



# ALEXANDRA HOSPITAL

1909

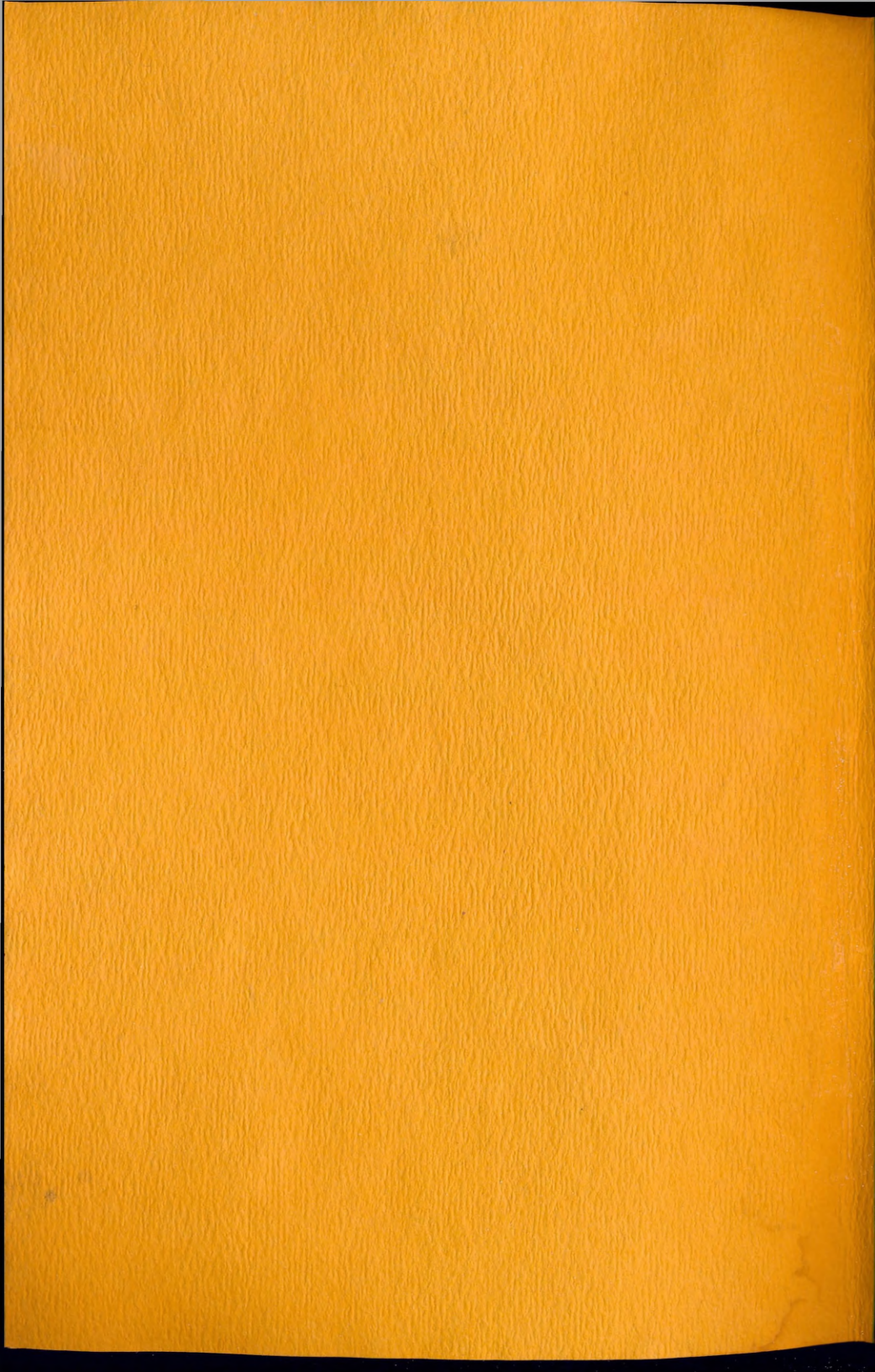
INGERSOLL, ONTARIO

1970

## OPENING DAY CEREMONIES

TUESDAY, MAY 12, 1970  
2:30 P.M.

THE HONOURABLE THOMAS L. WELLS  
Provincial Minister of Health



# Forward

The history of Alexandra Hospital is an unusual saga of dedication to the care of the sick, which spans more than sixty years in the life of Ingersoll and the neighboring communities.

The history of the old hospital goes back many, many years. In 1874 the late James Noxon built a palatial castle-like residence on the street which now bears his name; (with a beautiful background of finely wooded park which in autumn bursts to a brilliant blaze of glory.) It was considered one of the beauty spots of Ingersoll.

This magnificent property was later purchased and occupied as a home by the late Dr. Angus McKay, physician in Ingersoll and vicinity, for many years.

For years the need for a public hospital had been growing. The only service obtainable up to 1909 was that of a private hospital, and private nurses.

The idea of establishing a hospital in Ingersoll occurred late in 1908, and was vigorously promoted by the medical fraternity, with Dr. J. M. Rogers actively participating. He in turn received the whole-hearted support of such public spirited men as Joseph Gibson, postmaster; Thomas Seldon, exporter; James E. Boles, merchant; Steven Noxon, manufacturer; George Naylor, merchant; and J. Anderson Coulter, of the Morrow Company.

Plans were laid for the founding of a hospital in Ingersoll. Dr. McKay stated he would sell his residence for \$8,000.00. The bookcase in the library would be given for the use of the hospital, and also contribute \$2,000.00 towards the building fund.

The generous response of citizens soon indicated they were heartily in accord with the project, and the proposal of a hospital in Ingersoll became an established fact. A committee was appointed to procure necessary forms and information from the Provincial Seconders Department in connection with the formation of the Hospital Trust.

In a meeting of April 29, 1909 it was decided that the suggestion of Dr. McKay, to call the hospital Alexandra, in honour of Queen Alexandra, wife of the reigning sovereign.

At a general meeting of subscribers on June 25, 1909 the following permanent directors were appointed: George Sutherland, Raymond Hutt, Joseph Gibson, Steven Noxon, Thomas Seldon, John E. Boles, George Naylor. These officers were elected for the term of 1909-1910: *President* - George Sutherland, *Vice-President* - Joseph Gibson, *Treasurer* - R. J. Robinson, *Secretary* - Raymond B. Hutt.

The work of converting the residence into a hospital was well under way during the summer of 1909, and the formal opening took place on September 22nd of that year. This was a happy occasion in the lives of Ingersoll residents.

In March 1946, the county council set aside a sum of money for the proposed building of a fund for the new hospital in Ingersoll, and recommended that the councils of 1947, 1948, 1949 set aside a like amount for the same purpose.

In November of 1946 preparations were made to submit to Council the plans for the new Hospital to be presented to the ratepayers. On December 9th, 1946 the vote carried and the project of building the hospital was under way.

