

8.3 Saint Elizabeths Hospital East Campus Historic Resource Survey (July 2011)



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July 2011

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METHODOLOGY

This document presents the Full Resource Inventory for the East Campus of Saint Elizabeths Hospital. This inventory has been prepared to inform the Saint Elizabeths Hospital East Campus Master Plan to be prepared by the District of Columbia Office of Planning for the redevelopment of a section of the campus.

The inventory organizes the identified resources into the following four categories:

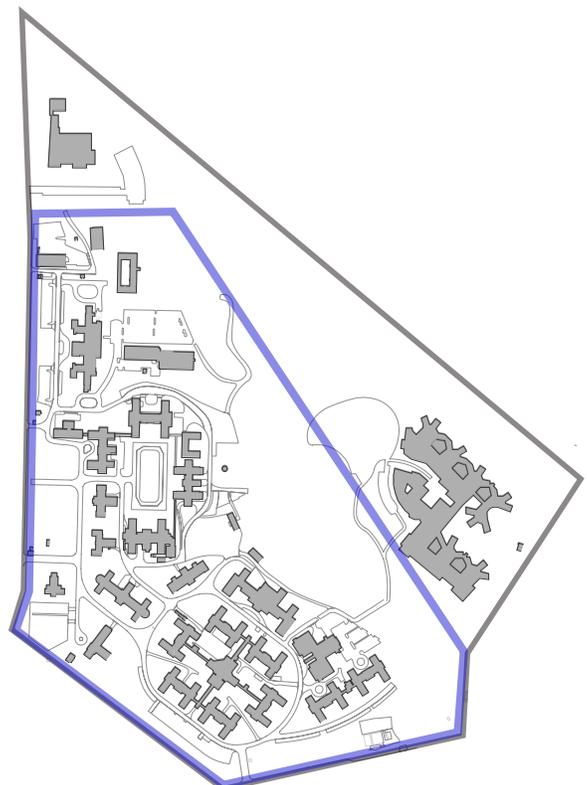
1. **BUILDINGS:** All numbered buildings on the East Campus. Buildings are presented numerically.
2. **LANDSCAPES:** Significant landscape units on the East Campus, as identified by EHT Traceries.
3. **ROADS:** All named roads on the East Campus. The road inventory does not include secondary service roads, drives, or parking lots.
4. **OTHER BUILT RESOURCES:** Structures and unnumbered buildings, as identified by EHT Traceries.

The Full Resource Inventory includes only those resources located within the area of study for the East Campus Master Plan, roughly that area east of the ravine and south of the United Communications Center.

Historic significance and historic integrity statements have been provided for individual resources and groups of resources throughout the inventory. These statements represent summary assessments based on the criteria for significance and the seven aspects of historic integrity defined by the National Park Service. Saint Elizabeths Hospital (East and West Campuses) is listed in the National Register of Historic Places (1979), as a National Historic Landmark (1990), and in the District of Columbia Inventory of Historic Sites (2005). The statements provided in this document take these designations into account, adopting the period of significance (1852 through the end of WWII) and the applicable National Register criteria identified (A, B, and C).

The 2005 landmark decision from the D.C. Historic Preservation Review Board provides the most recent description and justification of the period of significance: *“The contributing structures are considered to be the same as those listed in the National Historic Landmark nomination, plus the 1921 motor pool garage on the East Campus (Building 81) and minus, of course, Staff Residences 7 and 10, former farm superintendents’ cottages demolished in 2003 in preparation for the Unified Communications Center project in the north corner of the East Campus. That is, all (but one) of the buildings– and the West Campus perimeter wall– predating the end of World War II are considered to contribute to the character of the historic district. Such a period of significance is an appropriate one, permitting enough time to have elapsed to judge the property in its proper historic context and ending shortly after the war and the end of the long superintendency of William Alanson White. Furthermore, for reasons of clarity in administering such a district in the future, it is important to synchronize as much as possible the present nomination with the National Historic Landmark designation. Thus the nondescript utility motor pool building is recommended for exclusion”* (HPRB Case No. 05-04).

Significance and integrity statements provided herein are not evaluations of the eligibility of resources for listing in the National Register of Historic Places as contributing to the Saint Elizabeths Historic District.



East Campus Master Plan Study Area

More detailed assessments should be completed if DCSHPO determines that additional eligibility evaluations are necessary, and the statements provided in this inventory could be used as a basis for subsequent evaluation. For resources previously evaluated as part of the 1979, 1990, and 2005 historic designations, the inventory states the contributing status as provided in each document and does not provide further evaluation or a resolution of conflicting evaluations amongst the documents.

All information included the Full Resource Inventory is based on the documentation provided in the previous historic designation nominations and the East Campus Historic Context (EHT Tracerics, 2011), as well as the images catalogued in the East Campus Historic Documentation Inventory (EHT Tracerics, 2011). These documents should be cross-referenced for citation information for the text and images provided in the Full Resource Inventory. All photographs included in this Inventory were taken by EHT Tracerics in 2011 unless otherwise indicated.

BUILDINGS

The East Campus was purchased by the Saint Elizabeths Hospital in 1869 for the expansion of its agricultural operations. The first buildings constructed on the East Campus by the Hospital were barns housing livestock and feed, as well as cottages to house the farm staff. Today, the farm structures that remain include a dry barn and horse stable, as well as two staff residences that have been moved from their original locations. Agriculture was a critical component both to the self-sufficiency of the institution, as well as to the therapeutic treatment of the patients who were employed to work the farm.

Although the Hospital intended to maintain the East Campus only for agricultural purposes, the Hospital failed to acquire additional land to house its overcrowded patient population at the turn of the twentieth century and was forced to construct patient buildings on the East Campus. Four of the twelve buildings constructed as part of the 1902 hospital expansion were located on the East Campus (Buildings 89, 94, 95, and 100). These two-story Italian Renaissance Revival-style buildings, referred to in early Annual Reports as the “Richardson Group,” are consistent with the cottage plan, an approach that intended to create a home-like atmosphere for patients. The cottage plan focused on small-scale detached buildings set within a picturesque landscape. Patients would be housed according to sex and the nature of their illness in non-institutional buildings. The four 1902 buildings on the East Campus housed the most “disturbed and destructive,” “especially untidy and demented” classes of male patients. These buildings also housed additional farm and hospital staff. The substantial setback of the buildings from the public road ensured privacy for patients and is consistent with a recommendation made by Frederick Law Olmsted Jr. for the new construction that he assumed would occur on the West Campus. The desire to maintain a consistent setback resulted in the orientation of Building 100, which is angled to reflect the change in direction of the campus boundary at that location. The buildings were separated from the existing farm by a ravine, a division that would continue throughout East Campus development in the first half of the twentieth century. All four 1902 buildings were designed by prominent architecture firm Shepley, Ruten, and Coolidge out of Boston. The buildings are two-story detached masonry structures capped with red tile roofs featuring cupolas and wide overhanging eaves. Each building was provided with open piazzas for patients to receive natural light and fresh air. Several of these piazzas were enclosed in 1918 to create additional interior space to house the ever-growing patient population at the Hospital.

In 1923, the Blackburn Laboratory was constructed adjacent to the 1902 buildings as the first medical science building for Saint Elizabeths Hospital. This building reflected a shift in treatment philosophies at the Hospital from therapeutic to scientific. At this time, Building 89 was converted into a general hospital to support the laboratory and was connected to Blackburn by an enclosed corridor.

In the 1930s, another major expansion of the Hospital resulted in the construction of a complex of buildings known today as Maple Quadrangle. These three buildings are distinct from all other buildings constructed by Saint Elizabeths in size, scale, and function. Each building is characterized by a complex massing of five or six stories, placed in a formal configuration around a landscaped quadrangle. Building 90, the first of the three Maple Quadrangle buildings, was designed as a medical and surgical building for the entire Hospital. Buildings 92 and 93 were designed as “receiving buildings.” These buildings represent another shift in treatment philosophies at Saint Elizabeths based on medical intervention. The Hospital’s experience over time was that patients, if they were going to recover, generally recovered quickly; most long-term patients became permanent residents of Saint Elizabeths. Thus, Buildings 92 and 93 were constructed to receive incoming short-term patients and included facilities for providing numerous forms of treatment and for accommodating a higher population of patients. Although at a much larger scale, the Maple Quadrangle buildings continued the architectural vocabulary of the Italian Renaissance Revival style that had been used on the previous East Campus buildings.

In contrast to the Maple Quadrangle Buildings, the Continued Treatment (CT) complex was intended to house chronic patients that required long-term or permanent housing and treatment. Constructed in the 1930s and 1940s, the primary complex consisted of six residential buildings (106, 107, 108, 110, 111, 112), facing outward in an oval configuration, and encircling a center kitchen and cafeteria (109). The design of these buildings was more consistent with the cottage plan, with detached, small-scale buildings configured to optimize privacy and a home-like atmosphere. Two additional CT buildings (115 and 116) were constructed in 1943 to the east of the primary CT grouping. The angled siting of both the primary CT grouping and the two additional CT buildings reflects an effort to maintain the setback that had been established by the 1902 buildings and reflects the angles of the southwest and southeast campus boundary lines.

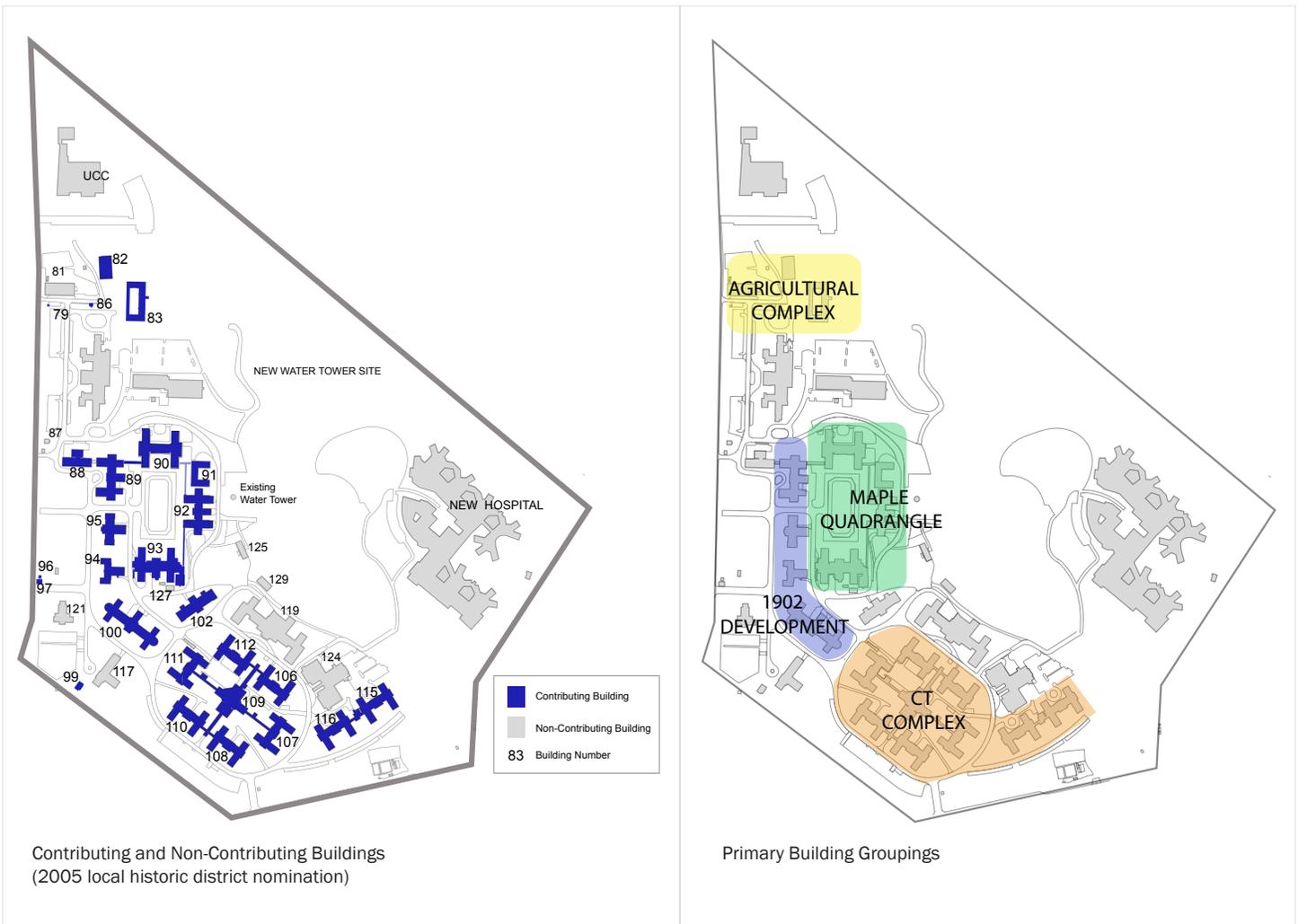
Between the CT Complex and Maple Quadrangle, the Hospital constructed a building for purposes of housing and treating Tuberculosis patients (Building 102). This building was sited in close proximity to the smaller tuberculosis cottages that were located

east of the CT Complex. These cottages were demolished in the 1950s to make way for Building 119, leaving Building 102 without a functional relationship to the other buildings on the campus.

