Teamwork at Mayo Clinic:
An experiment in cooperative individualism
Cover: Doctors Charles H. Slocumb (left), Howard F. Polley, Edward C. Kendall and Philip S. Hench gathered in Kendall’s biochemistry laboratory in 1949. In 1950 Doctors Kendall and Hench received the Nobel Prize in Physiology and Medicine for discoveries regarding the hormones of the adrenal cortex, their structure and biological effects. Doctor Hench and his clinical colleagues, Doctors Slocumb and Polley, initiated the clinical trials of cortisone in 1948.
Preserving Values and Advancing Practice

Thank you for your interest in this publication: *Teamwork at Mayo Clinic: An experiment in cooperative individualism*. This is a revision of the original 2003 publication, which was developed with generous support of Mayo patient and benefactor, Nancy W. Knowles and the Knowles Foundation.

This publication is an introduction to the historical traditions of Mayo Clinic. For our visitors, including our patients and their families, understanding this unique institution requires an understanding of how it evolved “out here in the cornfields”, beginning with the private medical practice of an innovative pioneer physician and his two sons, evolving to be the first and still the largest multi-specialty medical group practice in the world. For members of the Mayo Clinic staff, the knowledge of our culture and heritage is essential to understanding who we are as an organization. It is necessary in the development of professionalism and institutional identity.

The authors of the original document were Carolyn Stickney Beck, Ph.D., Mayo Clinic Center for Humanities in Medicine, and Matthew D. Dacy, Department of Development. Research was provided by Renee Ziemer and Nicole Babcock, staff of the Historical Suite. Revisions were supported by W. Bruce Fye, M.D., past chair of the Historical Committee, and by Elizabeth Curry, past coordinator of the Mayo Clinic Center for Humanities in Medicine.

Our vision of history is often described with the observation of “Dr. Will”, who wrote on his 70th birthday in 1931 that: “I look through a half-opened door into the future, full of interest, intriguing beyond my power to describe, but with a full understanding that it is for each generation to solve its own problems.”

The science and the art of medicine evolve within the context of history. Understanding the evolution of our institution provides clarity to our work, our lives, and our delivery of compassionate medical care. We hope this document promotes that knowledge and serves Mayo’s primary value that “The needs of the patient come first.”

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In 1941, the University of Minnesota Press published *The Doctors Mayo* by Helen Clapesattle, which is still regarded as the definitive historical interpretation of Mayo. In addition to interpreting the past, Ms. Clapesattle addresses Mayo’s contemporary and future challenges and opportunities.

Ms. Clapesattle highlights three qualities that Dr. William James Mayo deemed vital for the continuation of this institution: an ideal of service rather than personal profit, a primary concern for each patient and every staff member’s interest in the professional progress of all staff members. She raises an insightful question: “Whether attitudes and qualities so rare in mankind as those can be perpetuated in an organization beyond the generation of the founders is a social question of the first magnitude. As an experiment in cooperative individualism, the Mayo Clinic deserves watching – and not by doctors alone.”

Conversations in Mayo Historical Suite indicate that people from all areas of the nation and the world are intrigued by Mayo. Their interest in comprehending the origins of Mayo is reflected in one of their most common questions: “What is Mayo’s founding date?” A close look at that question provides a key to understanding Mayo’s past in relation to its present and future.

**Connections of caring**

There are many important dates in the history of Mayo, but there is no founding date. Developing gradually, the Mayo enterprise of today is the culmination of a family’s commitment to caring for the sick. As a result, we must search beyond a temporal framework to discover the essence of Mayo, which is the
Rochester was a thriving farm town when Dr. W. W. Mayo settled his young family here during the Civil War.
principle that the needs of the patient come first. Uncovering that principle reveals how widely and deeply Mayo is rooted. This rooting springs from the Mayos’ genius in connecting people across generations and great distances, centering the connection in a timeless principle of caring. This genius for creating caring connections was nourished by their remote location, which demanded both innovation and cooperative effort.