On March 16th, 1949 it was a snowy day, but hundreds turned out for the significant occasion in the life of the new hospital. The late Allan Horton acted as chairman in the absence of Mr. Start. The laying of the corner stone was performed by Mr. R. W. Green, Secretary-Treasurer of the Hospital Trust, at that time. The new Hospital was officially opened, June 16th, 1950.

The late Allan Horton, chairman of the building committee during the construction of the hospital in 1949-50 records the information as follows: (The new hospital is modern in design and equipped with the best furnishings available.) The essentials such as heating plant, kitchen and laundry are sufficiently large, should the occasion for expansion arise.

This beautiful buff brick building has been designed with the greatest of care, and approved by the Provincial Department of Health. It is extremely compact and complete, in every detail. No necessary expense that would make for efficiency and service has been spared. We feel it is complete in every respect, and equipped to give the most modern treatment, to the patients we serve.

In just fifteen short years, Alexandra Hospital had outgrown its new facilities and need for expansion to a larger and more efficient operation was evident.

At a meeting of the Hospital Board it was agreed, that the firm of Agnew Peckham & Associates be hired to do a survey of the requirements, for our hospital, for the present and future. The survey was completed in 1966 and the results proved that additional accommodation and expanded facilities were required. Plans were then proceeded with for expansion of the hospital.

After considerable discussion with Architects who have been experienced in construction of hospitals. It was unanimously agreed that the Hospital Board acquire the services of Mr. Ludwig W. Gindl of Blair Ontario as architect, for the new addition of our hospital.

The Building Committee was formed from within the board and Mr. Peter Breel was named secretary. Upon the resignation of Mr. Breel the new administrator Mr. G. L. "Bud" Hayter assumed the responsibilities of secretary to the Building Committee. The Building Committee has spent long hours going over plans, specifications, and changes. Those who have worked untiringly throughout the construction stages are: Mr. Ken Swance - *Chairman*, Mr. Jack Hunsberger, Mr. Norman McLeod, Mrs. Boyd Garland, Dr. G. Westman, Mr. Blake Coyle.

In October of 1968, the sod was turned by the chairman of the board Mr. J. Hunsberger, along with G. Henry, Mayor of Ingersoll, Mrs. Bangarth, President of the Hospital Auxiliary, and the Administrator - G. L. Hayter. The construction of the new addition to Alexandra Hospital commenced. The new Hospital measured in terms of its physical size and facilities, you might describe as a new beginning with a totally new approach to the care of the sick. The inspiration of the hospital's success now and always will be the kind and generous support we have received from the County of Oxford, Town of Ingersoll, and surrounding community, and people in general from the area that the hospital serves.

The new Alexandra Hospital may well lay claim to being the first hospital of its size in Canada, to turn its attention to automation and introducing many innovations which simplify hospital methods and medical care. The Hospital's design embodies new concepts and new applications in automation at no greater cost than conventional hospitals; thus creating an environment where all the procedures to which a patient moves from admitting to discharge are planned to give him the maximum personal service, diagnostic, surgical and medical treatment.

In the planning stages of the hospital our *first* consideration was to determine what kind of physical organization in the hospital would best service the patient. The *second* question was how much easier can we make the task of treating our patient, and lastly we thought to successfully co-ordinate all the new techniques the hospital provides to the advantage of both the patient and staff, and still strive if possible to lower the cost of each patient's day of service we render. These objectives we feel we have achieved through the wonderful work of our architect Mr. Ludwig Gindl in conjunction with the hospital consultants, of O.H.S.C., and the Hospital's Board.

The new Alexandra Hospital was literally designed from the inside out and the building was then constructed to conform to the many new operational procedures which would facilitate both the giving and the receiving of hospital care. The hospital building committee in the initial planning stages emphasized better patient care and better use of facilities through a well planned organization which would expedite the flow of supply and information, where needed.

Group related functions and close proximity of supplies relieving the nurse and the doctor of the need for fetching and carrying, will permit them to devote the maximum attention to caring for the sick. Based on the achievement of these objectives the production line flow of supplies and materials from Central Dispatch, the controlled point which all clean supplies and materials are moved to the area of need and unused supplies and materials are returned for decontamination and sterilization. All sources of supply including receiving, bulk and process storage, pharmacy, laundry, and sterilization are grouped around the Dispatch. Clean supplies are delivered by mobile carts to each patient's area and in some areas of the new building a special cabinet called a nurseserver, a combination of two distinct double door pass through units have been installed. Attendants working from the corridor side place clean supply items in one unit, and others remove soiled items from the other well ventilated unit. From within the room the nurse removes the prepackaged supplies from the clean section upon completing her nursing routines, places the used materials in the other section which stores the soiled items temporarily. She may then move on to other patients under her care, without retracing her steps for supplies.

As our community hospital evolves into a true medical centre so do the specialized medical, surgical and clinical services it supports. In planning the new areas of the hospital it became obligatory not only to

enlarge the total facilities but also to re-equip and expand the facilities for clinical investigations. To this end a large area of the first floor is now devoted to an impressive pathology department which includes sections devoted to scintology, bio-chemistry, and haematology, and other related sciences. The strategic location of the clinical laboratory will enable tests to be given to patients in the emergency and outpatients department with a minimum of inconvenience. The greatly expanded department of Bio-chemistry will permit many new tests using the most technical equipment available. Our patient and medical staff will receive diagnostic reports much quicker than previously. The X-ray equipment with our new automatic processor in the dark room, will provide much faster service in addition to our standard equipment which we had previously. A new piece of equipment has been added. This new X-ray equipment with its image intensifier unit will allow a brighter image to be observed with an optical system resulting in lower patient dosage of radiation and better visual observation. Last but not least television techniques are being made use of in our special X-ray department area.

The Engineering Department is located at the basement level. The giant workhorses of the hospital provide emergency power, steam, air-conditioning, and ventilation which make the entire hospital complex function so efficiently. Here to, are the receiving docks of the bulk storage area, laundry, kitchen supplies and the Central Dispatch etc. The network of oxygen, compressed air, suction, nitrous-oxide; outlets so essential to the treatment of patients also has its source here. The air-conditioning throughout the building ensures warming or cooling impulses of the air moving plant located on the fourth floor. The specialized engineering air-conditioning and heating systems circulates a 100% fresh air properly humidified to the entire building. The area is exhausted from the fourth floor level above the patient's room by a grill so located that nothing but fresh air is circulated in the system, and the patient is never exposed to any air that is not clean and washed, cooled or heated for safety and comfort. In the event of a power failure during an electrical storm or a nearby catastrophe the hospital's new diesel driven power generating plant automatically takes over the hydro system within seconds. A split second change over would hardly be noticed even during a critical operation. The architect of the hospital and the engineering consultants have taken great pains to develop workable mechanical system which although complex can be readily operated by our hospital's engineering personnel. Systems are custom designed for the Hospital in co-operation with a small army of contractors and suppliers. The new Alexandra Hospital is a tribute to the brilliant research of our architect



Mr. Ludwig W. Gindl, his army of consultants, who have designed a hospital in which everything needed to care for the patients is provided where it is needed, at the time it is needed.

