

**MARYLAND HISTORICAL TRUST
DETERMINATION OF ELIGIBILITY FORM**

NR Eligible: yes no

Property Name: Johns Hopkins Bayview Hospital Campus Inventory Number: B-5176
 Address: 4940, 5100, 5520, 5550 Eastern Ave. Historic district: yes no
 City: Baltimore Zip Code: 21224 County: Baltimore City
 USGS Quadrangle(s): Baltimore East
 Property Owner: FSK Land Corporation Tax Account ID Number: 26176332014
 Tax Map Parcel Number(s): _____ Tax Map Number: 26
 Project: Red Line Transit Study - Bayview Extension Agency: MTA
 Agency Prepared By: John Milner Associates, Inc.
 Preparer's Name: Katherine Farnham Date Prepared: 2/8/2010
4/15/2011, REVISED
 Documentation is presented in See sources below.
 Preparer's Eligibility Recommendation Eligibility recommended Eligibility not recommended
 Criteria: A B C D Considerations: A B C D E F G
Complete if the property is a contributing or non-contributing resource to a NR district/property
 Name of the District/Property: _____
 Inventory Number: _____ Eligible: yes no Listed: yes no
 Site visit by MHT Staff yes no Name: _____ Date: _____

Description of Property and Justification: *(Please attach map and photo)*

The Johns Hopkins Bayview Hospital Campus (currently known as the Johns Hopkins Bayview Medical Center) is a large hospital campus that contains several historic buildings amid modern facilities. The historic buildings date from the 1860s to the 1950s, and include hospital buildings and an early twentieth century power plant. Three stages of historic construction remain extant: the renovated remains of the original 1860s asylum; a 1930s Art Deco group of hospital buildings and two service structures; and 1950s new construction and renovations. Large modern pavilions surround the remaining older facilities. The hillside campus has a system of curving roads, surface lots, and parking garages. The front lawns of the campus slope toward the south, forming a park-like green space with a pond along the north side of Eastern Ave. The campus abuts the sunken I-895 expressway on the west and the Bayview residential neighborhood on the east. Lombard St. forms the northern boundary.

Johns Hopkins Bayview Medical Center is a descendant of Baltimore's first almshouse, established in 1773 on 20 acres at what was then the city outskirts (land bounded by Eutaw, Biddle, Madison and Linden Sts.). In this time period, almshouses sheltered people of all ages and a variety of social ills. The Baltimore Almshouse took in petty criminals, alcoholics, foundlings, the elderly, the mentally ill, the indigent, and the homeless. Residents were treated more as inmates than patients, and warehoused more than cared for. It was also a workhouse where convicted criminals were forced to work for their keep and support the

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MHT Comments:

John J. [Signature]
 Reviewer, Office of Preservation Services

3/25/2010
 Date

[Signature]
 Reviewer, National Register Program

6/16/10; 6/19/2012
 Date

institution through their labor. As with most early almshouses, it evolved into a hospital as new institutions, such as prisons and orphanages, were created to house certain population groups. Unlike many institutions of this period, the almshouse had trained doctors on staff from its inception, drawing on the medical education available in the city. During some periods, patients were used for medical-surgical training. The first smallpox inoculation in Maryland occurred there in 1801. Still, patients frequently died of disease, especially infants, and this state of affairs would continue for decades.

In 1822, the Baltimore Almshouse facility moved to the former Calverton estate in what is now West Baltimore, and occupied land bounded by Franklin, Presstman, Lexington, and Pulaski Sts. Its population was primarily alcoholics and those suffering from contagious diseases like cholera. Dr. William Power became the resident physician in 1840 and was credited with introducing scientific medicine in Baltimore, but medical care at Calverton was largely delegated to medical students. In 1853, Baltimore City was separated from Baltimore County, and growth again pushed the almshouse further from the city center. In 1862, Baltimore City passed an ordinance to purchase 46 acres of vacant land from the Canton Company for a new almshouse.

The new property was on a hilltop in Baltimore County, east of the city limits, and later acquisitions expanded the campus area to 240 acres. Following the initial purchase, the city constructed a new three-story brick main building at a cost of \$500,000 and named the new campus the Baltimore Bay View Asylum. The massive side-gabled building had a neoclassical appearance with symmetrical wings flanking a domed central pavilion with a columned front. End buildings were connected to the central building with one-story hyphens, which later became two-story sunporches, and there was a central service wing off the back. The lantern of the large blue dome was said to be a landmark for ships traveling the Patapsco. The building's interiors were divided into large, high-ceilinged wards, which was standard design for institutions of the period but gave inhabitants little privacy.

The first residents moved to Baltimore Bay View Asylum in 1866, and the annual population was typically 700-800 people initially. The institution cared for the mentally ill, patients with chronic health conditions, unemployed men, the indigent, and the elderly. Unlike other hospitals, Bay View accepted African American patients, but they were segregated in separate areas. The residents of the institution were now considered to be patients rather than inmates. The admission of a significant population of the mentally ill gave Bay View Asylum a prevailing reputation as an insane asylum. Health conditions at the new asylum were better than at Calverton due to the new facilities and increased knowledge of sanitary medical practices learned from battlefield medical treatment during Civil War. Still, complaints were made about living conditions in the buildings and the patient population grew as time went on, resulting in increased crowding. New buildings were added to house insane women and African-American patients. A farm and dairy herd on campus provided food for the institution and served as a workhouse for able-bodied residents. The farm was located on the northern part of the property and eventually covered 140 acres.

The Bay View Asylum developed an early affiliation with Johns Hopkins Medical School in the 1880s, when Bay View pathology and psychiatry cases were used to train Hopkins medical students. The 1890s saw greater involvement and oversight of Bay View Asylum staffing appointments by Johns Hopkins Medical School, the University of Maryland Medical School, and the College of Physicians and Surgeons. In 1890, Bay View established a separate ward for patients with tuberculosis, and was perhaps the first hospital in the U.S. to do so. Although there was an increasing emphasis on active medical care for ill residents, the asylum remained a dumping ground for many indigents, invalids, and petty criminals who had nowhere else to go. Chronic staff shortages resulted in lower-quality care and continued to plague the institution into the mid-1900s. Much of the treatment of patients was custodial rather than medical.

The early 1900s saw rapid development on the Bay View Asylum campus. A new tuberculosis building was added in 1904. 1911 saw construction of a new Y-shaped general hospital building (eventually the south wing of B Building). A separate infectious

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diseases building was completed by 1909. By 1913, three hospitals shared the grounds: a tuberculosis sanitarium, an acute care hospital, and a chronic care infirmary. The Infirmary (Main Building) housed the long-term asylum patients. By 1914, a modern one-story power plant had been constructed.