Dr. William Worrall Mayo emigrated from his native England to the United States, arriving in New York on August 22, 1846. He received his first formal medical training in Indiana, where he graduated from Indiana Medical College at LaPorte in 1850. When his mentor, Dr. Deming, joined the University of Missouri Medical Department faculty, Dr. Mayo worked as his assistant, receiving a degree from that university in 1854.

Returning to Indiana, he contracted a malaria-like disease. Impatient with his suffering, he announced to his wife, Louise Wright Mayo, that he was setting off to discover a place where he could regain his health. At the time, there were frequent reports of the healthful climate and beautiful country in Minnesota. So it is not surprising that his explorations led him there. He and his family settled in St. Paul in 1854, moving to Le Sueur in 1856.

Dr. Mayo’s decision to move to Minnesota was based on his experience as a patient seeking a cure. His commitment to discovery and dedicated service for the patient’s benefit was thus first evident in his own life.

The intensity of that commitment is apparent in its transmission over generations. In 1968, his grandson, Dr. Charles William Mayo, said: “The exacting Mayo Clinic of today is a reflection of my grandfather’s personal style as a doctor. He was a perfectionist who
was readily infuriated by sloppy or second-rate work and was always delighted at any opportunity to improve medicine. The Mayo Clinic (is) the extension of that angry little man’s implacable integrity.”

**Quest for knowledge**

Dr. W. W. Mayo’s quest for new opportunities and knowledge resulted in long periods of solitary exploration. Balancing this with a commitment to family and community was one of his most notable accomplishments. His sons frequently recalled his precept, “No one is big enough to be independent of others.” This precept is one of his most profound influences on his sons.

In 1863, Dr. Mayo’s skill as a physician was recognized when President Lincoln appointed him as a Civil War examining surgeon for the Union enrollment board, first Minnesota district. As a result of this appointment, the Mayo family moved from Le Sueur to Rochester, where the enrollment board was headquartered.

Rooting the family enterprise in a small, rural community rather than a metropolitan area has profoundly influenced Mayo’s development. Because of this origin, over the years thousands of Mayo staff members have received their fundamental schooling in farming. This training is an important influence in the well-regarded Mayo work ethic.

The Mayo brothers often used farming as an analogy for their practice, saying that they were reared in medicine as farm boys are reared in farming. Their parents understood the important lessons in farming. In 1914, Dr. Will received a letter from Andrew Seeverts, a Byron farmer. Mr. Seeverts recalled a conversation about a cow which
Dr. W. W. Mayo offered to buy from him during a visit to the Seeverts’ farm to care for their children:

WM: Can’t my boys take her down?
AS: No, they are too young.
WM: Will she lead?
AS: No, you put a halter on her and take her out of the stable and she will act just as awkward and mean as she can.
WM: I’ll send the boys tomorrow anyhow. It will keep them out of mischief and they will learn something.

In his letter, Mr. Seeverts asked Dr. Will the rhetorical question, “Yes, they learned something, didn’t they?” What they learned and taught is aptly summarized in a comment by an English surgeon who trained at Mayo: “The most amazing thing of all about the Mayo Clinic is the fact that hundreds of members of the most highly individualistic profession in the world could be induced to live and work together in a small town on the edge of nowhere, and like it!”

The surgeon’s comment highlights one of the keys to Mayo’s development: replicating Dr. W. W. Mayo’s balance of innovative individuality with commitment to community.

A mother’s influence

Much of the credit for this balance rests with his wife, Louise Wright Mayo. According to her grandson, Dr. C. W. Mayo, she was responsible for the family staying in Rochester rather than continuing to move. Mrs. Mayo’s talents included a well-regarded business acumen that provided financial stability for the family and the medical practice in the early years. Dr. Charles Horace Mayo paid tribute to his mother’s expertise in patient care:
“Patients used to call at the house for father. There were no telephones, and if mother knew he was out in the country, she would keep the patients interested, discussing their troubles and problems, until he returned, even if she had to prepare a meal for them. Often the neighbors and the country people came to talk to her ... with as much satisfaction from a social standpoint as they got from consulting my father when sickness descended on them. When father was taking special studies in the East or in Europe, patients came to mother to talk about illness and she told them of the simple remedies, which would tide them through the most common illness. Mother was a real good doctor herself.” In honoring his parents, Dr. Charlie said: “The biggest thing Will and I ever did was to pick the father and mother we had.”

