

Landmarks Preservation Commission
July 11, 1989; Designation List 218
LP-1578

WILLIAM J. SYMS OPERATING THEATER, 400 West 59th Street, Borough of Manhattan. Built 1890-92; architect William Wheeler Smith.

Landmark Site: Borough of Manhattan Tax Map Block 1068, Lot 1 in part, consisting of that portion of the lot bounded by a line extending southerly along the base of the fence on Ninth Avenue to a point approximately 83 feet 6 inches from the intersecting point with the base of the fence on West 59th Street, then westerly approximately 120 feet 11 inches along a line parallel with the base of the fence on West 59th Street to a point within Lot 1, then northerly approximately 83 feet 6 inches along a line parallel with the base of the fence on Ninth Avenue to the base of the fence on 59th Street, then easterly along a line contiguous with the base of the fence on 59th Street approximately 120 feet 11 inches to the point of beginning, be designated as its Landmark Site.

On December 10, 1985, the LPC held a public hearing on the proposed designation as a Landmark of the William J. Syms Operating Theater and the proposed designation of the related Landmark site (Item No. 16). The hearing was continued to March 11, 1986 (Item No. 12). Both hearings had been duly advertised in accordance with the provisions of the law. A total of four witnesses spoke in favor of designation including one representative of the owner whose support was qualified.

DESCRIPTION AND ANALYSIS

Summary

The William J. Syms Operating Theater, built 1890-1892, was the most advanced operating theater in the world when it opened and one of the first equipped for aseptic surgery. The result of a collaboration of the architect William Wheeler Smith and the prominent American surgeon Charles McBurney, the building represented the attempt in the 19th century to reconcile architecture with technological advances. The appearance of the building, subtle and simple in detail but striking in its massing, especially in the form of its semi-conical roof, is expressive of the unusual functional demands of the building, an effort to harmonize the design with the other Roosevelt Hospital buildings, and the well-developed personal style of the architect for medical buildings.

Syms was the fourth of several major pavilions (see below) built as part of the pavilion plan of Roosevelt Hospital begun in 1869, and as such is both part of one of the earliest pavilion

plan hospitals in America, and a rare early survivor of a once highly influential approach to hospital design. Syms was the center of medical education in New York City in its early years, and it was the site of numerous advances in surgical practice at a time when modern surgery was taking shape.

Roosevelt Hospital

The Syms Operating Theater was one of a series of pavilions built according to the original pavilion plan of Roosevelt Hospital. The pavilion plan was an important early step, proposed by the French Academy of Sciences in 1788 but not executed until much later, in applying scientific knowledge to the design of hospitals. At first it called for small parallel two-story buildings, called pavilions, set in a symmetrical plan oriented for access to light and air. Disease and infections were believed to be carried in vapors, odors, dirt, and other "miasms" which were dispelled by light and good ventilation. Later, improved lighting and mechanical ventilation systems led to the acceptance of larger pavilion buildings.¹ Syms' location, siting, massing, and exterior detail as well as its institutional history all relate to the original plan for Roosevelt Hospital and to the architecture of its early buildings.

Roosevelt Hospital was established by the bequest of James Henry Roosevelt (1800-1863) who left about \$1,000,000 to build a hospital "for the reception and relief of sick and diseased persons."² Roosevelt Hospital occupies the full block bounded by 58th and 59th Streets and Ninth and Tenth Avenues. Although the land was part of the 1811 Commissioners Plan of Streets, 59th Street was only opened in 1851, and in 1866 when Roosevelt Hospital bought its site the area was still mostly scattered houses and small farms. The trustees of the hospital adopted the pavilion plan in 1866. This was among the earliest in the United States and, as far as is known, the first in New York City.

Although no early plan of the hospital survives, the original intention was to build a series of four parallel pavilions. In the first building campaign (1869-72), the prominent New York architect, Carl Pfeiffer, designed all the major buildings, three pavilions along 59th Street. They were built in the High Victorian Gothic Style with red brick walls and light colored "Ohio Stone" trim, and had lively roof lines. The one-story Surgical Pavilion next to the future site of the Syms Operating Theater was the smallest and most simply detailed of the group. The pavilion plan was largely adhered to in several expansions of the hospital, including a group of buildings designed by W. Wheeler Smith in the 1880s and 1890s, until about 1940.³

Surgery, Medical Education, and Operating Theaters

In the 19th century, surgery developed from a remedy of last resort to a common medical procedure, in part due to the introduction of anesthesia in 1847 and to the development of two theories of modern surgery, antiseptic surgery developed by Joseph Lister in 1867, followed by aseptic surgery about 1890. The operating theater was developed in the early 19th century on the model of anatomical theaters which had been the center of medical training since the Renaissance.⁴ In the 1870s, many new operating theaters, including the first one at Roosevelt Hospital, were built for the rapidly growing population of student surgeons.⁵ Usually incorporated in larger hospital buildings but occasionally occupying their own pavilions, these were well-ventilated wood rooms, often decorated, amply lit by large windows and gas lamps, which accommodated up to 300 observers. The best-known operating theater of this generation was at Johns Hopkins Hospital in Baltimore, built between 1877 and 1885.⁶

These were superseded by a new generation of operating theaters about 1890 for aseptic surgery, among the very first of which were the McLane Operating Room⁷ (now demolished), designed in 1890 by W. Wheeler Smith at Roosevelt Hospital for gynecological surgery, and the Syms Operating Theater. These had improved heat and ventilation from mechanical forced air systems, improved lighting from electric lights, and, with the understanding that absolute cleanliness was essential, smooth, impervious materials for all surfaces. Aseptic operating rooms were bright, clean, hard, undecorated spaces; they were the "high tech" spaces of their day. They utilized the latest technology to produce places suitable for the latest medical practices in a rapidly changing period.

History of Syms Operating Theater

The Syms Operating Theater was built with \$350,000 left by William J. Syms (1818-89), \$250,000 to build the theater and the remainder to be invested as an endowment for its work. Syms expressed in his will the desire to erect an operating theater which would be "an enduring monument to himself" and of "great service to suffering humanity."⁸

Syms was a partner in the New York firm of Blunt and Syms, for more than 25 years the largest gunmaker and dealer in New York. Syms was also a founder of the Metropolitan Gas Company and the Forty-second and Grand Street Railroad Company, and he was President of the Franklin Telegraph Company and Vice-president of the Atlantic and Pacific Telegraph Company. At his death, the Times said that he was "one of the largest land and house owners" in New York.⁹

Syms stipulated that the surgeon, Dr. Charles McBurney (1845-1913) would have complete charge of the building's design and operation. McBurney was a prominent New York surgeon and professor at the College of Physicians and Surgeons. In the year before William Syms died, McBurney achieved international recognition for his identification of the diagnostic point on the abdomen for appendicitis, still called "McBurney's Point." In his years at Syms, he described "McBurney's Incision," a method for removing the appendix, and made numerous other well publicized advances in the practice of surgery.¹⁰ Under McBurney, Syms became a world renowned center for surgeons.¹¹ McBurney had been called when President McKinley was shot because of his long experience in treating such cases at Roosevelt Hospital.¹²

