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Article Summary: In a period when many university medical schools used admission quotas to discourage Jewish applicants and Jewish physicians often had difficulty obtaining hospital affiliations, Omaha provided a better experience for Jewish members of its medical community. Jewish physicians did make up a relatively small percentage of the Omaha medical market, but they encountered little prejudice.

Cataloging Information:

Names: Oscar S Hoffman, Philip Sher, Maynard Greenberg, Oscar Hoffman, Charles Rosewater, Millard Langfield, James Goetz, Herman Hirschmann, Abraham Romm, Herman Jahr, Manuel Grodzinsky, Adolph Sachs, Abe Greenberg, Abraham Rubnitz, Morris Margolin, Victor Levine, Morris Brodkey

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Photographs / Images: chemistry lab, University of Nebraska College of Medicine, 1913-14; Dr Philip Sher; Dr Maynard Greenberg; University of Nebraska College of Medicine: campus in 1920 (2-page view), south laboratory building (erected 1918-19), University Hospital, original building (north building); St Joseph's Hospital, Creighton Memorial; Omaha Medical College, 1899; Dr Abe Greenberg; Wise Memorial Hospital, 1913

OMAHA'S JEWISH PHYSICIANS: EDUCATIONAL AND OCCUPATIONAL OPPORTUNITY, 1890-1940

By Thomas Magnuson

The arrival of Oscar S. Hoffman, M.D., in 1884 marked the beginning of Jewish medical practice in Omaha.¹ Over a period of fifty years the number of doctors increased, and by 1940 the city was home to at least thirty Jewish physicians, more than eight percent of the total.² Parallel in time to Omaha's increase in Jewish doctors stood the national experience of Jewish overrepresentation in the medical profession. The marked presence of Jews in the medical field following the turn of the century caused discrimination against them in medical education and practice by the 1920s.³ A comparative study of Omaha and the nation may provide insight into whether educational and occupational opportunities in medicine proved to be qualitatively different in Omaha than in the mainstream of American Jewish life from 1890 to 1940.

Medicine has long provided a means for Jews in America to achieve middle class standing and social status. Anti-Semitism largely excluded Jews from professional careers in academics, banking, finance, heavy industry, architecture, and engineering. Prior to World War II Jewish hopes for high occupational status in the United States were limited to medicine and law, the so-called free professions.⁴ Though Jewish doctors can be found among the Sephardic and German

Jewish communities as far back as colonial times, their numbers and influence upon the course of American medicine was small compared to the later experience of first and second-generation Jewish immigrants from Eastern Europe.⁵

The East European Jews, who began to emigrate to America in 1881, brought with them a culture respectful of learning and reinforced with a middle class orientation.⁶ Hard work and perseverance began to move these new immigrants from the lower ranks of society into the American middle class by the mid-1890s. Concurrent with the movement of East European Jews out of the laboring classes in the late nineteenth century was an increase in the number of Jewish students appearing on the campuses of colleges across the urban Northeast.⁷ The rising presence of Jews, especially at the patrician institutions of the Ivy League, fed nativist fears of cultural degeneration, leading to the implementation of admission quotas by the mid-1920s.⁸

After the turn of the century medical professionals made an effort to strengthen the standards of admission into the profession. In 1907 the Carnegie Foundation accepted the invitation of the American Medical Association to fund a survey of medical schools nationwide and named Abraham Flexner to head the study. The report which followed severely criticized the majority of medical schools in the country. Spurred on by the release of the Flexner Report in

1910, the American Medical Association, the Association of American Medical Colleges, and the Federation of State Medical Boards all worked to reduce the number of medical schools to seventy-five in 1938 from a high of 162 in 1906.⁹ Basing admissions almost solely on objective measures of academic achievement, medical colleges nationwide began to show increasing percentages of Jewish students as the total number of medical school seats dropped.¹⁰ By 1925 medical colleges began to apply restrictive measures against Jewish applicants.¹¹

Quotas were masked by calls for more subjective criteria in the evaluation of medical school applicants. The importance of high examination scores waned by the 1930s, yielding to a less objective system of rating candidates. Several medical college administrators felt that the offspring of Southern and Eastern European immigrants, especially Jews, though intellectually capable of acquiring a medical education, possessed ethical constitutions "much lower than those expected of a physician."¹² Jews were portrayed as a menace to the noble calling of the physician, ever ready to transform medicine into a vehicle for personal profit. Anti-Semitism became couched in terms of the preservation of civil society: "We find it hard to instill the ethical ideas of medicine into the son of a junk peddler."¹³

In 1925 58.4 percent of the graduates of the City College of New York, a school with a large Jewish representa-

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Chemistry lab, University of Nebraska College of Medicine, 1913-14. Courtesy of University of Nebraska Medical Center.

tion, entered medical school. By 1939, however, this figure had slipped to fifteen percent.¹⁴ Columbia University's College of Physicians and Surgeons, whose student body was forty-seven percent Jewish in 1920, had a drop in Jewish enrollment by 1940 to eight percent of the total number of medical students.¹⁵ At Cornell University's medical college the percentage of Jewish students fell from forty percent in 1920 to five percent in 1940.¹⁶

Almost from the beginning medical education in Omaha exhibited a Jewish presence. The city contained a small but active Jewish community prior to the turn of the century. Mainly of German descent, the 1,400 Jews in Omaha had a life relatively free of overt prejudice and discrimination through the 1880s.¹⁷ Several prominent civic leaders were Jews, such as newspaper publisher Edward Rosewater and department store owner J. L. Brandeis.¹⁸ The depression of 1893 removed many of the established German Jews from Omaha through unemployment and bankruptcy, but the majority of the recently settled East European Jews remained.¹⁹ A large migration from Russia and Romania between 1910 and

1920 increased the size of the city's Jewish community from under 5,000 to nearly 8,500.²⁰ Despite forming recognized neighborhood communities in a few sections of the city, intraurban mobility was common for Jews, as for other ethnic groups (with the exception of blacks) prior to World War I. No ghetto or other plan of residential segregation developed in Omaha as in larger American cities.²¹ By the late 1920s Omaha had seen Jews occupy the offices of state legislator, city councilman, acting mayor (1905), chief of police, assistant fire chief, justice of the peace, school board member, city bacteriologist, and city meat inspector.²² Retail trades such as clothing, jewelry, groceries, and dry goods were heavily Jewish, and insurance and real estate had a Jewish influence.²³ Against this background the two institutions of formal medical training in Omaha were established during the 1880s. By 1900 both schools had Jewish physicians on their faculties and Jewish students in their classrooms.