Hospital development in the 1950s and 1960s evidences a distinct departure from the architectural style of the previous developments, with large-scale modern buildings with no clear spatial relationship to the other buildings on the campus. The siting of the Dorothea Dix Pavilion (120) in 1959 departed from the historic separation between the farm to the north and the hospital facilities to the south. Its construction required the filling of the ravine that had provided a natural barrier between the two functions.

Smaller buildings constructed in the late 1940s and 1950s, such as the Chapel (121) and Barton Hall (117), also lack strong architectural and spatial relationships to the historic development but are more in keeping with the scale of the historic development.

In general, the extant historic buildings on the East Campus reflect four distinct phases of development: the Agricultural complex, the 1902 Development, the Maple Quadrangle, and the CT Complex. These primary building groupings represent distinct functions at Saint Elizabeths and the evolving treatment philosophies implemented by the Hospital in the late nineteenth and early twentieth centuries. Today, the East Campus retains 27 buildings that contribute to the historical significance of Saint Elizabeths Hospital (2005 local historic district nomination form).



BUILDING 79: STAFF RESIDENCE NO. 8



ARCHITECT: Unknown
HISTORIC USES: Staff Residence
CONSTRUCTION DATE: 1888
LOCATION: Agricultural Campus
RESOURCE TYPE: Building
SIGNIFICANCE:

1979 NR Nomination	1990 NHL Nomination	2005 DC Nomination
Contributing	Contributing	Contributing



Front (west) elevation



Side (south) elevation



Rear (east) elevation

Constructed in 1888, this two-story vernacular farmhouse is of wood-frame construction set on a solid, raised, concrete block foundation. The building is faced with asbestos shingles and capped by an asymmetrical side-gable roof of asphalt shingles with overhanging eaves and white-painted wood rafter ends. The roof is penetrated by a centrally placed brick chimney. A full-width, single-story front porch with a shed roof and decorative green-painted wood shutters characterize the building. A half-width, single-story porch is located to the rear of the building. The building is primarily fenestrated with double-hung, multi-light, wood-sash windows with white-painted wood sills.

STORIES	MATERIALS	STRUCTURE	FOUNDATION	ROOF	WINDOWS
2	Asbestos shingles; wood	Wood frame	Concrete block; brick piers	Side gable, asphalt shingles	Double-hung, multi-light, wood-sash

CHARACTER-DEFINING FEATURES: (exterior)

- Side gable roof
- Wood-sash, multi-light windows with painted shutters
- Full-width front porch
- Central chimney

ALTERATIONS SUMMARY:

- New entry stairs and foundation as a result of building relocation
- Installation of metal grilles on windows and doors
- Relocation

HISTORIC SIGNIFICANCE:

Building 79 was constructed in 1888 to house agricultural staff for the adjacent hospital farm. As a result of a growing number of patients, the farm greatly increased in size in the late nineteenth century and thus required permanent staff. The house is significant for its role in the growth of the hospital farms and its continued presence on the East Campus since its construction.

HISTORIC INTEGRITY:

Building 79 retains a moderate degree of historic integrity. The building's exterior generally retains much of its original form, fenestration, and detailing, despite the replacement of the original cladding with asbestos shingles. The cottage has been moved, but its new location maintains an association with the agricultural operations of the Hospital. Generally, the integrity of setting and feeling of all farm buildings and structures on the East Campus have been diminished by the termination of agricultural operations, the construction of modern buildings nearby, and the paving of much of the original surrounding, landscape.

BUILDING 81: GARAGE

ARCHITECT: Unknown
HISTORIC USES: Garage
CONSTRUCTION DATE: ca. 1922
LOCATION: Agricultural Campus
RESOURCE TYPE: Building
SIGNIFICANCE:



1979 NR Nomination	1990 NHL Nomination	2005 DC Nomination
Non-Contributing	Non-Contributing	Non-Contributing



East elevation of Building 81



Northeast corner of Building 81



Southern entrance

Constructed ca. 1922, this single-story building reflects the style of the Modern Movement. The building is located at the intersection of Martin Luther King Jr. Avenue and Magnolia Street S.E. The rectangular concrete building is set on a solid concrete foundation and capped with a flat roof and a concrete parapet. Painted concrete columns create the building's eight bays, each of which is separated by triple fixed, multi-light, metal windows. Several of the bays have been enclosed with concrete block. The building has a single montior roof that maintains its fenestration. Two metal garage doors adjacent to single-leaf metal doors provide entrance to the building from the south.

STORIES	MATERIALS	STRUCTURE	FOUNDATION	ROOF	WINDOWS
1 plus basement	Concrete; metal	Reinforced concrete	Concrete	Flat roof with parapet and clerestory	Multi-pane steel windows

HISTORIC SIGNIFICANCE:

Building 81 is listed as a non-contributing resource in the 1979, 1990, and 2005 historic designations. The historic significance of this building was thus not evaluated.

HISTORIC INTEGRITY:

Building 81 is listed as a non-contributing resource in the 1979, 1990 and 2005 historic designations. The historic integrity of this building was thus not evaluated.

BUILDING 82: DRY BARN



ARCHITECT: Unknown
HISTORIC USES: Cow Barn
CONSTRUCTION DATE: 1884
LOCATION: Agricultural Campus
RESOURCE TYPE: Building
SIGNIFICANCE:

1979 NR Nomination	1990 NHL Nomination	2005 DC Nomination
Contributing	Contributing	Contributing



View of Building 82 from the southwest



Southern entry bridge



First floor entry

Constructed in 1884, the building is a two-story vernacular dairy barn. The Dry Barn has a large rectangular plan with a single-story shed bay along the west elevation. The building is of wood-frame construction set on a solid, raised, brick foundation. The façade of the rectangular building is faced with white-painted board and batten siding capped with a jerkinhead roof of metal shingles in a diamond pattern with overhanging eaves supported by white-painted wood rafter ends. The west bay is capped with a shed roof of metal shingles. Two concrete bridges supported by bluestone piers connect the north and south barn doors to gravel drives.

STORIES	MATERIALS	STRUCTURE	FOUNDATION	ROOF	WINDOWS
2 plus basement	Wood; concrete; brick	Wood frame; bluestone pier; concrete	Brick	Jerkinhead, metal shingles	Enclosed wood vents with wood surround

CHARACTER-DEFINING FEATURES: (exterior)

- Jerkinhead roof
- Bluestone piers supporting concrete bridges
- Board and batten siding
- Brick foundation

ALTERATIONS SUMMARY:

- Replaced roof
- Removal of cupola
- Enclosed windows and doors
- Replaced brick at foundation of east elevation

HISTORIC SIGNIFICANCE:

Building 82 was constructed as part of the expansion of agricultural operations on the East Campus in the late nineteenth century. The building was the second large barn to be constructed on the Hospital’s grounds and was used to house dairy cows. The Dry Barn is significant for its construction during a period of growth at the hospital and is representative of the continued presence of agriculture buildings and structures on the East Campus.

HISTORIC INTEGRITY:

Building 82 retains a moderate degree of historic integrity. The building retains its original location and thus its association with the agricultural operations of the Hospital. Generally, the integrity of setting and feeling of all farm buildings and structures on the East Campus have been diminished by the termination of agricultural operations, the construction of modern buildings nearby, and the paving of much of the original surrounding, landscape. Major alterations include the replacement of the roof, the removal of the cupola, and the replacement of bricks at the foundation. Generally, the barn retains its original form.

BUILDING 83: HORSE BARN



ARCHITECT: Shepley, Rutan & Coolidge Architects
HISTORIC USES: Stable
CONSTRUCTION DATE: 1901-1902
LOCATION: Agricultural Campus
RESOURCE TYPE: Building
SIGNIFICANCE:

1979 NR Nomination	1990 NHL Nomination	2005 DC Nomination
Contributing	Contributing	Contributing



West elevation



Side wing, looking south



Front gabled entry

Set on a level site at the end of Magnolia Street, the horse barn is a two-story agricultural building with a U-shaped plan. The two projecting wings are connected by a single-story open shed that creates the building's courtyard. The building is of brick construction, with a wood-frame second story, capped by a hip and valley roof of asbestos shingles in a diamond pattern. The second story and centrally placed cupola have wood shingle siding. The building is fenestrated with double-hung, multi-light wood-sash windows and small single-light fixed wood windows with limestone sills and polychrome jack arches.

STORIES	MATERIALS	STRUCTURE	FOUNDATION	ROOF	WINDOWS
2	Brick; wood shingles; limestone	Brick; wood frame	Brick	Hip and valley, asbestos shingles	Wood, multi-light sash

CHARACTER-DEFINING FEATURES: (exterior)

- Stone and brick detailing and ornamentation
- Large dormer windows
- Centrally placed cupola
- Remnants of cobblestone entry

ALTERATIONS SUMMARY:

- Replaced roof
- Enclosed windows and doors
- Addition of chain-link fence
- Cobblestone replaced with concrete at courtyard

HISTORIC SIGNIFICANCE:

Building 83 is significant as part of the restructuring of the Hospital in the early twentieth century. At this time, the stable located near the original hospital building on the West Campus was demolished, and this new, larger stable was constructed on the East Campus. The stable is also significant as part of the phase of construction that resulted in the expansion of hospital functions to the East Campus.

HISTORIC INTEGRITY:

Building 83 retains a moderate degree of historic integrity. The Stable continues to occupy its historic location and thus its association with the agricultural operations of the Hospital. Generally, the integrity of setting and feeling of all farm buildings and structures on the East Campus have been diminished by the termination of agricultural operations, the construction of modern buildings nearby, and the paving of much of the original surrounding landscape. Unlike the Dry Barn, however, the stable retains its iconic cupola and much of its exterior detailing. Extensive interior damage is evident, and there are major structural failures visible at the entry gable of the open shed. This deterioration diminishes the building's integrity of design, materials, and workmanship.

BUILDING 86: STAFF RESIDENCE NO. 9



ARCHITECT: Unknown
HISTORIC USES: Staff Residence
CONSTRUCTION DATE: 1888
LOCATION: Agricultural Campus
RESOURCE TYPE: Building
SIGNIFICANCE:

1979 NR Nomination	1990 NHL Nomination	2005 DC Nomination
Contributing	Contributing	Contributing



North and west elevations



Front elevation



Rear elevation

Constructed in 1888, this two-story, asymmetrical, vernacular house represents the gable-front-and-wing form. The building is of frame construction with vinyl siding set on a solid, raised, concrete block foundation. The house is capped by a side gable roof of standing-seam metal with overhanging eaves with white-painted rafter ends. The building is accessed through a one-story, full-width porch with a shed roof supported by square posts. The porch is set on a concrete block pier foundation enclosed with white-painted lattice-work dating from the building's relocation. The building is fenestrated with double-hung, wood-sash windows with wood sills, many of which have been enclosed.

STORIES	MATERIALS	STRUCTURE	FOUNDATION	ROOF	WINDOWS
2	Wood; vinyl siding; metal	Wood frame	Concrete block	Side gable, standing-seam metal	Double-hung, multi-light, wood-sash

CHARACTER-DEFINING FEATURES: (exterior)

- Side gable roof
- Wood-sash, multi-light windows
- Full-width front porch

ALTERATIONS SUMMARY:

- New entry stairs and foundation
- Enlargement of original front porch
- Installation of metal grilles on windows and doors
- Vinyl siding
- Relocation

HISTORIC SIGNIFICANCE:

Building 86 was constructed in 1888 to house agricultural staff for the adjacent hospital farm. As a result of a growing number of patients, the farm greatly increased in size in the late nineteenth century and thus required permanent staff. The house is significant for its role in the growth of the hospital farms and its continued presence on the East Campus.

HISTORIC INTEGRITY:

Building 86 retains a moderate degree of historic integrity. The building's exterior generally retains much of its original form, fenestration, and detailing, despite the replacement of the original cladding with vinyl siding. The cottage has been moved, but its new location maintains an association with the agricultural operations of the Hospital. Generally, the integrity of setting and feeling of all farm buildings and structures on the East Campus have been diminished by the termination of agricultural operations, the construction of modern buildings nearby, and the paving of much of the original surrounding, landscape.