Indeed, McBurney took an active role in the design of the Syms Operating Theater. He made a tour of the most modern operating facilities in Europe and America including "all the large hospitals in England, France, Germany, Austria, and Switzerland" and worked closely with the architect, W. Wheeler Smith, in the design of Syms. It appears that McBurney wrote a detailed program for the building and closely critiqued Smith's plans, finally accepting a fourth effort.¹³

Application for a building permit was made on October 15, 1890 and the building was completed on October 17, 1890. It opened on November 3, 1892 and at that time was considered the most advanced operating theater in the world.¹⁴

In addition to "McBurney's Incision," described above, which was developed largely at Syms, a number of other notable surgical advances were made here. These included the popularization of the use of rubber gloves, the invention of the "Roosevelt clamp," the first use by Thomas Bennett of the nitrous oxide-ether sequence and his subsequent development of the Bennett inhaler, and the development of the Connell Airway Anesthetometer by Dr. Karl Connell.¹⁵

Design and Construction¹⁶

The design of the Syms Operating Theater followed the very latest standards for a scientifically correct surgical operating theater. Syms was planned to serve several complex objectives and its simple exterior form belies the substantial complexity of the interior. Named for its dramatic focal point, the surgical amphitheater, the building also contained numerous additional rooms with varied requirements for light, air, and location. These included visitors' rooms, recovery rooms, living quarters for nurses and assistant surgeons, a decorated private chief surgeon's room, laboratory rooms, rooms for photography and

microscopes, two small operating rooms, surgeons' rooms, an ether room, various preparation rooms for bandages, instrument sterilization and storage, and separate circulation systems for visitors, the surgical staff, patients, and residents of the building. Visitors entered the building from the street; patients and medical staff entered via the connecting corridor to the surgical ward next door.

The Syms Operating Theater, a "fireproof" building,¹⁷ was built of loadbearing brick walls above a stone foundation with rolled-iron floor and roof beams and brick floor arches, and a slate roof. In addition, iron was used extensively for lintels and to create special spaces and features, notably the wheel-ramp leading from the amphitheater to the recovery room, and the amphitheater itself. The amphitheater, whose design was an innovative solution to the problem of lighting such spaces, had a semi-conical iron roof structure supporting tiers of skylights that provided diffused light without glare to the arena.¹⁸

Exterior materials include Haverstraw brick with Trenton molded brick and terra-cotta details, granite window trim, copper downspouts, slate roofing, and "Hayes Skylights." Inside, "No device has been omitted to repel the invasion of dirt and dust..." to dispel dampness, or to admit light.¹⁹ These devices included mosaic tile floors with curved corners, light colored impermeable wall surfaces of marble and painted hard plaster, cement floors in the amphitheater, floor traps, and a basement floor of cement mixed with felt to absorb moisture.

The building had a sophisticated heating and ventilating system operated from an engine room and a fan room in the basement. Important features of the system visible from the outside are the air intake tower which projects above the west wing of the building abutting the recovery rooms, brick chimneys in a symmetrical arrangement on either side of the amphitheater roof, and the massive exhaust chimney at the rear of the amphitheater roof.

In designing the exterior of the Syms Operating Theater the architect endeavored to make the building harmonize with its High Victorian Gothic style neighbors at Roosevelt Hospital in its setback from the street, the massing of its volumes, the contrasting use of red brick with light stone trim, and picturesque roof form. In particular, it related to the old Surgical Pavilion next door in the height of its one-story wings and in the rhythm and placement of its stone lintels.

While the round entrance arch and the main exhaust chimney recall the Romanesque, the overall design reflects the personal approach of the architect for hospital buildings. The principal features were decorative detail largely confined to variations of color and texture in flat walls, recessed windows which minimized

interior reveals, curved corners, and modest cornices. In 1892 when it opened, the restrained use of decorative detail was unusual for a prominent medical building. Most contemporary New York hospital buildings were more stylish and more lavishly ornamented, built generally for private paying patients or institutions with religious affiliations. Their designs may have been more fully in the hands of institutional benefactors or architects rather than doctors, and their outward appearances had more to do with aesthetic or conventional symbolic associations than with the practical function of a hospital. For example, Presbyterian Hospital, built in the Romanesque Revival Style at the same time as Syms, was designed by J.C. Cady and was a picturesque composition of Richardsonian elements that conveyed both an ecclesiastical and a club-like character to the building, and St. Luke's Hospital, designed by Ernest Flagg the year Syms opened employed a Beaux-Arts composition and French Baroque ornament in a sophisticated way that conveyed the power, permanence, and reliability of the institution. In contrast to these, at Syms the exterior appearance was considered important but secondary to the primary scientific function of the building.²⁰ Making a virtue of a restricted budget for its exterior, the design appears neither frugal nor lacking expressiveness, but serious and straightforward, evoking the high place of medical science in determining its form, and the priority of science over symbolism in the medical care to be provided within.

As a work of architecture, Syms must be seen in the context of hospital buildings and operating spaces not just in New York City but internationally. In this context it is a remarkable building representative of an alliance of medical science and architecture that produced some of the most advanced buildings of the 19th century.²¹

William Wheeler Smith²²

William Wheeler Smith (1838-1908), designer of the Syms Operating Theater, practiced architecture in New York from 1865 to 1908. During an unusually long career, he designed a number of notable buildings including the Collegiate Reformed Protestant Dutch Church (1872, demolished ca. 1933) at 48th Street and Fifth Avenue; the James White Building (1881), a cast-iron commercial structure, now a designated New York City landmark, at 361 Broadway; the W. & J. Sloane Store (1882), a large commercial structure now included in the Ladies Mile Historic District; and the Syms Operating Theater. Smith was successful and well regarded in his day but most of his major buildings have been demolished and little else survives to give us a full picture of his life and career.

Born in New York City, "Mr. Smith was described by his

friends and associates as an 'old school architect' who had inherited the fondness and ability for his profession from his father, a well-known builder of this city."²³ He apprenticed with one of the leading architects of the day, James Renwick, and studied at the University of London. He practiced on his own from about 1865 until his death in 1908.²⁴

Along with his architectural practice Smith invested in real estate. He left an estate worth more than \$3,000,000, almost all of which was to build "a country sanitarium for poor convalescents who must be sent away from St. Luke's [Hospital] before they have fully regained their strength."²⁵ Smith's philanthropic interest in hospitals was long standing. Over a period of many years he designed several buildings for Roosevelt Hospital including the Syms Operating Theater, without pay.