Medical education in Omaha centered at Creighton University's College of Medicine and at the medical school of the University of Nebraska.

Creighton, a denominational school administered by the Jesuit order, began a medical program in 1894.²⁴ The medical school of the University of Nebraska grew out of the Omaha Medical College, which opened in 1882.²⁵

Creighton's College of Medicine had few Jewish students before the late 1920s. The number of seats in the medical school expanded from 115 to 284 between 1920 and 1930. Likewise, the number of Jewish students increased, from two to thirty-four. The high point, in terms of total enrollment, came in 1933 when 316 students registered for medical classes. Afterwards Creighton's enrollment dropped, and by 1941 the medical school had 235 student physicians. The number of Jewish students at Creighton reached a zenith in 1931 with thirty-four attending classes, comprising twelve percent of the medical college's students. A decade later this figure had fallen to eleven students, less than five percent of the total.²⁶

The sudden increase in Jewish students at Creighton's medical school was caused by the arrival of a large number of freshmen from the New York City area in 1931. Waves of prospective

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Jewish physicians from New York sought admission to medical colleges across the country following the imposition of admission restrictions in the Northeast. Over ninety first-year students enrolled at Creighton in 1931 and twenty of them were Jewish. Fifteen of the Jewish freshmen came from New York (only two were Omahans).²⁷ Dr. David Platt, a local Jewish dentist with strong ties to Creighton, encouraged the university to accept these New Yorkers.²⁸ A former classmate remembered this group from New York as excellent students, who came to Creighton because of their inability to gain admission to medical schools in the East.²⁹

Between 1920 and 1940 the proportion of out-of-state students at Creighton's medical school increased from three-fifths to four-fifths, although the undergraduate college maintained a steady 2:1 ratio of native Nebraskans.³⁰ As a private school Creighton had no mandate to select state residents over other applicants. The fierce competition for seats to medical schools assured private colleges like Creighton that highly qualified applicants, denied admission to other schools on the basis of their ethnicity, would be applying. A total of sixty-three Jews received their medical degrees at Creighton from 1920 to 1940; only fifteen, less than one quarter, came from Omaha.³¹

Following the graduation of these New Yorkers, the size of the medical school at Creighton, the number of Jewish students, and the percentage of Jewish enrollment from New York declined. Where there were twenty-four Jewish medical students from the New York area in 1932, there were only seven in 1939.³²

Early records indicated that the University of Nebraska Medical School graduated its first Jewish student prior to 1900. From 1882 to 1919 Nebraska conferred degrees upon eighteen Jewish students out of a total enrollment of 602. In 1920 the University of Nebraska had 185 students in its medi-



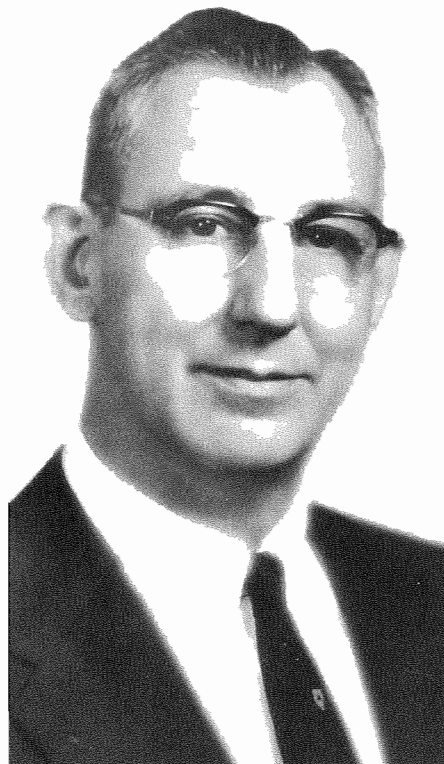
Dr. Philip Sher. Courtesy of Nebraska Jewish Historical Society.

cal college. By 1935 the school grew to over 300 places, an increase of over forty percent. The number of Jewish students increased from eleven to twenty during the same fifteen-year period. In the five years after 1935 both the total number of students and the number of Jewish students dropped to 292 and eleven. The acme for Jewish enrollment was 1935-37 when twenty students attended medical classes, representing nearly seven percent of the college. By 1940 the Jewish contingent had declined to eleven, less than four percent.³³

Unlike at Creighton nearly all of the Jewish students at Nebraska were state residents. From 1922-40 sixty-seven Jewish physicians graduated from Nebraska. Native Nebraskans accounted for fifty-two students, or 77.6 percent. All but nine of the fifty-two (64.2 percent) came from Omaha. However, of the fifteen non-residents, six were from New York.³⁴

The decline in total enrollment of the two medical colleges was a function of the A.M.A.'s response to the serious economic condition of the country. In 1934 the A.M.A.'s Council on Medical Education cautioned medical schools against increasing their enrollment in the wake of the downturn of the nation's economy. From 1929 to 1934 increases in the number of students in the country's medical colleges had occurred each year. Following the A.M.A.'s warning, enrollment dropped yearly through 1940.³⁵ The decrease in the number of Jewish students studying medicine across the U.S. in the late 1930s was seen as "a reflection of a general drop in medical school enrollment," according to a national survey.³⁶ However, at both of Omaha's medical colleges the decline in the number of Jewish student physicians exceeded the overall decline in enrollment.

