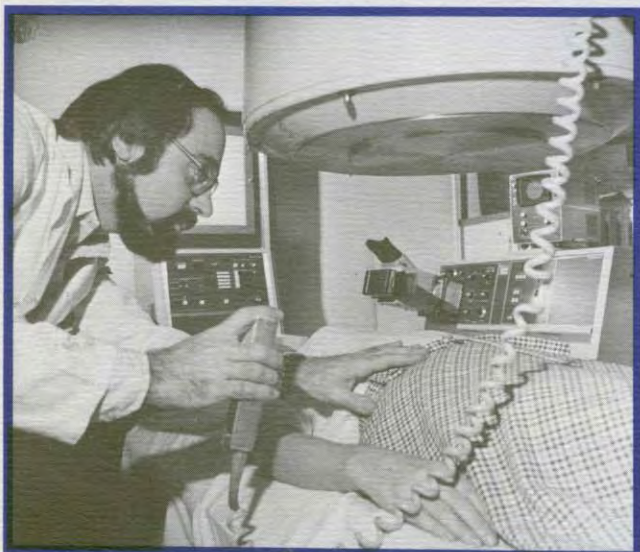




*Pulmonary Function Testing*



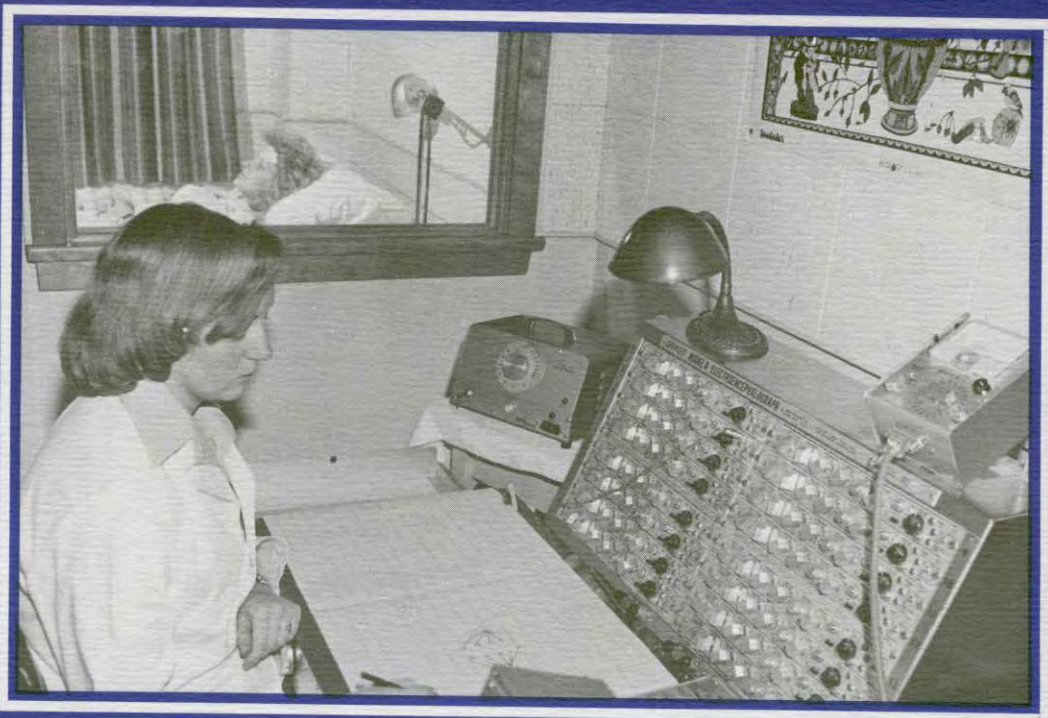
*Computerized Tomography*



*Liver Scan — Gamma Camera*



*Fluorescein Angiography (Fundus Camera)*



*Ultraviolet cubicle*

*Electroencephalography*





1. Ladies Auxiliary Tuck Shop  
 2. Patient Relation Centre  
 3. Central Dictating System

4. Reading & Printing of Micro-film Information  
 5. Lab Information Computer System  
 6. Unit Dose





1 *Emergency Room*

2 *Cardiac Monitor*

3 *Blood Gas Analysis*