In 1883, Dr. Will joined his father’s practice after graduating from the University of Michigan Medical School. Dr. Charlie arrived home from Chicago Medical College of Northwestern University to begin practice with them in 1888. In recognizing the importance of their family, the Drs. Mayo acknowledged the significance of durable human relationships in building a successful organization. The origin of Mayo in a family committed to a common goal is among its strongest assets. Today, the emphasis on collegiality and mentoring expresses this family origin, profiled by Ms. Clapesattle: “The Doctor was vitally interested in the problems and needs of his profession and on those long country drives or in conversation at table or before the fire at home he introduced the boys to the principles and ethics of the profession.” The Mayos’ ability to choose partners who could extend their reach without losing the essence of their family enterprise was a noteworthy talent.
Mayo researchers Drs. Edward Kendall (center) and Philip Hench (right) shared the Nobel Prize for their development of cortisone.

The Sisters of St. Francis were the first partners of the Drs. Mayo. Beginning with the devastation of the 1883 tornado, Mother Alfred Moes and Sister Mary Joseph Dempsey joined the Mayos in demonstrating that creative response to suffering could generate professional partnerships between doctors and nurses, men and women, lay people and religious leaders. Speaking of the founding of Saint Marys Hospital in 1889, Dr. W. W. Mayo corrected the misperception that he had founded the hospital, saying that the Sisters of St. Francis deserve credit for the inception and funding of the hospital; he acted merely as an agent to carry out their wishes. Dr. Will Mayo spoke of Sister Mary Joseph Dempsey as the finest of all his nurse and physician surgical assistants. She founded Saint Marys Training School for Nurses in 1906.

**Importance of partnership**

The Mayos’ resolve to work with physicians in other communities was first evident in 1892 when they invited Eyota physician Dr. Augustus Stinchfield to join their practice. Drs. Graham, Millett, Plummer, Judd and Balfour eventually joined as partners. A major advantage of group practice is the opportunity to increase the knowledge and skill provided to patients by traveling to study with other experts. This opportunity also fosters the collegiality necessary for perpetuation of the practice. Leaving the practice in the hands of one’s colleagues is an affirmation of their capabilities. Drs. Will and Charlie and other Mayo staff members followed in Dr. W. W. Mayo’s footsteps by traveling extensively in the United States and abroad.

During such national and international trips, the Mayos and their associates established a wide-ranging network of acquaintances who often recommended people that might be interested in joining their practice in Rochester. Through such a
recommendation, in 1907 Dr. Will invited Maud Mellish to develop editorial and library services for the staff. She inaugurated the publication now known as *Mayo Clinic Proceedings*. In 1914 she was appointed director of the new Division of Publications, becoming the first woman to head a Mayo Clinic division.

The Mayos’ ability to assess the expansive needs of a specialized practice when there was no existing model for it was a mark of their capacity for innovation. Aware that they needed further help in the administration of the practice, they invited Harry J. Harwick to join them in 1908. Mentored by Dr. W. J. Mayo, he pioneered the development of medical administration to free physicians’ time to care for patients.

**New concepts to house the group practice of medicine**

After decades of renting space in existing buildings, the Drs. Mayo and their associates constructed a new building designed specifically for the integrated group practice of medicine, the first building of its kind in the world. It became known as the 1914 building.

At the cornerstone ceremony for this building, which stood on the site of the current Siebens Building, Dr. Will said: “Within its walls all classes of people, the poor as well as the rich, without regard to color or creed, shall be cared for without discrimination.” With the completion of this building, the Mayos’ practice was officially called Mayo Clinic, a name used by visiting physicians and patients long before it became official.

Designing and implementing a well-organized group of specialists to provide maximum benefit
to patients was a central concern of the Mayos. Reflecting on these early years, Dr. Robert Mussey, founder of Mayo’s Obstetrics and Gynecology Section, noted another Mayo innovation: “That the physical examination was complete can be emphasized, for in the second decade of this century, it was rare indeed for the patient to be given a complete physical examination in the office, and not always was he given such an examination when he was in the hospital. It is my opinion that aside from reports of good results of surgical operations performed by the Mayos, the reputation of the clinic in the early years was largely built on the thoroughness of history taking and examination of the patient.”