BUILDING 87: GATEHOUSE NO. 3



ARCHITECT: Unknown
HISTORIC USES: Gatehouse
CONSTRUCTION DATE: 1958
LOCATION: Agricultural Campus
RESOURCE TYPE: Building
SIGNIFICANCE:

1979 NR Nomination	1990 NHL Nomination	2005 DC Nomination
Non-Contributing	Non-Contributing	Non-Contributing



View of gatehouse, looking northwest

Constructed in 1958, this small, single-story building reflects aspects of the Modern Movement and dates from the construction of the nearby Dorothea Dix Pavilion. The building is located between Martin Luther King Jr. Avenue and Sycamore Street and sits on a concrete slab foundation. It is capped by a flat roof with wide, overhanging eaves. The southern elevation, which is comprised of a full-width three-sided canted bay, is faced with corrugated metal siding. The bay holds a single-leaf door flanked by metal jalousie windows.

STORIES	MATERIALS	STRUCTURE	FOUNDATION	ROOF	WINDOWS
1	Brick; metal; concrete	Concrete	Concrete	Flat, metal	Jalousie, metal

HISTORIC SIGNIFICANCE:

Building 87 is listed as a non-contributing resource in the 1979, 1990 and 2005 historic designations. The historic significance of this building was thus not evaluated.

HISTORIC INTEGRITY:

Building 87 is listed as a non-contributing resource in the 1979, 1990 and 2005 historic designations. The historic integrity of this building was thus not evaluated.

BUILDING 88: BLACKBURN



ARCHITECT: Not known, initials C.B.S. noted on drawing
HISTORIC USES: General laboratory space
CONSTRUCTION DATE: 1929-1931
LOCATION: Development between Maple Quadrangle and MLK Jr. Avenue
RESOURCE TYPE: Building
SIGNIFICANCE:

1979 NR Nomination	1990 NHL Nomination	2005 DC Nomination
Contributing	Contributing	Contributing



Front elevation



Rear wing looking west



Basement autopsy room

Constructed in 1923, this two-story masonry building reflects the Italian Renaissance Revival architectural style that is prevalent on the East Campus, with relatively minimal architectural detailing in comparison to other East Campus buildings. The building is located on the north side of Sycamore Street adjacent to Building 89 to which it is connected by an enclosed masonry corridor. The building is set on a solid, raised foundation and is capped by a hipped roof with red ceramic tiles, exaggerated flared overhanging eaves, and exposed molded wood rafter ends. The building's T-shaped footprint is formed by a main rectangular block and a small rear wing connected by a narrow hyphen. The building has a raised central entrance facing Sycamore Street that is set within a buff brick surround. Fenestration consists primarily of double-hung, multi-light, metal-sash windows with cast-stone belt courses that serve as sills and lintels. The building's interior plan consists of double-loaded corridors with large laboratory spaces and small office spaces. An original autopsy theater is located on the basement level of the rear wing.

STORIES	MATERIALS	STRUCTURE	FOUNDATION	ROOF	WINDOWS
2 plus exposed basement	Brick; limestone; ceramic tile	Masonry; reinforced concrete floors; wood frame partition	Brick	Hip and valley, ceramic tiles	Wood, multi-light sash

CHARACTER-DEFINING FEATURES: (exterior)

- Red tile roof
- Stone and brick detailing and ornamentation
- Wood windows
- Overhanging eaves
- Double-loaded corridors
- Plaster walls

ALTERATIONS SUMMARY:

- Replacement of front entrance door
- Installation of elevator in corridor connecting main block to rear wing
- Replacement of interior flooring and doors
- Installation of dropped ceiling
- Removal of minor partitions

HISTORIC SIGNIFICANCE:

Building 88 was constructed to house laboratories for scientific research on mental illness. As one of the first of its kind in the United States, the building is representative of an important time period at the Hospital. Adjacent to the Maple Quadrangle and connected to Building 89, Building 88 is easily visible from Martin Luther King Jr. Avenue.

HISTORIC INTEGRITY:

Building 88 retains a high degree of historic integrity. The exterior of the building is largely intact, with retention of original windows, roof, and masonry. No major additions have altered the building's form or footprint. From the exterior, major alterations are limited to the replacement of the front entrance doors and the addition of some mechanical equipment. The interior floor plan is largely intact, with the removal of minor partitions within original laboratory spaces, replacement of some original treatments, and the addition of an elevator. The building's material condition does not diminish its integrity.

BUILDING 89: "R" BUILDING

ARCHITECT: Shepley, Rutan & Coolidge Architects
HISTORIC USES: Mixed Wards, Chronic Medical & Surgical Building
CONSTRUCTION DATE: 1902
LOCATION: Early Development, between Sycamore and Maple Quadrangle
RESOURCE TYPE: Building
SIGNIFICANCE:



1979 NR Nomination	1990 NHL Nomination	2005 DC Nomination
Contributing	Contributing	Contributing



Front elevation, looking northeast



Side wing elevation



Typical Piazza Space

Constructed in 1902, this two-story masonry hospital building reflects the Italian Renaissance Revival architectural style that is prevalent on the East Campus. Located on the northwest corner of Maple Quadrangle, the building fronts onto Sycamore Drive, with its rear elevation oriented to the Quadrangle; the building is adjacent to Building 90 and Building 88 and connected to both by enclosed masonry corridors. The building is set on a solid, raised foundation and capped by a hip and valley roof with red ceramic tiles, a center cupola, seven interior chimneys, exaggerated flared overhanging eaves, and prominent molded wood brackets. The building's modified H-shaped footprint is formed by a rectangular main block, two perpendicular rectangular wings on the north and south ends, and a small centered rear wing. The two side wings have L-shaped enclosed porches (also called piazzas) on both stories. The building has a central entrance facing Sycamore Street and is primarily fenestrated with double-hung, wood-sash multi-light windows with limestone sills and jack arch lintels. The interior plan is characterized by a center stair and a single double-loaded corridor that terminates at either end in a sitting room and ward, both of which lead to the enclosed porches. The rear wing is occupied by a dining room and kitchen.

STORIES	MATERIALS	STRUCTURE	FOUNDATION	ROOF	WINDOWS
2	Brick; limestone; ceramic tile	Masonry; concrete floor slabs; wood frame	Brick	Hip and valley, ceramic tile	Wood, multi-light sash

CHARACTER-DEFINING FEATURES: (exterior)

- Red tile roof
- Stone and brick detailing and ornamentation
- Wood windows
- Overhanging eaves
- Double-loaded corridors
- Plaster walls

ALTERATIONS SUMMARY:

- Replacement of front entrance door
- Installation of elevator in corridor connecting main block to rear wing
- Replacement of interior flooring and doors
- Installation of dropped ceiling
- Removal of minor partitions

HISTORIC SIGNIFICANCE:

Building 89 was one of the four buildings constructed on the East Campus in 1902. Originally used as a patient ward, this building was designed as the ideal situation for the moral treatment popular during the early 20th century. Building 89 housed the general hospital practice at the hospital, beginning in 1920, until those functions were diverted to Building 90 in 1929. Building 89 is part of the 1902 building grouping, which is significant as the first phase of construction of hospital buildings on the East Campus.

HISTORIC INTEGRITY:

Building 89 retains a moderate degree of historic integrity. The exterior of the building is largely intact, with retention of original windows, roof, and masonry. No major additions have altered the building's form or footprint. From the exterior, major alterations are limited to the replacement of the front entrance, the addition of fire escapes and exits, the replacement of the rear entrance, the enclosure of porches, and the replacement of wood porch balustrades. The interior floor plan is largely intact. The deterioration of the building's roofline and the poor condition of the interior diminish the building's integrity of materials and workmanship.

BUILDING 90: W.W. ELDRIDGE BUILDING



ARCHITECT: Designed by L. H. Dittrich, approved by U.S. Veterans Bureau
HISTORIC USES: Medical and Surgical Building
CONSTRUCTION DATE: 1929-1931
LOCATION: Maple Quadrangle, north side
RESOURCE TYPE: Building

1979 NR Nomination	1990 NHL Nomination	2005 DC Nomination
Contributing	Contributing	Contributing



Building 90, looking northwest from Building 92



Rear elevation, looking south



Front entrance

Constructed circa 1931, this five-story masonry hospital building reflects the Italian Renaissance Revival architectural style that is prevalent on the East Campus. Located on the north edge of Maple Quadrangle and facing south toward the quadrangle, the building is adjacent to Buildings 89 and 91 and connected to both by masonry corridors. The building is set on a full basement with a solid, raised foundation and is capped by a series of hip and valley roofs with red ceramic tiles and a projecting limestone cornice. The building’s modified H-shaped plan is formed by a complex massing consisting of a five-story central block connected by full-height hyphens to two side wings that step down to three stories at the quadrangle and at the rear. The side wings have enclosed porches at each end of the second and third stories. Porches are also centered on each story’s east and west side elevations. The building has a central entrance set in a recessed entry bay facing Maple Quadrangle. Two additional raised entrances face the quadrangle at the side wings. Fenestration primarily consists of double-hung, metal-sash multi-light windows with limestone sills, surrounds, and flat arch or jack arch lintels. Exterior elevations are styled in polychrome brick detailing, decorative metal grilles and balconies, and extensive limestone banding, door and window surrounds, and ornamentation. The interior plan is defined by intersecting double-loaded corridors, a center stair and elevator core, and two stairwells in each of the side wings.

STORIES	MATERIALS	STRUCTURE	FOUNDATION	ROOF	WINDOWS
5 plus basement	Brick; limestone; ceramic tile	Masonry; concrete floor slabs; terra cotta block partitions	Brick-faced concrete	Hip and valley, ceramic tile	Wood, multi-light sash

CHARACTER-DEFINING FEATURES: (exterior)

- Red ceramic tile roof
- Stone and brick detailing and ornamentation
- Metal windows
- Ornamental metal window grilles
- and balconies
- Recessed entry bay with arcade and projecting terrace
- Double-loaded corridors
- Plaster walls

ALTERATIONS SUMMARY:

- Alterations to interior plan
- Installation of porch enclosures
- Full-height vertical mechanical chases at rear elevation
- Replacement of front entrance doors and lobby windows

HISTORIC SIGNIFICANCE:

Building 90 was the first of the three buildings constructed on the Maple Quadrangle. Originally used as the Medical and Surgical Building, the building housed general hospital functions, which were previously housed in Building 89. The construction of this large building followed the treatment of the time when large buildings housed short-term care. The building also fit what the NHL nomination described as, “the final abandonment of ‘moral treatment’ in favor of medical intervention based on scientific, clinical research as the appropriate treatment for mental illness.” Building 90 is significant as part of the Maple Quadrangle building grouping.

HISTORIC INTEGRITY:

Building 90 retains a high degree of historic integrity. The building’s exterior is largely unaltered and retains its original windows, masonry, ornamental metalwork, and stone detailing. Major exterior alterations are limited to rear external mechanical chases and replacement material at the entrance and lobby. Significant features of the interior plan are largely intact, except for the removal of the operating theater on the 4th floor.

BUILDING 91: GLENSIDE



ARCHITECT: Not known, initials C.B.S. noted on drawing
HISTORIC USES: Isolation Building, (Contagious Building)
CONSTRUCTION DATE: 1923
LOCATION: Northeast corner of Maple Quadrangle
RESOURCE TYPE: Building
SIGNIFICANCE:

1979 NR Nomination	1990 NHL Nomination	2005 DC Nomination
Contributing	Contributing	Contributing



Entrance at end of wing



Looking north, from Building 92



North elevation, looking south

Constructed ca. 1923, this single-story masonry hospital building does not reflect a distinctive style. Located at the northeast corner of Maple Quadrangle, the building is blocked from the quadrangle by the masonry corridor connecting Building 90 and Building 92. The building's U-shaped plan opens to Pecan Street, S.E., away from the quadrangle. It is adjacent to Building 90 and Building 92 and connected to their shared corridor by a short masonry corridor. Constructed with terra cotta block, the building is set on a concrete foundation and capped with a hipped roof of asbestos shingles with overhanging eaves. Entry to the building has been altered over time and several entrances currently exist. The building is primarily fenestrated with double-hung, wood-sash multi-light windows with rowlock brick sills.

STORIES	MATERIALS	STRUCTURE	FOUNDATION	ROOF	WINDOWS
1 plus crawlspace	Terra Cotta block; concrete; asbestos shingles	Masonry; concrete floor slabs	Stucco-faced brick	Hipped, asphalt shingle	Wood, multi-light sash

CHARACTER-DEFINING FEATURES: *(exterior)*

- Hipped roof with dormers
- Wood multi-light windows
- Combed terra cotta block masonry walls
- Exterior chimney
- Double-loaded corridors
- Wood doors

ALTERATIONS SUMMARY:

- Alterations to interior plan, including removal of all interior partitions of north wing
- Infill and replacement doors
- New exterior access points
- New roofing
- Relocation

HISTORIC SIGNIFICANCE:

Building 91, constructed in 1923, was originally located directly east of Building 89 in the middle of what is now Maple Quadrangle. To accommodate the construction of Buildings 90, 92, and 93, Building 91 was moved to the northeast. Originally named the Isolation Building, it has also been known as the Contagious Building.