THE HOSPITAL BOARD OF TRUST, extend to you an invitation to see your hospital in operation, and hope that you will be justly proud of our Community Medical Centre.

G. L. Hayter,  
*Administrator*

J. Hunsberger,  
*Chairman of Hospital Board*

(Thanks to the Hospital Auxiliary for information on the old Noxon Home,  
and the first Hospital Board.)

# Board Chairmen

## 1909 - 1970

Oct. 1909 - .....	Mr. Geo. Sutherland
Oct. 1910 - Oct. 1911 .....	Mr. H. C. Wilson
	(According to our records which are sketchy, Mr. G. Sutherland carried on as Chairman until Oct. 1914)
Oct. 1914 - Oct. 1915 .....	Mr. J. E. Gayfer
Oct. 1915 - Oct. 1916 .....	Mr. W. J. Elliott
Oct. 1916 - Oct. 1917 .....	Mr. J. W. Enright
Oct. 1917 - Oct. 1918 .....	Mr. Geo. Sutherland
Oct. 1918 - Oct. 1919 .....	Mr. Thos. Seldon
Oct. 1919 - Oct. 1920 .....	Mr. E. A. Wilson
Oct. 1920 - Oct. 1921 .....	Mr. J. E. Gayfer
Oct. 1921 - Oct. 1922 .....	Mr. H. C. Wilson
Oct. 1922 - Oct. 1923 .....	Mr. Geo. Sutherland
Oct. 1923 - Oct. 1924 .....	Mr. R. W. Green
Oct. 1924 - Oct. 1925 .....	Mr. J. W. Enright
Oct. 1925 - Oct. 1928 .....	Mr. J. E. Gayfer
Oct. 1928 - Oct. 1929 .....	Mr. C. H. Sumner
Oct. 1929 - Oct. 1930 .....	Mr. Geo. Sutherland
Oct. 1930 - Oct. 1932 .....	Mr. J. E. Gayfer
Oct. 1932 - Oct. 1933 .....	Mr. J. J. McLeod
Oct. 1933 - Oct. 1934 .....	Mr. T. N. Dunn
Oct. 1934 - Nov. 1935 .....	Mr. J. E. Gayfer
Nov. 1935 - Nov. 1936 .....	Mr. Geo. D. Beck
Nov. 1936 - Nov. 1938 .....	Mr. R. G. Start
Nov. 1938 - Nov. 1939 .....	Mr. J. M. Malcolm
Nov. 1939 - Feb. 1941 .....	Mr. F. H. Stone
Feb. 1941 - Feb. 1946 .....	Mr. T. N. Dunn
Feb. 1946 - Feb. 1952 .....	Mr. R. G. Start
Feb. 1952 - Feb. 1953 .....	Mr. A. R. Horton
Feb. 1953 - Feb. 1955 .....	Mr. R. S. Foster
Feb. 1955 - Feb. 1956 .....	Mr. A. E. Izzard
Feb. 1956 - Feb. 1958 .....	Mr. P. M. Dewan
Feb. 1958 - Feb. 1960 .....	Mr. J. B. Mitchell
Feb. 1960 - Feb. 1962 .....	Mr. G. K. Newell
Feb. 1962 - Feb. 1964 .....	Mr. J. D. Duncan
Feb. 1964 - Feb. 1966 .....	Mr. B. Coyle
Feb. 1966 - Feb. 1968 .....	Mr. N. McLeod
Feb. 1968 - (present) .....	Mr. J. Hunsberger

# Hospital Board

## ELECTED

Mr. N. McLeod	Mr. B. W. Carr	Mr. R. B. McFarlan
Mr. K. C. Swance	Mr. R. G. Start	Mr. Wm. Bell
Mr. J. Hunsberger	Mr. B. Coyle	Mr. J. J. Nadalin
Mr. P. M. Dewan		

## APPOINTEES

Mr. T. Hunt	Mrs. S. Bangarth
Mr. A. Longworth	Dr. J. Lawson
Mr. G. L. "Bud" Hayter, <i>Administrator</i>	

## DEPARTMENT HEADS

<i>Director of Nursing</i> .....	Mrs. D. Christie
<i>Assistant Director of Nursing</i> .....	Mrs. E. Scott
<i>Chief Engineer</i> .....	Mr. Wm. Hobbs
<i>X-Ray Technician</i> .....	Mr. G. Foster
<i>Laboratory Director</i> .....	Mr. A. Roberts
<i>Dietitian</i> .....	Miss M. Hill
<i>Office Manager</i> .....	Mr. K. L. Dobbie
<i>Physiotherapist</i> .....	Mrs. R. Whiting
<i>Pharmacist</i> .....	Mr. M. Taggart
<i>Medical Records Librarian</i> .....	Mrs. B. McCutcheon
<i>Housekeeper</i> .....	Mrs. M. Masters
<i>Purchasing Agent</i> .....	Mr. G. R. Miller
<i>Laundry Manager</i> .....	Mrs. P. Martin
<i>Ambulance Supervisor</i> .....	Mr. T. Winter
<i>Occupational Therapist</i> .....	Mrs. H. Talbot

# Doctors

## ACTIVE

Dr. J. W. Rowsom, *Chief of Medical Staff*

Dr. J. Lawson, *President of Medical Staff*

Dr. S. S. Bland

Dr. G. B. Westman

Dr. G. H. Emery

Dr. M. Dietrich, *Pathologist*

Dr. J. Kellner

Dr. G. W. Kruger, *Radiologist*

Dr. S. K. Warma, *Surgeon*

Dr. S. P. Dixit, *Surgeon*

Dr. R. Kosmol

Dr. G. Q. Sutherland

## CONSULTING

Dr. S. M. Busby, *Urology*

Dr. M. Dietrich, *Pathology*

Dr. G. W. Kruger, *Radiology*

Dr. C. McPherson, *Surgery*

Dr. M. L. Robinson, *O.B. & Gyn.*

Dr. J. Szasz, *Ophthalmology*

Dr. W. D. Wilkey, *Internal Medicine*

## COURTESY

Dr. P. B. Lindsay, *Anaesthetics*

Dr. J. D. Smith, *General Surgery*

## DENTAL

Dr. C. Kennedy, *Dental Surgery*

Dr. B. Roberts, *Dental Surgery*

# Program

## Opening Ceremony

☆ ☆ ☆

*Chairman* — J. Hunsberger

☆ ☆ ☆

GOD SAVE THE QUEEN  
I.D.C.I. Orchestra

☆ ☆ ☆

INVOCATION  
Rev. J. E. Brisson

☆ ☆ ☆

REPORT FROM THE CHAIRMAN OF THE BUILDING COMMITTEE  
Mr. K. C. Swance

☆ ☆ ☆

GREETINGS FROM THE COUNTY OF OXFORD  
Mr. S. Gehring (Warden)

GREETINGS FROM THE TOWN OF INGERSOLL  
Mr. Gordon Henry (Mayor)

GREETINGS FROM OUR FEDERAL GOVERNMENT  
Mr. Wally Nesbitt, M.P.