Smith's career seems to fall into two periods, an early period of general practice and a later period of specialization in hospital architecture and real estate development. The hospital and medical buildings, including the Sloane Maternity Hospital (1886), the College of Physicians and Surgeons (1888), and the Vanderbilt Clinic (1889), all on the block across 59th Street from Roosevelt Hospital (and all demolished), and the McLane Operating Room (1890), the Accident Building (1898) (both demolished), the Syms Operating Theater, and Private Patients Pavilion (1896) of Roosevelt Hospital all resembled one another. A late project of Smith's was the Kingston Avenue Hospital in Brooklyn. A perspective rendering shows a pavilion plan hospital organized much like McKim, Mead, and White's Columbia College Campus and in the same general style.²⁶

Later History

Syms was refurbished in 1934 but remained an operating theater only until 1941 when the new Private Patients pavilion was opened with new surgical rooms. For some time, Roosevelt's role as a teaching hospital had been diminished, styles of teaching surgery had changed, and the theatrical presentation to large crowds was considered obsolete.

In 1942 the blood bank and mortuary of the Hospital were moved into Syms. In 1948, Syms was used as a temporary emergency room. In 1953 the rear portion of the building (17 feet 6 inches deep) was removed to make way for the new Tower Building, the upper tier of skylights was covered in copper sheets, the semi-opaque glass on the ground floor was replaced by clear glass, the amphitheater was gutted, and the building was occupied by the Department of Pathology. Since that time, air-conditioning equipment has been placed in the front lawn, ducts have been run through several windows, parts of the areaway have been obstructed by pipes, trees have been allowed to grow in the front

lawn, and the old amphitheater and other spaces have been remodeled to suit changing office and laboratory space needs of the Hospital.

Description

The Syms Operating Theater is a nearly rectangular structure at the southwest corner of West 59th Street and Ninth Avenue. The building is set back on its two street fronts behind narrow planted strips which are bordered along the sidewalk by an iron fence on a granite base with granite capped brick posts.

In its massing the building consists of a central block with an elongated semi-conical roof, one-story wings on either side, a narrow three-story L-shaped wing adjacent to the central block on the south and west sides, and a square air intake tower adjacent to the west side of this wing above the one-story wing.

The walls of the building are brick with curved corners. Brick is of two types, each laid in the same plane in Flemish bond and differentiated by their finish: smooth and evenly colored around windows and corners, rough and varicolored between windows. The smooth brick framing was in a form suggesting quoins creating two-story bays at the basement and first story levels. Windows have granite sills and lintels and occasional granite mullions in wider windows, sometimes with egg and dart moldings or block modillions of terra cotta.

The roof, whose distinctive form signals the amphitheater below, is crowned by a decorative iron finial in the form of a caduceus surmounted by a fleur-de-lis, and is clad in two tiers of skylights across the front, slate shingles on the sides, and tin flashing. The roof is pierced by a large unadorned chimney in either flank, above the back wall of the amphitheater, and a massive exhaust chimney behind the amphitheater with a Romanesque corbelled cornice. The building is entered through a large rounded arch of glazed brick which is reached by a short flight of stairs. Above this arch is a granite panel with raised letters saying "The Wm. J. Syms Operating Theater of the Roosevelt Hospital, 1891."

Alterations

Today the exterior of the building is as built except for the loss of the entire south facade (the new facade abuts the adjacent Tower Building), the loss of the southernmost bays of the east and west facades, the addition of copper sheeting over the principal skylights, the presence of modern HVAC equipment, and the overgrowth of the lawn.

Although the alterations to the building are extensive (more

so on the interior, which is not the subject of this designation, than on the exterior) and mostly irreversible, the visual character of this highly distinctive building is still largely intact. Its subtly decorated flat brick walls with rounded corners, its strong entranceway and name panel, its massing as visible from most angles, and especially the distinctive shape of its roof are all present.

Report prepared by
Michael Corbett, Research Department

NOTES

1. Information on the pavilion plan at Roosevelt Hospital in Special Committee on the History of Roosevelt Hospital, The Roosevelt Hospital, 1871-1957 (New York, 1957), 7, 29. The development of the pavilion plan in the United States and Europe is discussed in Robert Bruegmann, "Architecture of the Hospital 1770-1870, Design and Technology," Ph.D. dissertation (University of Pennsylvania, 1976), 113-115 and passim. The first pavilion plan hospital to be executed was in 1846-54 with the Hospital Lariboisiere in Paris. The first pavilion plan hospital in America was the Hospital of the Protestant Episcopal Church, built 1864-74 in Philadelphia.
2. James P. Lathrop, History and Description of the Roosevelt Hospital (New York, 1893), 7.
3. The Roosevelt Hospital plan is discussed generally in many places but refers to four pavilions specifically in Roosevelt Hospital, First Annual Report (New York, 1873), 7. The role of Pfeiffer in choosing such a plan is not known. He was chosen, presumably, in large part for his expertise in designing heating and ventilating systems, for which he was internationally recognized. On Pfeiffer, see Elie Brault, Les Architectes par Leurs Oeuvres, vol. 3, (Paris, 1893), 442-443 and "Summary," American Architect and Building News 23, no. 648 (May 26, 1888), 241.
4. The idea of an operating theater as a "theater" had its origins in the well-attended Renaissance anatomical theaters. In the 18th and 19th centuries, operating theaters with their crowds of spectators, literal life and death drama, and dramatic lighting, were natural inheritors of the term. In 19th-century operating theaters, surgery was highly ritualized and surgeons traveled great distances to see operations performed. Numerous artists found the surgeon in his amphitheater a compelling subject. Thomas Eakins' paintings of "The Gross Clinic" (1875) and "The Agnew Clinic" (1898) depicting the excitement, drama, and heroic quality of these theaters are the best known.
5. Although neither Roosevelt Hospital nor Syms ever had any formal affiliation with a medical school, it was a central institution in the city's diffuse medical education establishment for many years. According to J.G. Speed, "Syms Operating Theater, Roosevelt Hospital," Harper's Weekly 37 (Feb. 25, 1893), 187, "The progress of New York towards the front rank of the great cities of the world has been more signally marked, perhaps, in its growth as a centre for medical and surgical education than in any other way," and called Syms "the most important hospital for

medical education in the city."

6. On the history of surgery see Charles Singer and E. Ashworth Underwood, A Short History of Medicine, 2nd ed. (New York, 1962), 357-70. Building on the germ theory of disease, antiseptic surgery involved directing a "steam carbolic spray" on the wound, instruments, and hands of the surgeon while aseptic surgery, still practiced today, required the sterilization by boiling of towels, instruments, gloves, and everything that touched the patient. On the Johns Hopkins Hospital, see John Shaw Billings, Description of the Johns Hopkins Hospital (Baltimore, 1890), 104-06 and plates 48-50.
7. "The Roosevelt Hospital," New York Times, Dec. 6, 1891, p.20.
8. Speed, 187.
9. "William J. Syms," NYT, Apr. 4, 1889, p.5.
10. On Syms' instructions to McBurney, see Lathrop, 16. On McBurney's achievements see John H. Talbott, A Biographical History of Medicine (New York, 1970) 1018-19.
11. Many European surgeons visited Syms on the way to the World's Columbian Exposition in Chicago in 1893: Special Committee, 10.
12. "Dr. Chas. M'Burney, Noted Surgeon, Dies," NYT, Nov. 8, 1913.
13. "For Scientific Surgery," NYT, Nov. 2, 1890, p.3.
14. NYC, Department of Buildings, Manhattan. Plans, Permits and Dockets, Block 1068, Lot 1. NB 1700-1890. On earlier assessments of the building, see Speed, 187; Roosevelt Hospital, 22nd Annual Report (New York, Jan. 1894), n.p.: "The universal testimony was, not only that it had no superior here or abroad, but that it might be regarded as a model structure in that line. In its practical workings it has realized all that was hoped for it by those who were most interested in the construction of an ideal operating building"; Lathrop, 16, quoting Dr. Edward Cowles of Boston, called it "the most remarkable structure of its kind that is now in existence"; Moses King, King's Handbook of New York City (New York, 1893), 467, said, "It is believed to be the best-appointed operating building in this or any other country"; Samuel W. Lambert, Hospitals and Medical Education (New York, Nov. 25, 1908), p.9, said, "in its early years it presented medicine and surgery to its student visitors in the best methods then known and practiced"; W.J. Duncan drawing of "The Operating Theater in the Roosevelt Hospital, New York" in an article by W. Gilman Thompson, "The Great Modern Hospital," Century Magazine 81,