HISTORIC INTEGRITY:

Building 91 retains a moderate degree of historic integrity. The building's integrity of design and integrity of materials have been diminished by alterations to original building entrances and the original interior floor plan. The building has been moved and no longer retains an association with the 1902 buildings.

BUILDING 92: CHARLES H. NICHOLS BUILDING



ARCHITECT: Designed by L. H. Dittrich, approved by U.S. Veterans Bureau
HISTORIC USES: Female Receiving (John F. Marr Division)
CONSTRUCTION DATE: 1936
LOCATION: Maple Quadrangle, east side
RESOURCE TYPE: Building
SIGNIFICANCE:

1979 NR Nomination	1990 NHL Nomination	2005 DC Nomination
Contributing	Contributing	Contributing



Building 92, looking southeast from Building 90



Rear elevation, looking southwest



Front entrance

Constructed circa 1936, this five-story masonry hospital building reflects the Italian Renaissance Revival architectural style that is prevalent on the East Campus. Located on the east edge of Maple Quadrangle and facing west toward the quadrangle, the building is adjacent to Building 91 and connected to Building 90, Building 91, and Building 93 by a masonry corridor that runs continuously under Building 92. The building is set on a full basement with solid, raised foundation and is capped by a series of hip and valley roofs with red ceramic tiles and a projecting limestone cornice. A cupola is centered on the roof and surrounded by stone balustrades. The building's modified H-shaped plan is formed by a complex massing consisting of a five-story central block connected by full-height hyphens to two side wings that step down to three stories at the quadrangle and at the rear. Both a front projecting bay and rear wing are centered on the main block and topped by open terraces. Enclosed porches are located within the projecting bays that are centered on both the north and south side elevations. The building has a central entrance and front terrace facing Maple Quadrangle and is primarily fenestrated with rectangular and arch-headed double-hung, metal-sash multi-light windows with limestone sills, surrounds, and flat arch or jack arch lintels. Two additional raised entrances face the quadrangle at the side wings, and each are accessed by a double stair. The building's exterior elevations are styled in brick quoins and banding, as well as extensive limestone banding, door and window surrounds, and ornamentation.

STORIES	MATERIALS	STRUCTURE	FOUNDATION	ROOF	WINDOWS
5 plus basement	Brick; limestone; ceramic tile	Masonry; reinf. concrete floor slabs; terra cotta block partitions	Brick-faced concrete	Hip and Valley, Red Ceramic Tile	Painted metal, multi-light sash

CHARACTER-DEFINING FEATURES: (exterior)

- Red ceramic tile roof with cupola
- Stone and brick detailing and ornamentation
- Metal multi-light windows
- Ornamental metal window grilles
- Front and rear roof terraces on 5th floor
- Porches centered on side elevations
- Raised entry court

ALTERATIONS SUMMARY:

- Replacement of front entrance doors
- Security grates in stairwells
- Installation of porch enclosures

HISTORIC SIGNIFICANCE:

Building 92 was the last of the three buildings constructed on the Maple Quadrangle and functions as the Female Receiving Building. The building reflects a major change in modern medical philosophy, common for the time, which the NHL nomination described as, "the final abandonment of 'moral treatment' in favor of medical intervention based on scientific, clinical research as the appropriate treatment for mental illness." As the center building of the Maple Quadrangle, facing the West Campus, Building 92 with its iconic cupola is a focal point of the East Campus. Building 92 is significant as part of the Maple Quadrangle building grouping.

HISTORIC INTEGRITY:

Building 92 retains a high degree of historic integrity. The building's exterior is largely unaltered and retains its original windows, masonry, ornamental metalwork, and stone detailing. Major exterior alterations are limited to the replacement of entry doors. Significant features of the interior plan are largely intact, with only minor alterations to interior treatments. The deterioration of interior and exterior materials is not extensive enough to substantially affect the building's historic integrity.

BUILDING 93: WM. A. WHITE BUILDING

ARCHITECT: Designed by L. H. Dittrich, approved by U.S. Veterans Bureau
HISTORIC USES: Male Receiving (National Institute of Mental Health Center)
CONSTRUCTION DATE: 1934
LOCATION: Maple Quadrangle, south side
RESOURCE TYPE: Building



SIGNIFICANCE:	1979 NR Nomination	1990 NHL Nomination	2005 DC Nomination
	Contributing	Contributing	Contributing



Building 93, looking southeast from Building 90



Side elevation, looking east



Front entrance

Constructed circa 1936, this five-story masonry hospital building reflects the Italian Renaissance Revival architectural style that is prevalent on the East Campus. Located on the south edge of Maple Quadrangle and facing north toward the quadrangle, the building is adjacent to Building 92 and Building 127, and is connected to Building 92 by a masonry corridor. The building is set on a full basement with solid, raised foundation and is capped by a series of hip and valley roofs with red ceramic tiles and a projecting limestone cornice. The building's modified H-shaped plan is formed by a complex massing consisting of a five-story central block connected by full-height hyphens to two side wings that step down to three stories at the quadrangle and at the rear. Both a front projecting bay and rear wing are centered on the main block and topped by open terraces. Enclosed porches are located within the projecting bays that are centered on both the east and west side elevations. The building has a central entrance and front terrace facing Maple Quadrangle and is primarily fenestrated with rectangular and arch-headed double-hung, vinyl windows with limestone sills, surrounds, and flat arch or jack arch lintels. Two additional raised entrances face the quadrangle at the side wings, and each are accessed by a double stair. The building's exterior elevations are styled in brick quoins and banding, as well as extensive limestone banding, door and window surrounds, and ornamentation. Several non-contributing additions, dating from 1960, are located to the east of the building. The interior plan of the building is defined by double-loaded corridors, a center stair and elevator core, and two stairwells in each of the side wings.

STORIES	MATERIALS	STRUCTURE	FOUNDATION	ROOF	WINDOWS
5 plus basement	Brick; limestone; ceramic tile	Masonry; reinf. concrete floor slabs; terra cotta block partitions	Brick-faced concrete	Hipped; ceramic tile	Wood, multi-light sash

CHARACTER-DEFINING FEATURES: (exterior)

- Red ceramic tile roof with cupola
- Stone and brick detailing and ornamentation
- Ornamental metal window grilles
- Front and rear roof terraces on
- 5th floor
- Porches centered on side elevations
- Raised entry court

ALTERATIONS SUMMARY:

- Minor alterations to int. treatments and plan
- Replacement of doors and windows
- Security grates in stairwells
- Installation of porch enclosures and minor alterations to openings between porches and adjacent sitting rooms

HISTORIC SIGNIFICANCE:

Building 93 was the second of the three buildings constructed on the Maple Quadrangle. Originally used as the Male Receiving Building, this building would later house the National Institute of Mental Health (NIMH) Neuroscience Center & NIMH Neuropsychiatric Research Hospital. As the NHL nomination described, the Maple Quadrangle Buildings, "reflected the final abandonment of 'moral treatment' in favor of medical intervention based on scientific, clinical research as the appropriate treatment for mental illness." Building 93 is significant as part of the Maple Quadrangle building grouping.

HISTORIC INTEGRITY:

Building 93 retains a moderate degree of historic integrity. The building's original exterior character is legible, but the replacement of all windows diminishes the building's integrity of materials, workmanship and design. The southeast additions, although reversible, also diminish the building's integrity of design. Major exterior alterations are limited to the replacement of entry doors. Significant features of the interior plan are largely intact, and the demolition of partitions in the east wing does not have a major impact on its character.

BUILDING 94: "N" Building

ARCHITECT: Shepley, Rutan, & Coolidge Architects
HISTORIC USES: Mixed Wards
CONSTRUCTION DATE: 1902
LOCATION: Early Development, between Sycamore Street and Pecan Street
RESOURCE TYPE: Building
SIGNIFICANCE:

1979 NR Nomination	1990 NHL Nomination	2005 DC Nomination
Contributing	Contributing	Contributing



Front elevation, looking northeast



Side elevation, looking south



Cupola

Constructed in 1902, this two-story masonry hospital building reflects the Italian Renaissance Revival architectural style that is prevalent on the East Campus. The building is located to the east of Sycamore Street between Building 95 and Building 100. The building's rear elevation faces east to Maple Quadrangle. The building is set on a solid, raised foundation and capped by a hip and valley roof with red ceramic tiles, a center cupola, two interior chimneys, exaggerated flared overhanging eaves, and exposed moulded wood rafter ends. The building's modified T-shaped footprint is formed by a main rectangular block, a large rectangular wing centered on the rear elevation, and two single-story enclosed masonry porches that project toward the street from the north and south side elevations of the main block. Two open terraces run along the rear elevation of the main block and connect the porches to the rear wing. The building has a central entrance and portico facing Sycamore Street and is primarily fenestrated with double-hung, wood-sash windows with limestone sills and brick jack arch lintels. The exterior elevations of the building are detailed with a limestone water table and keystones, brick quoins, and painted wood Tuscan columns. The interior plan is composed of a short double-loaded corridor in the rear wing that connects a dining room at the rear of the building to a large sitting room or ward that comprises the interior of the main block. A stair is located in the rear wing.

STORIES	MATERIALS	STRUCTURE	FOUNDATION	ROOF	WINDOWS
2 plus basement	Brick; limestone; ceramic tile	Masonry; reinf. concrete floor slabs; wood frame interior walls	Brick	Hipped, ceramic tile	Wood, multi-light sash

CHARACTER-DEFINING FEATURES: (exterior)

- Red ceramic tile roof and cupola
- Stone and brick detailing and ornamentation
- Wood multi-light windows
- Wide overhanging eaves with exposed rafter ends
- One-story projecting side porches
- Brick chimneys

ALTERATIONS SUMMARY:

- Non-original partitions in sitting room
- Minor alterations to interior treatments, including flooring
- Installation of porch enclosures
- Replacement of entry doors
- Addition of fire escapes
- Security grilles in stairwell

HISTORIC SIGNIFICANCE:

Building 94 was one of the four buildings constructed on the East Campus in 1902. Originally used as a patient ward, this building was designed as the ideal situation for the moral treatment popular during the early twentieth century. Building 94 continued to house patients through the twentieth century before eventually being vacated. Building 94 is part of the 1902 building grouping, which is significant as the first phase of construction of hospital buildings on the East Campus.

HISTORIC INTEGRITY:

Building 94 retains a moderate degree of historic integrity. The exterior of the building is largely intact, with retention of original windows, roof, and masonry. No major additions have altered the building's form or footprint. From the exterior, major alterations are limited. The interior floor plan is largely intact, with reversible changes to the sitting room plan. The deterioration of the building's roofline, poor condition of the interior, and possible deterioration of structures diminish the building's integrity of materials and workmanship.

BUILDING 95: "I" Building



ARCHITECT: Shepley, Rutan, & Coolidge Architects
HISTORIC USES: Mixed Wards
CONSTRUCTION DATE: 1902
LOCATION: Early Development, between Sycamore Street and Pecan Street
RESOURCE TYPE: Building

1979 NR Nomination	1990 NHL Nomination	2005 DC Nomination
Contributing	Contributing	Contributing



Front elevation, looking northeast



Side elevation, looking south



Front Entrance

Constructed in 1902, this two-story masonry hospital building reflects the Italian Renaissance Revival architectural style that is prevalent on the East Campus. The building is located to the east of Sycamore Street between Building 94 and Redwood Street. The building's rear elevation faces west to Maple Quadrangle. The building is set on a solid, raised foundation and is capped by a hip and valley roof with red ceramic tiles, a center cupola, exaggerated flared overhanging eaves, paired moulded wood brackets, and exposed moulded wood rafter ends. The building's modified cross-shaped footprint is formed by a main rectangular block with large centered rear wing and small centered projecting front bay. A one-story enclosed masonry porch terminates both the north and south ends of the main block. The building has a central projecting vestibule, entrance, and terrace and is primarily fenestrated with double-hung, wood-sash windows with limestone sills and brick jack arch lintels. The exterior elevations are detailed with a limestone water table and limestone keystones. The interior plan is defined by a double-loaded corridor in the rear wing, connecting a dining room at the rear of the building to a series of sitting rooms (first story) and wards (second story) that comprise the main block of the building. A single stair is located at the intersection of the rear wing and main block.