One of Creighton's responses to budget tightening, which greatly affected the number of New York Jews studying there, was an effort to increase the proportion of Catholics in the medical program. The representa-



Dr. Maynard Greenberg. Courtesy of Omaha World-Herald.

tion of Catholics in the professions in the United States had long been well below that of Protestants and Jews.³⁷ It was not unusual for Catholic medical colleges to give preference to students with whom they shared a common faith. In 1932, of thirty-eight medical students from New York at Creighton, twenty-four were Jewish, ten were Italian, and four were unidentifiable as to ethnic background. By 1939 this distribution was reversed: Of thirty New Yorkers, seven were Jewish, nineteen were Italian, and four were unidentifiable.³⁸

Aside from the economy and preferential admission policies another factor contributed to the decline in Jewish enrollment. Medium-sized cities such as Omaha, with Jewish communities of less than five percent, had long pro-

vided greater occupational breadth for Jews than merely medicine and law.³⁹ The ability of young Jews to procure high status and material success through careers other than medicine may have been a reality for many in the Omaha community. Jewish representation on Omaha civic boards was an accepted practice. "You were welcomed as an equal," remarked Philip Klutznik when reflecting upon Jewish participation in the Omaha Chamber of Commerce. "They wouldn't think of having a campaign without Jewish leadership."⁴⁰ The variety of Jewish businesses in Omaha indicated that a wide array of profitable enterprises were open to young Jews. All of these factors may have accounted for the smaller number of Jewish medical students.

In 1930 Jewish students represented twenty percent of the enrollment in the nation's medical colleges. At the same time only 3.5 percent of the country's population was Jewish.⁴¹ Despite its two medical schools Omaha never witnessed this high ratio of Jewish medical students. While the two colleges had Jewish enrollments ranging between four and six percent for the twenty-year period following 1920 (the highest figure was twelve percent), Jews constituted around four percent of the city's population.⁴²

The increasing Jewish representation in medical colleges after 1900 produced growing numbers of Jewish practitioners. In 1930 Jews constituted less than four percent of the U.S. population, yet Jewish physicians accounted for twelve to fifteen percent of their profession.⁴³ However, in Omaha the percentage of Jewish doctors more nearly paralleled the approximately four percent representation of Jews in the city's population. In 1893 there were two Jewish practitioners in Omaha out of a total of 138 doctors, or 1.4 percent. By 1915 eight Jewish physicians worked in Omaha (2.7 percent). Eight years later the number grew to fifteen practitioners (4.0 percent). The 1935 figure was twenty-

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seven Jewish doctors within the city (7.0 percent).⁴⁴ The Jewish medical community in Omaha had grown to twenty-four doctors by 1940, or 6.6 percent of the city's physicians. Both the total number of Jewish physicians, and the percentage of Jews in the medical profession, rose in Omaha from 1890 to 1940.

Jewish physicians practicing in America before the turn of the century were mainly of Sephardic and, especially west of the Mississippi River, Germanic descent. Jewish doctors who traveled to the Midwest to practice were usually educated somewhere in the urban Northeast. The largest wave of Jewish immigration began in the 1880s with the arrival of thousands of Russian and Romanian Jews. These East Europeans provided a vastly larger pool from which prospective physicians could be drawn. However, not until after 1900 was there both a class of American born Jews and medical schools in the Midwest.

The demographic profile of the Jewish physicians who practiced in Omaha during this period mirrors the national experience. Oscar Hoffman settled in the city in the mid-1880s due to the encouragement of local merchant Max Meyer. A native New Yorker, Hoffman attended medical school and studied extensively in Europe following his graduation. Hoffman practiced in New York City for years prior to arriving in Omaha. Active in the local medical societies, Hoffman taught dermatology at the Omaha Medical College for a number of years and was on the medical staff of the Union Pacific Railroad.⁴⁵ Charles Rosewater, the younger brother of newspaper publisher Edward, came to the city in 1886 following a trail that led from Cleveland to post-graduate training in Prague and Vienna. Leaving a practice in Ohio to move to Omaha, Rosewater became an early member of the Creighton medical school faculty as an instructor in obstetrics and gynecology. Eventually Rosewater was rewarded for his service to the university

by being named an emeritus professor in the 1920s.⁴⁶ Millard Langfeld, a Missouri native and graduate of Johns Hopkins, arrived in the city in 1898. Soon after arriving Langfeld became a professor of bacteriology and clinical medicine at Creighton. Eschewing private practice, Langfeld worked for the city board of health for over thirty years. Initially chief bacteriologist, Langfeld eventually rose to director by the early 1930s, a post he held for nearly five years.⁴⁷ James Goetz came to Omaha in 1902 following his graduation from the University of Cincinnati's medical school. Goetz became Hoffman's partner and joined the Nebraska faculty, where he became chairman of medical therapeutics. Goetz taught at the college and maintained a private practice until his death in 1927.⁴⁸