- no. 1 (Nov. 1910), 91; and Special Committee, 20-21: "For many years it was the pride of the hospital, the Mecca of visiting surgeons and a place of wonder as well as instruction for generations of medical students."
15. Special Committee, 41, 79, 177, 184-87.
 16. Information in this section is taken from William Wheeler Smith, "Plans of the Syms Operating Theater," (Block 1068, Lot 1; NYC Department of Buildings); from Sanborn Map Company, Insurance Maps of the City of New York, Borough of Manhattan, vol. 6w, plate 17 (New York, 1920-present); and from various published sources, especially Lathrop, 16-20, "For Scientific Surgery," 3, and "A Temple Dedicated to Surgery," Harper's Weekly 36 (June 11, 1892), 574.
 17. Under the laws which governed construction in the City of New York [New York State. Statutes, The Building Laws Relating to the Construction of Buildings in the City of New York (New York, 1891), p. 32ff], "fireproof" construction consisted of walls of brick or other hard, incombustible materials, stairs and floor and roof structures of similar materials, and wood only in doors, windows, floor boards and sleepers. Syms more than met these standards with all of its floors of cement or mosaic tile and wood used only in the chief surgeon's private office. The 1926 Sanborn Maps revised their earlier rating of "Superior" and "Fireproof" to "Semi-fireproof" because of the exposed iron beams in the structure of the amphitheater roof.
 18. This was accomplished with some difficulty by placing the skylights at the top of a high, light reflecting wall directly above the arena, rather than directly above the center of the amphitheater space, as was done at Johns Hopkins, for example.
 19. "A Temple Dedicated to Surgery," 574.
 20. See "For Scientific Surgery": "All style and architectural feelings were sacrificed to the scientific demands, but the building nevertheless will be an ornament to its neighborhood;" and "A Temple Dedicated to Surgery": Beauty of exterior has been sacrificed to utility of interior."
 21. See note 14 above.
 22. See "William Wheeler Smith," NY Evening Post, Apr. 6, 1908, p.8: 2; Brault, 444; and LPC files.
 23. "William Wheeler Smith," 8.

24. We have no information about the size or nature of his office except the names of his head draftsmen between 1899 and 1901.
25. "Gave up \$3,000,000 For the Poor and Ill," NYT, Apr. 17, 1908, p. 1:1.
26. This was designed with Charles W. Leavitt, Jr., Landscape Architect, and Westervelt and Austin, Associated Architects, and illustrated in The Architectural League of New York, Catalog of the Twenty-first Annual Exhibition (New York, 1906).

FINDINGS AND DESIGNATIONS

On the basis of a careful consideration of the history, the architecture and other features of this building, the Landmarks Preservation Commission finds that the William J. Syms Operating Theater of Roosevelt Hospital has a special character, special historical and aesthetic interest and value as part of the development, heritage and cultural characteristics of New York City.

The Commission further finds that, among its important qualities, the William J. Syms Operating Theater, built in 1890-92, was the most advanced operating theater in the world when it opened and one of the first equipped for aseptic surgery; that it was the result of the collaboration of architect William Wheeler Smith and the prominent American surgeon Charles McBurney; that the building represented the attempt in the 19th century to reconcile architecture with technological advances; that the appearance of the building with its simply massed base and semi-conical roof, is expressive of the unusual functional demands of the building; that it displays the architect's personal style for medical buildings, characterized by flat walls, curving corners, a straightforward use of materials, and a simplicity in decorative detail; that Syms was the fourth of several major pavilions built as part of the pavilion plan of Roosevelt Hospital and as such is both part of the one of the earliest pavilion plan hospitals in America (begun 1869) and a rare early survivor of a once highly influential approach to hospital design; that Syms was the center of medical education in New York City in its early years; and that it was the site of numerous advances in surgical practice at a time when modern surgery was taking shape.

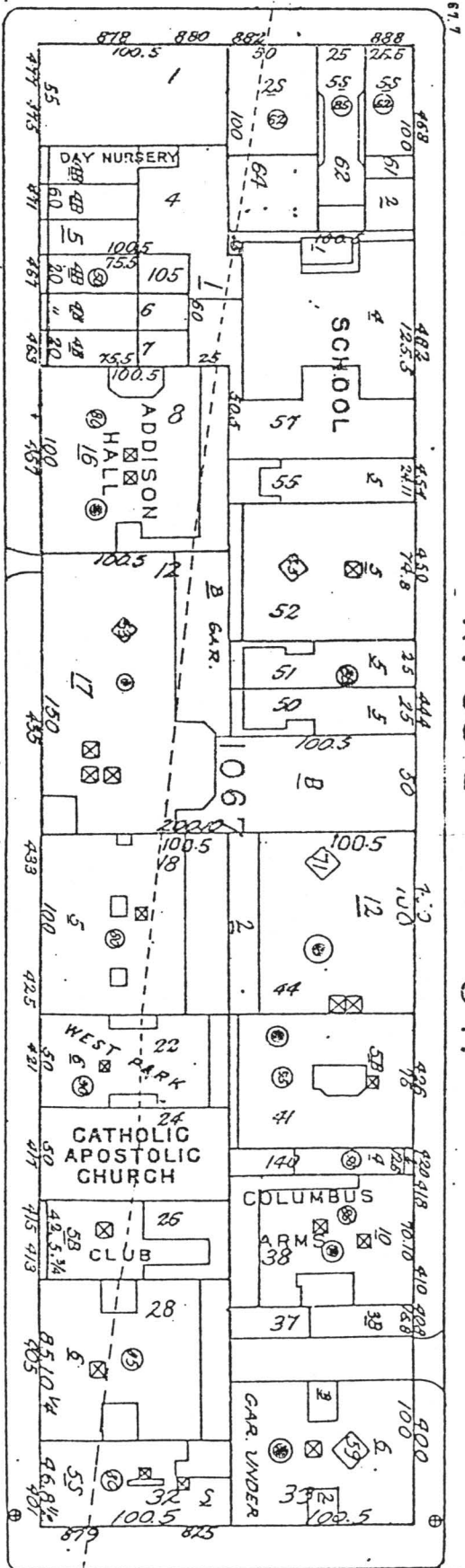
Accordingly, pursuant to the provisions of Chapter 21, Section 534, of the Charter of the City of New York and Chapter 3 of Title 25 of the Administrative Code of the City of New York, the Landmarks Preservation Commission designates as a Landmark the William J. Syms Operating Theater of Roosevelt Hospital, 400 West 59th Street, Borough of Manhattan, and designates Borough of Manhattan Tax Map Block 1068, Lot 1 in part, consisting of that portion of the lot bounded by a line extending southerly along the base of the fence on Ninth Avenue to a point approximately 83 feet 6 inches from the intersecting point with the base of the fence on West 59th Street, then westerly approximately 120 feet 11 inches along a line parallel with the base of the fence on West 59th Street to a point within Lot 1, then northerly approximately 83 feet 6 inches along a line parallel with the base of the fence on Ninth Avenue to the base of the fence on 59th Street, then easterly along a line contiguous with the base of the fence on 59th Street approximately 120 feet 11 inches to the point of beginning, as its Landmark Site.