The Mayos’ concept of team effort encompassed their loyalty to community and nation. They led the Clinic’s effort in World War I by serving on the executive committee of the General Medical Board of the Council for National Defense. The board established 50 base hospitals overseas. In Allerey, France, Base Hospital No. 26 became known as “the Mayo unit,” because so many Mayo staff served there.

This hospital was a surgical unit for 10 surrounding base hospitals. Nell Bryant, a nurse from Mayo, was among the staff who served there. In a letter to her sister, she quoted a citation from the commanding general, which said: “...the officers, soldiers and nurses gave proof of a skill and a self-sacrificing devotion to duty that is beyond all praise. Through their ministrations, our wounded received every comfort and assistance that human sympathy could administer.”
Planning for the future

Against a background of international crisis, innovation continued at Mayo. In 1915, Mayo School of Graduate Medical Education was established. Physicians in training were known as “fellows.”

In addition to coordinating specialists to enhance patient care, the Mayos innovated by integrating research and education with practice. Their program became the first in the world to train medical specialists. Today, more than 20,000 alumni of Mayo School of Graduate Medical Education are a significant measure of how widely the Mayo approach to medical care is rooted.

In an act of vision and courage, the Mayos completed their gift to future generations of patients by extending their extraordinary generosity beyond the Mayo School of Graduate Medical Education. In 1919, they founded Mayo Properties Association (today known as Mayo Clinic).

G. Slade Schuster, deceased emeritus head of administration, interpreted this act as a “decision of renunciation and dedication,” because it meant that the Mayos, their partners and all future Mayo physicians would receive a salary and not profit personally from the proceeds of the practice. All proceeds beyond operating expenses were henceforth contributed to education, research and patient care.

The philosophy of these innovations is summarized in Dr. Will’s statement to the press in 1917: “We
want to make the medical experience of the past generation available for the coming one and so on indefinitely, so that each new generation shall not have to work out its problems independently, but may begin where its predecessors left off. This foundation, its fund and all that goes with it are the contribution of the sick of this generation to prevent sickness and suffering in the next and following generations.”

The Mayos’ extraordinary generosity was a measure of their deep commitment to meeting the needs of patients. This encouraged similar dedication in their staff members, whose welfare was a primary concern of the Mayos; they understood that caring for patients also means caring for employees.

Social Service began at Mayo when Willa Murray and Cora Olson were hired to assist young women employed at Mayo with their personal needs. Before long, patients as well as staff were availing themselves of the information they provided. Recognizing these patient needs, Charlotte Bundy initiated the Social Service Section. In association with this section, volunteers initiated an occupational therapy program. This service also included interpreters for patients who did not speak English.

**Ongoing innovation**

Major innovation continued when the Mayos’ interest in research culminated in the construction of Institute Hills in 1924. The humane use of animals for experimentation has been a continuing ethical priority of Mayo from the beginning. This facility has been the site of research that has resulted in life-saving treatments for such conditions as heart disease, cancer, leukemia, Hodgkin’s disease, gastrointestinal diseases, multiple sclerosis and hemophilia.
Mayo’s paramedical staff are key members of our team. Many patients cite the compassion and skill of these professionals as an important aspect of receiving care at Mayo. This photo depicts Mayo’s clerical and medical art staff (note the World War I patriotic poster).
Providing innovative facilities is a continuing resolve at Mayo. Dr. Henry Plummer was chiefly responsible for the design and systems of the 1914 and 1928 buildings. The systems he devised included telephone communications, in-house telegraphy, multi-light signals, cross-indexed patient records, a power plant, subways and a pneumatic tube delivery system. His architectural and engineering talents created the physical foundation for Mayo’s integrated group practice.

Dr. Will Mayo gave him the ultimate praise, saying that hiring him was the best day’s work he ever did for the Clinic. In addition to acknowledging the genius of Dr. Plummer, this conveys Dr. Mayo’s awareness that his associates’ talents were as important as his own.