STORIES	MATERIALS	STRUCTURE	FOUNDATION	ROOF	WINDOWS
2 plus basement	Brick; limestone; terra cotta	Masonry; concrete floor slabs; wood frame interior partitions	Brick	Hip and valley, ceramic tile	Wood, multi-light sash

CHARACTER-DEFINING FEATURES: (exterior)

- Red ceramic tile roof and cupola
- Stone and brick detailing and ornamentation
- Wood multi-light windows
- Wide overhanging eaves with exposed rafter ends and brackets
- One-story projecting side porches
- Brick chimneys
- Projecting front vestibule

ALTERATIONS SUMMARY:

- Non-original partitions in sitting room
- Minor alterations to interior treatments, including flooring
- Installation of porch enclosures
- Replacement of entry doors
- Addition of fire escapes
- Security grilles in stairwell

HISTORIC SIGNIFICANCE:

Building 95 was one of the four buildings constructed on the East Campus in 1902. Originally used as a patient ward, this building was designed as the ideal situation for the moral treatment popular during the early twentieth century. Building 95 continued to house patients throughout the twentieth century before eventually being vacated. Building 95 is part of the 1902 building grouping, which is significant as the first phase of construction of hospital buildings on the East Campus.

HISTORIC INTEGRITY:

Building 95 retains a moderate degree of historic integrity. The exterior of the building is largely intact, with retention of original windows, roof, and masonry. No major additions have altered the building's form or footprint. From the exterior, major alterations are limited. The interior floor plan is largely intact, with reversible changes to the sitting room plan. The deterioration of the building's roofline, poor condition of the interior, and possible deterioration of structures diminish the building's integrity of materials and workmanship.

BUILDING 96: COMFORT STATION



ARCHITECT: Unknown
HISTORIC USES: Rest room
CONSTRUCTION DATE: 1922
LOCATION: Development along Martin Luther King Avenue
RESOURCE TYPE: Building
SIGNIFICANCE:

1979 NR Nomination	1990 NHL Nomination	2005 DC Nomination
Contributing	Contributing	Contributing



North elevation



West elevation



East elevation

This one-story, one-bay building was originally constructed in 1922 as a comfort station. The brick building does not reflect a distinctive style. It is set on a solid parged foundation and is capped by a hipped roof of asphalt shingles with overhanging eaves. A denticulated brick cornice is located beneath the roof. A single-leaf metal door is centrally located on the east elevation and another door opening has been enclosed with brick on the west elevation. This doorway on the west elevation has a concrete-paved access ramp bordered by low, brick retaining walls. The north and south elevations each have a pair of clerestory windows with sills of projecting row-lock bricks; the windows have been enclosed with brick.

STORIES	MATERIALS	STRUCTURE	FOUNDATION	ROOF	WINDOWS
1	Brick	Masonry	Concrete	Hipped, asphalt shingles	Enclosed

CHARACTER-DEFINING FEATURES: (exterior)

- Hip roof
- Brick facade

ALTERATIONS SUMMARY:

- Window and door openings have been enclosed with brick.

HISTORIC SIGNIFICANCE:

Building 96 was built in 1922 along with moderate development, including the construction of Blackburn Laboratory.

HISTORIC INTEGRITY:

Building 96 retains a moderate degree of historic integrity. The building’s exterior has been altered with the enclosure of the original windows and doors. The building also no longer retains its historic use as a public rest room.

BUILDING 97: GATEHOUSE NO. 4



ARCHITECT: Unknown
HISTORIC USES: Gatehouse
CONSTRUCTION DATE: 1926
LOCATION: Development along Martin Luther King Avenue
RESOURCE TYPE: Building
SIGNIFICANCE:

1979 NR Nomination	1990 NHL Nomination	2005 DC Nomination
Contributing	Contributing	Contributing



North elevation



West elevation



East elevation

Constructed ca. 1926, this single-story brick gatehouse does not reflect a distinctive style. The small brick structure is located near the western boundary of St. Elizabeths East Campus near the intersection of Martin Luther King Jr. Avenue, S.E., and Gatehouse No. 4 Entry Road. The building has a rectangular footprint capped with a hipped roof of asbestos shingles and exaggerated overhanging eaves with exposed rafter ends. The overhang of the roof on the south elevation, supported by circular metal posts, creates a full-width porch. Behind the porch a trapezoidal-shaped enclosed vestibule has a brick-faced solid balustrade beneath plywood facing. The building's fenestration generally consists of multi-light metal casement windows and large, single-light, fixed metal windows.

STORIES	MATERIALS	STRUCTURE	FOUNDATION	ROOF	WINDOWS
1	Brick	Masonry	Concrete	Hipped, asbestos-cement shingles	Enclosed

CHARACTER-DEFINING FEATURES: (exterior)

- Hip roof of asbestos shingles
- Brick facade

ALTERATIONS SUMMARY:

- Window and door openings have been enclosed with brick.

HISTORIC SIGNIFICANCE:

Building 97 was part of the moderate development that took place in the 1920s that included the construction of Blackburn Laboratory.

HISTORIC INTEGRITY:

Building 97 retains a moderate degree of historic integrity. The building's exterior has been altered with the exposure of the steel columns at the east end of the porch and the addition of an enclosed vestibule. The building is currently vacant.

BUILDING 99: STAFF RESIDENCE NO. 7

ARCHITECT: Unknown
HISTORIC USES: Staff Residence, Physician’s Residence
CONSTRUCTION DATE: 1924
LOCATION: Development along southern boundary of East Campus
RESOURCE TYPE: Building



1979 NR Nomination	1990 NHL Nomination	2005 DC Nomination
Contributing	Contributing	Contributing



Front (northeast) elevation



Southeast elevation



Southwest elevation

Constructed in 1924, the two-story vernacular foursquare house is located to the southwest of Building 117 near the southern edge of the East Campus. The house is of hollow tile construction set on a raised, parged foundation. The building is capped with a hipped roof of asbestos shingles that meet at a central brick chimney. A full-width, single-story enclosed front porch is sided with asbestos shingles and capped with a shed roof. A two story addition to the rear of the building is finished with aluminum siding and a shed roof. The building is primarily fenestrated with double-hung, multi-light, wood-sash windows with white-painted wood sills and surrounds.

STORIES	MATERIALS	STRUCTURE	FOUNDATION	ROOF	WINDOWS
2 plus basement	Hollow tile; concrete; asbestos shingles; aluminum siding	Concrete block	Concrete	Hipped, asbestos shingles	Double-hung, wood-sash, multi-light

CHARACTER-DEFINING FEATURES: (exterior)

- Hip roof of asbestos shingles with central chimney
- Enclosed side garden
- Enclosed front porch
- Hollow tile construction

ALTERATIONS SUMMARY:

- Window and door opening have been enclosed
- Two story rear addition

HISTORIC SIGNIFICANCE:

Building 99 was built as a staff cottage in the 1920s. The cottage was known as the Physician’s Residence, making it the only remaining staff cottage associated with hospital functions on the East Campus. Also unlike other East Campus cottages, Building 99 remains in its original location.

HISTORIC INTEGRITY:

Building 99 retains a moderate degree of historic integrity. The building’s exterior has been altered with an addition and enclosing of the porch. Much of its exterior detailing has also been altered, but the building retains its original windows and chimney. Unlike other East Campus cottages, Building 99 remains in its original location and thus retains its association with hospital functions as opposed to agricultural functions.

BUILDING 100: "P" BUILDING

ARCHITECT: Shepley, Rutan, & Coolidge Architects
HISTORIC USES: Mixed Wards
CONSTRUCTION DATE: 1902
LOCATION: Early Development, between Sycamore Street and Pecan Street
RESOURCE TYPE: Building
SIGNIFICANCE:

1979 NR Nomination	1990 NHL Nomination	2005 DC Nomination
Contributing	Contributing	Contributing



Front porch of Building 100



Rear elevation, looking southwest



Round porch at side elevations

Constructed in 1902, this two-story masonry hospital building reflects the Italian Renaissance Revival architectural style that is prevalent on the East Campus. Of the four buildings constructed in 1902, Building 100 is the largest, and it is sited at an angle to both the 1902 buildings and the Maple Quadrangle. The building is located north of Dogwood Street and between Buildings 94 and 102. The building is set on a solid, raised foundation and capped by a hip and valley roof with red ceramic tiles, a center cupola, nine interior chimneys, exaggerated flared overhanging eaves, exposed molded wood rafter ends, and paired molded wood brackets. The building's modified H-shape footprint is formed by a long rectangular block terminated by north and south side wings. A large rear wing is centered on the main block, and a two-story semi-circular porch is centered on both the north and south ends of the two side wings. The building has a central entrance accessed through a single-story portico facing Dogwood Street and is primarily fenestrated with double-hung, wood-sash multi-light windows with limestone sills and brick jack arch lintels. The exterior elevations are ornamented by a wood balustrade at the front portico and limestone keystones, water table, and capitals. The interior plan is defined by a center stair and a single double-loaded corridor terminating at sitting rooms and wards at either end. A dining room and kitchen are located in the rear wing.

STORIES	MATERIALS	STRUCTURE	FOUNDATION	ROOF	WINDOWS
2 plus basement	Brick; limestone; plaster; wood	Masonry; concrete floors slabs; wood frame interior partitions	Brick	Hip and valley, ceramic tile	Double-hung, wood-sash, multi-light

CHARACTER-DEFINING FEATURES: (exterior)

- Red ceramic tile roof and cupola
- Stone and brick detailing and ornamentation
- Wood multi-light windows
- Wide overhanging eaves with exposed rafter ends and brackets
- Two-story semi-circular projecting side porches
- Brick chimneys
- Projecting front portico

ALTERATIONS SUMMARY:

- Minor alterations to interior treatments, including flooring
- Installation of porch enclosures
- Replacement of entry doors
- Addition of fire escapes
- Security grilles in stairwell

HISTORIC SIGNIFICANCE:

Building 100 was one of the four buildings constructed on the East Campus in 1902. Originally used as a patient ward, this building was designed as the ideal situation for the 'moral treatment' popular during the early 20th century. Building 100 continued to house patients through the twentieth century before eventually being vacated. Building 100 is part of the 1902 building grouping, which is significant as the first phase of construction of hospital buildings on the East Campus.

HISTORIC INTEGRITY:

Building 100 retains a moderate degree of historic integrity. The exterior of the building is largely intact, with retention of original windows, roof, and masonry. No major additions have altered the building's form or footprint. From the exterior, major alterations are limited. The interior floor plan is largely intact, with reversible changes to the sitting room plan. The deterioration of the building's roofline, poor condition of the interior, and possible deterioration of structures diminish the building's integrity of materials and workmanship.

BUILDING 102: BEHAVIORAL STUDIES BUILDING



ARCHITECT: Designed by L. H. Dittrich, approved by U.S. Veterans Bureau
HISTORIC USES: Tuberculosis Building
CONSTRUCTION DATE: 1932-1933
LOCATION: Isolated Development, between Maple Quadrangle and CT Campus
RESOURCE TYPE: Building
SIGNIFICANCE:

1979 NR Nomination	1990 NHL Nomination	2005 DC Nomination
Contributing	Contributing	Contributing



Front elevation, from across Oak Street



Rear elevation, looking southeast



Front Entrance

Constructed between 1932 and 1933, this two-story masonry hospital building reflects the Italian Renaissance Revival architectural style that is prevalent on the East Campus. Located north of Oak Street, south of Maple Quadrangle, and is set at an angle to the Maple Quadrangle buildings. The building is set on a solid, raised foundation and is capped by a hipped roof with red ceramic tiles, a copper cupola, overhanging eaves, and exposed moulded wood rafters. Projecting bays are centered on the front and rear of the main block, with two additional projecting bays on the rear elevation. The building has a central entrance facing Oak Street and set within a limestone surround. The building is primarily fenestrated with double-hung, metal-sash multi-light windows with limestone sills and soldier brick flat arch or jack arch lintels. The exterior elevations detailed in brick quoins and surrounds, polychrome brick ornamentation, limestone keystones and water table, and decorative metal window grilles. The interior plan is defined by a center stair and elevator and a double-loaded corridor terminating in small wards. A dining room was located in the rear wing.

STORIES	MATERIALS	STRUCTURE	FOUNDATION	ROOF	WINDOWS
2	Brick; limestone	Masonry; concrete floors slabs; wood frame partitions	Brick-faced concrete	Hip and valley, ceramic tile	Double-hung, wood-sash, multi-light

CHARACTER-DEFINING FEATURES: (exterior)

- Red ceramic tile roof
- Stone and brick detailing and ornamentation
- Metal multi-light windows
- Ornamental metal window grilles
- Double-loaded corridors
- Terrazzo (stairs, wall bases, and window sills)
- Interior wood windows and doors at porch space

ALTERATIONS SUMMARY:

- Alterations to interior plan
- Enclosure of full-width front porches on first and second stories and incorporation of porch space into interior space in several locations
- Installation of dropped ceiling
- Alterations to interior treatments

HISTORIC SIGNIFICANCE:

Building 102, also known as the Tuberculosis Building, was part of the 1930s building campaign that included the buildings on Maple Quadrangle. The substantial two-story brick building had eighty beds and was located near the earlier male Tuberculosis Cottages (current location of Buildings 119 and 124). The design of the building followed the pattern of smaller scale buildings, which were used to house long term patients, while larger medical buildings provided short term care.