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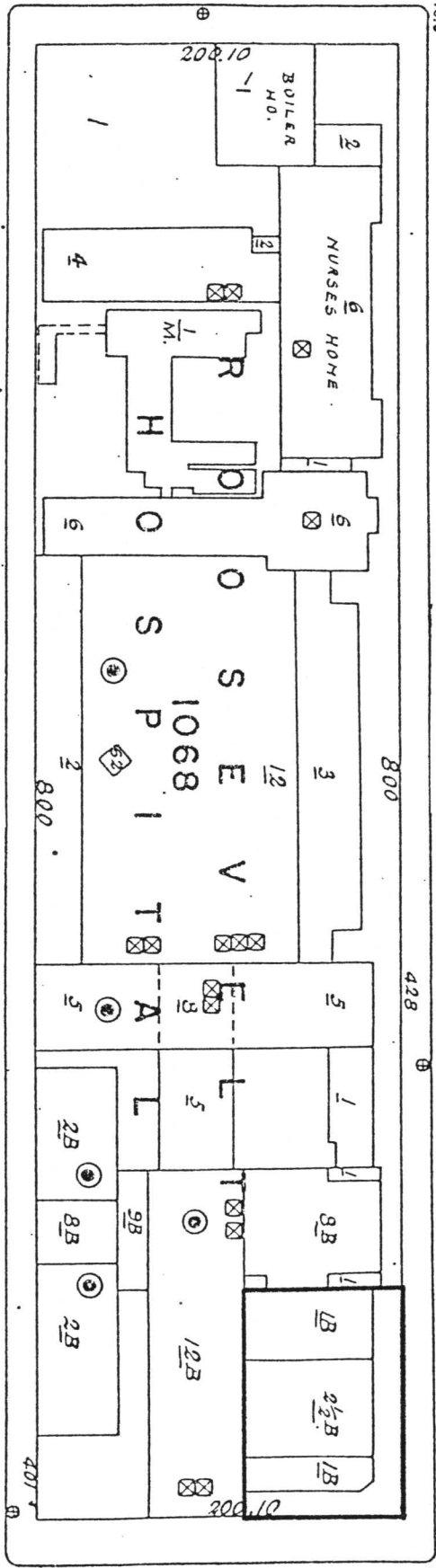
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TENTH AVE



W. 58 TH ST.

NINTH AVE



W. 59 TH ST.

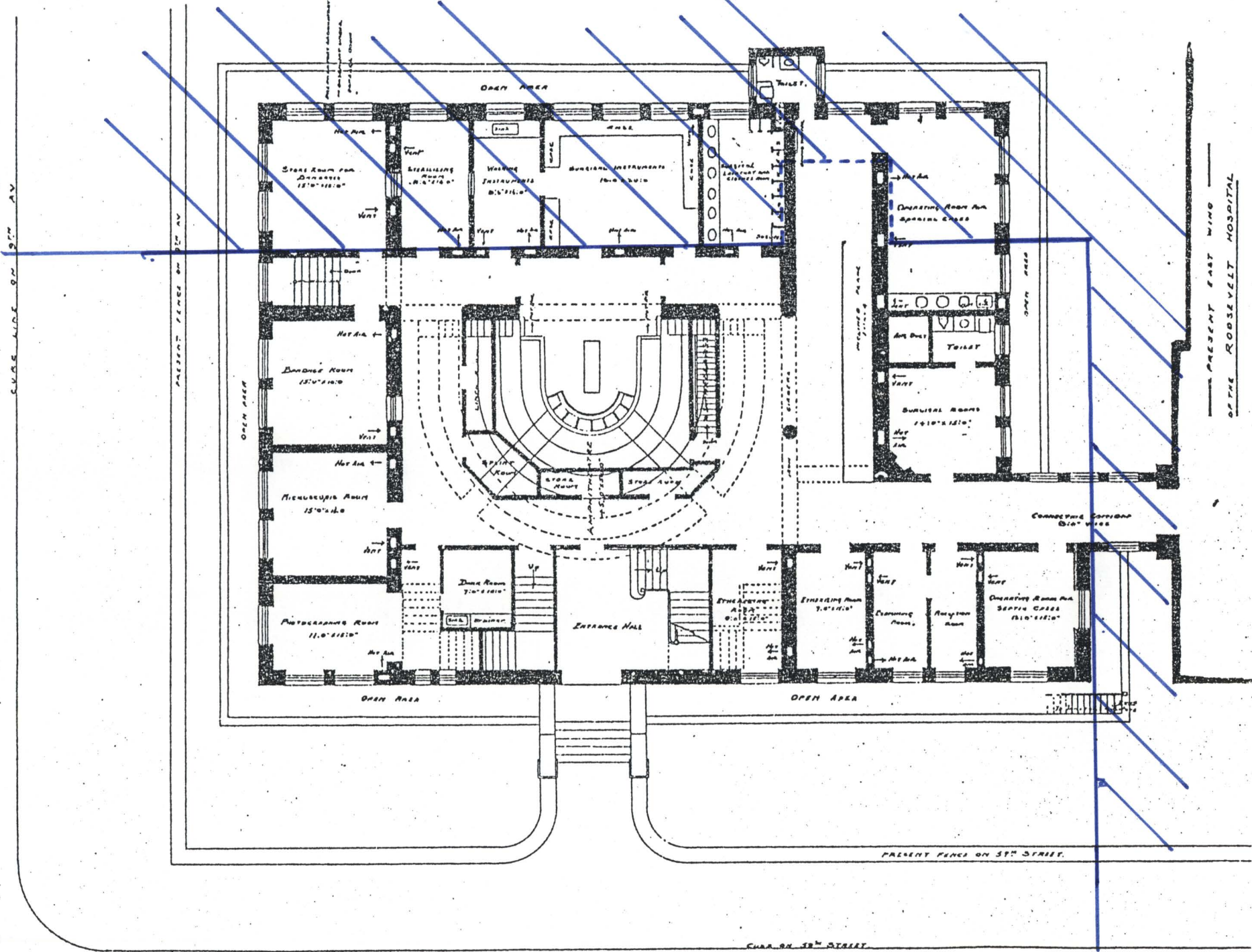
Syms Operating Theater, Landmark Site

Graphic Source: Sanborn, Manhattan Land Book 1968-88, pl. 81.