GREETINGS FROM THE PROVINCE OF ONTARIO  
Mr. Gordon W. Innes, M.L.A.

GREETINGS FROM THE O.H.S.C.  
Mr. S. W. Martin, Chairman of Board O.H.S.C.

☆ ☆ ☆

INTRODUCTION OF GUEST SPEAKER  
Mr. P. M. Dewan

GUEST SPEAKER  
Honourable T. Wells (Minister of Health, Province of Ontario)

☆ ☆ ☆

CEREMONIAL PASSING OF THE KEY

☆ ☆ ☆

O' CANADA  
I.D.C.I. Orchestra

☆ ☆ ☆

OFFICIAL OPENING  
Mr. T. L. Wells and Mr. R. G. Start

# Acknowledgments

The hospital grants provided by

The Government of Canada and the Province of Ontario,

The Town of Ingersoll grant,

The County of Oxford grant,

and

the many contributions to the Alexandra Hospital's Building Fund  
under the chairmanship of Mr. R. G. Start  
are gratefully acknowledged.

☆ ☆ ☆

LUDWIG W. GINDL, M.R.A.I.C.

*Architect*

Prack & Prack, Associate Architects  
Structural and Mechanical Consultants

John Freeling Hunt, Design Supervisor  
Eaton's Design Group Interior Consultant

Keith Little Associates Limited  
Kitchen Planning Consultants

Quist and Associates  
Electrical Consultants

☆ ☆ ☆

THE JOHN HAYMAN AND SONS COMPANY LIMITED

*General Contractors*

Canadian International Comstock Company Limited

*Electrical Contractors*

King Plumbing and Heating Limited

*Plumbing, Heating and Air-Conditioning Contractors*

☆ ☆ ☆

The Alexandra Hospital is also indebted to the staff  
of the Ontario Hospital Service Commission  
for their co-operation and assistance in planning the new hospital.

# Donations

## Building Account

### APRIL / 69

Ingersoll District Community Services Association (raised by walkathon by Young People) .....	\$ 1,548.62
Woodstock Lodge No. 1141, Loyal Order of the Moose	200.00

### MAY / 69

Alexandra Hospital Auxiliary .....	3,000.00
St. Paul's Presbyterian Fun Fellowship (Young People) ..	365.00

### JUNE / 69

Women of the Moose, Woodstock Chapter No. 1012 ..	50.00
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### JULY / 69

Women of the Moose, Woodstock Chapter No. 1012 ..	150.00
Dr. Charles C. Cornish Jr., Chapter I.O.D.E. ....	529.00

### SEPTEMBER / 69

Avalon Chapter Order of Eastern Star .....	200.00
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### DECEMBER / 69

Alexandra Hospital Auxiliary .....	1,500.00
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### FEBRUARY / 70

Ingersoll Lions Club .....	6,000.00
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### MARCH / 70

Norsworthy Chapter I.O.D.E. ....	250.00
Red Cross Youth I.D.C.I. ....	150.00

### APRIL / 70

Kiwanis Club of Ingersoll .....	5,000.00
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### MAY / 70

Mr. and Mrs. F. H. Stone .....	1,000.00
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\$19,942.62



## Remarks by the Architect

When the commission was requested to expand the existing facilities, the services for the wards were so inadequate that it was necessary to design complete replacement, rather than, add to the existing, thus avoiding compromise of the new by adding to the old.

It was necessary to increase Emergency, Radiology, Laboratories, Physiotherapy, Pharmacy, Dietary, the Department of Supply, Processing and Distribution and add Occupational Therapy. A new Power Plant was necessary. Through re-location of the above services into the new building, areas in the existing building were freed to add Autopsy facilities and expand Laundry, Locker Rooms, Cafeteria, Maintenance Shops, Medical Records, Administrative Offices, Teaching Rooms, Obstetrics, and update the Operating Room Suite.

To provide maximum administrative efficiency and labour utilization, use was made of the most up-to-date audio visual nurses call system and intercommunications equipment linking all departments, including pocket paging for day personnel and surveillance camera on the main entrance, for the night staff.

We have exercised every facility justifiable in relationship to the size of the hospital, to reduce the workload in the planning of the hospital with a view to curtailing the ever increasing labour charges and its increasing percentage of the total operating expense.

One stipulation the owner attached to the commission was, that the hospital be expandable to 500 beds in different stages, depending on the growth of the Town and its surrounding area. This necessitated a master plan for future expansion, without which no hospital should be built.

All footings in the wing are capable of carrying up to seven storeys. The substructure of the addition is reinforced concrete, floor slabs are of rib and tile construction. The outside walls consist of 8 $\frac{1}{2}$ " brick, partially cantilevered with 2" insulation and lath and plaster. Partition walls are of clay tile, plastered. At the ground floor all walls, including outside walls are of concrete block, to facilitate changes, if and when needed.

The interior walls, with the exception of corridors, washrooms and service areas like Operating Rooms, Obstetrics, Kitchen etc., are painted. Use has been made of elastomeric thermo-plastic and two component elastomeric coatings in the latter areas, such eliminating joints etc., (which could develop into breeding grounds for bacteria.) Monolithic Neoprene composition flooring, Conductive Neoprene terrazzo and

ceramic coated quartz epoxy flooring, has been used out of similar considerations. The use of vinyl asbestos flooring for the balance of the building was dictated by economic factors. In entrance areas carpet was used to cut down on tracking-in of dirt from the outside.

Ceilings are basically plaster painted, with the exception of corridors and the administrative area, where fire proof acoustic tiles were utilized.

Fullspectrum fluorescent bulbs are used in Operating Rooms and Nurseries, to cut infection possibilities. The light level throughout the hospital conforms to recommended standards for this type of construction.

Colours have been kept bright and pleasant to avoid an institutional atmosphere.

Harmonious operation, such as was found in this hospital, was a concerted team effort on the part of the Board of Governors, represented by the Administrator, the Contractor and his Sub-contractors and last but not least by the O.H.S.C. and their Consultants.