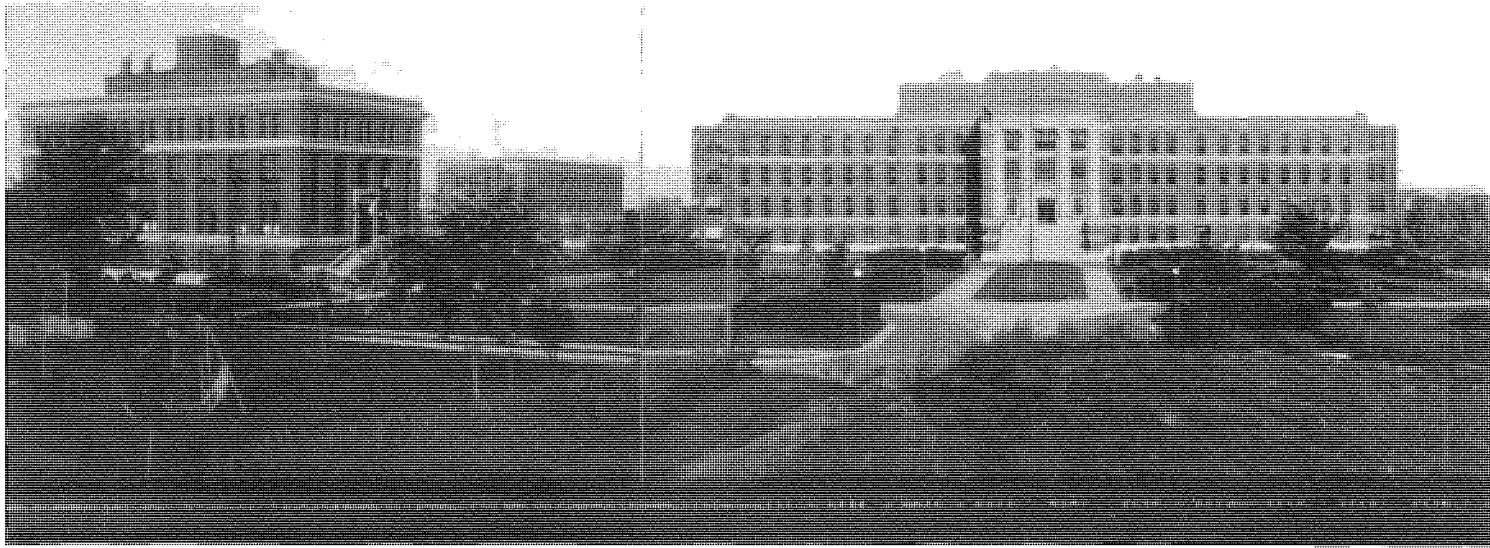
Beginning in 1903 three medical graduates of the University of Baltimore ventured west to begin their careers as physicians. Herman Hirschmann arrived in Omaha shortly after his graduation and continued to practice in the city for over thirty years.⁴⁹ Philip Sher and Abraham Romm came to Omaha soon after Hirschmann and shared living and working quarters at 709 South Sixteenth Street. Sher, a Lithuanian immigrant who had received seminary training prior to coming to America, became a significant contributor to the local Jewish community by his involvement in B'nai B'rith, Talmud Torah, the Jewish Community Center, and the Jewish Welfare Federation.⁵⁰ Although non-Omahans like the previous five, Sher and Romm differed from their colleagues in that they were both immigrants from Eastern Europe. Hoffman, Rosewater, Langfeld, Goetz, and Hirschmann all came from an Ashkenazic, or Central European Jewish heritage. Prior to 1910 only two of the seven Jewish doctors in the city had East European roots. After 1910 of twenty-six Jewish physicians who established practices in Omaha, twenty-three emigrated from Eastern Europe or were first generation de-

scendants of Russian Jews.⁵¹ This parallels the demographic shift in American Jewish culture brought on by the waves of immigration from Eastern Europe.

The pattern of non-professional parents helping to send the children to medical school was apparent in Omaha also.⁵² Jewish physicians who practiced in Omaha were the offspring of grocers, merchants, and insurance salesmen.⁵³ Only two doctors came from professional households. Pediatrician Herman Jahr, a New York native who eventually became chairman of the department of pediatrics at Nebraska, was the child of a physician.⁵⁴ Manuel Grodzinsky, a surgeon and long-time Nebraska faculty member, was the son of Orthodox Rabbi Henry Grodzinsky of Beth Hamrodeh Hogodel in Omaha.⁵⁵

In 1907 Adolph Sachs received his medical degree from Creighton. Sachs joined the Creighton faculty after graduation and eventually became chairman of the department of internal medicine in 1933. Creighton named Sachs to head the university's board of regents in 1950. Sachs served as president of the Nebraska State Medical Association and the Omaha-Douglas County Medical Society in addition to three terms as governor of the state branch of the American College of Physicians and as the medical director for the Union Pacific Railroad.⁵⁶ Besides being the starting point to a successful medical career Sachs's graduation signified a transition for the local Jewish community. It marked the first time an Omaha-born Jewish student had graduated from one of the local medical colleges. The six Jewish physicians in the city when Sachs graduated had emigrated from other places. After 1910 this pattern was reversed. From 1910-19 nine doctors opened offices in Omaha, and all but one were raised and educated there.⁵⁷

Included in this group were Abe Greenberg and Abraham Rubnitz. Greenberg, a 1915 Nebraska graduate, served with distinction in France with



St. Joseph's Hospital, Creighton Memorial,
Omaha, Neb.



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University of Nebraska College of Medicine, 1920: south laboratory building, erected 1918-19 (left); University Hospital; original building (north building). Courtesy of University of Nebraska Medical Center. . . . (bottom) Jewish physicians had hospital affiliations at St. Joseph's. (NSHS-M281-1207)

the field hospital sponsored by the University of Nebraska College of Medicine during World War I, and became a leading advocate for local and national Jewish organizations during his fifty-six-year medical career.⁵⁸ Rubnitz graduated from Nebraska in 1916 after emigrating from Russia and working at a series of factory jobs. Self-educated, Rubnitz did not graduate from college but scored high enough on the medical school entrance exam to be admitted. Rubnitz decided on a career in pathology, and later became a founding fellow of the College of American Pathologists.⁵⁹

During the 1920s twelve new Jewish physicians entered the local medical community, nine of whom grew up and went to medical school in Omaha.⁶⁰ Morris Margolin received his degree from Nebraska in 1924 and went on to a successful career as an internist. Diabetic retinopathy caused Margolin to go blind in 1946, but he continued to treat patients for over twenty years following his loss of sight. Margolin founded the Nebraska Diabetes Association in 1944 and was one of the first physicians in the state to treat diabetes with insulin therapy.⁶¹ Victor Levine had already become established as a researcher in nutrition by the time he came to Creighton to teach in the 1920s. Levine received a Ph.D. from Columbia University and an M.D. from Creighton. The author of several books on clinical nutrition, Levine was well known for the pioneering study he completed with Elmer McCollum of Johns Hopkins on the vitamin and iron content of organ meat.⁶²

The decade 1931-40 brought eight Jewish physicians into the Omaha medical community.⁶³ All but one had local roots. Among this group were Morris Brodkey and Maynard Greenberg. Brodkey graduated from Creighton in 1931. A longtime member of the Creighton faculty, Brodkey was board certified in internal medicine and in allergy and immunology.⁶⁴ Greenberg, whose family founded an optical shop in Omaha, graduated from

Creighton in 1934. Following an internship in Portland, Oregon, he returned to Omaha to practice as an ophthalmologist. A fascination with photography led Greenberg to turn his camera on the eyes of his patients, and several of these photographs were published in journals and textbooks.⁶⁵

By 1936 the majority of Jewish practitioners in the U.S. earned their living exclusively from Jewish patients. Anti-Semitism among medical professionals and the public at large, plus the pattern of large, inclusive Jewish communities in major urban areas such as New York and Philadelphia, helped to bring about exclusivity of practice.⁶⁶ The infusion of newly trained Jewish doctors resulted in a growing concentration of Jewish physicians in the country's largest cities, further increasing competition in an already strained marketplace.

