United States Department of the Interior
National Park Service

National Register of Historic Places
Inventory—Nomination Form

See instructions in How to Complete National Register Forms
Type all entries—complete applicable sections

1. Name

historic Robert Koch Hospital
and/or common Quarantine

2. Location

street & number 4101 Koch Road

city, town
X vicinity of Oakville

state Missouri code 29 county St. Louis code 189

3. Classification

Category
X district
___ building(s)
___ structure
___ site
___ object

Ownership
X public
___ private
___ both

Status
occupied
___ unoccupied
___ work in progress

Accessible
X yes: restricted
___ yes: unrestricted
___ no

Present Use
agriculture
___ commercial
___ educational
___ entertainment
___ government
___ industrial
___ military
___ museum
___ park
___ private residence
___ religious
___ scientific
___ transportation
X other: health/medicine

4. Owner of Property

name City of St. Louis c/o The Honorable Vincent Schoemehl, Mayor

street & number Room 200, City Hall

city, town St. Louis

state Missouri 63103

5. Location of Legal Description

courthouse, registry of deeds, etc. St. Louis City Hall

street & number Market Street at Tucker Boulevard

city, town St. Louis

state Missouri 63103

6. Representation in Existing Surveys

title

has this property been determined eligible? ___ yes ___ no

date

___ federal ___ state ___ county ___ local

depository for survey records

city, town

state
## 7. Description

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Describe the present and original (if known) physical appearance

The Robert Koch Hospital consists of nineteen buildings, constructed between 1907-1939 primarily by city architects, from the Board of Public Services. The buildings consist of the following: a 426-bed intermediate care facility, a 39-bed hospital, a 166-bed residential-care facility known as the Riverside Facility (originally the employee complex), and a 2,275 square-foot superintendent's residence. The complex is designed on the pavilion plan with two infirmary and two ward buildings radiating out from the centralized administration building and situated symmetrically around the semicircular, macadam access road. These buildings were built detached, in order to isolate incipient patients, and later all buildings were connected by stone-and-frame-covered corridors. The complex east of the administration complex, known as the Riverside Facility, forms a straight plan on the west facade that faces the access road. All buildings are attached and arranged symmetrically. Maintenance and service buildings are located on the outer perimeter of the 50.34 acres on which the buildings stand. (Undeveloped land outside the nominated area encompasses an additional 92.53 acres.) The property is situated in the southern portion of St. Louis County, 15 miles south of the City of St. Louis. It is bounded by Jefferson Barracks on the north, Telegraph Road on the west, Cliff Cave County Park on the south, and the Mississippi River on the east. The terrain consists generally of gently rolling, wooded hills sloping east toward the Mississippi River. Access to the property is from Kinswood Lane, Koch Road, and Robert Koch Hospital Road. Koch Road is a north-south road which intersects with Interstate 270 approximately 300 feet north of the property. Robert Koch Hospital Road curves in an east-west direction. The eastern boundary is a 2,515 foot frontage along the Missouri-Pacific Railroad right-of-way.

The main buildings situated on the west side of the circular access road are the administration (1907), infirmary (1922, 1924), and ward buildings (1936, 1939) (see site plan). The red-brick, three-and-a-half-story administration building is devoid of ornamentation except for a pronounced crenelated parapet capped with terra cotta (see photo 1). The arched entrance is accentuated with a raised brick label moulding. Terra cotta belt courses wrap around the front facade above the second story windows. The large, rectangular plan is modified by slightly projecting entrance and outer bays. Enclosed frame porches were added on the north and south facades in 1913. The two-story porches are supported by wood columns that extend from the ground floor. The need for additional space subsequently eliminated the south porch, which was replaced with a brick addition in the 1960's. An effort was made to match the earlier brick. Cream-colored brick imitates the crenellated roof. Original wooden, double-hung windows were replaced with thermopane louvered windows. The original entrances was recessed, but due to rising heating costs, a storm transom and fanlight were installed over double doors that were brought flush with the facade. The ashlar granite water table and foundation have been painted white to further accentuate the foundation.