The efficiency of the Plummer Building and its systems is matched by its architectural and artistic beauty, which includes the carillon. The Plummer Building dramatically portrays the Mayos’ attention to the total needs of the patient. As carillonneur Jimmy Drummond said, “Here science serves, enthroned in architecture and crowned with music.”

The Plummer Building exemplifies the Mayos’ dedication to providing a friendly, reassuring environment for patients. From the early 1860s, Mayo staff members have reflected that devotion in their manner of work. Legends have grown up around many of these local heroes, such as Joseph Fritsch, affectionately known as “Joe Clinic.” Serving more than 45 years with General Service, he was the Mayo Clinic doorman from 1928 to 1954, welcoming patients and staff alike.

The Mayos’ unwavering concern for the total needs of the patient was a result of their unique ability to
comprehend far-reaching dimensions of their immediate concerns. Their understanding of their connections with and responsibility to preceding and succeeding generations also manifests this unique ability. A holistic view of their work is, perhaps, their hallmark.

**Sustaining the legacy**

As they advanced in years, the Mayo brothers sought assurance that the organization they had created would survive beyond their lifetimes. Accordingly, they stepped down from the Board of Governors in 1932.

At that time, a Mayo Clinic scroll was created to express the collegiality that is central to the continuation of their enterprise. This scroll recognized the individual accomplishments of Mayo physicians who had been elected presidents of numerous medical associations. It says in part: “The Institution whose leaders are so honored shares the obligation thus imposed on its distinguished members as well as the splendid recognition which their peers have conferred upon them, for the institution and its members are obviously inseparable.” The Mayos are not treated specially in this scroll; they are listed alphabetically with their colleagues.

The Mayos were wise in tending to the collegiality that sustains the institution, especially in times of stress. In 1939, the strength of Mayo Clinic was tested by the deaths of Dr. Will, Dr. Charlie and Sister Mary Joseph, all in the same year. Three major leaders passed together, during a period of economic depression and impending war. Mayo was able to survive these challenges, because it had developed wide and deep roots.
The resourcefulness which had been nourished by the Mayos was also evident in the founding of Mayo Clinic Women’s Club. Women staff members pooled their energy and finances, establishing the club to provide insurance for unmarried women. This club was eventually housed in the former home of Dr. E. Starr Judd and his family. It became an important residential and social center for secretaries, nurses, desk attendants, laboratory assistants and other women who worked at Mayo. The club continues today as the Friendship Club.

Mayo people challenged by World War II rose to the occasion to provide medical services. In addition, Mayo expanded the research that had resulted in the BLB Oxygen Mask by establishing an aeromedical research unit, offering its services to the government for $1 per year. The unit developed the anti-blackout “G” suit. A modified version of the original “G” suit is worn today by military pilots. The unit also originated the Mayo-1 or M-1 maneuver. This self-protective technique, in which a flyer takes a deep breath, then slowly forces air through the mouth, increases pressure around the heart so it can pump more blood to the head. The “G” suit and M-1 maneuver saved countless lives and gave the Allies air superiority for the duration of the war.

This aeromedical research has led to advances in patient care at Mayo, including methods and instruments for heart catheterization.

Mayo research achievements were recognized in 1950 when Drs. Kendall and Hench shared the Nobel Prize for the development of cortisone.
Innovations in the development of physical facilities to meet the needs of Mayo patients continued with the construction of Rochester Methodist Hospital in 1954. This hospital pioneered the radial unit design, a concept that has been adopted by many other medical centers.

On the site of Central School, where Drs. Will and Charlie had been educated, the Mayo Building was completed in 1955, with an additional eight stories erected between 1966-1970. Like the 1914 and 1928 buildings, it perpetuates Dr. Plummer’s systems as a foundation for teamwork in service to patient needs.

“A spiritual quality”

Events such as holiday concerts presented by staff for patients represent Mayo’s long-standing musical tradition. This tradition is expressed by Dr. Will in his address to the faculty on November 21, 1932, in the midst of the Depression: “We know only too well the necessity for efficient management, but there is a spiritual as well as a material quality in the care of sick people, and too great efficiency in material details may hamper progress.”