Graphic Source: Lathrop
History...p. 17

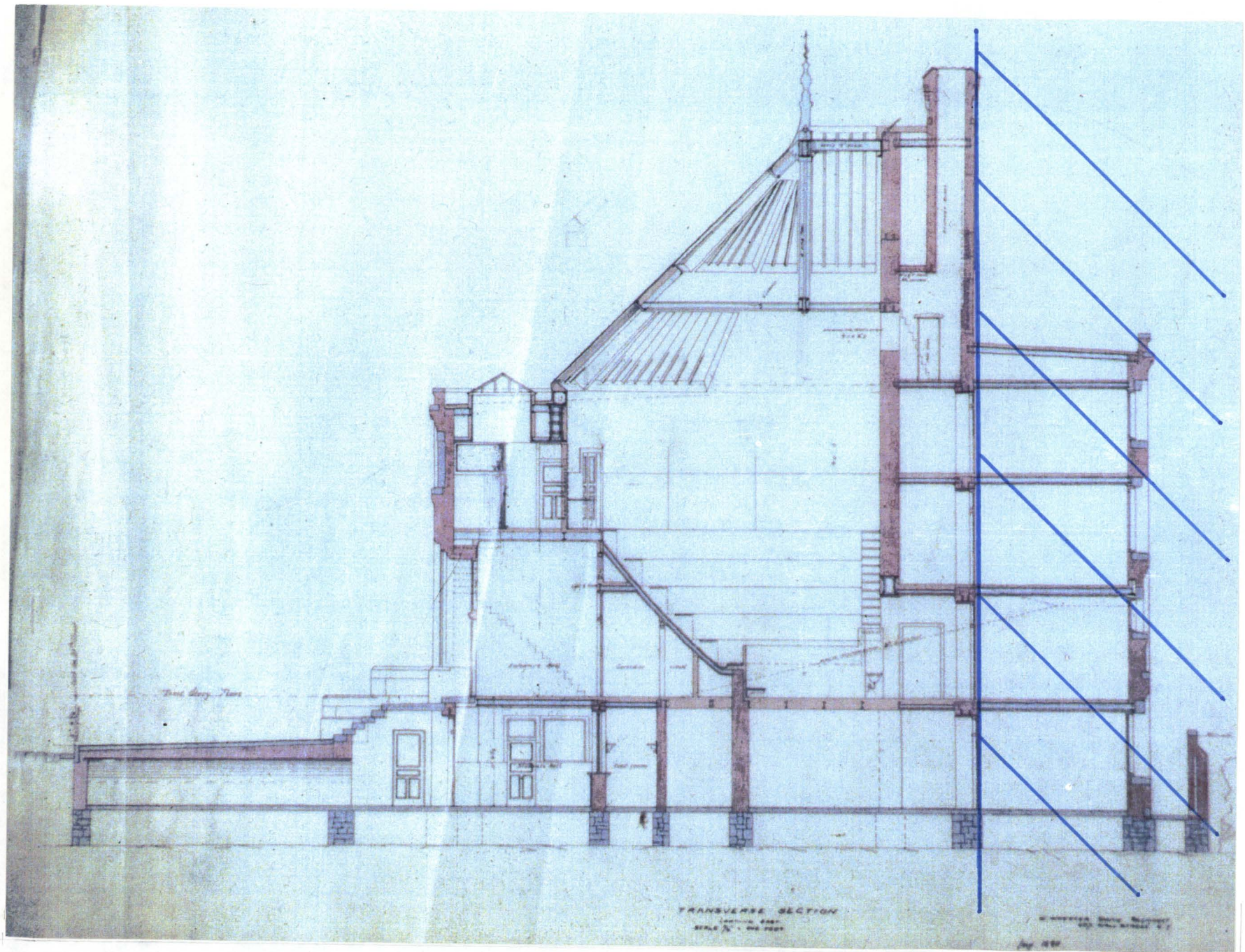
NINTH AVE.



59TH ST.