HISTORIC INTEGRITY:

Building 102 retains a moderate degree of historic integrity. The exterior of the building is largely intact, with retention of original windows, roof, and masonry. No major additions have altered the building's form or footprint. The most substantial exterior and interior change has been the incorporation of the porches into the interior space, which diminishes the building's integrity of design, workmanship, and materials. Other major exterior alterations include to the replacement of the front entrance. The interior floor plan has been altered, but its arrangement around a double-loaded corridor is intact. Although there is some deterioration of interior treatments, the condition of the building does not have a major impact on its character.

BUILDING 106: CT-3

ARCHITECT: Unknown
HISTORIC USES: Mixed Ward
CONSTRUCTION DATE: 1938
LOCATION: Continued Treatment Campus Oval
RESOURCE TYPE: Building
SIGNIFICANCE:

1979 NR Nomination	1990 NHL Nomination	2005 DC Nomination
Contributing	Contributing	Contributing



Front (northeast) elevation



Southwest elevation



Main entrance

Constructed in 1938, this two-story masonry hospital building reflects the Italian Renaissance Revival style that is prevalent on the East Campus. The building is located on the southwest side of Oak Street adjacent to Building 112 to which it is connected by an original enclosed masonry corridor. The building is set on a solid, raised foundation and is characterized by a red ceramic tile roof with flared, exaggerated overhanging eaves and wood rafter ends. The building's H-shaped footprint is formed by a central rectangular block intersected by two rectangular wings on its southeast and northwest sides. The end of the side wings facing the road are terminated by porches with screen enclosures. The building has a central entrance facing Oak Street and is primarily fenestrated with double-hung, metal-sash multi-light windows with concrete sills and soldier brick flat arch or polychrome jack arch lintels.

STORIES	MATERIALS	STRUCTURE	FOUNDATION	ROOF	WINDOWS
2 plus basement	Brick; limestone	Masonry	Brick-faced concrete	Hip and valley, ceramic tiles	Double-hung, multi-light, metal-sash

CHARACTER-DEFINING FEATURES: (exterior)

- Polychrome brick and concrete details
- Recessed main entryway set in an Italian Renaissance-style concrete surround
- Ceramic tile shingles
- Rear dormer window

ALTERATIONS SUMMARY:

- Reconfiguration of interior plan
- All new interior treatments
- Replacement of entry doors

HISTORIC SIGNIFICANCE:

Building 106 is part of the Continued Treatment Oval. These seven buildings, whose construction began in 1933, each held 164 beds. These small-scale buildings were constructed to house long-term care patients, as opposed to the short-term care available in the large structures on Maple Quadrangle.

HISTORIC INTEGRITY:

Building 106 retains a moderate degree of historic integrity. The building's exterior is largely unaltered and retains its original metal windows. Major alterations are limited to the interior of the building, where vast remodeling has left no evidence of the original plan or finishes.

BUILDING 107: CT-4



ARCHITECT: Unknown
HISTORIC USES: Mixed Ward
CONSTRUCTION DATE: 1939
LOCATION: Continued Treatment Campus Oval
RESOURCE TYPE: Building

1979 NR Nomination	1990 NHL Nomination	2005 DC Nomination
Contributing	Contributing	Contributing



Front (southeast) elevation



Northwest elevation and corridor to Building 109



Main entrance

Constructed in 1939, this two-story masonry hospital building reflects the Italian Renaissance Revival style that is prevalent on the East Campus. The building is located on the northwest side of Oak Street between Buildings 106 and 108. It is connected to Building 109 to the northwest by an original enclosed masonry corridor. The building is set on a solid, raised foundation and is characterized by a red ceramic tile roof with flared, exaggerated overhanging eaves and wood rafter ends. The building's H-shaped footprint is formed by a central rectangular block intersected by two rectangular wings on its southwest and northeast sides. The end of the side wings facing the road are terminated by porches with screen enclosures. The building has a central entrance facing Oak Street and is primarily fenestrated with double-hung, metal-sash multi-light windows with concrete sills and soldier brick flat arch or polychrome jack arch lintels.

STORIES	MATERIALS	STRUCTURE	FOUNDATION	ROOF	WINDOWS
2 plus basement	Brick; limestone	Masonry	Brick-faced concrete	Hip and valley, ceramic tiles	Double-hung, multi-light, metal-sash

CHARACTER-DEFINING FEATURES: (exterior)

- Polychrome brick and concrete details
- Recessed main entryway set in an Italian Renaissance-style concrete surround
- Rear dormer window
- Ceramic tile shingles

ALTERATIONS SUMMARY:

- Reconfiguration of interior plan
- All new interior treatments
- Replacement of entry doors

HISTORIC SIGNIFICANCE:

Building 107 is part of the Continued Treatment Oval. These seven buildings, whose construction began in 1933, each held 164 beds. These small-scale buildings were constructed to house long-term care patients, as opposed to the short-term care available in the large structures on Maple Quadrangle.

HISTORIC INTEGRITY:

Building 107 retains a moderate degree of historic integrity. The building's exterior is largely unaltered and retains its original metal windows. Major alterations are limited to the interior of the building, where vast remodeling has left no evidence of the original conditions.

BUILDING 108: CT-5



ARCHITECT: Unknown
HISTORIC USES: Mixed Ward
CONSTRUCTION DATE: 1940
LOCATION: Continued Treatment Campus Oval
RESOURCE TYPE: Building
SIGNIFICANCE:

1979 NR Nomination	1990 NHL Nomination	2005 DC Nomination
Contributing	Contributing	Contributing



Front (southwest) elevation



Rear (northeast) elevation



Main entrance

Constructed in 1940, this two-story masonry hospital building reflects the Italian Renaissance Revival style that is prevalent on the East Campus. The building is located on the northeast side of Dogwood Street adjacent to Building 110, to which it is connected by an original enclosed masonry corridor. The building is set on a solid, raised foundation and is characterized by a red ceramic tile roof with flared, exaggerated overhanging eaves and wood rafter ends. The building's H-shaped footprint is formed by a central rectangular block intersected by two rectangular wings on its southeast and northwest sides. The end of the side wings facing the road are terminated by porches with screen enclosures. The building has a central entrance facing Dogwood Street and is primarily fenestrated with double-hung, metal-sash multi-light windows with concrete sills and soldier brick flat arch or polychrome jack arch lintels.

STORIES	MATERIALS	STRUCTURE	FOUNDATION	ROOF	WINDOWS
2 plus basement	Brick; limestone	Masonry	Brick-faced concrete	Hip and valley, ceramic tiles	Double-hung, multi-light, metal-sash

CHARACTER-DEFINING FEATURES: *(exterior)*

- Polychrome brick and concrete details
- Recessed main entryway set in an Italian Renaissance-style concrete surround
- Front dormer window
- Ceramic tile shingles

ALTERATIONS SUMMARY:

- Reconfiguration of interior plan
- All new interior treatments
- Replacement of entry doors

HISTORIC SIGNIFICANCE:

Building 108 is part of the Continued Treatment Oval. These seven buildings, whose construction began in 1933, each held 164 beds. These small-scale buildings were constructed to house long-term care patients, as opposed to the short-term care available in the large structures on Maple Quadrangle.

HISTORIC INTEGRITY:

Building 108 retains a moderate degree of historic integrity. The building's exterior is largely unaltered and retains its original metal windows. Major alterations are limited to the interior of the building, where vast remodeling has left no evidence of the original conditions.

BUILDING 109: CT-KITCHEN & CAFETERIA



ARCHITECT: Unknown
HISTORIC USES: Mixed Ward
CONSTRUCTION DATE: 1933
LOCATION: Continued Treatment Campus Oval
RESOURCE TYPE: Building
SIGNIFICANCE:

1979 NR Nomination	1990 NHL Nomination	2005 DC Nomination
Contributing	Contributing	Contributing



Main entrance and loading dock



West elevation



East elevation

Constructed in 1933, this three-story masonry hospital building reflects the Italian Renaissance Revival style that is prevalent on the East Campus. The building is located at the center of the CT Campus and serves as a hub to which the surrounding CT buildings are connected by radiating corridors. The building is set on a solid, raised foundation and is characterized by a red ceramic tile roof with flared, exaggerated overhanging eaves and wood rafter ends. The building's cruciform footprint is formed by a center block from which four rectangular wings protrude. Each wing is connected to other buildings on the CT-Campus by an enclosed masonry corridor. The building has an entrance and loading dock along the northwest elevation between two wings. The building is primarily fenestrated with double-hung, multi-light, metal-sash windows with concrete sills and soldier brick flat arch or polychrome jack arch lintels.

STORIES	MATERIALS	STRUCTURE	FOUNDATION	ROOF	WINDOWS
3 plus basement	Brick; limestone	Masonry	Brick-faced concrete	Hip and valley, ceramic tiles	Double-hung, multi-light, metal-sash

CHARACTER-DEFINING FEATURES: (exterior)

- Polychrome brick and concrete details
- Dormer window
- Ceramic tile shingles

ALTERATIONS SUMMARY:

- Reconfiguration of interior plan
- All new interior treatments

HISTORIC SIGNIFICANCE:

Building 109 is part of the Continued Treatment Oval and served as the kitchen and cafeteria. The six connected buildings each held 164 beds. These small-scale buildings were constructed to house long-term care patients, as opposed to the short-term care available in the large structures on Maple Quadrangle.

HISTORIC INTEGRITY:

Building 109 retains a moderate degree of historic integrity. The building's exterior is largely unaltered and retains its original metal windows. Major alterations are limited to the interior of the building, where vast remodeling has left no evidence of the original conditions.

BUILDING 110: CT-6



ARCHITECT: Unknown
HISTORIC USES: Mixed Ward
CONSTRUCTION DATE: 1940
LOCATION: Continued Treatment Campus Oval
RESOURCE TYPE: Building

1979 NR Nomination	1990 NHL Nomination	2005 DC Nomination
Contributing	Contributing	Contributing



Main entrance and loading dock



West elevation



East elevation

Constructed in 1940, this two-story masonry hospital building reflects the Italian Renaissance Revival style that is prevalent on the East Campus. The building is located on the northeast side of Dogwood Street adjacent to Building 108, to which it is connected by an original enclosed masonry corridor. The building is set on a solid, raised foundation and is characterized by a red ceramic tile roof with flared, exaggerated overhanging eaves and wood rafter ends. The building's H-shaped footprint is formed by a central rectangular block intersected by two rectangular wings on its southeast and northwest sides. The end of the side wings facing the road are terminated by porches with screen enclosures. The building has a central entrance facing Dogwood Street and is primarily fenestrated with double-hung, multi-light, metal-sash windows with concrete sills and soldier brick flat arch or jack arch lintels.

STORIES	MATERIALS	STRUCTURE	FOUNDATION	ROOF	WINDOWS
2 plus basement	Brick; limestone	Masonry	Brick-faced concrete	Hip and valley, ceramic tiles	Double-hung, multi-light, metal-sash

CHARACTER-DEFINING FEATURES: (exterior)

- Polychrome brick and concrete details
- Recessed main entryway set in an Italian Renaissance-style concrete surround
- Front dormer window
- Ceramic tile shingles

ALTERATIONS SUMMARY:

- Reconfiguration of interior plan
- All new interior treatments
- Replacement of entry doors

HISTORIC SIGNIFICANCE:

Building 110 is part of the Continued Treatment Oval. These seven buildings, whose construction began in 1933, each held 164 beds. These small-scale buildings were constructed to house long-term care patients, as opposed to the short-term care available in the large structures on Maple Quadrangle.

HISTORIC INTEGRITY:

Building 110 retains a moderate degree of historic integrity. The building's exterior is largely unaltered and retains its original metal windows. Major alterations are limited to the interior of the building, where vast remodeling has left no evidence of the original conditions.