The infirmary and ward buildings display a cohesive design (see photo 2 and site plan). They evoke a sense of solidity and strength without projecting a melancholy feeling. The variegated, light-colored brick is laid in a flemish bond. Decorative features are concentrated along the cornice and the end walls. The side walls contain the enclosed porches in which thermopane louvered windows have been installed; originally
louvered screens fit into the existing openings. Window spandrels are decorated with a stack brick rowlock pattern. Brick piers between windows are accentuated with stone caps. Windows are outlined with brick soldier courses. The cornices of the buildings, both under the roof overhangs and at the top of the parapets, are decorated with evenly spaced terra cotta tiles painted in gold and green. The ground floor is squared, coursed rubble extending upward to form bases for the first floor piers. The tiled, gable roof flairs at the eaves. Twin cupolas with tiled, gable roofs are in actuality ventilators. The end walls are extended by polygonal, flat-roofed solariums; their roofs serve as balconies (see photo 3 and illustration 1). Ornamentation employing various brick patterns and other materials is striking to the observer. Painted terra cotta blocks continue the line of the cornice from the side walls. These painted blocks glisten in the sun. Brick patterns run horizontally across the gable end, including bands laid at an obtuse angle and soldier-course bands dividing the courses of Flemish bond (see photo 4). The solarium parapet is decorated with raised brick patterns that cast shadows on the walls. Piers between windows are outlined with brick and project slightly from window bays. Spandrels are decorated with a stacked header pattern. Pylons that frame the central curtain wall are accentuated with diamond-shaped terra cotta panels enclosed in brick triangles on both side and outer faces. The outside corners of the third-story end wall are further decorated with triple, compound-arched opening glazed with translucent glass (see photo 5). Two terra cotta columns with foliated capitals support the central arches. The entrance on the fourth floor, which opens on the solarium roof, has an arch surround decorated with terra cotta moldings (see photo 4). The terra cotta lunette above the door is divided into five tear drop lights radiated from a semicircular light and set into an arched surround. The surround has circles within triangles, set in its spandrels columns with a plain bases pillow, capitals and diaperwork pattern shafts. A terra cotta foliated rope encircles the door surround. A foliated capital is decorated with a frieze of Fleurs-de-lis (the symbol of the City of St. Louis) that extends across the entrance. The original French doors and transom have been removed to meet federal fire code standards. A single steel door and aluminum vent are set into bricked-in space. A one-and-a-half-story kitchen building was built in 1924 to replace the smaller kitchen (see photo 6). The smaller kitchen was remodelled and now serves as the dining room. These buildings are wings off of the west facade of the administration building (see site plan). The face brick is buff-colored, with random accents of a contrasting dark-colored brick, laid in a Flemish bond. Ornamentation is limited to the gable ends, which are suggestive of the design of the end walls of the infirmary and ward buildings. The center bay on the end wall slightly projects from the face. This bay contains two sets of triple, double-hung windows with the larger, upper, windows nine-over-nine. The lower windows are six-over-six. The outer bays have single double-hung windows six-over-six. The gable end in the center is decorated with a circular louvered vent that is outlined with radiating bricks. The steep, tiled gable roof has two shed dormers with casement windows on both the east and west slopes. The
parapet is further accentuated by three rows of raised bricks that outline the cornice of the building. Brick buttresses capped with stone punctuate the west facade between fenestration. The entrance on the west facade has a makeshift projecting entrance with a shingled gable roof. The southeast extension of the kitchen is decorated with a flat roof capped with two rows of roof tiles. The cornice is accentuated with raised brick. One triple window, double-hung is centered in the extension. It has four-over-four lights on the two outer windows and six-over-six lights in the center. All windows are decorated with brick lugsills. Foundation is accentuated with smooth stone on the west facade. The dining room was built in 1916 as the kitchen. The tiled gable roof connects the administration building to the kitchen. Exterior walls have been stuccoed.

A one-story nurse's dormitory (1915) is situated south of the administration complex at the southern boundary of the property (see photo 7). This building has dark face-brick laid in stretcher bond. The squared coursed rubble foundation is accentuated by a smooth stone watertable. The main entrance (facing northeast) consists of an enclosed screen porch; both porch and main building have slate gable roofs. The gable end of the porch is decorated with vertical framing with a large, diamond-shaped vent centered. Wood balustrades run between brick porch outside porch screens. The double-hung windows are decorated with stone surrounds with stone quoins; stone lugsills extend between pairs of windows. The side entrances are protected by shed roofs supported by wood brackets. The stepped parapets on the end walls are outlined with stone.

The carpenter and plumbing shop, the original portion of which was built as a laundry in 1911, is located west of the administration complex (see photo 8). The center building is the original; it is dark red brick laid in common bond and has a hipped roof with asphalt shingling. The single door at the entrance has a shed roof supported by brackets. Windows are double-hung, two-over-two. The cornice is decorated with raised brick moulding that continues across the east addition. This addition has a flat roof with a parapet topped by tile coping. The west addition contains a garage with a brick flat arch above the garage door. Its parapet, lower than the east one, is capped by tile coping. The original plans for this building show that a cupola was positioned in the center; the framing is still visible.

A brick storage building west of the administration complex (1931) was used for X-ray storage (see photo 9). It was designed to blend in with the other major buildings in the complex. It has buff brick walls and a red tile roof. A more modern building nearby, possibly built in the 1950's, was used for alcohol storage.