In 1925, the overall facility was renamed Baltimore City Hospitals, with the plural reflecting the existence of multiple hospitals on the grounds. The renaming reflected the institution's aim to establish its reputation as a hospital rather than an insane asylum. In 1929, plans were made for a major expansion intended to modernize the facilities and make the hospital a model for similar institutions throughout the nation. Winford Smith, director of Johns Hopkins Hospital, was the architectural consultant for the planning, which included a new general hospital, chronic care hospital, tuberculosis sanitarium, service building, and nurses' dormitory. The architect was Edward L. Palmer. The new brown-brick high-rise facilities would share a distinctly Art Deco style, with flat roofs, stepped pavilions, and vertical lines of windows.

Edward Palmer, a local Baltimore architect, began working in Baltimore for the Roland Park Company, where he served as resident architect from 1907 to 1917. With his firm, Palmer and Lamdin, Palmer later designed other Moderne buildings in the city, including a small commercial building at 1020 Saint Paul Street in 1938, and a residence at 333-335 Belvedere Avenue in 1939.

At the time of the new hospital buildings' construction, the popularity of the Art Deco style was near its peak in the United States. The style was defined by an emphasis on verticality with bold geometry and dynamic ornament. Drama was created through the use of chevrons, zigzags, sunbursts, and other angular designs. By 1931, buildings recently completed or under construction included the Empire State Building and the Chrysler Building in New York, and the Guardian Building in Detroit. Baltimore's most prominent Art Deco building, the Bank of America Building at East Baltimore and Light streets, was completed in 1929. Other Art Deco designs in Baltimore include the 1932 former Hutzler Brothers Department Store at 212 North Howard Street; 301 North Charles Street, constructed in 1930; and the University of Maryland Medical Center, completed in 1934.

Like many Art Deco designs, the new Baltimore City Hospitals buildings demonstrated the influence of other architectural movements, including the clean lines of stripped Classicism and the monumentality of Italian Futurism. The buildings were less opulent than other examples in the city and represented a severity and simplicity not seen in Baltimore's commercial Art Deco examples. The buildings' verticality was emphasized through lines of windows, and angular decorative motifs adorned the entrances and spandrel panels.

The first building constructed as part of the hospital expansion plan, the 10-story Nurses' Home, was completed in 1931. Along with over 100 single rooms, it had lounges, a library, a combination auditorium-gymnasium with elaborate Art Deco detailing, and a bowling alley. In 1935, a six-story 450-bed general hospital (A Building) and six-story chronic hospital (B Building) opened. The A Building had two prominent towers and was the main hospital building as seen when approaching from a new driveway and entrance gate on Anglesea St. The B Building was appended to the north end of the Y-shaped medical-surgical building from 1911, which subsequently was known as the south wing of B Building. Although the wards were much smaller than in the old buildings, curtains around each bed provided a degree of privacy, and the facilities were fully modern.

The new hospital buildings were dedicated in April 1935 in a ceremony presided by former Maryland governor Albert Ritchie. Mayor Howard Jackson and others spoke to a seated crowd of over 1,000 as hospital employees viewed the dedication from the windows of the hospital building and the Nurses' Home. Speakers heralded the new facilities as a milestone in public health and a testament to the ability of Baltimore to provide appropriate care for the sick and needy, citing the progress made since the

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hospital's role as a crowded asylum.

A new three-story tuberculosis sanitarium was completed in 1937. A worker dormitory, new laundry, and a larger power plant were completed during this period, and the overall capacity of the institution reached 3,000. Meanwhile, the dairy farm on the campus was improved with a new pasteurization and bottling plant.

Despite the new facilities, the hospital suffered from a lack of nurses and other personnel, and the new buildings were not fully occupied by patients for some time. In the meantime, due to a city charter revision, hospital oversight was delegated in 1934 to the newly created Department of Public Welfare. Mental-health admissions were phased out during this decade as well, though the almshouse function remained. Still, the hospital was firmly on a course towards modern medicine rather than custodial care.

A number of changes occurred in the wake of World War II. The campus dairy herd was deemed too costly and eliminated in 1948. A new four-story, H-shaped tuberculosis annex was opened in 1953, attached to the west side of the 1937 tuberculosis building. By now, the 1860s almshouse, also known as the Infirmary, was overcrowded, decrepit, and obsolete. Conditions had declined there for decades, and crowding was a perennial issue. Despite the movement of many chronic patients to B Building in the 1930s, the longtime asylum population of elderly and indigent residents remained in the Infirmary, with many enduring dampness, crumbling plaster and windowless basement rooms. The vast wards with 20' ceilings were packed with rows of beds and afforded the residents almost no personal space or privacy. Under the dome was a chapel, furnished with shabby bench seats salvaged from old streetcars.

In 1953-1954, the hospital began a full renovation of the Infirmary Building. While the original deep brick exterior walls were retained, the interior was gutted, the dome removed, and the floor levels reconfigured with lower ceilings so that five stories would fit within the space that had formerly held three. The work entailed raising the original gabled half-story roofline to create a full flat-roofed top floor. The original tall windows were removed to form vertical bays of shorter windows corresponding to the new floor levels. In place of the massive dome, the designers constructed a square, modern central tower and reused the original weathervane at the top of the pyramidal roof. The former inset sun-porch hyphen areas on either side of the central block were filled in and renovated as bay-windowed solariums. The modernized building, now nearly unrecognizable, was renamed the Mason F. Lord Building in honor of Mason F. Lord, the chief of chronic and community medicine, who died in 1965. The original 1860s neoclassical rear service wing on the north side of the Lord Building was retained with its original exterior mostly intact, and now illustrates the contrast between the former historic appearance and the modern appearance of the Lord Building.

In 1964, the City of Baltimore authorized the separation of the Baltimore City Hospitals from the Department of Welfare, spelling an end to the institution's welfare orientation. The 1935 General Hospital Building received a modern acute care addition in 1965. This three-story beige brick annex was appended to the original south front of the 1935 building, altering its appearance by obscuring its primary facade and closing off its main entrance. A complex of twelve small two-story apartment buildings for employees was built inside the loop of Nathan Shock Drive northeast of the main hospital complex. The apartment area had its own swimming pool. The flat-roofed, modernist-style buildings were apparently of inferior construction quality, and the complex was demolished around 2003. The site is now an employee parking lot.

The hospital's finances deteriorated over the next several years, suffering from a large deficit and collections/billing problems. By the early 1980s, the City of Baltimore wanted to get out of the hospital business. To eliminate the longstanding debt and upgrade the facilities, the city transferred ownership and operation of City Hospital to Johns Hopkins University in 1984. The city paid Johns Hopkins \$5.4 million to cover physical plant upgrades and repairs, and agreed to a 50-50 split of any profit from

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future development on the grounds. Johns Hopkins renamed the facility to distance it from its past reputation, and it was subsequently known as Francis Scott Key Medical Center.