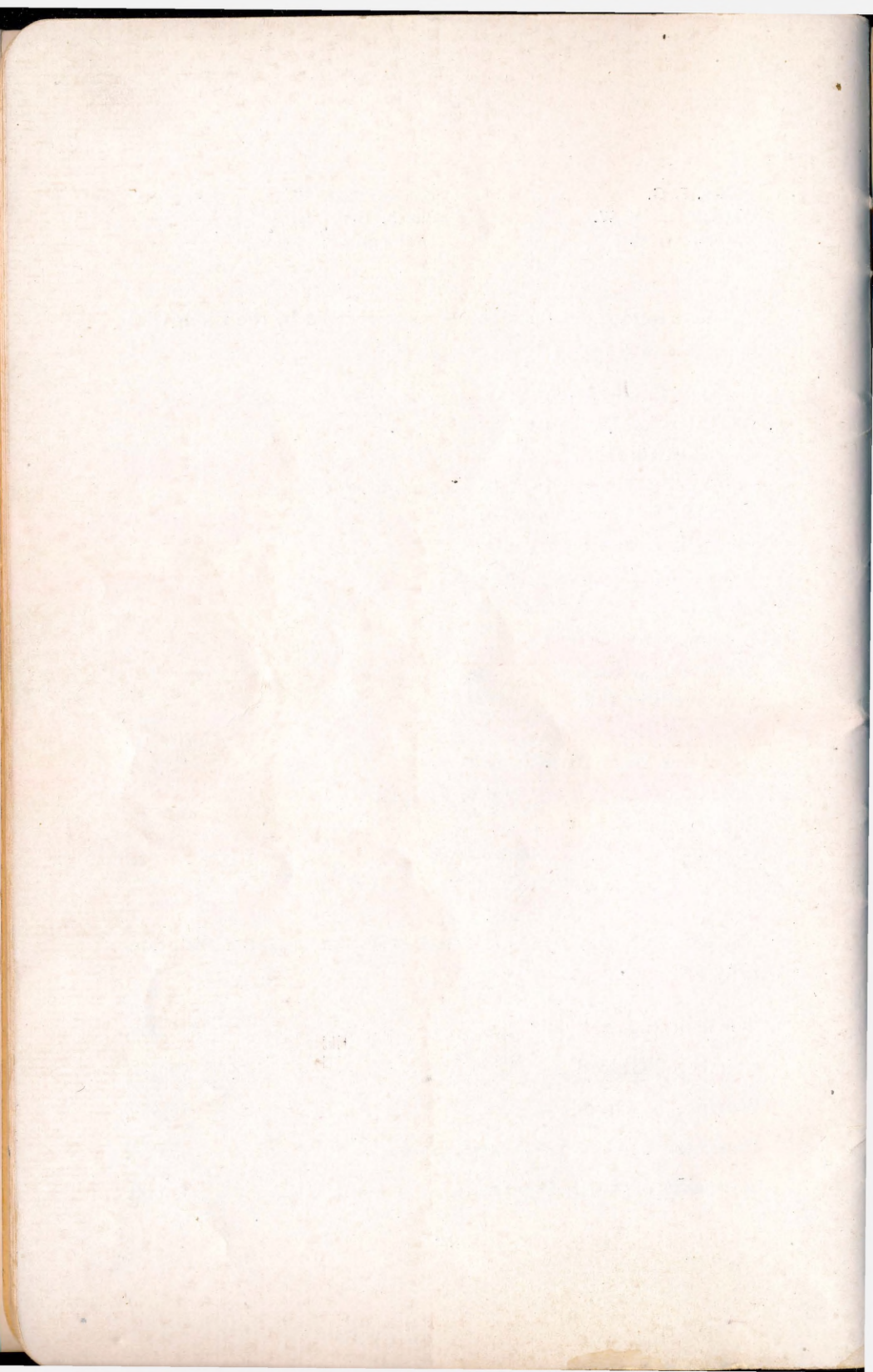
I am indebted to all, and to them go my sincere thanks.

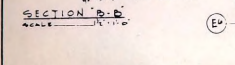
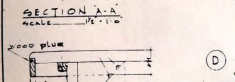
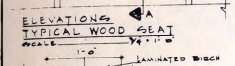
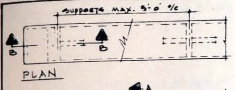
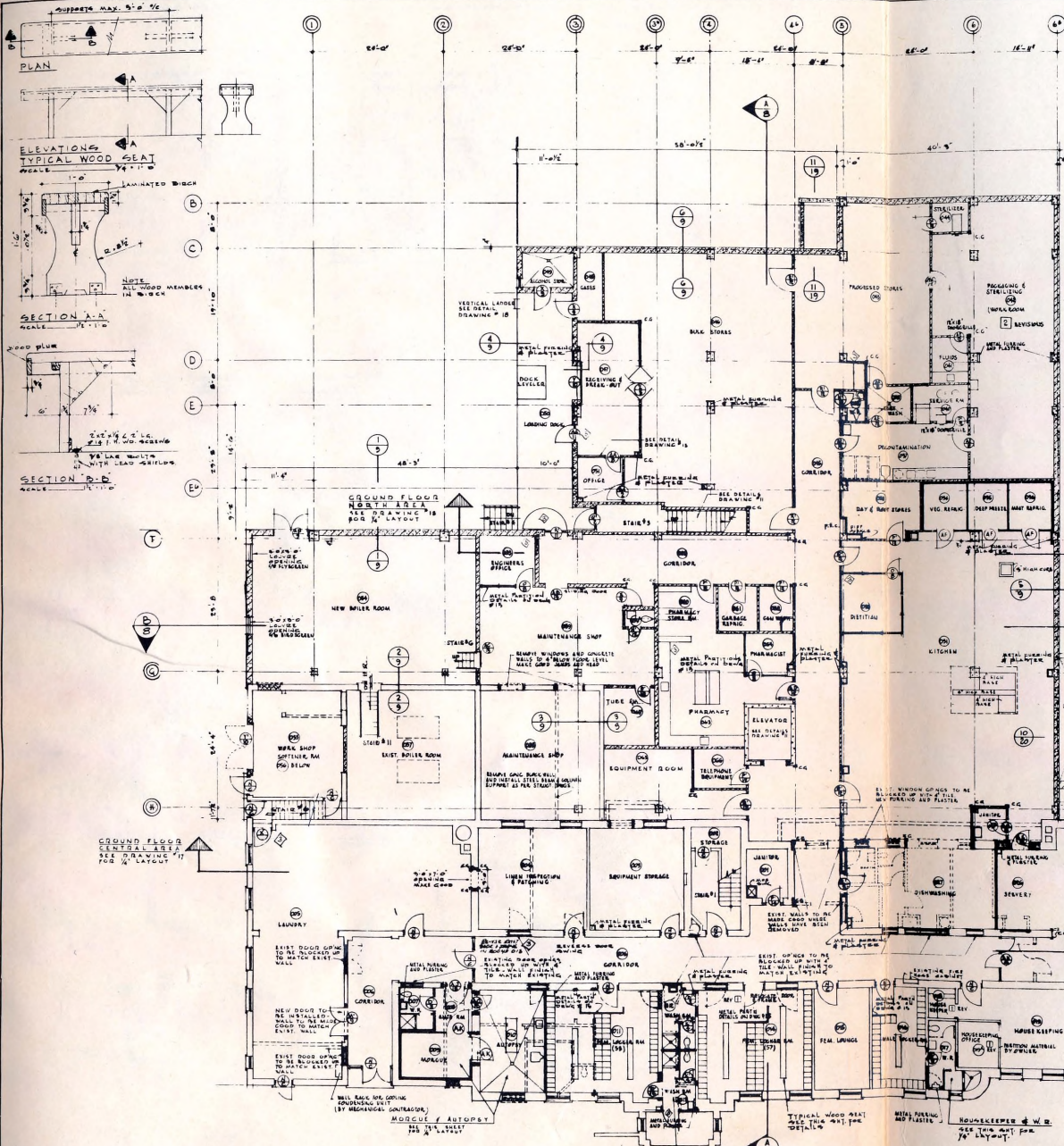
LUDWIG W. GINDL, M.R.A.I.C.  
*Hospital Architect.*

# The Master Plan of Alexandra Hospital

These are the floor plans of the Hospital's expanded facilities and renovations:

Detailed graphic illustrations starting with the ground floor, first floor, second floor, and third floor. The floor plans illustrate the function of each room, size, and location, whether it is for patient or treatment, for your information.