FIRST STORY PLAN: Showing Demolished Portions of Building
Syms Operating Theater

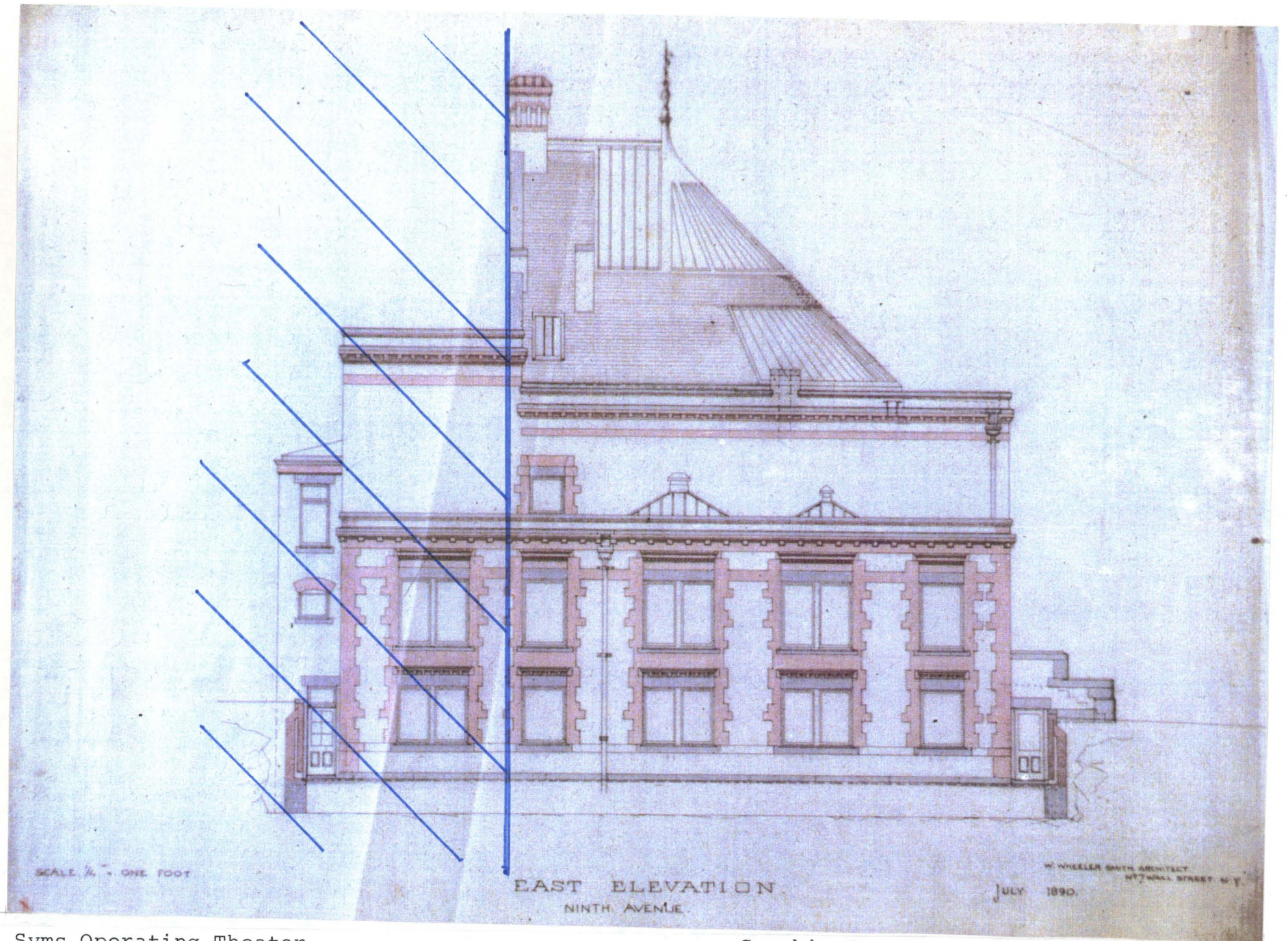




Syms Operating Theater

Graphic Source: Smith, Plans..., 1890.

Transverse Section Showing Demolished Portions of Building



Syms Operating Theater

Graphic Source: Smith, Plans..., 1890.

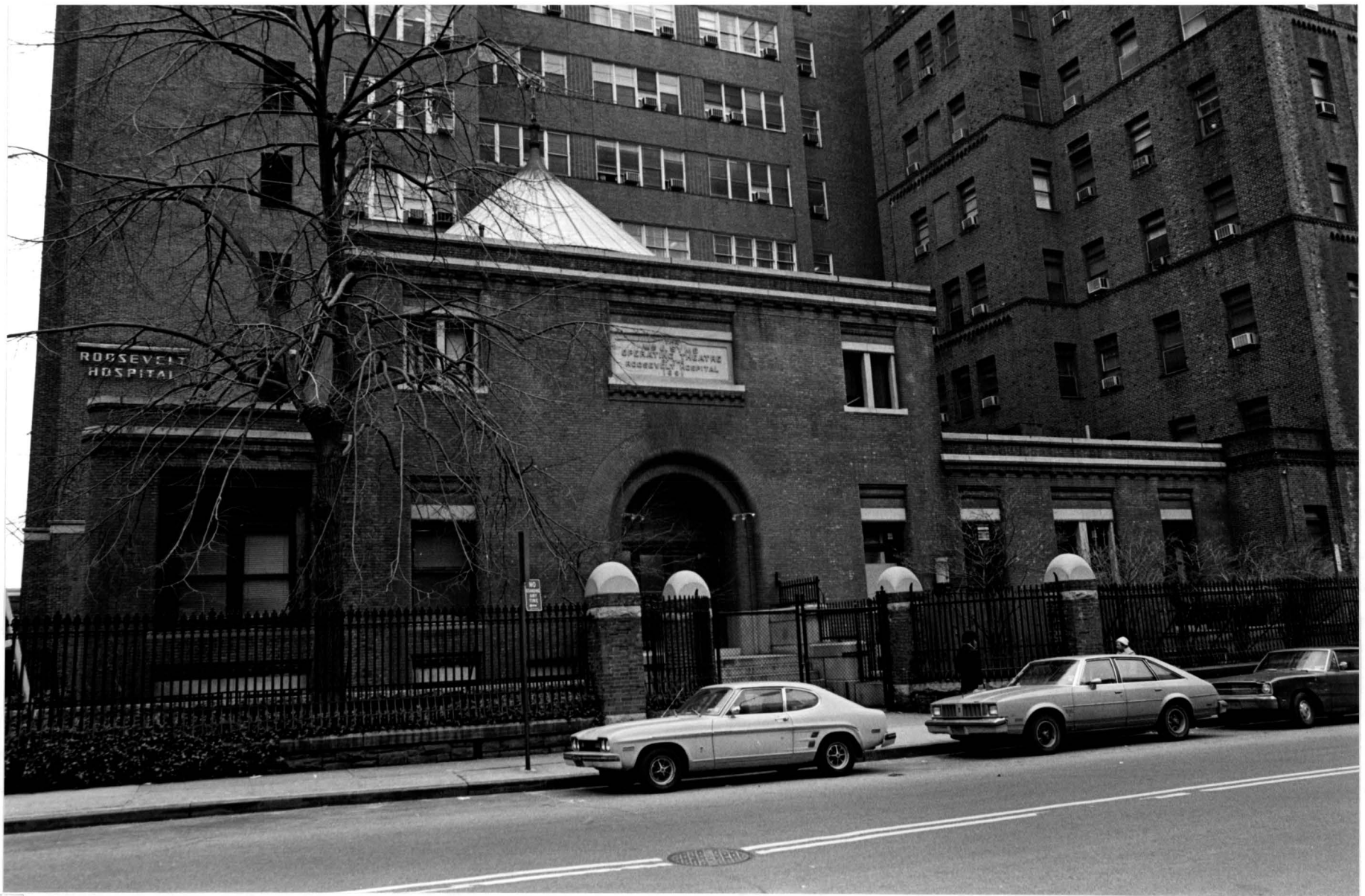
East Elevation Showing Demolished Portions of Building



Syms Operating Theater

Graphic Source: St. Luke's/
Roosevelt Hospital Center

Historical Photo: Syms Operating Theater (left)
and Surgical Pavilion (right), ca. 1893.