In Omaha, though some physicians may have established exclusively Jewish practices, the majority of Jewish doctors had substantial association with non-Jewish practitioners and patients. By 1890 the physician distribution among the population of Omaha was 742:1, or approximately 140 doctors for 102,000 residents.⁶⁷ Thirteen years later this ratio had plummeted to 599:1.⁶⁸ A continued downward slide, though at a substantially slower pace, characterized Omaha's physician distribution through 1930. In that year one doctor could be found for every 556 Omahans. However, by 1941 the ratio had risen to 619:1.⁶⁹

Among the city's Jewish community the ratio of practitioners in 1890 was 517:1 (two doctors for 1,035 Jews).⁷⁰ By 1904 the Jewish population in Omaha grew to 3,000, due chiefly to emigration from Eastern Europe. However, only two additional Jewish physicians had come to Omaha to practice since 1890, resulting in a 750:1 ratio.⁷¹ These four doctors probably saw only Jewish patients. Hereafter the distribution dropped greatly: 556:1 in 1923; 315:1 in 1935; and 354:1 in 1940.⁷² In 1935 com-



Omaha Medical College, 1899, at Twelfth and Pacific streets. Courtesy of University of Nebraska Medical Center.

petent care was deemed available at physician distributions of 1200:1; at this time the U.S. national average was 780:1.⁷³ The small ratios present by the 1930s indicate that on numbers alone, few Jewish physicians in Omaha could have earned enough to maintain a practice by treating only Jewish patients, especially through the Depression. Economic incentive would have forced them to attempt to expand their practice beyond the Jewish community. While most (if not all) of these doctors had a substantial number of Jewish patients within their practice, the small size of the Jewish community in Omaha would have enabled few of them to maintain exclusivity of practice prior to World War II.

The physicians who served as instructors at the city's two medical colleges provide an additional sign that de facto segregation between Jewish practitioners and the non-Jewish com-

munity in Omaha did not exist. A faculty position at either school gave a Jewish physician the opportunity to interact with non-Jewish physicians, students, and patients on a regular basis. Of the thirty-four Jewish doctors who practiced in Omaha from 1890 to 1940 twenty-eight, or over eighty-two percent, were on the teaching staff at either Creighton or Nebraska.⁷⁴

Membership in local medical societies would have placed Omaha's Jewish physicians in situations where contact with their non-Jewish peers occurred routinely. Thirty-two of the thirty-four doctors identified as Jewish in the 1890-1940 period belonged either to the Omaha or Douglas County medical societies, the earliest member joining in 1890.⁷⁵ This large percentage verifies that the city's Jewish practitioners were not occupationally isolated.

A significant parameter for deter-

mining the professional well-being of physicians within the 1890 to 1940 period is hospital affiliation. Affiliation was a privilege allowing physicians to admit patients, receive continuing education concerning new concepts in diagnosis and treatment, and conduct research. Affiliation was bestowed upon a physician by a vote of the trustees, board of directors, or staff doctors, depending on the organizational structure of the hospital. Generally, a physician seeking affiliation needed sponsorship by a current member of the hospital's staff. Acquiring affiliation enabled a doctor to improve his professional status, which led to improved economic standing.⁷⁶

In practice the process of obtaining a hospital affiliation often centered on the physician's ethnicity or social class. One outgrowth of this clique-like system was the establishment of proprietary hospitals, institutions built and operated by physicians denied access to hospital privileges elsewhere. Discrimination in elitist voluntary institutions, against both physicians and patients, also provided the motivation for the establishment of religious and ethnic hospitals. These facilities were not merely a haven for the sponsoring group's ill (in fact, most proved to have an open admission policy), but they provided an environment in which their physicians could practice and their interns could learn.⁷⁷

Alarmed by the lack of competent care provided to indigent Jewish patients in the city's existing hospitals, members of the Omaha Jewish community, led by Mrs. Fannie Brandeis, decided in 1899 to build a Jewish hospital. The Isaac M. Wise Memorial Hospital, a small frame structure on Sherman Avenue, was dedicated on November 15, 1901. The institution relocated to a new sixty-bed building near Twenty-fourth and Farnam in 1908, after a fund raising drive headed by Edward Rosewater and A. D. Brandeis. Technically non-sectarian due to the wishes of the principal donor, Wise Memorial was maintained by the

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established charities of the Omaha Jewish community. Wise Memorial operated until the late 1930s, when debt and an inability to remain technically progressive forced it to close.⁷⁸

The experience of Omaha's Jewish physicians in procuring affiliation appears to be a positive one. Omaha's first Jewish doctor possessed three hospital affiliations by 1900.⁷⁹ Of the six Jewish physicians in the city by 1908, only one lacked any visiting physician privileges. Four of the five affiliated doctors were on the staff of more than one hospital. The affiliations were spread among six hospitals: Wise Memorial, Douglas County, Immanuel, St. Joseph's, Omaha General, and University.⁸⁰

In a survey of the Omaha Jewish community compiled in 1929 by the Jewish Bureau for Social Research, a justification was sought for the continued existence of Wise Memorial. One guideline used to determine need concerned whether affiliation was available for Jewish doctors in Omaha's other hospitals. According to the survey, "The Jewish medical men of Omaha have made their mark in the community, have received recognition, and are and could be cared for from a professional standpoint of hospital affiliation."⁸¹