The water tower (ca. 1879) is situated in the southwestern corner of the property (see photo 10). This reservoir held 50,000 gallons of water. The romanesque tower has a slate conical roof which flares at the eaves. Arched, corbelled openings
decorates the cornice. The body of the tower is made of large semicylindrical blocks of stone. A modern, reservoir replaced the old tower in 1926 but was torn down later.4

The employees' dormitory and recreation complex is situated on the eastern boundary of the property, across the encircling access road from the administration building complex. It was built between 1924 and 1936 (see photo 11 and illustration A-5). Face brick is buff-colored with a contrasting dark accent brick laid at random. The brick is a variation of Flemish bond alternating two stretchers and one header.5 Ornamentation is rich at the main entrances, cornices, and the third story corner windows. The tiled, hipped gable roof has copper louvered vents at the ridge line. The eye is drawn to the compound-arched arcade which joins the men's and women's building to the recreation building in the background. The parapet of the recreation building echoes the design of the arcade (see photo 12). The cornices of this complex are composed of many decorative brick courses (see photo 13). Brick raised in a diamond or diaper shape pattern decorates the cornice with dentil molding, rowlock courses and dogtooth molding. Window heads are decorated with rowlock courses, and raised rowlock courses are used as lugsills. Windows are double-hung, six-over-six, with stairway windows eight-over-eight. The window above the entrance is four-over-four. Each of the four buildings has a main entrance richly decorated with terra cotta (see photo 14). Framing the doors and the arches above them are pilasters with Renaissance-style foliated reliefs. Palm leaves and flat discs ornament the spandrels, while garlands and shields grace the frieze. The window directly above is pedimented and framed by volutes applied on quions. The window surround is decorated with roping. The arch above the door has a circular window set into it. The original doors (see illustration A-2) have been replaced with steel doors with lights (currently boarded up) to meet fire code standards. The door sills are rose granite. The water tables are decorated with burnt-orange-colored terra cotta moldings. The third floor corner windows (see illustration A-3) are also decorated with terra cotta ornamentation. The arched surround is decorated with roping and has a cartouche entered above the window opening. A balustrade is attached below the window. The window is finished with a brick keystone.

The two-story superintendent's residence (1934) is located south of the employee complex (see photo 15). Brick matches the employee complex in color and bond. Dark brick accentuates corners, foundation, and window decoration. Fenestration is asymmetrical, with the front entrance offset from the center. Raised brick outlines first-story windows. A brick belt course wraps around the front facade below the second-story windows. The tile hip roof along with the cornice treatment (rowlock and dogtooth courses) echo the treatment of the employee complex. The entrance is decorated with a terra cotta molded surround topped by a sunburst and volutes (see illustration A-1). Building corners are accentuated by raised brick piers which rise to the second story, where they change to raised brick quions. The enclosed porch on the south wing has arched openings with French doors surmounted by semi-elliptical transoms. The garage is located on the north facade with a pierced, shaped patio wall above. Below, the foundation
is squared coursed rubble, which continues as a retaining wall around the circular driveway in front of the residence.

The service buildings situated east of the employee complex are the laundry room (built in 1925) and the engine room (1924) (see photos 16 and 17). The laundry room has brick pilasters capped by stone between window groupings. Original windows, have for the most part, been replaced with thermopane windows. The window spandrels have raised brick. The upper story windows are accentuated with a double brick soldier course which wraps around the perimeter of the building. The main entrance, located in the second bay of the west facade has an eighteen-light transom with sidelights. The cornice and end of parapet are capped with stone. The two gable ends have circular louvered vents in center. The engine room (see photo 17) has had several additions. The west facade opens to a two bay garage that has been stuccoed. The brick portions match the rest of the complex in bond and color. The three- and four-story wings are capped with stone. Several stone belt courses wrap around the building. Center portion of the building has glass blocks in window openings.

The Robert Koch Hospital buildings remain in structurally sound condition. The Riverside Facility was in operation until October of 1982 when it was vacated, and a portion was used temporarily as a detention facility. The remaining buildings were vacated in November, 1983, awaiting the sale of the property by the City of St. Louis. Due to the fact that the complex is in a rather isolated area, vandalism is taking its toll on the buildings.

NOTES

1. Research concerning construction dates of buildings were found in a card file in the Office of President, Board of Public Services, St. Louis City Hall. Architectural plans were also provided by this office, and copies are now on file with the St. Louis County Department of Parks and Recreation.

2. The pavilion plan (based on European models) was popular in the United States around the turn of the century. Pavilion plans required patients to be isolated in separate wings. This plan required acreage. Urban areas were building high-rise buildings because of the shortage of land. Buch-Lindgren, Gustaf, Modern Hospital Planning in Sweden and Other Countries. (Stockholm: 1951).

3. Pictorial documentation from the Robert Koch Archival file. Documents, including clippings, are now located at the Hospital Commissioner's Office, City of St. Louis.