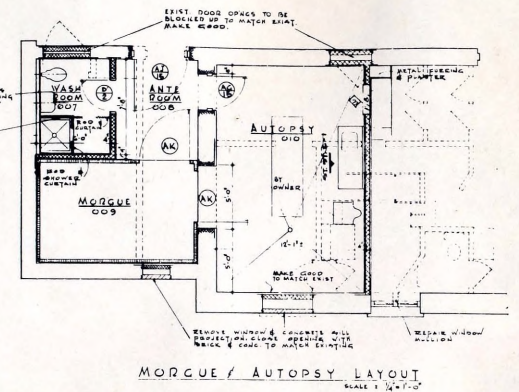




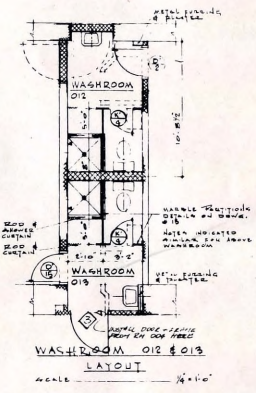
SCALE 1/8" = 1'-0"

- SEE FINISH SCHEDULE FOR ADDITIONAL INFORMATION
- SEE CONDITIONS SUPPLY SPEC. SEE TO BE REMOVED AND/OR ELIMINATED
- E.G. OPERATIONS AS DETAILED ON DWG'S 14
- SEE ALL PLANS - SEE DRAWINGS IT AND 14
- EXPANSION JOINT DETAILS ON DWG'S 14 & 15 - FIRE WIRE CABINET

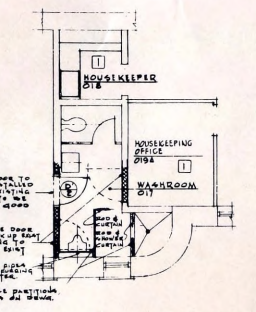
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- SEP 28/66 HAS 07-10-09A
- NOV 15/66 SEE ACC A-2



MORQUE / AUTOPSY LAYOUT  
SCALE 1/4" = 1'-0"



WASHROOM LAYOUT  
SCALE 1/4" = 1'-0"

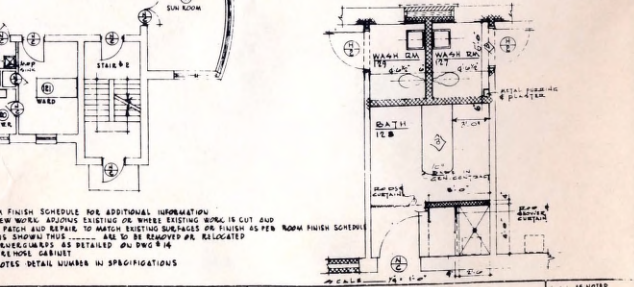
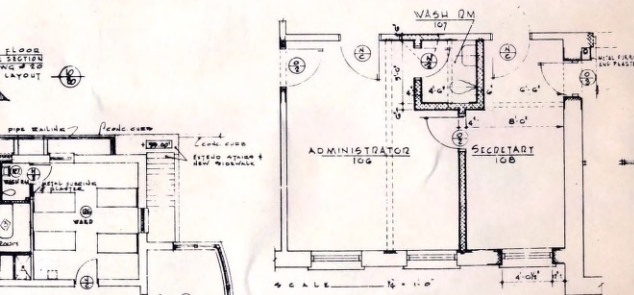
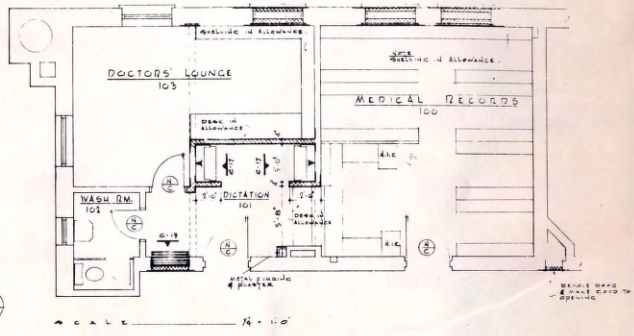
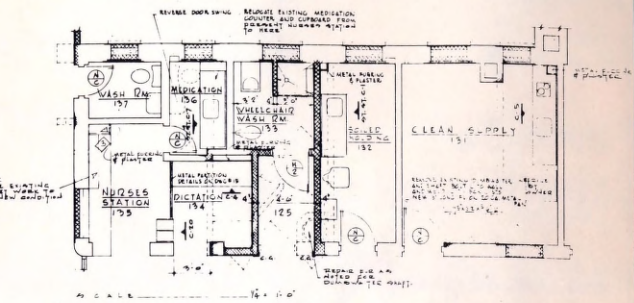
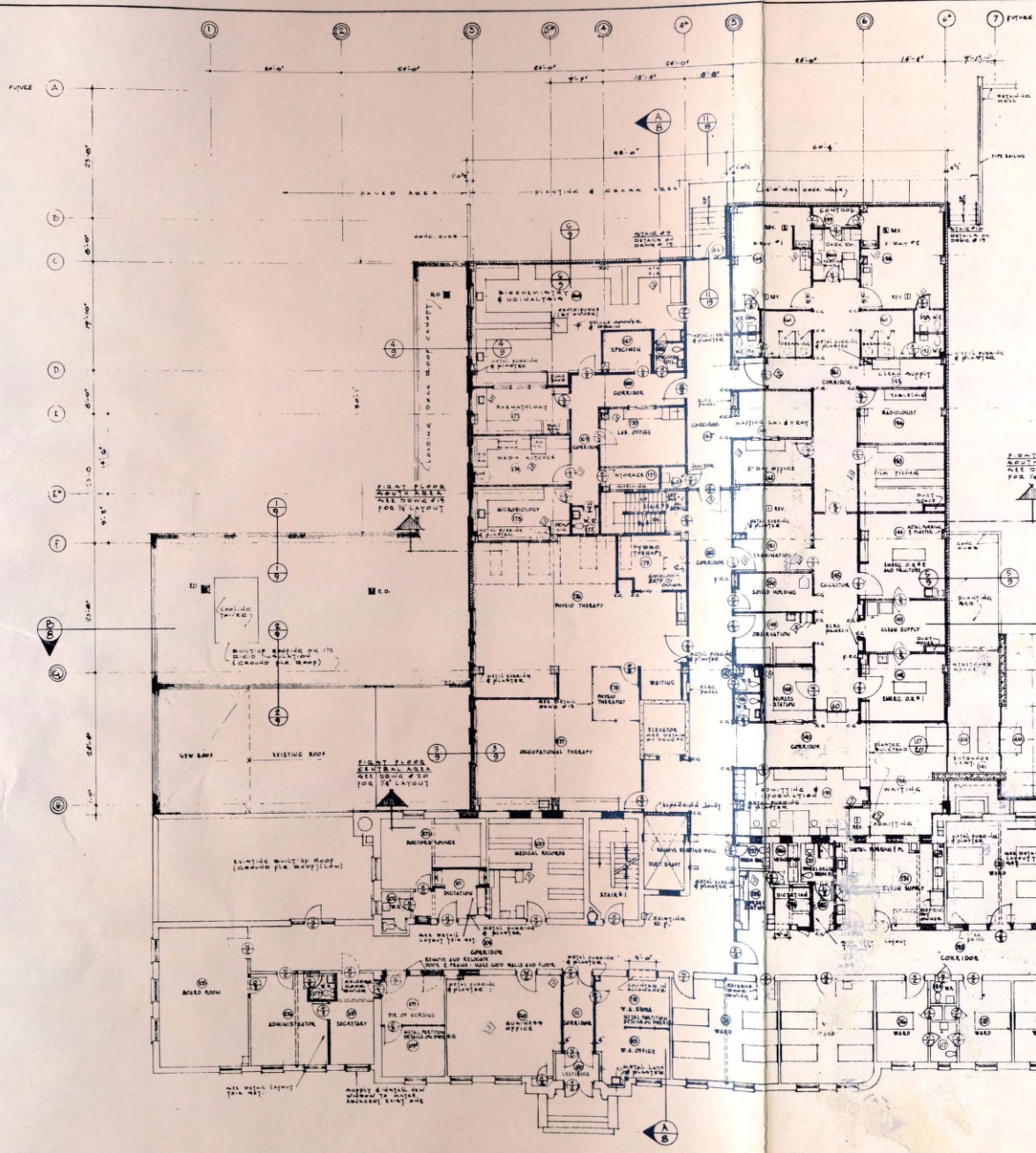