There were twenty-one Jewish physicians listed in the survey, and only two did not possess an affiliation. Eighteen of the doctors used twelve hospitals in treating patients. Seventeen of the practitioners had a professional tie to Wise Memorial. Eleven of these seventeen had staff privileges, and for six of the eleven, Wise Memorial was their sole affiliation. If Wise Memorial closed eight doctors would be without affiliation. The survey team was assured, however, that the physicians could quickly find another staff position. Both the number of Omaha hospitals (the city had an excess of 850 hospital beds in 1929) and the open staffing policy practiced by the city's medical institutions aided physicians



Dr. Abe Greenberg, Courtesy of Nebraska Jewish Historical Society.

in gaining affiliation.⁸² The study concluded that Omaha's Jewish doctors had made "good adjustments" in finding hospital affiliations.⁸³

The experience of Jews in medical education and professional practice in Omaha differed quantitatively from that of Jewish students and physicians nationally during the 1890-1940 period. Both locally and nationally the number of Jews among the country's medical students increased. Jews were five to six times as prevalent in medical schools as they were in the general population, but among Omaha's two medical colleges the representation of Jewish students remained roughly equivalent to (or less than) the percen-

tage of Jews in the Omaha population.

Variables within Omaha and its medical community probably account for the discrepancy between the national and local experience in medical education. Admission preference at Creighton towards Catholic applicants appeared to increase after 1932. The resulting change in the ratio of Catholic to Jewish students coming from New York City during the 1930s aided in reversing the trend of increasing Jewish enrollment at Creighton. The University of Nebraska limited access to its medical program by a policy of preferential admission for state residents, few of whom were Jewish. This limited Jewish influence at the college, since a large pool of applicants from the Northeast were effectively excluded from consideration.

Omaha's history of cooperation and tolerance between Jews and non-Jews in commercial and civic ventures may have enabled Jewish youth to choose among career opportunities that yielded status and material success without the long grind and high cost entailed by a medical education. The financial strain of the Depression certainly contributed to declining Jewish enrollment at the two schools by making medical education unaffordable for many families and individuals after 1929.

Finally, institutional restrictions may have limited the size of the Jewish contingent at both Creighton and Nebraska. In light of the widespread application of these practices throughout the country the possibility that Omaha's medical colleges established quotas on the admission of Jewish students must be considered. Naturally, no record of restriction measures exists. A combination of factors likely worked to keep the proportion of Jewish medical students in Omaha at less than the national average.

The proportion of Jewish physicians in Omaha remained steady in relation to the city's Jewish population between 1890 and 1940. Nationally, by 1930 Jews

practiced medicine at a rate five times that of their percentage of the U.S. population. Despite possessing a lesser share of the local medical community, Omaha's Jewish doctors enjoyed greater latitude than the majority of the country's Jewish practitioners due to non-exclusive practices, medical school appointments, medical society memberships, and hospital affiliations.

Exclusive practices, the norm for physicians working in the Jewish communities on the East Coast, was the exception among the local doctors. A low patient to physician ratio among Omaha's Jews, a professional life characterized by frequent interaction with non-Jews, and the lack of complete segregation of the city's various ethnic and religious communities, contributed to a lack of exclusive practices among the Jewish physicians. Whereas avenues of career opportunity remained closed or severely curtailed for many Jewish doctors in 1940, Omaha had long provided a viable environment for professional growth. Medical society memberships were nearly universal for Jewish physicians. Jewish practitioners readily obtained hospital affiliation, especially after 1930. Faculty positions at the medical colleges had been granted from the beginning. By 1940 over eighty percent of the doctors in Omaha's Jewish community were instructors at Creighton or Nebraska.

Because Jewish physicians made up a relatively small percentage of Omaha's medical market in comparison to the national average they encountered little prejudice and discrimination. In addition, the record of positive relations between Jews and non-Jews in Omaha provided an environment that encouraged professional interaction. The qualitative differences between Omaha and the nation between 1890 and 1940 categorized the city as a positive place for Jewish physicians to work.

NOTES

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⁵Nathan Glazer, *American Judaism*, 2nd ed. (Chicago: University of Chicago Press, 1972), 44.

⁶S. Joseph Fauman, "Occupational Selection Among Detroit Jews," *The Jews: Social Patterns of an American Group*, Marshall Sklare, ed. (Glencoe, Illinois: The Free Press, 1958), 135-37; Miriam K. Slater, "My Son the Doctor: Aspects of Mobility Among American Jews," *American Sociological Review* XXXIV (3) (June 1969): 359-72; Abraham J. Karp, *Haven and Home: A History of the Jews in America* (New York: Schocken Books, 1985), 187.

⁷Leonard Dinnerstein, *Uneasy at Home: Anti-Semitism and the American Jewish Experience* (New York: Columbia University Press, 1987), 49-50; Karp, *Haven and Home*, 271; Oliver Pollak, "Anti-Semitism, the Harvard Plan and the Roots of Reverse Discrimination," *Jewish Social Studies* XLV (2) (Spring 1982), 113-22.

⁸Dinnerstein, *Uneasy at Home*, 48-50.

⁹Duffy, *The Healers*, 264-65; Paul Starr, *The Social Transformation of American Medicine* (New York: Basic Books), 121.

¹⁰Duffy, *The Healers*, 264-5; Starr, *Social Transformation*, 116-27.

¹¹Duffy, *The Healers*, 290.

¹²The American Foundation, *American Medicine: Expert Testimony Out of Court* (New York: The American Foundation, 1937), 258.

¹³*Ibid.*, 266.

¹⁴Dinnerstein, *Uneasy at Home*, 50.

¹⁵*Ibid.*, 51.

¹⁶Marcia Graham Synott, "Anti-Semitism and American Universities: Did the Quotas Follow the Jews?" *Anti-Semitism in American History*, David Gerber, ed. (Chicago, Illinois: University of Illinois Press, 1986), 252.

¹⁷Nathan Bernstein, "The Story of Omaha Jews," *The Reform Advocate* (May 2, 1908), 11-12.

¹⁸*Ibid.*

¹⁹Gendler, "Jews of Omaha," 106.