4. In close proximity to the water tower on the southwestern boundary of the hospital property was a cluster of frame, and stucco buildings. These cottages housed patients suspected of having a disease but not positively diagnosed; the term used was "incipient". A school house was erected to provide children with an education while
convalescing. This location was chosen because it provided a healthful atmosphere away from the more contagious hospital wards.

Other sources (which are on file with the St. Louis County Parks and Recreation Department) refer to one-story frame buildings being erected in clusters around the original 58 acres. Buildings near the river provided an area for patients to bathe and to receive a change of clothing. A fumigating house was located a short distance from the bath house, where disinfectants were used to fumigate the boats, trunks, bedding and clothing. Buildings were torn down, and others were erected to meet the changing needs of the hospital and to combat infection.

8. Significance

Period | Areas of Significance—Check and justify below
--- | ---
prehistoric | archeology-prehistoric
1400-1499 | archeology-historic
1500-1599 | agriculture
1600-1699 | X architecture
1700-1799 | art
1800-1899 | commerce
X 1900- | communications

Specific dates 1879, 1907-1938

Builder/Architect E.E. Christopher and A.A. Osburg

Statement of Significance (in one paragraph)

The Robert Koch Hospital is eligible for listing in the National Register of Historic Places under Criteria A and C, and is significant in the areas of HEALTH AND MEDICINE, and ARCHITECTURE. The hospital's significance in HEALTH AND MEDICINE demonstrates the struggle of the City of St. Louis to deal with the public health threat, tuberculosis, which at the turn of the century killed more St. Louisans than all other common infectious diseases combined. Robert Koch Hospital, owned and operated by the City of St. Louis, provided free medical care to victims of a disease which thrived especially in the crowded living conditions and poor diet of non-affluent citizens. In 1910 the City first utilized the present Administration Building as a tubercular sanatorium. The City had owned the site, fifteen miles south of the city center, since 1854 and had used it as a Quarantine station and a hospital for victims of cholera, yellow-fever, small pox, typhoid fever, diphtheria, and leprosy. This remote location and the fresh air along the west bank of the Mississippi River were considered ideal for the treatment of tuberculosis. Today, Robert Koch Hospital is a last tangible link with the great public health effort to treat and cure tuberculosis, and with the devastating epidemic diseases which threatened the City during the 19th century. The ARCHITECTURE of the hospital is a little-altered example of the best in institutional building during the first part of this century. While meeting a rigorous set of functional requirements, the buildings also fit gracefully into their setting and, although built over several decades, harmonize in scale, materials and detailing.

HEALTH AND MEDICINE

The present red-brick Administration Building was built in 1907 as a center for smallpox victims, but before it was completed vaccination was eliminating smallpox as a threat to the citizens of St. Louis. However, health professionals now concerned themselves with efforts to control tuberculosis, or consumption, the leading cause of death in American cities. In 1903 the Medical Society of City Hospital Alumni went to Jefferson City to propose a state sanatorium for incipient tuberculars. The Trudeau Club, composed of physicians and community leaders, lobbied for a tuberculosis facility in St. Louis. Despite their efforts to educate the public to the fact that tuberculosis was a curable disease, not a death sentence, city officials ignored their suggestions. The Trudeau Club and the newly formed Municipal Society for the Relief and Prevention of Tuberculosis continued their program of public education. One of their aims was "discontinuance of the present Quarantine Hospital for other contagious and infectious diseases and that it be used only for tubercular patients, especially children." Another goal was the establishment of a farm for convalescent tubercular patients to be operated in connection with a tuberculosis sanatorium on the property now owned by the City and now a part of Quarantine. They were to realize both of these goals.
In 1910 Dr. John C. Morfit, Hospital Commissioner, persuaded his committee, but not the Mayor or Comptroller, that the Quarantine-Smallpox Hospital was an ideal site for a tubercular sanatorium. Its location on a hillside overlooking the Mississippi River in fresh country air could not be better. One Sunday afternoon he had 70 tubercular patients transferred from other City institutions to the Quarantine site. In the ensuing uproar at City Hall Dr. Morfit lost his position, but not before the institution was named the Robert M. Koch Hospital for tuberculars, honoring the German physician who had isolated the tuberculosis bacillus. Dr. Koch, incidentally, had also discovered the organism which caused cholera.

When citizens were made aware that tuberculosis accounted for 1 out of every 10 deaths in St. Louis and that as many as 8,000 people in the city had some stage of the disease, city officials began an expansion program which never seemed to catch up with the demands for treatment. Bond issues in 1920, 1933 and 1934 allocated funds for expansion of Koch Hospital. In 1928 Koch Hospital was described as built to care for 240 patients, with 420 in residence and a waiting list of 100. The overall plan called for additional wings to be added to the central structure, 4 or 6 such ward buildings. Patients were to move from the center outward as a morale-building sign that their condition was improving.