As plans were made to upgrade the hospital, the local community expressed concerns about overdevelopment of the park-like grounds. The hospital worked with the community to develop a "passive urban park," consisting of a 10-acre green space along Eastern Ave., which is extant today. Master planning in 1986 called for demolition of the Mason F. Lord Building and the former Nurse's Home, as well as some smaller structures. Engineers found that the heavy construction of the Lord Building made demolition infeasible, but other components of the project eventually proceeded. Part of Phase I included demolition of the Nurses' Home, by now known as the Community Services Building and home to a nursing school, a branch of the Baltimore City Department of Social Services, and other offices. The building was dynamited in 1989, and a new road was cut through this area. The road and a small parking lot now occupy the site. Other components of Phase I included the construction of a new geriatrics facility, a new central utilities plant, and renovations of several existing buildings. The \$17.5- million Geriatrics Center opened in 1991. The concave quarter-round building was named the John R. Burton Pavilion.

Phase II of the master plan included demolition of the Y-shaped B-South wing and renovations to the original and 1967 sections of the acute hospital. Construction of a new semicircular Asthma and Allergy Center for the Johns Hopkins University School of Medicine, located immediately west of the Burton Pavilion, required demolition of the 1920s Superintendent's Residence. Construction of the Asthma and Allergy building occurred concurrently with the Triad Technology (biomedical) building, located south of the Lord Building.

A new Acute Care tower was begun in 1991, completed in 1994, and dedicated as the Francis Scott Key Pavilion. This L-shaped red-brick structure with its curved roofline wraps around the southwest corner of the 1935 General Hospital and the 1967 hospital annex.

In 1994, the boards of the Francis Scott Key Medical Services and Johns Hopkins Health Services decided to rename the facility, and it became the Johns Hopkins Bayview Medical Center. In 1999, the Bayview Medical Offices Building was completed and housed ambulatory care. This building is a four-story asymmetrical structure with a flat roof and large front canopy. Additional parking garages have been constructed as well.

At unknown dates in the hospital's history, the bodies of patients were apparently buried in at least two cemeteries or potter's fields on the grounds. No burial sites are identified on historic maps or views, and the dates and overall number of interments remain unknown. In 1961, workers found a group of human skeletons during work at the north end of the farm complex. This site is now in the vicinity of present E. Lombard St. just north of Bioscience Drive, and may have been unearthed as part of road construction. At the time, it was theorized that this site may have been a potter's field. It appears that no professional archeological investigation was conducted at the site and the overall number of burials is not known.

In the fall of 1989, grading work in preparation for the new geriatric center unearthed additional unmarked human burials at a new site in a completely different area of the campus than those found in 1961. Three historic burials were found in the Bayview Cemetery Site (18BC73), and were estimated to date to the late nineteenth to early twentieth century period. Despite investigations of the surrounding land, no more burials were unearthed and construction proceeded. This site is believed to be another potter's field from ca. 1900.

As of 2009, the hospital retains nine buildings pre-dating 1960:

1. Mason F. Lord Building (1866; renovated 1953-54).

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2. Alpha Center (ca. 1866).
3. Old Power Plant (ca. 1910).
4. Power Plant (ca. 1934).
5. A Building (1935).
6. B Building (1935).
7. Laundry (ca. 1936).
8. Behavioral Biology Research Center (1937).
9. NIDA Building (1953).

The Johns Hopkins Bayview Medical Center Campus has a long and fascinating history, and its physical appearance reflects the continued importance of the hospital over the past century. Few of the hospital's buildings have gone unaltered for any period of time, as modernization has been necessary for ongoing operation. Continual updates, expansions, and new construction have defined the Bayview location since the beginning of the twentieth century. The present campus is dominated by massive modern pavilions and parking garages constructed over the past two decades, and the streets and circulation system have changed completely. The hospital's main entrance is now located at a traffic light fronting on Eastern Avenue, and all of the smaller pre-1950 buildings standing on the campus have been demolished. A result of frequent renovation, the remaining older buildings do not all read as old, and the interspersed newer construction has given them a fragmentary character.

The Mason F. Lord Building, while retaining the imposing footprint, massing and viewpoint of the original 1860s Main Building, was heavily modernized in the 1950s and has the appearance of a 1950s building. Little evidence of its 1860s construction period can be seen. Parts of the facade were renovated again in more recent years, with some loss of integrity from the 1950s period due to full window replacements in the renovated areas. The old rear service wing, now known as the Alpha Center, retains some semblance of its 1860s appearance but has been updated with new windows and other details.

The 1930s Art Deco hospital campus has been affected by demolitions, the addition of newer buildings, and large-scale alterations to remaining individual buildings. The remaining 1930s buildings are surrounded by newer construction and large surface parking lots. The Art Deco-style gateway entrance constructed ca. 1935 still stands intact at the north end of Anglesea St., although it no longer serves as a vehicular entrance, and the vista to the A Building has been interrupted by new construction. However, the entrance remains an active part of the campus. The structure has been converted to a park-like pedestrian walkway, and the gateway still has its original Art Deco character defining features. Their original context is hard to discern, but the A and B Buildings remain relatively intact and still have many original windows and other exterior details. Although the front of A Building has been surrounded by newer additions and partly obscured by stucco panels, the original facade and main entrance have been preserved within an open courtyard formed by the 1965 acute care addition. The removal of the Y-shaped 1911 wing from the B Building left a large blank stucco-covered area on its south elevation. Otherwise, the B Building features no significant alterations and conveys most of its original character. The former Tuberculosis Building, now the Behavioral Biology Research Center, is partly surrounded by National Institute of Drug Abuse (NIDA) Building (the former tuberculosis annex constructed in 1953). Of all the surviving pre-1960 hospital buildings, the Power Plant and Laundry complex on the north side of the campus is the best preserved.

Alterations to the campus over time are typical of operating hospitals and are part of a long continuum of growth and change at the Bayview location. This continuity is expressed through the repeated improvement and rebuilding of the hospital facilities. Since the 1900s, change has been the greatest constant at the campus. The facility retains much of the original fabric constructed between 1934 and 1954, a period of rapid growth and change as the hospital took steps toward modernization. Even with the loss of the Nurses' Home and new additions to other buildings, the Johns Hopkins Bayview buildings retain enough important

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original features to convey their historic significance. The hospital's location has not changed, and new buildings and renovations at the campus between 1934 and 1954 retain a degree of integrity of design, materials, workmanship, and association. Changes to the campus since the 1950s have obscured but not eliminated significant historic design elements.