Syms Operating Theater, 1890-1892

400 West 59th Street, Manhattan

W. Wheeler Smith, Architect

Photo Credit: LPC



Syme Operating Theater
Ninth Avenue Side

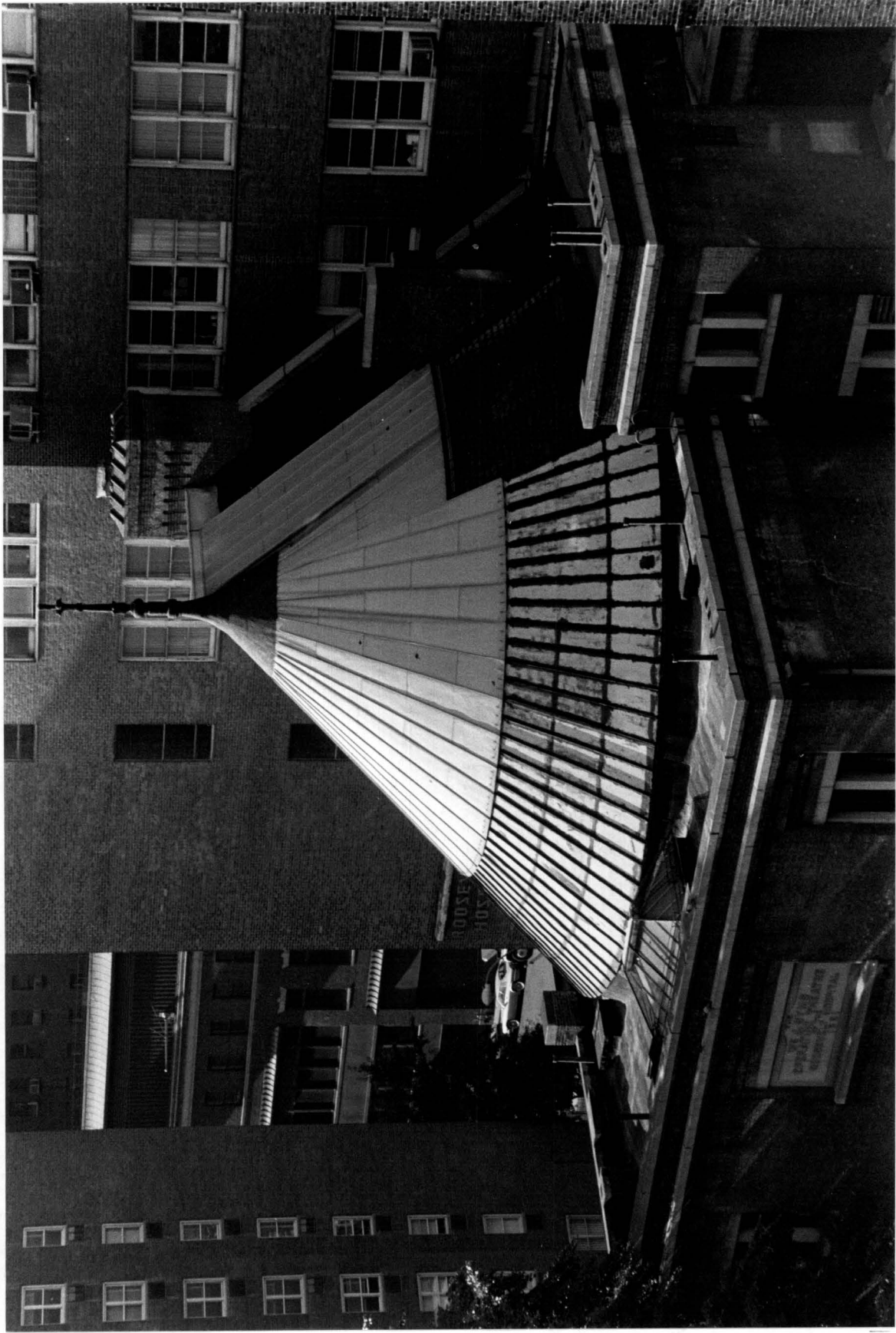
Photo Credit: LPC



Syms Operating Theater

Detail of Ninth Avenue Facade and Iron Fence

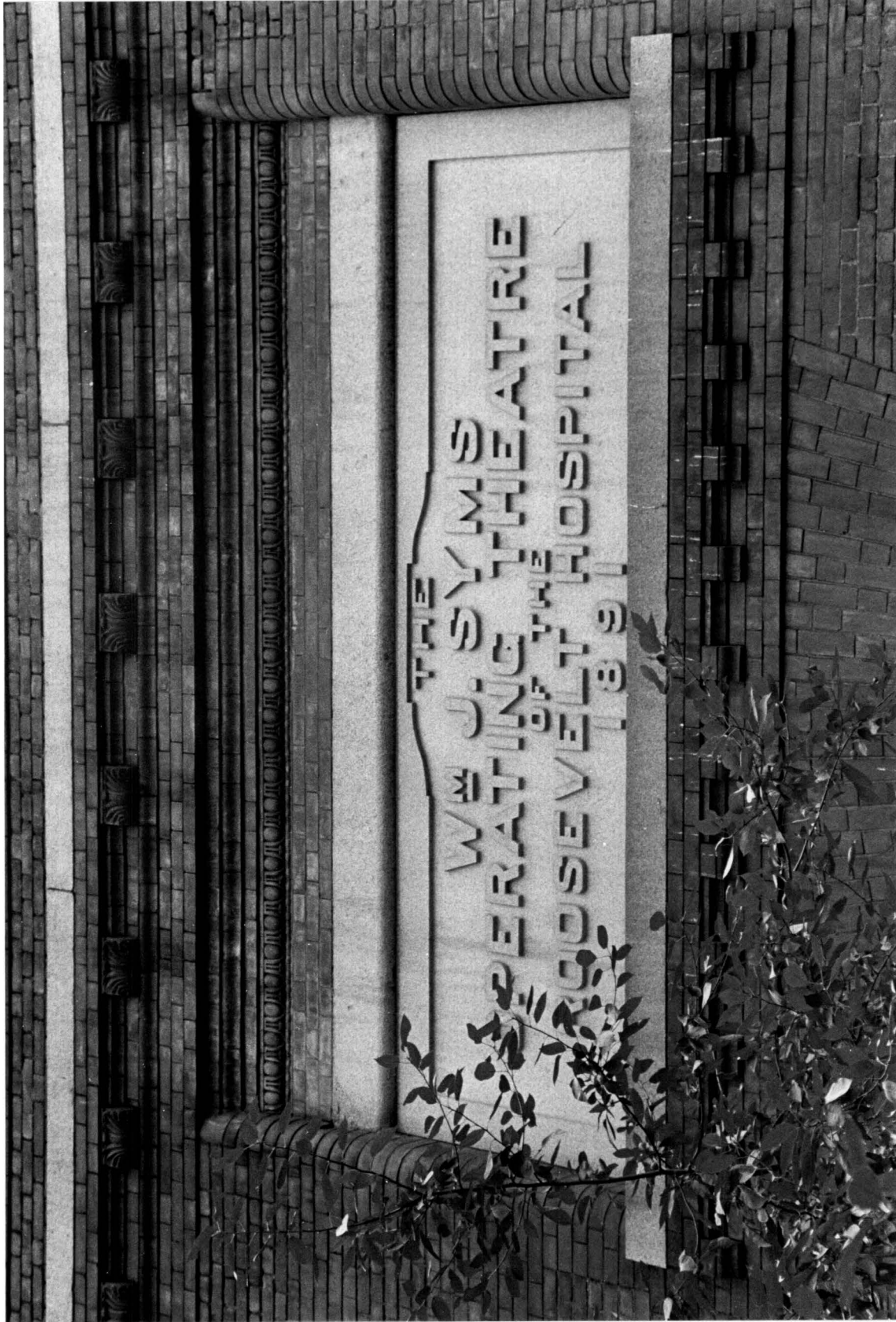
Photo Credit: Michael Corbett



Syms Operating Theater

Roof Detail

Photo Credit: Michael Corbett



Syms Operating Theater
Name Panel

Photo Credit: Michael Corbett



Syms Operating Theater

Main Entry Detail

Photo Credit: Michael Corbett