In 1922 the aim of the Municipal Society for the Relief and Prevention of Tuberculosis to establish a farm on the Koch grounds was realized when 105 acres to the north were purchased. In 1937 this farm supplied hundreds of bushels of corn, apples, tomatoes, grapes, spinach and pears for patients at Koch Hospital and at other City institutions. At its peak in the 1930's Koch Hospital was an almost self-contained community with its own post office, railroad stop, water supply, kitchens, laundry, power house, paint and carpentry shops, living quarters for some physicians, nurses and employees. A special area had been set aside for expectant mothers. Early in 1939 the State of Missouri began to contribute funds for the care of indigent tuberculars. Despite the constant building at that time there were 207 people on the waiting list to enter Koch Hospital.

Along with the expansion of the physical plant went improvements in medical care and what we know as social services. The first chest specialist became medical superintendent in 1921. By 1925 a consulting staff of pertinent medical specialists was available, most of them faculty members of one or the other of the St. Louis medical schools. Koch Hospital was approved as a training program by the American Medical Association and physicians-in-training rotated there from the City Hospital. At first a strict regimen of bed rest, good food and fresh air was the basic treatment. The solariums allowed patients to have heliotherapy in the early years. Later sun lamps and water-cooled quartz lamps were available. The use of the X-ray to determine the progress of the disease caused the building of the small X-ray vault or shed which is still standing. When the use of the pneumothorax refill, the collapsing
of the diseased lung so it could rest, became acceptable, physicians at Koch Hospital performed this procedure almost 90 times each week. The medical staff also cooperated in testing chemical treatments such as injections of gold and of isonicotnic acid and later the "new" antibiotics. Through the years nurses-in-training came to Koch to study the latest techniques in caring for tuberculosis patients.

The staff at Koch Hospital realized the need to educate the patients and their families about the nature of the disease and the necessity of long hospitalization to cure it. The average stay for an arrested case was 22 months. Regular lectures were given to ambulatory patients. The Koch Messenger, a monthly magazine, began publication in 1925 and continued until 1947. This publication communicated news from and to the patients and their families, informing them of the many classes in business, sewing, etc. available, and also of the hobby clubs formed for the patients. In 1932 the U.S. Department of Vocational Rehabilitation sent observers to study the retraining being done at Koch Hospital for patients about to be discharged. Many of the patients had to change their occupation after recovery.

Plans were drawn to expand the bed capacity to 1000, the number estimated by Public Health figures for St. Louis. The acceptable number was 2 beds per death in the area and St. Louis averaged more than 600 deaths each year from tuberculosis. These plans died when Congress did not include this kind of appropriation in the Public Works Administration budget. The last ward building (D) was ready for use in July of 1940 but not utilized until September because there were no funds to staff it. Shortages of doctors and nurses during World War II necessitated closing some sections of the hospital. In 1942 as the Depression lingered on, City officials asked the State to increase its contribution to the care of indigent patients.

By the end of World War II new drugs and improved techniques revolutionized the care of tuberculosis patients and obviated the need for such a large specialized hospital. Preventive measures, such as the screening of school children, those working in hospitals or in food preparation, combined with improved medication, drastically reduced the threat of tuberculosis.

By the mid-1950's City officials contemplated selling Robert M. Koch Hospital. This was history repeating itself, since in 1878 the same thought had been in the minds of the Mayor and his advisers. The steamboat quarantine imposed after the devastating cholera epidemic of 1849 had been lifted and the disease at the time seemed eliminated. In 1878 a virulent outbreak of yellow fever demonstrated the need for a city-owned isolated hospital for victims of highly contagious diseases. For the next 30 years patients with yellow fever, smallpox, diphtheria, typhoid fever were sent to the Quarantine Hospital. The bodies of victims of these epidemics were buried on the grounds until by the end of the nineteenth century an estimated 18,000 people were

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buried around at what was then called the Quarantine-Smallpox Hospital. Since during epidemics, bodies were buried en masse in some of the sinkholes on the property, while at other times only wooden headboards marked the graves, little remains to mark burial sites; burial records were destroyed by a fire in the late 1880's. Scattered references suggest that other types of burials were made here as well. In 1856, for example, the city burial ground that had operated for thirty years at the present site of Benton Park was removed to Quarantine. "The pauper dead of the city and the patients who died in the hospital" were placed at the extreme west end of the hospital grounds up until 1877. Their remains have been left undisturbed up to the present, 1984. One of the few monuments erected there was one in memory of 175 non-commissioned officers and soldiers of the 56th United States Colored Infantry, who died of cholera in 1866. These remains and the plain monument have been moved to hallowed ground at nearby Jefferson Barracks National Cemetery sometime in the mid-20th century.