The Johns Hopkins Bayview Hospital Campus was evaluated under the National Register of Historic Places (NRHP) Criteria A, B, and C using the guidelines set forth in the NRHP Bulletin How to Apply the National Register Criteria for Evaluation.

As an institution, the Johns Hopkins Bayview Hospital has played a significant role in city health care practices over the past 250 years, and is clearly associated with the history of municipal health and welfare in Baltimore. Its progression from almshouse to modern hospital is representative of changes in public healthcare since its inception in 1773. Additions, alterations, and new construction at the hospital complex during the early and mid twentieth century reflect the hospital's success and importance in the community. Therefore the hospital is eligible under Criterion A for its association with the modernization of public care facilities in Baltimore.

Research has not shown the Johns Hopkins Bayview Hospital Campus to be associated with lives of persons significant in our past. Therefore, the campus is not eligible under Criterion B.

Despite changes to the buildings and the surrounding campus, the hospital retains some of the best examples of Art Deco architecture in Baltimore City. Among Baltimore's Art Deco designs, the 1930s Bayview Hospital buildings and entrance gate demonstrate a unique blend of influences. The opulence typical of commercial buildings is subdued, resulting in an interpretation more befitting a public institution. The buildings embody distinctive characteristics of the Art Deco style and possess high artistic value. Therefore, the Johns Hopkins Bayview Hospital Campus is eligible for listing in the NRHP under Criterion C for its significant examples of Baltimore Art Deco architecture.

The hospital campus has undergone previous archeological investigations, and it was not evaluated under NRHP Criterion D during this architectural survey.

Based on the evaluated Criteria, the Johns Hopkins Bayview Hospital Campus is eligible for listing in the NRHP with a period of significance of 1934-1954.

Sources:

Baltimore City Hospitals, Baltimore City Hospitals: Third Century of Service. Baltimore: Baltimore City Hospitals, 1973.

City of Baltimore. Baltimore City Hospitals: What It Offers You. Nurse recruitment brochure, n.d. ca. 1940s (Enoch Pratt Library Vertical Files).

Cucchiella, S. Baltimore Deco. Baltimore: Maclay & Associates, Inc., 1984.

Gelernter, Mark. A History of American Architecture. Hanover, NH: University Press of New England, 1999.

Grauer, Neil A. Centuries of Caring: The Johns Hopkins Bayview Medical Center Story. Baltimore: Johns Hopkins University Press, 2004.

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Helton, Gary. Images of America: Highlandtown. Charleston, SC: Arcadia Publishing, 2006.

Kerson, Toba Schwaber. "Almshouse to Municipal Hospital: The Baltimore Experience." Bulletin of the History of Medicine, vol. 55, pp. 203-220 (1981).

Macaulay, Stewart. "Bay View Emerging as a Medical Center." The Baltimore Sun, December 3, 1933: MS1.

Maryland Real Property Tax Database. Available online at: http://sdatcert3.resiusa.org/rp_rewrite/.

Maryland State Medical Journal, Baltimore City Hospitals Issue, vol. 4, no. 12 (December 1955).

Sanborn Fire Insurance Maps: 1902, 1914, 1928, 1936, 1951, 1953.

The Baltimore Sun. "\$680,000 Nurses' Home at Baltimore City Hospitals." August 20, 1931: 3.

The Baltimore Sun. "Accept Additions at City Hospital." December 26, 1935: 26.

The Baltimore Sun. "Hospital Building Here is Dedicated." April 29, 1935: 20.

The Baltimore Sun. "Jones Explains City Plan for New Hospital." April 6, 1929: 24.

The Baltimore Sun. "New Hospital Building Plan is Outlined." June 21, 1929: 30.

The Baltimore Sun. "Plans for New Hospital are Submitted." December 14, 1929: 22.

U.S. Census 1910, 1920, 1930.

Vertical clipping files of the Maryland Collection, Enoch Pratt Free Library.

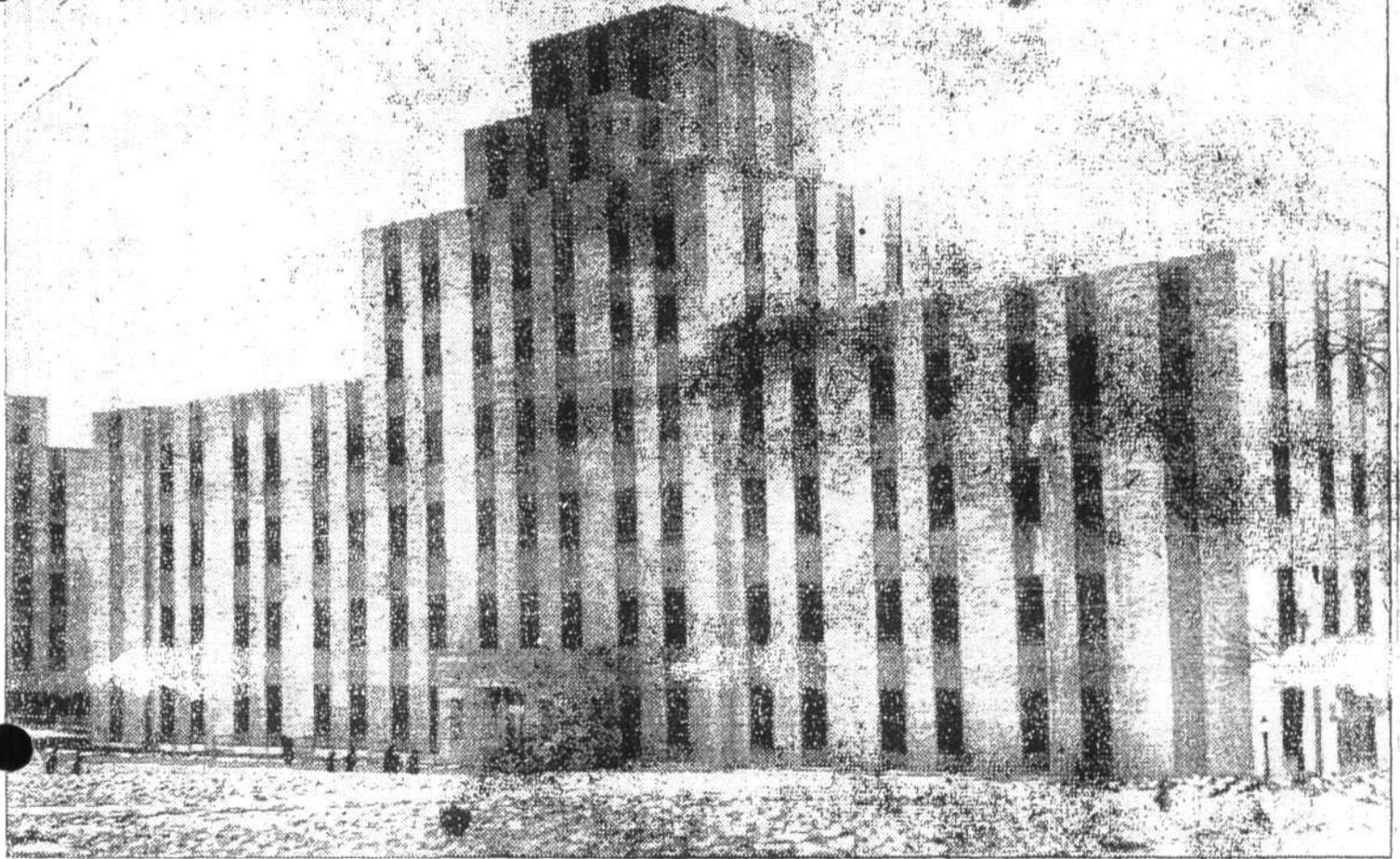
"Hospitals-Baltimore-Baltimore City Hospitals," "Hospitals-Baltimore-Bayview Asylum," "Hospitals-Baltimore-Francis Scott Key Medical Center."