HOUSEKEEPER & WASHROOM LAYOUT  
SCALE 1/4" = 1'-0"

ALTERATIONS & ADDITIONS  
TO  
ALEXANDRA HOSPITAL, INGERSOLL, ONTARIO  
LUDWIG W. BINDL ARCHITECT BLAIR, ONTARIO  
PRACK & PRACK ARCHITECTS & ENGINEERS MILTON, ONTARIO  
ASSOCIATE ARCHITECTS

AS NOTED  
JULY 23/1966  
1890

GROUND FLOOR



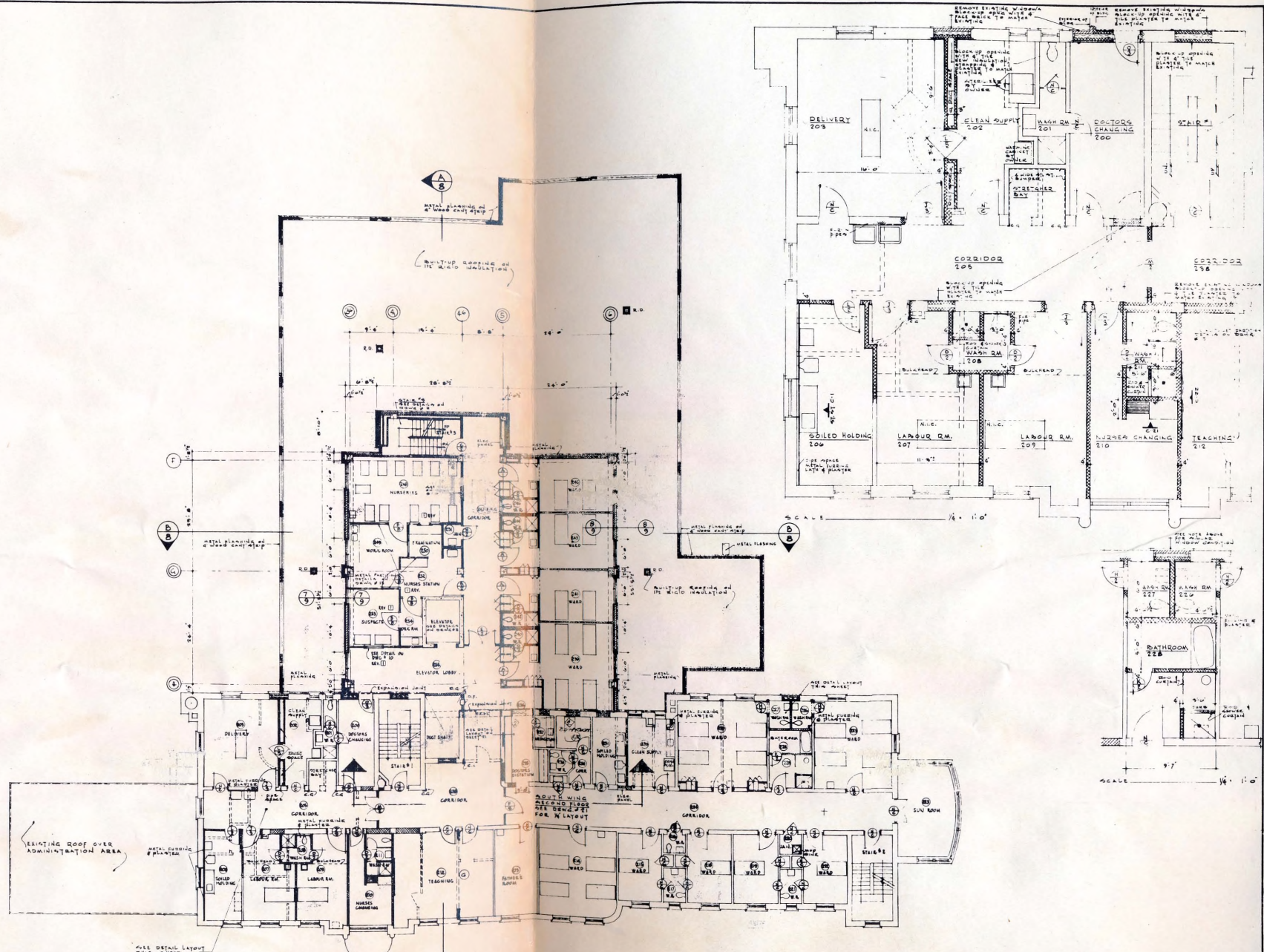
- SEE ROOM FINISH SCHEDULE FOR ADDITIONAL INFORMATION
- WHERE NEW WORK ADJACENT EXISTING OR WHERE EXISTING WORK IS CUT OUT AND CHANGED, PATCH AND REPAIRS TO MATCH EXISTING SURFACES OR FINISH AS PER ROOM FINISH SCHEDULE
- CONDITIONS SHOWN THIS DATE TO BE RECAPTURED AS RELOCATED
- C.G. - CONCRETEWORK AS DETAILLED ON DWG. 1-1
- F.H.C. - FIREHOLE CABINET
- DETAILS DETAIL NUMBER IN SPECIFICATIONS