²⁰Ella Fleishman Auerbach, *Jewish Settlement in Nebraska* (Typescript, 1927), 39-48; Howard P. Chudacoff, *Mobile Americans: Residential and Social Mobility in Omaha, 1880-1920* (New York: Oxford University Press, 1972), 23, 63; Barbara Cottrell and Lawrence H. Larson, *The Gate City: A History of Omaha* (Boulder, Colorado: Pruett Publishing Co., 1982), 161; Landmarks Heritage Preservation Commission, *A Comprehensive Program for Historic Preservation in Omaha* (Omaha, Nebraska: Omaha City Planning Department, 1980), 33-54.

²¹Chudacoff, *Mobile Americans*, 38, 65, 81, 154.

²²Auerbach, *Jewish Settlement*, 95-6; Gendler, "Jews of Omaha," 119-31.

²³Bernstein, "Omaha Jews," 13-15, 19-24; Gendler, "Jews of Omaha," 62, 69-72; Omaha City Directory, 1880-1900.

²⁴Medical Department of The Creighton University, *Bulletin of The John A. Creighton Medical College*, 1894 (Omaha, Nebraska: Creighton University, 1894).

²⁵Robert Coleman, *The First Hundred Years of the University of Nebraska College of Medicine* (Omaha, Nebraska: The University of Nebraska Medical Center, 1980), 14-30.

²⁶Medical Department of The Creighton University, *Bulletin of the John A. Creighton Medical College* 1894, 1901; Idem, *Announcements of the College of Medicine*, 1911, 1920-41 (Omaha, Nebraska: Creighton University, 1911, 1920-40).

Information was gathered from the medical college bulletins from both schools, as well as published lists of alumni. The bulletins were reviewed every ten years for the year ending in "0," when available, in order to determine the number of Jewish medical students. Each bulletin for the years 1920-40 was examined in an effort to analyze enrollment figures in light of national trends. Jewish identity was determined by students' last names. The most probable source of error in identification would have been the non-inclusion of students whose names were not readily recognizable as Jewish, such as Hoffman or Green.

²⁷*Ibid.*, 1931.

²⁸Thomas Platt, interview with the author, Omaha, Nebraska, March 21, 1989.

²⁹Maurice Steinberg, M.D., interview with the author, Omaha, Nebraska, December 12, 1988.

³⁰*Announcements of the College of Medicine*, 1920-41 (Omaha, Nebraska: Creighton University, 1920-40).

³¹*Ibid.*

³²*Ibid.*

³³Coleman, *The First Hundred Years*, 139-47; The University of Nebraska College of Medicine, *Annual Catalog of the College of Medicine* 1901, 1911, 1921, 1931 (Lincoln, Nebraska: University of Nebraska, 1901, 1911, 1921, 1931); The University of Nebraska College of Medicine, *The Caduceus*, Volumes I and II (Omaha, Nebraska: The University of Nebraska College of Medicine, 1929, 1930).

³⁴Coleman, *The First Hundred Years*, 139-47; The University of Nebraska College of Medicine, *Annual Catalog*, 1901, 1911, 1921, 1931; Idem, *The Caduceus*, 1929, 1930.

³⁵Starr, *Social Transformation*, 120.

³⁶Jacob A. Goldberg, "Jews in the Medical Profession: A National Survey," *Jewish Social Studies* I (3) (July 1939), 332.

³⁷Goldberg, "Jews," 332; Baumann, "Jewish Medical Students," 2.

³⁸Medical Department of The Creighton University, *Announcement of the College of Medicine*, 1931-41. Methodology similar to that described in footnote twenty-six was employed to determine the number of Italian students in the medical college at Creighton.

³⁹Goldberg, "Jews," 335.

⁴⁰Anti-Defamation League of B'nai B'rith, "Not the Work of a Day": *Anti-Defamation League of B'nai B'rith Oral Memoirs, Volume III, Philip Klutznik, David Rose, Bernard Nash* (New York: Anti-Defamation League of B'nai B'rith, 1980), 11.

⁴¹Goldberg, "Jews," 335.

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⁴²Bernstein, "Omaha Jews," 11; Cottrell and Larson, *Gate City*, 71, 122, 157; Edgar Z. Palmer, "The Correctness of the 1890 Census of Population in Nebraska Cities," *Nebraska History* XXXII (December 1951), 265-66; Bureau of Jewish Social Research, *Jewish Communal Survey of Omaha, Nebraska* (New York City: 1929), 38; Gendler, "Jews of Omaha," 62, 84-5; *Omaha City Directory*, 1893, 1903, 1915, 1923, 1935, 1941.

⁴³Karp, *Haven and Home*, 374; L. Wallerstein, "Behind the Pioneer Role of Jews in Medicine: The Traditional Jewish Doctor Explained," *Commentary* XIX (March 1955), 244.

⁴⁴*Omaha City Directory*, 1893, 1903, 1915, 1923, 1935, 1941.

⁴⁵Ella Fleishman Auerbach and Albert F. Tyler, *History of Medicine in Nebraska* (Omaha, Nebraska: Magic City Printing Co., 1928), 100-1; *Omaha World-Herald*, July 24, 1926.

⁴⁶Bernstein, "Omaha Jews," 16; Auerbach and Tyler, *History of Medicine*, 105, 296.

⁴⁷Auerbach and Tyler, *History of Medicine*, 115-16, 147, 605; *Who's Who in Omaha* (Omaha, Nebraska: Robert M. Baldwin Corp., 1928), 117.

⁴⁸Auerbach and Tyler, *History of Medicine*, 116; Bernstein, "Omaha Jews," 16; *The Jewish Press*, June 9, 1927; *Omaha World-Herald*, June 8, 1927.

⁴⁹Auerbach and Tyler, *History of Medicine*, 594.

⁵⁰*Ibid.*, 636, 642; Bernstein, "Omaha Jews," 16; *Who's Who*, 176.

⁵¹*Omaha City Directory*, 1893, 1903, 1915, 1923, 1935, 1941.

⁵²Charles E. Silberman, *A Certain People: American Jews and Their Lives Today* (New York: Summit Books, 1985), 124; Glazer, *American Judaism*, 43; Karp, *Haven and Home*, 189.

⁵³*Omaha City Directory*, 1893, 1903, 1915, 1923, 1935, 1941.

⁵⁴Auerbach and Tyler, *History of Medicine*, 209-10, 280.