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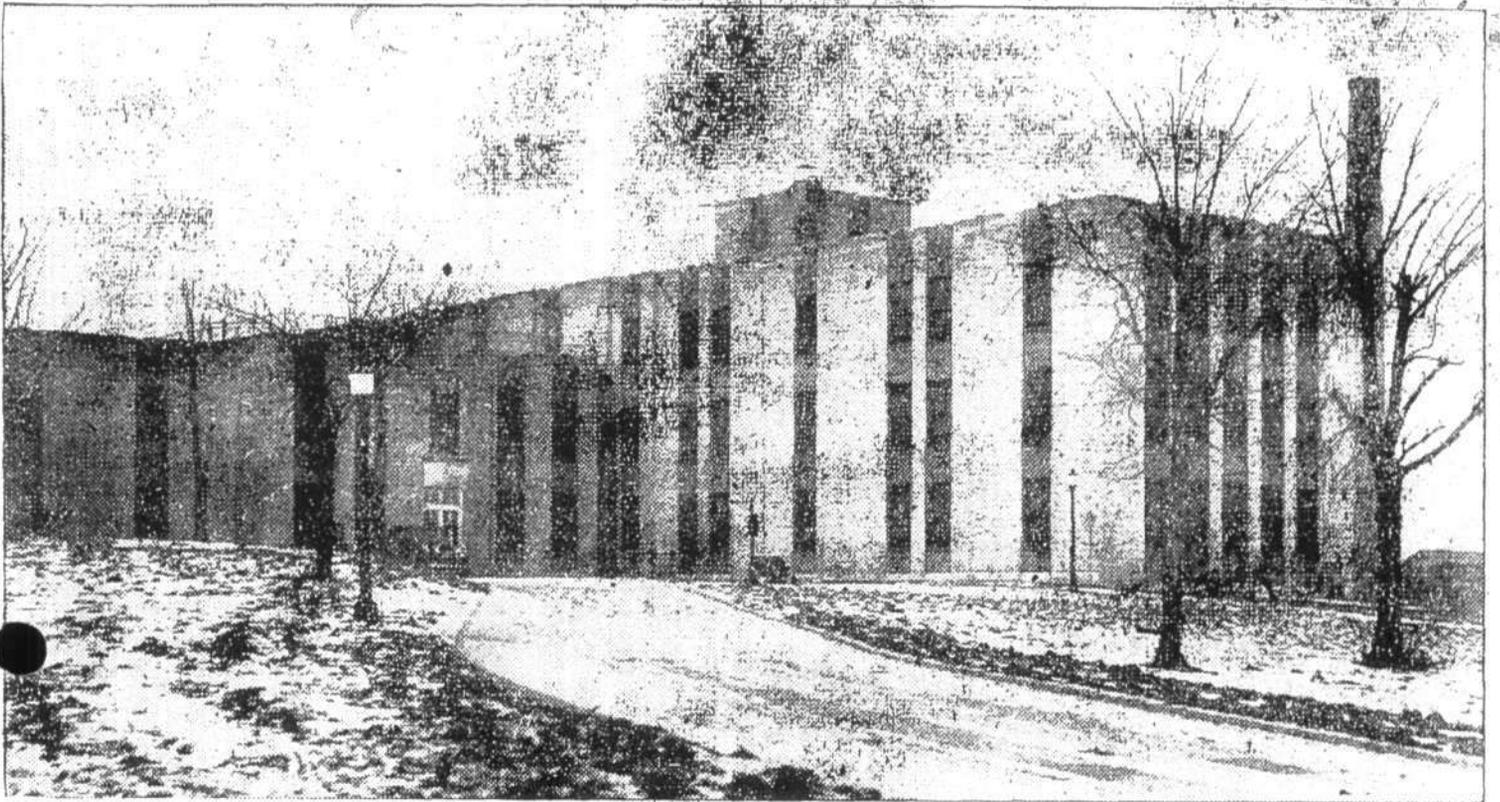
SUN

New Additions To City Hospitals Plant

DEC 29 1935



WING TO WARD A FOR CHRONIC CASES



ANNEX TO OLD TUBERCULOSIS BUILDING

Buildings at Johns Hopkins Bayview
in 1955



(NIDA + Behavioral Bio) The New Tuberculosis Division

from MARYLAND STATE MEDICAL JOURNAL
Vol. 4 # 12 December 1955



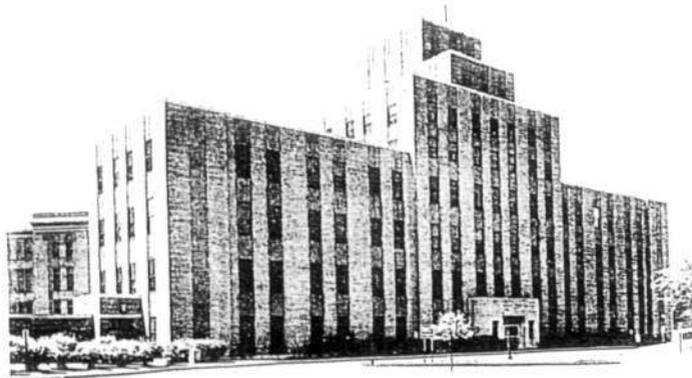
The New Infirmary Division (Mason F. Lord Bldg.)