NO.	DATE	REVISION
1	SEPT 20/48	RMS (SI) 104-106 104, 105, 106
2	DECEMBER 1948	ENG 104, 104 & 106
3	APRIL 1949	ENG 104, 104 & 106



ALTERATIONS & ADDITIONS  
TO  
ALEXANDRA HOSPITAL, INGERSOLL, ONTARIO  
LUDWIG W. SINDL ARCHITECT BLAIR, ONTARIO  
PRACK & PRACK ARCHITECTS & ENGINEERS HAMILTON, ONTARIO  
ASSOCIATE ARCHITECTS

AS NOTED  
DATE  
JULY 23/1958  
1890



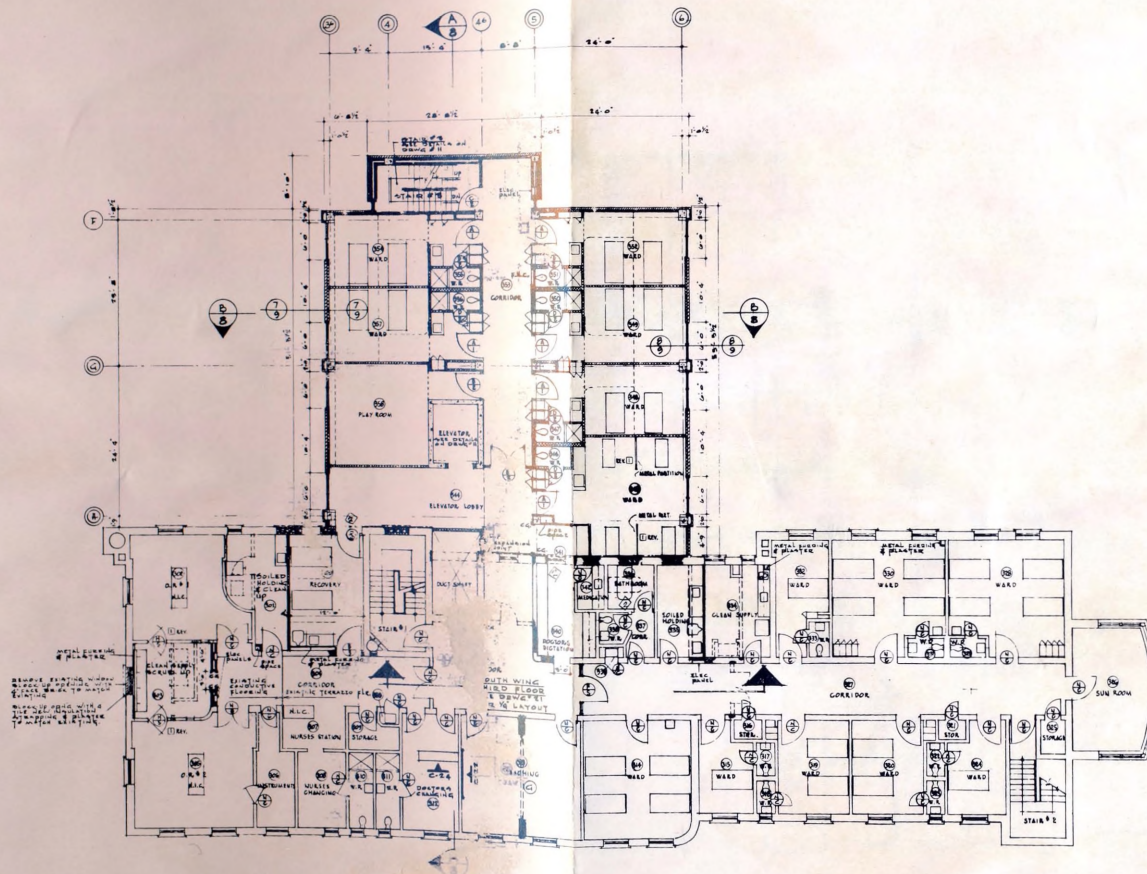
- SEE ROOM FINISH SCHEDULE FOR ADDITIONAL INFORMATION
- BRICKS: USE WORK EXISTING EXCEPT WHERE EXISTING WORK IS CUT AND DAMAGED; PATCH AND REPAIR TO MATCH EXISTING SURFACES OR FINISH AS PER ROOM FINISH SCHEDULE
- GROUT: SHOWS THIS ... ARE TO BE REMOVED OR RELOCATED
- C.C. CORNER GUARDS AS DETAILED ON DWG. 8 & 9
- R.H.C. FLEX HOSE CASSET
- PENOTES: DETAIL NUMBER IN SPECIFICATIONS

NO.	DATE	REVISIONS
1	11/27/50	ENG. 408, 409, 450, 455, 454
2	1/27/51	SEE CONC. # 4-12



ALTERATIONS & ADDITIONS  
 TO  
 ALEXANDRA HOSPITAL, INGERSOLL, ONTARIO  
 LUDWIG W. SINTEL ARCHITECT & ENGINEER, HAMILTON, ONTARIO  
 FRANK & FRANK ARCHITECTS & ENGINEERS ASSOCIATE ARCHITECTS

SCALE AS USED	DATE
AS USED	JULY 23/1948
	1990



SCALE 1/8" = 1'-0"

- SEE ROOM FINISH SCHEDULE FOR ADDITIONAL INFORMATION.
- WHERE NEW WORK ADJOINS EXISTING OR WHERE EXISTING WORK IS CUT AND DAMAGED, PATCH AND REPAIR TO MATCH EXISTING SURFACES, OR FINISH AS PER ROOM FINISH SCHEDULE.
- DIMENSIONS SHOWN THIS PLAN ARE TO BE RAMPED OR ELONGATED.
- E.G. CORNERCABS AS DETAILED ON DWG 116.
- P.H.C. FIRE HOSE CABINET.

NO.	DATE	REVISIONS
1	1968	REVISED TO SHOW CHANGES
2	1968	REVISED TO SHOW CHANGES
3	1968	REVISED TO SHOW CHANGES
4	1968	REVISED TO SHOW CHANGES
5	1968	REVISED TO SHOW CHANGES



ALTERATIONS & ADDITIONS  
TO  
ALEXANDRA HOSPITAL, INGERSOLL, ONTARIO  
LUDWIG W. BINDL ARCHITECT BLAIR, ONTARIO  
PRACK & PRACK ARCHITECTS & ENGINEERS HAMILTON, ONTARIO  
ASSOCIATE ARCHITECTS

25 NOTED  
JULY 25, 1968  
1890  
5.

THIRD FLOOR