⁵⁵Baeyla Tatleman, interview with the author, Omaha, Nebraska, May 24, 1988; Auerbach and Tyler, *History of Medicine*, 279; *The Jewish Press*, April 3, 1953.

⁵⁶Auerbach and Tyler, *History of Medicine*, 301, 303, 305, 337, 372, 386; *Omaha World-Herald*, May 3, 1955.

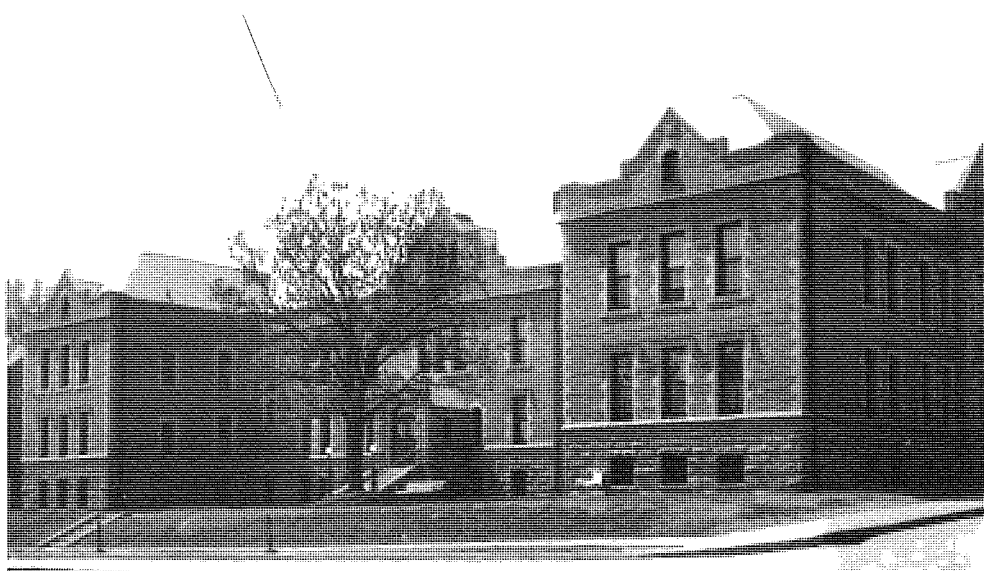
⁵⁷*Omaha City Directory*, 1910-19; Auerbach and Tyler, *History of Medicine*, 587; *Who's Who*, 82, 165.

⁵⁸Renee Engel, interview with the author, Omaha, Nebraska, May 21, 1988; Auerbach and Tyler, *History of Medicine*, 587; *Who's Who*, 82.

⁵⁹Miriam Simon, interview with the author, Omaha, Nebraska, July 5, 1988; *The Jewish Press*, June 28, 1968; *Who's Who*, 165.

⁶⁰*Omaha City Directory*, 1920-29; Auerbach and Tyler, *History of Medicine*, 228-30; *Who's Who*, 125.

⁶¹J. Milton Margolin, M.D., interview with the



Wise Memorial Hospital, 1913. From Bostwick-Frohardt Collection owned by KMTV and on permanent loan to Western Heritage Museum, Omaha, Nebraska.

author, Omaha, Nebraska, November 30, 1987; *The Jewish Press*, October 26, 1976; *Who's Who*, 125.

⁶²Auerbach and Tyler, *History of Medicine*, 228-30.

⁶³*Omaha City Directory*, 1930-39.

⁶⁴Bess Brodkey, interview with the author, Omaha, Nebraska, May 16, 1988; *The Jewish Press*, January 1, 1981.

⁶⁵Avreem Greenberg, interview with the author, Omaha, Nebraska, May 16, 1988; *The Jewish Press*, June 26, 1970.

⁶⁶Duffy, *The Healers*, 289-90; A. J. Rongy, "Medical School Fair To Jews," *The Literary Digest*, September 13, 1920, 20; C. Bezalel Sherman, *The Jew Within American Society: A Study in Ethnic Individuality* (Detroit: Wayne State University Press, 1961), 180; Silberman, *A Certain People*, 124.

⁶⁷Cottrell and Larson, *Gate City*, 71; *Omaha City Directory*, 1890.

⁶⁸Cottrell and Larson, *Gate City*, 122, 157; *Omaha City Directory*, 1903.

⁶⁹Cottrell and Larson, *Gate City*, 157; *Omaha City Directory*, 1935, 1941.

⁷⁰Gendler, "Jews of Omaha," 62; *Omaha City Directory*, 1890.

⁷¹Bernstein, "Omaha Jews," 11; *Omaha City Directory*, 1903.

⁷²*Jewish Communal Survey*, 38; *Omaha City Directory*, 1923, 1935, 1941.

⁷³Rongy, "Medical School," 20.

⁷⁴Medical Department of The Creighton University, *Bulletin of the John A. Creighton Medical College*, 1894, 1901; *Idem, Announcement of the College of Medicine*, 1911, 1921, 1931, 1941; Omaha Medical College, *Nineteenth Annual Circular of Information* (Omaha, Nebraska: Omaha Medical College, 1900); The University of Nebraska College of Medicine, *Annual Catalog*, 1911, 1921-40.

⁷⁵Douglas County Medical Society, Omaha, Nebraska. Letter to author, March 12, 1988; Nebraska State Medical Association, Lincoln, Nebraska. Letter to author, March 19, 1988.

⁷⁶Starr, *Social Transformation*, 163-70.

⁷⁷*Ibid.*, 170-71.

⁷⁸Bernstein, "Omaha Jews," 44; Maria Crosby, "Wise Memorial Hospital: The Rise and Fall of a Jewish Institution." Collection of the Jewish Historical Society of Omaha, Nebraska. Undated typescript, 1-10; Gendler, "Jews of Omaha," 112.

⁷⁹Omaha Medical College, *Circular*, 1900.

⁸⁰Bernstein, "Omaha Jews," 16-17.

⁸¹*Jewish Communal Survey*, 185-202.

⁸²*Ibid.*, 9.

⁸³*Ibid.*, 185-202.