(A Building)

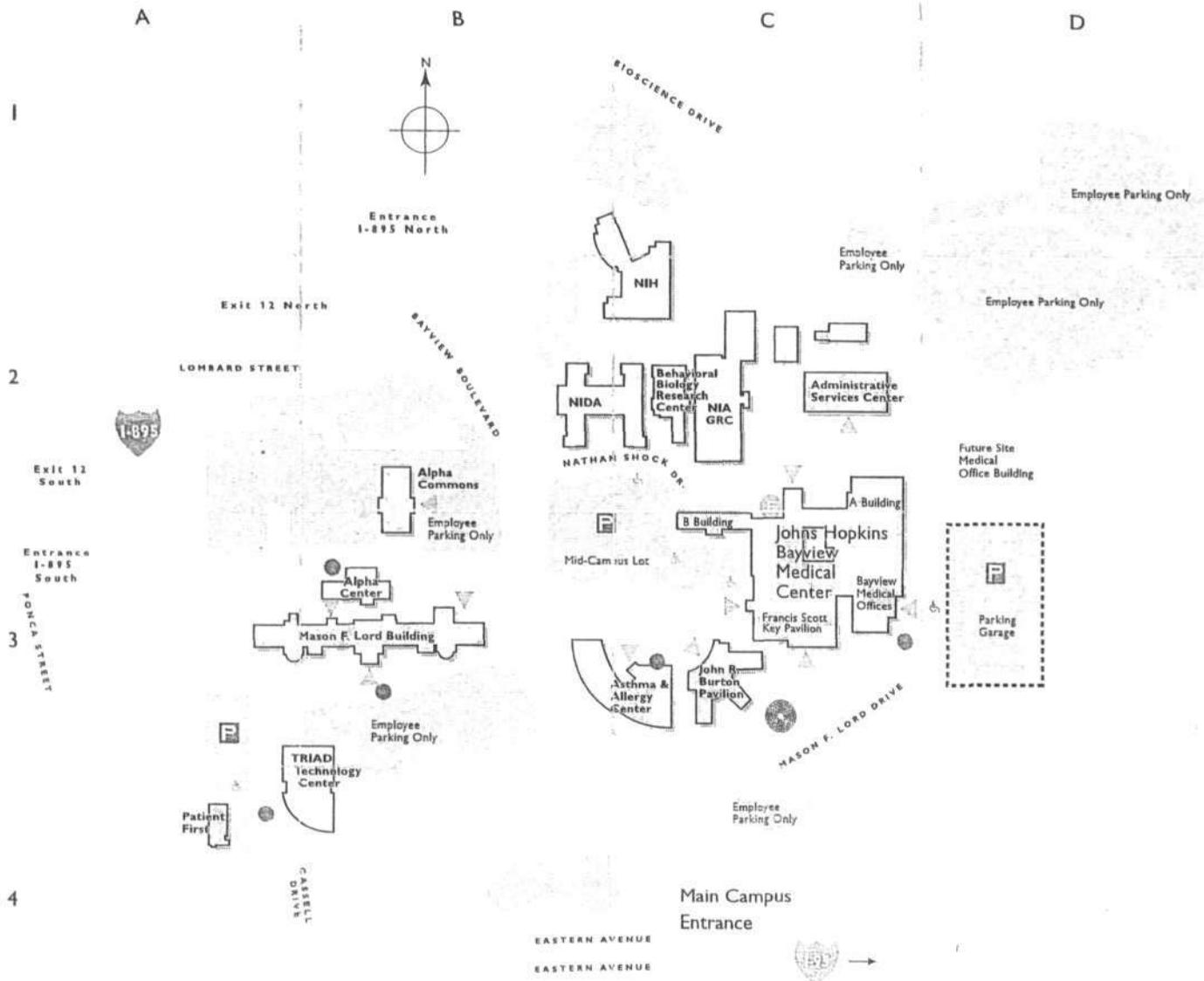
The General Hospital Out-Patient Department

The Chronic
Hospital
(B Building)



Nurses' Home (Demolished)

Johns Hopkins Bayview Medical Center Campus



PATIENT CARE AND ADMINISTRATIVE BUILDINGS

- A Building C3
- Administrative Services Center C2
- Alpha Commons B3
- Asthma & Allergy Center C3
- B Building C3
- Bayview Medical Offices C3
- Francis Scott Key Pavilion C3
- John R. Burton Pavilion C3
- Mason F. Lord Building B3

RESEARCH BUILDINGS

- Alpha Center B3
- Behavioral Biology Research Center C2
- NIA/GRC C2
- NIDA B2
- NIH C2
- TRIAD Technology Center B4

KEY

- Building Entrance
- Accessible
- Emergency
- Shuttle Bus Stop
- Parking Garage
 - Administrative Services Center
 - Bayview Medical Offices
 - Francis Scott Key Pavilion
- Mid-Campus Lot
 - Alpha Commons
 - Asthma & Allergy Center
 - B Building
 - John R. Burton Pavilion
 - Mason F. Lord Building
 - Labyrinth

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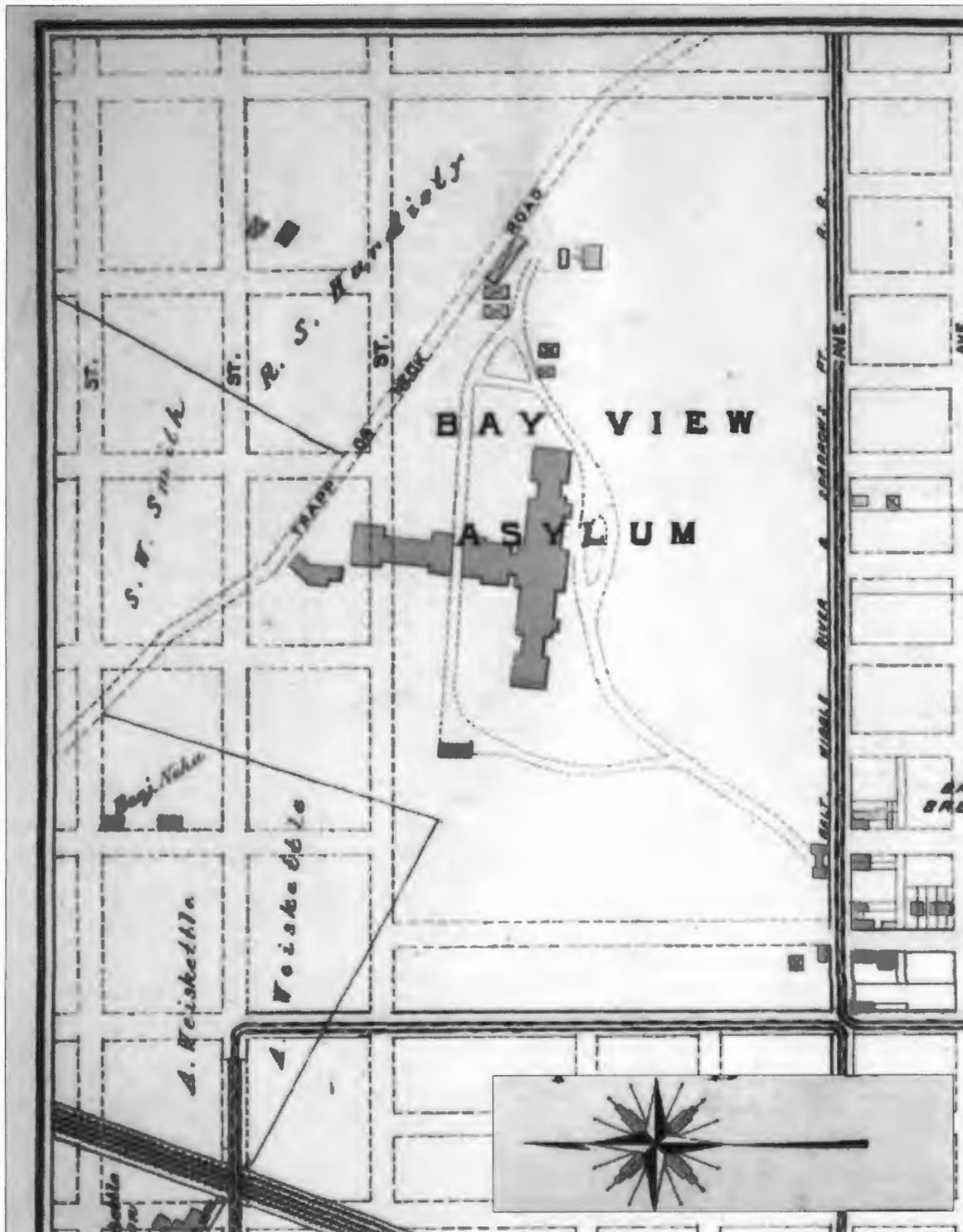
Johns Hopkins Bayview Hospital Campus (Bay View Hospital, Bay View Asylum)
4940 Eastern Avenue, Baltimore