This expansive view of medical care was apparent during the Mayo centennial in 1964. The featured event of this extended celebration was a symposium of distinguished scientists and other leaders who offered their reflections on the Mayo Building murals theme: Mirror to Man. Their presentations focused on human adaptation to an expanding environment. Staff, patients, Rochester citizens and many national and international visitors joined the celebration, which also included exhibits, concerts and parties.
Since there is no Mayo Clinic founding date, 1964 was chosen to celebrate our origins, because it expresses how widely and deeply Mayo is rooted in many places and many lives. It commemorated the births of the Mayo brothers, Will in 1861 and Charlie in 1865. It was also the centennial of Dr. W. W. Mayo’s arrival in Rochester, the 50th anniversary of the Mayo School of Graduate Medical Education and the 1914 building, as well as the 75th anniversary of the founding of Saint Marys Hospital. With the issue of a special U.S. postal stamp, the nation joined in the Mayo celebration.

Soon after the centennial celebration, there was another Mayo milestone. In 1968, Dr. Charles William Mayo, son of Dr. Charlie and nephew of Dr. Will, died. With his passing, there were no longer any physicians who were direct descendants of the founders on the staff of Mayo Clinic. This transition was honored by the closing of the Plummer Building bronze doors, a rare event. From this time forward, the responsibility to perpetuate the Mayo heritage was transferred to all staff members, who by this time had come to think of themselves as “the Mayo family.”

**Extending the family**

This extended family network was growing rapidly. In 1972, Mayo Medical School was established to expand Mayo’s education programs to the pre-doctoral training of physicians. The training of physicians at Mayo includes reaching out to diverse people and educational opportunities far afield from Rochester.

Dr. Roberta Matern describes her experience: “I grew up as the daughter of medical missionaries in Asia. As a result, I am from Vietnam, Nepal, India, California, Nevada and Arizona. By blood, however, I am Navajo. I continually endeavor to understand my
heritage and perhaps not surprisingly, mainstream culture as well. Mayo has provided me with excellent and challenging opportunities to further develop my broad culture in both these areas. In the Fall of 1994, I was able to conduct survey research among Navajo cancer patients. The experience was frustrating almost beyond endurance, yet I cannot deny the invaluable lessons I learned regarding my people and their attitudes toward death, disease, ‘outsiders’ and Western medicine.”

Continuing Mayo’s mission to extend its approach as widely as possible without compromising its distinguishing features, Mayo Clinic opened campuses in Jacksonville, Florida, in 1986 and in Scottsdale, Arizona, in 1987.

Extending Mayo’s integrated practice is also a regional effort. Mayo Clinic Health System, for example, is a growing regional network that began to proliferate in 1992. Mayo Clinic Health System continues the Mayo family’s outreach into surrounding communities in the early days of their practice.

Connecting with our heritage

There are many ways in which Mayo people who have grown up with the Clinic, and those who are newly associated with Mayo through group and regional practices, can appreciate their commonality as well as their unique histories. Blending of disparate experiences in diverse geographic areas based on commitment to the common goal of meeting patients’ needs is a steadfast tradition at Mayo which can serve us well at present and in the future.

The Foundation House, built as a private residence by Dr. Will and his wife, Hattie Damon Mayo, in
1918, is a meeting place for Mayo staff and visitors. It allows us to sense connections with preceding and future generations and with people from diverse backgrounds.

One particular sculpture, depicting a Native American boy on the grounds of Foundation House, symbolizes the Mayos’ appreciation of the arts as a means of enhancing communication and understanding. Sculpted by John K. Daniels of St. Paul, this piece reflects Dr. Mayo’s philosophy that physicians should be able to “sympathize with all classes and all people in the hour of their need, putting aside all bigotry and intolerance which would defeat the very object of our convictions by putting us out of touch with people of different views.” This sculpture reminds us that every person is unique and every patient-caregiver relationship is a distinctive creation.