Instead of selling Koch Hospital in the 1950's, City officials decided to use the facility to address another municipal problem, decent housing for the indigent elderly. The large buildings and spacious grounds made it especially attractive for this purpose. The employees dormitory complex, re-named Riverside, was converted into single bedrooms, and the first women residents moved in 1961. Later the Administration Building and four attached ward buildings were altered and used as an Intermediate Care Facility. The dwindling city funds available for this kind of project and problems with state and federal regulations and payment finally determined officials to close the facility. They transferred the last elderly resident in 1983 and sold much of the perimeter acreage. At present the remaining land and the buildings of Robert M. Koch Hospital, formerly the Quarantine-Smallpox Hospital, are for sale by the City of St. Louis.

ARCHITECTURE

Public buildings in the early 20th century generally were designed after classical or Renaissance precedent. It appears that architects who worked for the City of St. Louis were educated in this school of thought. Physical evidence of other public buildings by these city architects strengthens the theory that these architects were adept at designing eclectic architecture. Robert Koch Hospital combines features of Italian Romanesque and Italian Renaissance in buildings that are also highly functional. The cohesive design of the buildings illustrates a continuity of the disposition and quality of materials, scale, site plan, and ornamental detail concentrated at entrances and cornices.

The American hospital in the first quarter of the 20th century posed unique problems of design to architects due to continuing advances in the field of medicine. New discoveries and changing methods led to medical demands for more and differently designed spaces. Health care institutions had to be designed flexibly in order to meet current demands. These facilities had also to convey a sense of hope and positive reinforcement through attractive and appealing facades and landscape.
Robert Koch Hospital met these fundamental concerns of its time, both functionally and aesthetically.

Situated on about fifty acres, the buildings are arranged symmetrically around a looping macadam access road. The ward and infirmary buildings radiating out from the administration building were sited to provide privacy from building to building and at the same time scenic views from the solariums. The employee complex is separate, situated at the bottom of a hill, also to provide privacy for the employees.

Service buildings are situated on the perimeters of the property to mask heavy traffic and to hide unsightly tanks and smoke stacks. The site planning shows a sensitivity to pedestrian scale and landscape. Main buildings are generally nestled into hillsides. Ornamentation is imitated in sometimes subtle mimicry between complexes. Terra cotta roping, foliated patterns, and arched fenestration are some examples of this shared ornamentation.

The ward and infirmary buildings had to be designed in accordance with the then-prevailing philosophy that fresh air and wholesome surroundings were essential to the healing process for tuberculosis. With this in mind, city architects provided patients with semi-enclosed porches. The hospital rooms were semi-private with french doors that opened onto the porches. Metal partitions in the porches provided privacy between rooms. Porches were evidently open until money was appropriated to install screens. Casement windows were installed later. Solarium rooms located at end walls provided spaces for recreation. They were designed to allow patients the advantage of feeling that they were enjoying the outdoors even though protected by glass and brick. The panoramic views from the solariums were enhanced by the polygonal shape of the rooms. The flat roofs were easily accessible as balconies for the further enjoyment of the outdoors.

Surprisingly, the Administration Building, the focal building of the hospital, is most strictly institutional in style, with least regard to ornamentation. Except for the water tower, it is the oldest surviving building, dating from 1907. Its main feature, the high battlemented parapet, was intended to make the flat roof accessible as a recreation area. A plan of this building in the files of the Board of Public Services has the name Barnett, Haynes, and Barnett, printed on it. George D. and Tom P. Barnett were the sons and successors of George I. Barnett, the leading architect in St. Louis in the mid-nineteenth century, and they inherited much of his prestige. Their work was the subject of an entire issue of Western Architect (Vol. XVIII, no. 2, February 1912), which shows it to have been typically of a lush Beaux-Arts character. Their Koch Hospital building is an atypical and little-known example of their efforts.

The subsequent buildings of the hospital were designed by the staff of the Board of Public Services. Edward E. Christopher was city architect between 1921-25 and Building Commissioner between 1925-29. He was credited with the design of Union Market in 1925.
Subsequently he was associated with the engineering firm of Sverdrup and Parcel. He died in 1951.\(^43\) He was succeeded by Albert A. Osburg, who had already been working for the city since 1912. The knowledge and love of period detailing seen at Koch Hospital is also seen in other buildings known to have been designed by Osburg, and it is likely that he had a hand in the designs at Koch even before he became chief. Osburg designed Soulard Market in 1929, modeling the central building on Brunelleschi's Foundling Hospital in Florence.\(^44\) For the Meramec Hills Home for Girls, a city facility located, like Koch Hospital, in the county, he designed the Administration Building in 1931 in a beautifully detailed Georgian Revival style.\(^45\) His design for Homer G. Phillips Hospital follows Koch in its extensive use of terra cotta ornamentation, although in this case in the newly popular Art Deco style. Osburg, who was born in St. Louis in 1887 and trained at Washington University's School of Fine Arts (night school), worked for the City as late as 1954 and died in 1976.\(^46\)

NOTES

1. Two Years Work by the St. Louis Society for the Relief and Prevention of Tuberculosis, 1910-11. (Pamphlet, St. Louis).