G. W. Bromley and Co., *Atlas of Baltimore County, Maryland, 1898*

Plate 26, Canton, Twelfth District

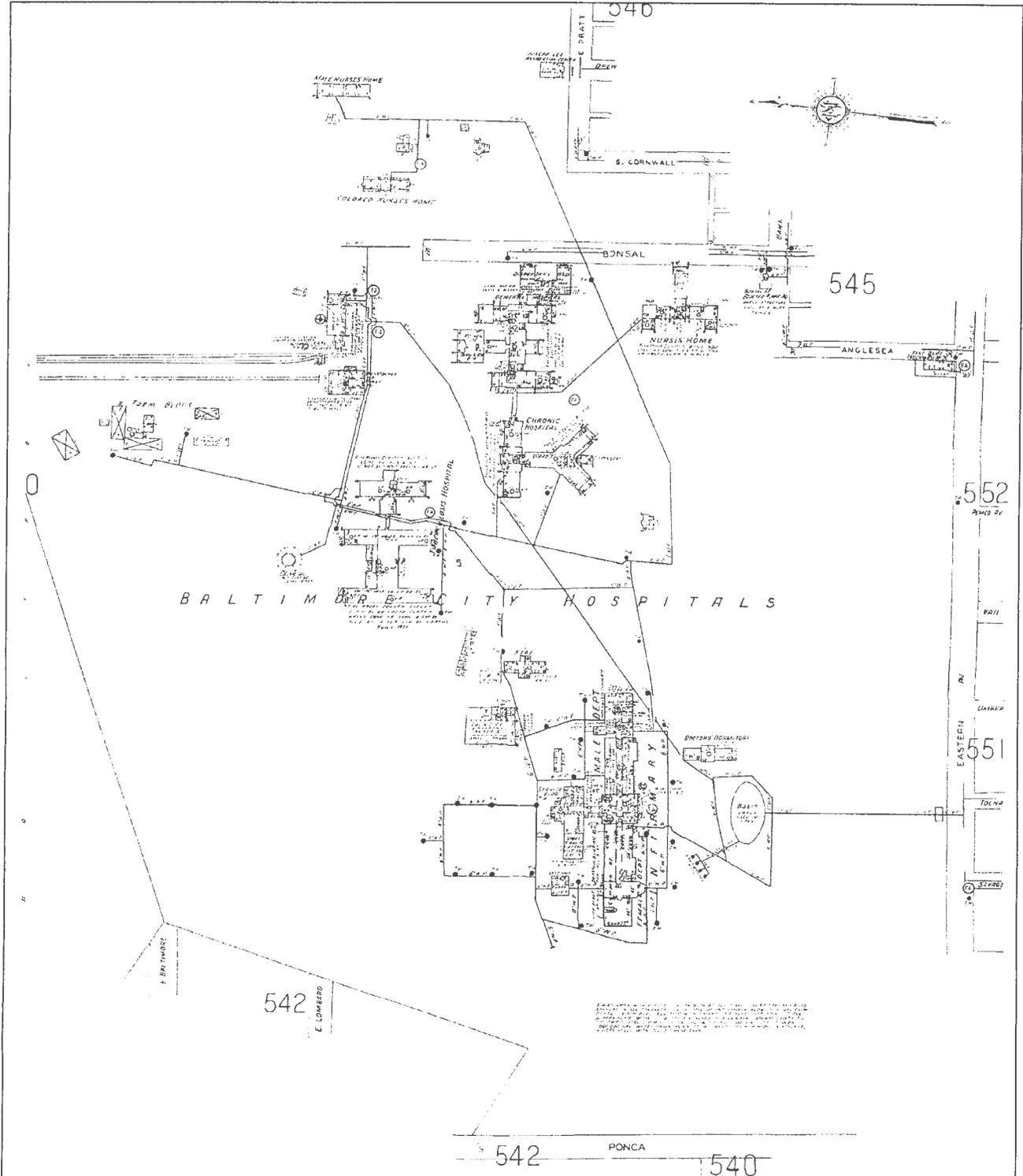
http://mdhistory.net/msaref07/bc_ba_atlases_1876_1915/html/bc_ba_atlases_1876_1915-0341.html