BUILDING 111: CT-1

ARCHITECT: Unknown
HISTORIC USES: Mixed Ward
CONSTRUCTION DATE: 1933
LOCATION: Continued Treatment Campus Oval
RESOURCE TYPE: Building



1979 NR Nomination	1990 NHL Nomination	2005 DC Nomination
Contributing	Contributing	Contributing



Front (northwest) elevation



Side elevation with exterior tank



Main entrance

Constructed in 1933, this two-story masonry hospital building reflects the Italian Renaissance Revival style that is prevalent on the East Campus. The building is located on the east side of Oak Street between Buildings 112 and 110. It is connected to Building 109 to the southeast by an original enclosed masonry corridor that extends from the rear elevation. The building is set on a solid, raised foundation and is characterized by a red ceramic tile roof with flared, exaggerated overhanging eaves and wood rafter ends. The building's H-shaped footprint is formed by a central rectangular block intersected by two rectangular wings on its southwest and northeast sides. The end of the side wings facing the road are terminated by porches with screen enclosures. The building has a central entrance facing Oak Street and is primarily fenestrated with double-hung, multi-light, metal-sash windows with concrete sills and soldier brick flat arch or polychrome jack arch lintels. The north side wing is surrounded by exterior service sheds, exposed plumbing, and a large steel tank. The windows on the north wing are all enclosed with plywood.

STORIES	MATERIALS	STRUCTURE	FOUNDATION	ROOF	WINDOWS
2 plus basement	Brick; limestone	Masonry	Brick-faced concrete	Hip and valley, ceramic tiles	Double-hung, multi-light, metal-sash

CHARACTER-DEFINING FEATURES: (exterior)

- Polychrome brick and concrete details
- Recessed main entryway set in an Italian Renaissance-style concrete surround
- Rear dormer window
- Ceramic tile shingles

ALTERATIONS SUMMARY:

- Complete interior remodeling

HISTORIC SIGNIFICANCE:

Building 111 is part of the Continued Treatment Oval. These seven buildings, whose construction began in 1933, each held 164 beds. These small-scale buildings were constructed to house long-term care patients, as opposed to the short-term care available in the large structures on Maple Quadrangle.

HISTORIC INTEGRITY:

Building 111 retains a moderate degree of historic integrity. The building's exterior is largely unaltered and retains its original metal windows. Major alterations are limited to the interior of the building, where vast remodeling has left no evidence of the original conditions.

BUILDING 112: CT-2



ARCHITECT: Unknown
HISTORIC USES: Mixed Ward
CONSTRUCTION DATE: 1933
LOCATION: Continued Treatment Campus Oval
RESOURCE TYPE: Building

1979 NR Nomination	1990 NHL Nomination	2005 DC Nomination
Contributing	Contributing	Contributing



Main entrance



Rear (southwest) elevation



Side elevation

Constructed in 1933, this two-story masonry hospital building reflects the Italian Renaissance Revival style that is prevalent on the East Campus. The building is located on the southeast side of Oak Street adjacent to Building 106 to which it is connected by an original enclosed masonry corridor. The building is set on a solid, raised foundation and is characterized by a red ceramic tile roof with flared, exaggerated overhanging eaves and wood rafter ends. The building's H-shaped footprint is formed by a central rectangular block intersected by two rectangular wings on its southeast and northwest sides. The end of the side wings facing the road are terminated by porches with screen enclosures. The building has a central entrance facing Oak Street and is primarily fenestrated with double-hung, multi-light, metal-sash windows with concrete sills and soldier brick flat arch or polychrome jack arch lintels.

STORIES	MATERIALS	STRUCTURE	FOUNDATION	ROOF	WINDOWS
2 plus basement	Brick; limestone	Masonry	Brick-faced concrete	Hip and valley, ceramic tiles	Double-hung, multi-light, metal-sash

CHARACTER-DEFINING FEATURES: (exterior)

- Polychrome brick and concrete details
- Recessed main entryway set in an Italian Renaissance-style concrete surround
- Rear dormer window
- Terra-cotta shingles

ALTERATIONS SUMMARY:

- Reconfiguration of interior plan
- All new interior treatments
- Replacement of entry doors

HISTORIC SIGNIFICANCE:

Building 112 is part of the Continued Treatment Oval. This group of seven buildings began construction in 1933 and each ward building held 164 beds. These small scale buildings were built to house long term care, as opposed to the short term care available in the large structures on Maple Quadrangle.

HISTORIC INTEGRITY:

Building 112 retains a moderate degree of historic integrity. The building's exterior is largely unaltered and retains its original metal windows. Major alterations are limited to the interior of the building, where vast remodeling has left no evidence of the original conditions.

BUILDING 115: CONTINUED TREATMENT - 8

ARCHITECT: Drawings list "L.E.S." as designer, approved by U.S. Veterans Bureau
HISTORIC USES: Mixed Ward
CONSTRUCTION DATE: 1943
LOCATION: Continued Treatment Campus, east of main group
RESOURCE TYPE: Building
SIGNIFICANCE:

1979 NR Nomination	1990 NHL Nomination	2005 DC Nomination
Contributing	Contributing	Contributing



Main entrance



Rear (southwest) elevation



Side elevation

Constructed from 1942-1943, this two-story masonry hospital building reflects the Italian Renaissance Revival architectural style that is prevalent on the East Campus. The building is located on the north side of Dogwood Drive east of Building 116, to which it is connected by an original enclosed masonry corridor. The building is set on a solid, raised foundation and is capped by a hip and valley roof with red ceramic tiles, overhanging eaves, and exposed moulded wood rafter ends. The building's H-shaped footprint is formed by a main rectangular block terminated by two large rectangular side wings. The side wings terminate in enclosed porches at the street side. The building's entrance is set within a projecting center bay facing Dogwood Drive. The building is primarily fenestrated with double-hung, metal-sash multi-light windows with concrete sills and soldier brick flat arch or jack arch lintels. The exterior elevations are detailed in ornamental metal window grilles, brick quoins, polychrome brick ornamentation, and limestone keystones, water table, and porch spandrels. The original interior plan was defined by intersecting double-loaded corridors with elevators at the intersections of the main block and side wings. The side wings consisted of large wards and day rooms, in addition to the enclosed porches.

STORIES	MATERIALS	STRUCTURE	FOUNDATION	ROOF	WINDOWS
2 plus basement and sub-basement	Brick; limestone	Terrazzo; drywall; vinyl tile	Masonry; concrete floor slabs; wood frame partitions	Hip and valley, ceramic tiles	Double-hung, multi-light, metal-sash

CHARACTER-DEFINING FEATURES: (exterior)

- Red ceramic tile roof and dormers
- Stone and brick detailing and ornamentation
- Metal multi-light windows
- Ornamental metal window grilles

ALTERATIONS SUMMARY:

- Reconfiguration of interior plan
- All new interior treatments
- Replacement of entry doors

HISTORIC SIGNIFICANCE:

Building 115 is part of the Continued Treatment Campus but, like Building 116, it is separate from the CT oval. These two buildings were constructed in 1943 and each held 164 beds. Cafeteria facilities originally intended to accompany the buildings were not constructed because of war shortages. These small-scale buildings were built to house long-term care patients, as opposed to the short-term care available in the large structures on Maple Quadrangle. The two buildings form the eastern most edge of the East Campus.

HISTORIC INTEGRITY:

Building 115 retains a moderate degree of historic integrity. The exterior of the building is largely intact and in good condition, with retention of original windows, roof, and masonry. No major additions have altered the building's form or footprint. The interior of the buildings have been substantially altered, and the original floor plan is no longer legible. The only original interior features are the stairwells and the enclosed porches.

BUILDING 116: CONTINUED TREATMENT - 7

ARCHITECT: Drawings list "L.E.S." as designer, approved by U.S. Veterans Bureau
HISTORIC USES: Mixed Ward
CONSTRUCTION DATE: 1943
LOCATION: Continued Treatment Campus, east of main group
RESOURCE TYPE: Building
SIGNIFICANCE:



1979 NR Nomination	1990 NHL Nomination	2005 DC Nomination
Contributing	Contributing	Contributing



Building 116, looking northwest



Rear elevation, looking southeast



Front entrance

Constructed from 1942-1943, this two-story masonry hospital building reflects the Italian Renaissance Revival architectural style that is prevalent on the East Campus. The building is located on the north side of Dogwood Drive west of Building 115, to which it is connected by an original enclosed masonry corridor. The building is set on a solid, raised foundation and is capped by a hip and valley roof with red ceramic tiles, overhanging eaves, and exposed moulded wood rafter ends. The building's H-shaped footprint is formed by a main rectangular block terminated by two large rectangular side wings. The side wings terminate in enclosed porches at the street side. The building's entrance is set within a projecting center bay facing Dogwood Drive. There is a long handicap ramp providing access to the main level that extends southwest from the building's west elevation; it is original to the building, with brick exterior walls, concrete coping, and window openings on the north side that provide light and ventilation to the utility tunnel under the ramp. The building is primarily fenestrated with double-hung, metal-sash multi-light windows with concrete sills and soldier brick flat arch or jack arch lintels. The exterior elevations are detailed in ornamental metal window grilles, brick quoins, polychrome brick ornamentation, and limestone keystones, water table, and porch spandrels. The original interior plan was defined by intersecting double-loaded corridors with elevators at the intersections of the main block and side wings. The side wings consisted of large wards and day rooms, in addition to the enclosed porches.

STORIES	MATERIALS	STRUCTURE	FOUNDATION	ROOF	WINDOWS
2 plus basement and sub-basement	Brick; limestone	Terrazzo; drywall; vinyl tile	Masonry; concrete floor slabs; wood frame partitions	Hip and valley, ceramic tiles	Double-hung, multi-light, metal-sash

CHARACTER-DEFINING FEATURES: (exterior)

- Red ceramic tile roof and dormers
- Stone and brick detailing and ornamentation
- Metal multi-light windows
- Ornamental metal window grilles

ALTERATIONS SUMMARY:

- Reconfiguration of interior plan
- All new interior treatments
- Replacement of entry doors

HISTORIC SIGNIFICANCE:

Building 116 is part of the Continued Treatment Campus but, like Building 115, it is separate from the CT oval. These two buildings were constructed in 1943 and each held 164 beds. Cafeteria facilities originally intended to accompany the buildings were not constructed because of war shortages. These small-scale buildings were built to house long-term care patients, as opposed to the short-term care available in the large structures on Maple Quadrangle. The two buildings form the eastern most edge of the East Campus.

HISTORIC INTEGRITY:

Building 116 retains a moderate degree of historic integrity. The exterior of the building is largely intact, with retention of original windows, roof, and masonry. No major additions have altered the building's form or footprint. The interior of the buildings have been substantially altered, and the original floor plan is no longer legible. The only original interior features are the stairwells and the enclosed porches.

BUILDING 117: BARTON HALL



ARCHITECT: Unknown
HISTORIC USES: Nurses Home
CONSTRUCTION DATE: 1946
LOCATION: Development near south boundary of hospital grounds
RESOURCE TYPE: Building
SIGNIFICANCE:

1979 NR Nomination	1990 NHL Nomination	2005 DC Nomination
Contributing	Contributing	Non-Contributing



Front (northwest) elevation



Side elevation



Main entrance

Constructed in 1946, this two-story masonry hospital building reflects the Colonial Revival style. The building fronts onto a circular drive at the southern termination of Sycamore Drive. The northeast elevation fronts onto the southwest side of Dogwood Street across from P Building (Building 100). The building is set on a solid, raised foundation and is faced with five-course American-bond brick. The building is capped by a cross-gable roof of slate shingles pierced by an interior side brick chimney. The footprint forms an asymmetrical T-shaped plan with the main entrance located on the southwestern end of the façade (northwest elevation). The main entry is set in a Colonial Revival-style wood surround sheltered by a front-gabled portico. The opening holds a double-leaf paneled wood door with lights beneath a fan light. The majority of window openings hold multi-light, double-hung, wood sashes with wood sills. A deck is located atop the flat roof of the first story on the southwest end of the building. Secondary entrances are located on the rear (southeast) elevation, the southeast elevation of the perpendicular rear wing, and the side (northeast) elevation; the opening on the northeast elevation is sheltered by a one-story, one-bay porch with a parged concrete foundation and a shed roof of asphalt shingles supported by square wood posts and enclosed on one side by horizontal vinyl siding.

STORIES	MATERIALS	STRUCTURE	FOUNDATION	ROOF	WINDOWS
2 plus basement	Brick	Masonry	Brick-faced concrete	Cross gable	Double-hung, multi-light, wood-sash

CHARACTER-DEFINING FEATURES: (exterior)

- Cross-gable roof
- Recessed entry and detailed surround

ALTERATIONS SUMMARY:

- Conversion from dormitory to office building

HISTORIC SIGNIFICANCE:

Building 117 dates from outside the period of significance of the Saint Elizabeths Hospital Historic District and National Historic Landmark and is a non-contributing resource. The historic significance of this building was thus not evaluated.

HISTORIC INTEGRITY:

Building 117 dates from outside the period of significance of the Saint Elizabeths Hospital Historic District and National Historic Landmark and is a non-contributing resource. The historic integrity of this building was thus not evaluated.