2. Clipping in the John C. Morfit, M.D., Scrapbooks, St. Louis Medical Society Library.

3. Unidentified clipping in George Homan Scrapbooks, Missouri Historical Society.

4. St. Louis Post-Dispatch, April 25, 1928.


8. Two Years Work, op. cit.


10. St. Louis Star, Sept. 8, 1926.


15. Fay Inman, "History of Koch Hospital," mimeographed history in the library of the Missouri Historical Society.

16. The Koch Messenger, Vol. 1, No. 1; and frontispieces of all editions.

17. Ibid., June, 1935.

18. Ibid., March, 1928.


20. Ibid., March 21, 1952.


23. St. Louis Post-Dispatch, May 7, 1933.

24. Many of these are on file in the library of the Missouri Historical Society.


27. St. Louis Post-Dispatch, Aug. 8, 1939.

28. Ibid., July 2, 1940.

29. Ibid., Aug. 11, 1942.

30. Ibid., Nov. 5, 1942.

31. Ibid., July 2, 1940.


33. Report of Health Commissioner Francis, see Mayor's Report for 1878 (St. Louis).

34. William Hyde and Howard Conard, Encyclopedia of the History of St. Louis, (St. Louis; Southern Printing Co., 1899), pp. 683, 1010.

35. William M. McPheeters, M.D., One Hundred Years of Medicine and Surgery in St. Louis, 1900.
36. St. Louis Post-Dispatch, May 6, 1894.

37. Hyde and Conard, p. 1010.

38. Ibid., p. 337.


41. South County Journal, Sept. 21, 1983.


44. McCue, p. 91.

45. Files of the Board of Public Service. This building now has the address of 811 Stone Canyon Road. (razed 7/84).

46. Homer G. Phillips Hospital is listed in the National Register of Historic Places. Biographical information on Osburg comes from the Inventory-Nomination Form prepared by Mary M. Stiritz and Carolyn Hewes Toft, Landmarks Association of St. Louis, 1982.
10. Geographical Data

Acreage of nominated property: 50.34

Quadrangle name: "Oakville, Mo. - III."

Quadrangle scale: 1: 24,000

UTM References

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Verbal boundary description and justification:
Commencing at the point of intersection of the northwardly prolongation of the eastern property line of Martiney Gardens Subdivision and the southern right-of-way of Robert Koch Hospital Road, 70 feet wide; Thence south 180°32'17" west, along the eastern property line of Martiney Gardens Subdivision, (cont.)

List all states and counties for properties overlapping state or county boundaries

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<td>St. Louis</td>
<td>189</td>
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11. Form Prepared By

name/title: V-J Bass, Assistant Curator; Jean Eberle, Consultant

organization: St. Louis County Dept. of Parks & Recreation

date: May 1984

street & number: 41 South Central

telephone: 314/889-3371

city or town: Clayton

12. State Historic Preservation Officer Certification

The evaluated significance of this property within the state is:

national state x local

As the designated State Historic Preservation Officer for the National Historic Preservation Act of 1966 (Public Law 89-665), I hereby nominate this property for inclusion in the National Register and certify that it has been evaluated according to the criteria and procedures set forth by the National Park Service.

State Historic Preservation Officer signature: John Karel, Director & Deputy State Historic Preservation Officer, Division of Parks & Historic Preservation

date: 9/4/84

For NPS use only

I hereby certify that this property is included in the National Register

date

Keeper of the National Register

Attest:

Chief of Registration
Continuation sheet Robert Koch Hospital

Item number 9

Page 1


12. *St. Louis Post-Dispatch*, "At Quarantine, a trip to the pest-house where small-pox patients lie," May 6, 1894.

13. *One Hundred Years of Medicine & Surgery in Missouri*. (St. Louis: St. Louis Star, 1900).