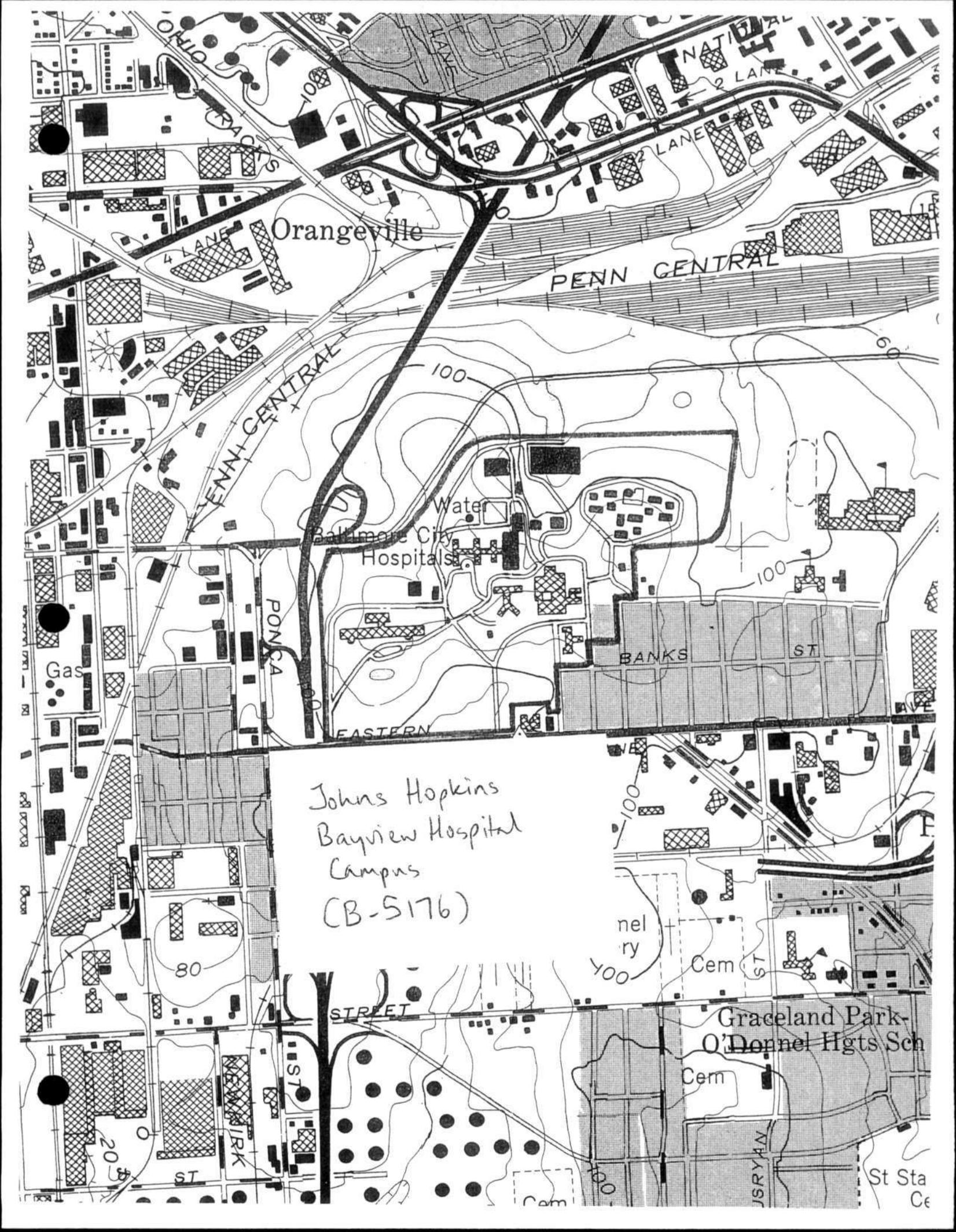
Accessed 1/14/2015



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Johns Hopkins Bayview Hospital Campus (Bay View Hospital, Bay View Asylum)
4940 Eastern Avenue, Baltimore
Sanborn Map 1936, Volume 5, Sheet 543





Orangeville

PENN CENTRAL

PENN CENTRAL

100

Water

Baltimore City
Hospitals

100

BANKS ST

PONCA

EASTERN

Johns Hopkins
Bayview Hospital
Campus
(B-5176)

100

nel
ry

Cem

80

Graceland Park-
O'Donnell Hgts Sch

Cem

STREET

ST

ST

ST

JSRYAN

St Sta
Ce

205

ST

Cem

100

Gas

4 LANE

2 LANE

2 LANE

NATIONAL

100

ORONIO

LANE

60

50

F



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Johns Hopkins Bayview Hospital Campus

Baltimore City, MD

K. Farnham

4/15/2008

MD SHPD

Mason F. Lord Bldg, view to NE

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Johns Hopkins Bayview Hospital Campus

Baltimore City, MD

S. Traum

August 2009

MD SHPO

Mason F. Lord tower, view to N

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Johns Hopkins Bayview Hospital Campus

Baltimore City, MD

K. Farnham

4/15/08

MD SHPO

Mason F. Lord Bldg., to NE

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Johns Hopkins Bayview Hospital Campus

Baltimore City, MD

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8/2009

MD SHPO

Mason F. Lord Bldg, detail of solarium date stone,
view to NE from south front, west end

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Baltimore City, MD

S. Traum

8/2009

MD SHPO

West end of Mason F. Lord Bldg., view to ENE

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Johns Hopkins Bayview Hospital Campus
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Rear view of Mason F. Lord Bldg., to SE

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Johns Hopkins Bayview Hospital Campus
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Rear of Mason F. Lord Bldg, Loading S

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Johns Hopkins Bayview Hospital Campus

Baltimore City, MD

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East end of Mason F. Lord Bldg., looking W

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Alpha Center, view to SE

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Johns Hopkins Bayview Hospital Campus

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Alpha Center, view to W, note contrast with Mason F.

Lord facade renovations

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Johns Hopkins Bayview Hospital Campus
Baltimore City, MD

S. Traum

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General view of west end of campus, looking E

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Johns Hopkins Bayview Hospital Campus
Baltimore City, MD

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View across campus to SW from NIDA Bldg.

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Johns Hopkins Bayview Hospital Campus
Baltimore City, MD

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Power Plant and Old Power Plant, looking W

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Johns Hopkins Bayview Hospital Campus

Baltimore City, MD

K. Farnham

4/15/2008

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View of 1935 Art Deco entrance gate at N end of
Anglesen St, looking N.

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Johns Hopkins Bayview Hospital Campus

Baltimore City, MD

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A Building, view to SW

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Johns Hopkins Bayview Hospital Campus

Baltimore City, MD

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A Building, view to SE

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Johns Hopkins Bayview Hospital Campus
Baltimore City, MD

K Farnham

4/15/08

MD SHPD

A Building, rear wing, and E wing of B Building -
view looking E

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Johns Hopkins Bayview Hospital Campus

Baltimore City, MD

K. Farnham

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MD SHPO

North facade of B Building, view to SE

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Johns Hopkins Bayview Hospital Campus
Baltimore City, MD

K. Farnham

4/15/08

MD SHPO

B Building south facade, view to NE

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Behavioral Biology Research Ctr, view to N

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NIDA Building, view to NW

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