The Mayos understood nature as a source of new, invigorating perspectives. Dr. Charlie was relaxed and energized by his farms. Dr. Will was especially fond of boating on the Mississippi. They often shared their homes and boats with staff and guests. Today, the landscape retreats, art exhibits and architectural resources throughout the Mayo system continue this dimension of the Mayo legacy. They encourage solitary exploration, which can lead to innovation and individual initiative.
History: a resource for today and tomorrow

Mayo’s rich history provides valuable perspective that can inform decision making across the organization. The integrated components of Mayo Clinic history help preserve Mayo’s past and provide resources for those who wish to explore our heritage.

The W. Bruce Fye Center for the History of Medicine promotes awareness of our history as a vital component of our institutional and professional identity. It coordinates and facilitates a wide range of activities relating to the history of medicine. The Mayo brothers and their associates invented the multispecialty group practice model that encouraged specialization plus teamwork to provide the best care for patients, to train physicians, and to expand medical knowledge. Mayo’s history also provides excellent examples of professionalism, a vital component of patient care and medical education.

The Mayo Historical Suite, located on the third floor of the Plummer Building, contains a museum that includes exhibits that provide insight into the careers and contributions of the Mayo brothers. Entering the Historical Suite takes you back in time. Dr. Will and Dr. Charlie, as they were called by colleagues and patients, come to life through displays that include re-creations of their offices, dozens of their awards and honors, and a photographic gallery. The photographs of doctors from all around the world include inscriptions that reflect both admiration and affection. The Historical Suite also contains exhibits on the history of the Plummer Building, an architectural gem that was
designed to facilitate patient care and encourage collaboration between physicians and surgeons. The Historical Suite also houses the expert staff responsible for preserving and building Mayo Clinic’s archival collections.

Mayo Clinic Heritage Hall, in the lobby of the Mayo Building, was funded by the Matthews Family, generous benefactors of Mayo Clinic. It provides many additional exhibits of the history of the Mayo Clinic and the Mayo family. These exhibits change periodically to bring our historical legacy to life for our patients, their families, our employees and our community.

One goal of the W. Bruce Fye Center for the History of Medicine is to encourage research about Mayo Clinic history leading to presentations and publications. These inform a broader audience about the many contributions of the Mayo Clinic to patient care, education, and research throughout the nation and the world.

The needs of the patient come first

At Mayo, education and research have always been essential to serving patients’ needs. The familiar Mayo logo is three intertwined shields. You will note that one shield, which represents patient care, stands forward from the other two, which represent research and education. This logo conveys the fundamental Mayo principle: the needs of the patient come first.

The interlocking shields highlight the complex, extensive network of people who serve the needs of Mayo patients. Mr. Harwick reminds us of the Mayos’ fidelity to both teamwork and individual initiative as foundations for this network.
He notes that Dr. Will found administration more exhausting than medicine and surgery, and then elaborates: “The Mayos believed that no group or individual in any society can have a monopoly on ideas. Believing this, they would discuss all but the most confidential Clinic-related problems with many people, usually those within the Clinic but sometimes those outside of it, and let these other opinions leaven their own thinking. Then, and only then, would they make a decision. Next, they would turn the project over to an individual or small group that they trusted, and allow sufficient time for the project to be put into operation. They would further allow for a period of trial and error, restudy the results, and make changes where necessary before adopting the new policy or procedure permanently. Looking back now, I remember times when this seemed to be an agonizingly slow process, but certainly in the long run the value of this approach to solving problems has been proven time and again.... The Mayos did prefer to act thoughtfully and deliberately. In an emergency, however, they could move with swift, incisive decision.”

Mr. Harwick’s interpretation of the Mayos’ management style conveys its sturdy quality, a well-balanced synthesis of cooperation and innovative, individual initiative. This synthesis is our link to the past and key to the future.
“The needs of the patient come first.”

These seven words describe much of our history and help define our future. In this era of rapid change in American healthcare, some have said the golden age of medicine is over. We say the golden age is ahead of us, and within our reach if we are able to change and adapt, while remaining focused on our primary value. We must accept change and work together to enhance the quality of care that we give to our patients.

The quality of care provided to Mayo patients reflects the strength of families and communities associated with Mayo. In turn, as an experiment in cooperative individualism, Mayo can encourage all of us to create healthy families, organizations and communities that adapt pioneering traditions to meet the challenges of today and tomorrow.