a distance of 749.29 feet to a point; Thence south 71°34′46″ east, along the southern line of U.S. Survey 3317, a distance of 1351.91 feet to the true point of beginning; Thence south 71°34′46″ east, continuing along said southern line of U.S. Survey 3317, a distance of 1687.35 feet to an intermediate point on the western curved right-of-way line of Missouri Pacific Railroad Company; Thence northeastwardly along the said western right-of-way line of said Railroad, a distance of 586.02 feet to the P.C. of a curve; Thence northeastwardly along said western right-of-way line of said Railroad, a distance of 254.441 feet to a point, said point being an angle point in the southern right-of-way line of the State of Missouri Highway Department; Thence south 73°32′00″ west, along said southern right-of-way line of said Highway Department, a distance of 251.501 feet to a point; Thence north 65°14′07″ west, along the southern line of Tract No. "4", a distance of 234.957 feet to the P.C. of a curve; Thence northwardly along the southwestern right-of-way line of said Highway Department, along a curve deflection to the right, having a radius of 1960.92 feet, and an arc distance of 333.803 feet to the P.T. of the curve; Thence north 28°15′20″ west, along said southwestern right-of-way line of said Railroad, a distance of 148.539 feet to a point; Thence north 00°47′20″ west, along the southwestern right-of-way line of said Highway Department, a distance of 234.957 feet to the P.C. of a curve; Thence northwardly along the southwestern right-of-way line of said Highway Department, along a curve deflection to the left, having a radius of 511.863 feet, and an arc distance of 196.541 feet to the P.T. of the curve; Thence north 21°12′40″ west, along the said southwestern right-of-way line of said Highway Department, a distance of 69.537 feet to a point; said point being in the southern right-of-way line of Robert Koch Hospital Road; Thence south 60°36′33″ east, along a line crossing said Koch Road, a distance of 233.482 feet to the P.T. of a curve in the southern right-of-way line of said Koch Road; Thence south 00°45′53″ west along a nontangential line to said curve along the eastern property line of said Tract No. "4", a distance of 162.525 feet to a point; Thence north 83°12′51″ west, along said eastern property line of said Tract No. "4", a distance of 338.307 feet to a point; Thence north 71°25′09″ west, along said eastern property line of said Tract No. "4", a distance of 419.484 feet to a point; Thence south 69°40′15″ west, along said eastern property line of said Tract No. "4", a distance of 228.746 feet to a point; Thence south 11°48′33″ west, along said eastern property line of said Tract No. "4", a distance of 194.560 feet to a point, Thence south 40°10′48″ west, along said eastern property line of said Tract No. "4", a distance of 913.791 feet to a point; Thence south 103°11′8″ east, along said eastern property line of said Tract No. "4", a distance of 260.012 feet to the true point of beginning and containing 2,238,715.038 square feet or 51.3938 acres more or less. This parcel is Tract No. "4" designated by the City of St. Louis in 1983 for the proposed sale of Koch Hospital.
2. James M. Denny, Chief, Survey & Registration
   and State Contact Person
   Department of Natural Resources
   P.O. Box 176
   Jefferson City
   May 1984
   (314) 751-4096
   Missouri 65102
Illustration A-1
Original architectural elevation of solarium end walls for ward and infirmary buildings.
Board of Public Services
Illustration A-2
Original architectural elevation of entrance detail for employee dormitories and employee buildings
Board of Public Service
Illustration A-4

Original architectural elevation of door detail on superintendent residence. Board of Public Services.
Illustration A-5

Original architectural elevation (west) of employee's recreation building. Board of Public Services.

WEST FRONT or COURT ELEVATION
**Photo Log:**

Name of Property:  **Robert Koch Hospital**  
City or Vicinity:  **Oakville vicinity**  
County:  **St. Louis County**  
State:  **MO**  
Photographer:  **V-J Bass**  
Date Photographed:  **Feb. 1984**

Description of Photograph(s) and number, include description of view indicating direction of camera:

1 of 17. View of E façade of Administration Building (1907) (attributed to the architectural firm Barnett, Haynes, & Barnett), facing W.
2 of 17. View of S façade of the women’s infirmary building (1922) with connecting corridor to the fourth ward building, facing N.
3 of 17. View of the NW façade of the fourth ward building (1939) showing connecting corridor (to women’s infirmary) and projecting solarium with porch above, facing SE.
4 of 17. View of NW façade of fourth ward building (1939) showing lunette detailing above solarium porch entrance facing SE.
5 of 17. View of NW façade of fourth ward building (1939) showing terra cotta detailing around arched window openings, facing SE.
6 of 17. View of SW façade of kitchen building (1924), facing NE.
7 of 17. View of NE façade of nurse’s dormitory (1915), facing SW.
8 of 17. View of SW façade of the carpenters and plumbing shop (1911) (originally built as the laundry room), facing NE.
9 of 17. View of SE façade of x-ray film storage building, facing NW.
10 of 17. View of E façade of water tower (oldest structure standing on property ca. 1879), facing W.
11 of 17. View of SW corner of the original employee dormitory complex, facing NE.
12 of 17. View of W arcade entrance to employee dormitories (1924) and recreation building (1924) in background, facing E.
13 of 17. View of NW façade of the men’s employee dormitory (1924) (currently known as Riverside Facility), facing NE.
14 of 17. View of S façade (entrance detail) to the men’s employee dormitory (1924), facing N.
15 of 17. View of SW façade of superintendent’s residence (1934), facing NE.
16 of 17. View of NW façade (ca. 1925) of the laundry building (situated behind the employee dormitory complex), facing SE.
17 of 17. View of S façade of engine room (ca. 1924 and additions), facing N.