BUILDING 119: HAYDON BUILDING



ARCHITECT: Unknown
HISTORIC USES: Geriatrics Building
CONSTRUCTION DATE: 1952
LOCATION: Mid-century development near CT Campus
RESOURCE TYPE: Building

SIGNIFICANCE:	1979 NR Nomination	1990 NHL Nomination	2005 DC Nomination
	Non-Contributing	Non-Contributing	Non-Contributing



Building 119, front (southwest) elevation



Building 119, rear (northeast) elevation



Exterior corridor connecting Buildings 119 and 124

Constructed ca. 1952, this five-story hospital building reflects the Modern Movement. Located on the north side of Oak Street, opposite the Continued Treatment Campus, the building faces southwest toward Building 112 and Building 106. On the rear elevation, a raised, enclosed corridor connects the building to Building 124. The five-course, American-bond, brick-faced masonry building has a flat roof with a projecting metal cornice and concrete coping. The building has a complex massing consisting of a large undulating central mass connected by hyphens to two five-story side masses. Enclosed porches are incorporated into the central mass and fitted with metal screens. Flat, concrete overhangs accentuate portions of the front facade of the second, third, and fourth stories. The building has a central entrance located in a wide single-story entry pavilion facing Oak Street, and the building is primarily fenestrated with double-hung, multi-light, wood-sash windows with concrete sills. Several of the faces on the west elevation are uniquely styled with rows of header bricks ornamented with central concrete window surrounds that travel the height of the building.

STORIES	MATERIALS	STRUCTURE	FOUNDATION	ROOF	WINDOWS
5 plus basement	Brick; concrete; metal	Reinforced concrete	Brick-faced concrete	Flat roof with parapet	Double-hung, multi-light, wood-sash

HISTORIC SIGNIFICANCE:

Building 119 dates from outside the period of significance of the Saint Elizabeths Hospital Historic District and National Historic Landmark and is a non-contributing resource. The historic significance of this building was thus not evaluated.

HISTORIC INTEGRITY:

Building 119 dates from outside the period of significance of the Saint Elizabeths Hospital Historic District and National Historic Landmark and is a non-contributing resource. The historic integrity of this building was thus not evaluated.

BUILDING 120: DORTHEA DIX PAVILION



ARCHITECT: Unknown
HISTORIC USES: General Hospital Building
CONSTRUCTION DATE: 1959
LOCATION: South of Agricultural Campus
RESOURCE TYPE: Building

1979 NR Nomination	1990 NHL Nomination	2005 DC Nomination
Non-Contributing	Non-Contributing	Non-Contributing



Front (east) elevation



Rear (west) elevation



Main entrance to Building 120

Constructed from 1953-1959, this six-story hospital building reflects the Modern Movement. Located on the east side of the Sycamore Street, the building is located northeast of Maple Quadrangle and faces west toward Martin Luther King Jr. Avenue and the Saint Elizabeths West Campus. An oval-shaped concrete-paved patio is located on the southern end of the building's east elevation—it is enclosed by a brick wall and features brick benches. The six-course American-bond brick-faced masonry building has a flat roof with concrete coping at the cornice. The building has a complex massing consisting of a large central mass that steps away from the entrance; the central mass is connected by hyphens to two side masses that step down away from the main block. L-shaped projecting wings are located on the west elevation and flank the one-story central entrance pavilion of the main block. Secondary entrances are located north and south of the main entrance on the main block. The building is primarily fenestrated with four-light metal jalousie windows. Two projecting masses are located on the east (rear) elevation and hold enclosed porches fitted with screen windows on portions of the second through seventh stories. The porches are faced with concrete panels. There is little ornamentation on the building besides concrete panel facing and granite edging at the main entrance and a concrete panel detail at the center of the west elevation of the main block.

STORIES	MATERIALS	STRUCTURE	FOUNDATION	ROOF	WINDOWS
6 plus basement	Brick; concrete; metal	Reinforced concrete	Brick-faced concrete	Flat roof with parapet	Multi-light metal jalousie

HISTORIC SIGNIFICANCE:

Building 120 dates from outside the period of significance of the Saint Elizabeths Hospital Historic District and National Historic Landmark and is a non-contributing resource. The historic significance of this building was thus not evaluated.

HISTORIC INTEGRITY:

Building 120 dates from outside the period of significance of the Saint Elizabeths Hospital Historic District and National Historic Landmark and is a non-contributing resource. The historic integrity of this building was thus not evaluated.

BUILDING 121: CHAPEL

ARCHITECT: Unknown
HISTORIC USES: Chapel
CONSTRUCTION DATE: 1955
LOCATION: South of forecourt, along western boundary
RESOURCE TYPE: Building
SIGNIFICANCE:

1979 NR Nomination	1990 NHL Nomination	2005 DC Nomination
Non-Contributing	Non-Contributing	Non-Contributing



Building 119, looking southwest



Building 119, rear (south) elevation



Building 119, front (north) elevation

Constructed in 1955, this one-story chapel reflects the Colonial Revival architectural style. The building has a T-shaped plan and is of brick construction laid in five-course American bond, set on a poured concrete foundation. The main entrance is sheltered by a portico with pediment in the center of the north elevation. A brick bell tower, centered on the main façade, penetrates the portico roof and is capped with a white, domed, octagonal cupola. The building is fenestrated with large double-hung, multi-light, wood-sash windows with jack lintels and white-painted wood sills.

STORIES	MATERIALS	STRUCTURE	FOUNDATION	ROOF	WINDOWS
1 plus basement	Brick; concrete	Reinforced concrete	Concrete	Front gable, asphalt shingles	Double-hung, multi-light, wood-sash

HISTORIC SIGNIFICANCE:

Building 121 dates from outside the period of significance of the Saint Elizabeths Hospital Historic District and National Historic Landmark and is a non-contributing resource. The historic significance of this building was thus not evaluated.

HISTORIC INTEGRITY:

Building 121 dates from outside the period of significance of the Saint Elizabeths Hospital Historic District and National Historic Landmark and is a non-contributing resource. The historic integrity of this building was thus not evaluated.

BUILDING 124: REHABILITATION MEDICINE BLDG



ARCHITECT: Unknown
HISTORIC USES: Specialized Hospital Building
CONSTRUCTION DATE: 1962-1963
LOCATION: Mid-century development near CT Campus
RESOURCE TYPE: Building

SIGNIFICANCE:	1979 NR Nomination	1990 NHL Nomination	2005 DC Nomination
	Non-Contributing	Non-Contributing	Non-Contributing



Building 119, front (southwest) elevation



Building 119, rear (northeast) elevation



Building 119, side (northwest) elevation

Constructed between 1962 and 1963, this four-story hospital building reflects the Modern Movement. Located on the northeast side of Oak Street opposite the Continued Treatment Campus, the building faces southwest toward Building 106. At the rear of the building, two enclosed corridors connect the building to Building 119 and the corridor of Building 115-116. The five-course American-bond brick-faced masonry building has a flat roof with concrete coping. The building consists of a central mass connected to two four-story side masses. Enclosed porches fitted with metal screens are incorporated into the building's mass at the rear corners of the side wings. The building has a central entrance facing Oak Street and is primarily fenestrated with unornamented metal jalousie windows and rows of awning windows. The central mass has a large vent above the fourth story that is ornamented with stylized concrete blocks.

STORIES	MATERIALS	STRUCTURE	FOUNDATION	ROOF	WINDOWS
4 plus basement	Brick, concrete	Reinforced concrete	Concrete	Flat, not visible	Multi-light, metal, jalousie and awning

HISTORIC SIGNIFICANCE:

Building 124 dates from outside the period of significance of the Saint Elizabeths Hospital Historic District and National Historic Landmark and is a non-contributing resource. The historic significance of this building was thus not evaluated.

HISTORIC INTEGRITY:

Building 124 dates from outside the period of significance of the Saint Elizabeths Hospital Historic District and National Historic Landmark and is a non-contributing resource. The historic integrity of this building was thus not evaluated.

BUILDING 125: REFRIGERATION PLANT



ARCHITECT: Unknown
HISTORIC USES: Service building
CONSTRUCTION DATE: 1952
LOCATION: Development associated with Building 119
RESOURCE TYPE: Building

SIGNIFICANCE:	1979 NR Nomination	1990 NHL Nomination	2005 DC Nomination
	Non-Contributing	Non-Contributing	Non-Contributing



Front (southwest) elevation



Side (southeast) elevation



Rear (northeast) elevation

Constructed ca. 1952, this single-story hospital service building reflects the Modern Movement. Located to the northwest of Building 119, the building fronts a large asphalt-paved parking lot. The brick-faced masonry building sits on a raised concrete foundation and is capped by a flat roof with concrete coping. The rectangular building is accessed by a metal roll-up door and several single-leaf metal doors. A pair of vents is located on the northwest and southeast elevations. Multi-light metal jalousie windows also fenestrate the building.

STORIES	MATERIALS	STRUCTURE	FOUNDATION	ROOF	WINDOWS
1 plus basement	Brick; concrete	Concrete	Concrete	Flat, not visible	Multi-light, metal, jalousie

HISTORIC SIGNIFICANCE:

Building 125 dates from outside the period of significance of the Saint Elizabeths Hospital Historic District and National Historic Landmark and is a non-contributing resource. The historic significance of this building was thus not evaluated.

HISTORIC INTEGRITY:

Building 125 dates from outside the period of significance of the Saint Elizabeths Hospital Historic District and National Historic Landmark and is a non-contributing resource. The historic integrity of this building was thus not evaluated.

BUILDING 127: ANIMAL HOUSES



ARCHITECT: Unknown
HISTORIC USES: Animal House
CONSTRUCTION DATE: 1960
LOCATION: Development associated with Building 93
RESOURCE TYPE: Building

1979 NR Nomination	1990 NHL Nomination	2005 DC Nomination
Non-Contributing	Non-Contributing	Non-Contributing



East elevation



South elevation



Entrance near Building 93

This two-story, rectangular building was constructed ca. 1960. It is attached to the southeast corner of Building 93. The building is of concrete block construction faced with areas of stretcher-bond brick above the ground level. The upper stories project beyond the ground level, which features recessed five-course American-bond brick panels between concrete parged pilasters. The building has a flat roof and the original entrance was located on the south elevation. By 1988, an addition was constructed to the north of the building that featured vertical ribbon windows. The entrance is now located on the east elevation of the addition and holds a single-leaf metal door with one light sheltered by a porch with a flat roof supported by metal posts. Mechanical equipment is located south of the building.

STORIES	MATERIALS	STRUCTURE	FOUNDATION	ROOF	WINDOWS
2	Brick; concrete	Concrete	Concrete	Flat, not visible	N/A

HISTORIC SIGNIFICANCE:

Building 127 dates from outside the period of significance of the Saint Elizabeths Hospital Historic District and National Historic Landmark and is a non-contributing resource. The historic significance of this building was thus not evaluated.

HISTORIC INTEGRITY:

Building 127 dates from outside the period of significance of the Saint Elizabeths Hospital Historic District and National Historic Landmark and is a non-contributing resource. The historic integrity of this building was thus not evaluated.

BUILDING 129: EAST SIDE SUBSTATION



ARCHITECT: Unknown
HISTORIC USES: Service building
CONSTRUCTION DATE: 1968
LOCATION: Service development associated with Building 119
RESOURCE TYPE: Building

SIGNIFICANCE:	1979 NR Nomination	1990 NHL Nomination	2005 DC Nomination
	Non-Contributing	Non-Contributing	Non-Contributing



Front elevation, looking north



Side (northwest) elevation



Side (southeast) elevation

Constructed ca. 1968, this one-story mechanical building is utilitarian in character. Fronting onto Cypress Street, the building is located north of the Haydon Building (Building 119). The building is of concrete block construction faced with stretcher-bond brick and has a raised, parged foundation. The rectangular building is capped by a flat roof and has a plain concrete frieze. A roll-up metal vehicular door is located on the southwest elevation, and single-leaf metal doors are located on the southwest and southeast elevations. Louvered metal vents fenestrate the northwest elevation.

STORIES	MATERIALS	STRUCTURE	FOUNDATION	ROOF	WINDOWS
1 plus basement	Brick; concrete	Concrete	Concrete	Flat, not visible	N/A

HISTORIC SIGNIFICANCE:

Building 129 dates from outside the period of significance of the Saint Elizabeths Hospital Historic District and National Historic Landmark and is a non-contributing resource. The historic significance of this building was thus not evaluated.

HISTORIC INTEGRITY:

Building 129 dates from outside the period of significance of the Saint Elizabeths Hospital Historic District and National Historic Landmark and is a non-contributing resource. The historic integrity of this building was thus not evaluated.