A Hoosier Country Doctor: Dr. Harry K. Engleman's Medical Ledger, 1911–1917

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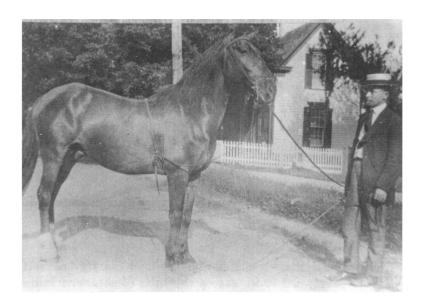
Nestled near the western border of Floyd County and settled on a major westward route across the hills of southern Indiana, Georgetown, like many Hoosier villages, can boast about its sons and daughters. Among them were R. Carlyle Buley, an Indiana University professor who won the Pulitzer Prize in history for his definitive *The Old Northwest: Pioneer Period*, 1815–1840 (1950), and Sherman Minton, the well-known jurist who served on the United States Supreme Court from 1949 to 1956.

Perhaps as well known to the people of Georgetown and the surrounding countryside was Dr. Harry K. Engleman. After graduating from what became the University of Louisville School of Medicine, he began his practice in Georgetown in 1911 and subsequently devoted his life to caring for its people. From his first day on the job, Engleman kept a record of his patients, marking down their names, their maladies, and his charges and collections. The pages of the only surviving ledger, 1911–1917, offer insight into the life of a country doctor and a glimpse into the nature of medical problems during the second decade of the twentieth century.

Engleman was born July 22, 1879, in Byrneville, a tiny village in the northeast section of Harrison County. His parents, Jefferson and Emma Engleman, bought a farm when Engleman was six years

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¹ Although Harry K. Engleman apparently kept a ledger throughout his practice, only the ledger running from October 12, 1911, through February 6, 1917, remains. The ledger is generally very readable, although a few of Engleman's abbreviations are difficult to decipher. The ledger, flawed only by lack of diagnoses and the specific medications given, is one of the precious possessions of Engleman's widow, Gayle Arganbright Engleman. The author thanks her for her kindness in permitting its use in this article and for the information she provided about their life together.



HARRY K. ENGLEMAN AND OLD PRINCE

Courtesy of Mrs. Harry K. Engleman

old. The family of six sons and one daughter lived in a log cabin for about two years before they were able to construct better housing. 2

The rigors of rural life for Engleman as a child included walking across the county line to go to school in Galena, in Floyd County, and at age thirteen working as a farmhand for twenty cents a day. After attending grade school and normal school, Engleman was unable to enroll in medical school because of lack of funds. He then turned to teaching in local one-room public schools. For his salary of about thirty-six dollars per month, he was expected to teach as many as fifty pupils in all eight grades. After three years of seeing his savings for medical school grow at a snail's pace, Engleman obtained a position with American Express, starting as an assistant cashier for sixty, and then sixty-six, dollars per month. He was able to save between forty and forty-five dollars each month toward his goal.³

² Cliff Robinson, "Last 'Country Doctor' in Floyd Still Going Strong After 48 Years," Louisville *Courier-Journal*, June 13, 1959; Prentice Seacat, "Some Facts from the Life of Dr. H. K. Engleman," unpublished manuscript, c. 1958.

³ One of Engleman's grade school students was a bright but mischievous lad, always with muddy shoes, who had to be challenged with more difficult exercises to keep him busy. The student was young Sherman "Shay" Minton, future Supreme Court justice. Years later, Minton dropped by Engleman's waiting room and asked if he could enter the doctor's inner office. Engleman replied, "come in, if your shoes are clean." Robinson, "Last Country Doctor"; Seacat, "Some Facts"; Gayle Arganbright Engleman, interview with author, summer, 1987.

In 1907, at age twenty-eight, with \$1,500 in savings, Engleman entered medical school in Louisville, Kentucky. As a freshman he demonstrated his lifelong scholastic inquisitiveness by winning the Faculty Gold Medal for the highest grades in his class. He graduated in 1911 after completing the four required years of training and started his practice in Georgetown, where his parents had moved. The New Albany *Weekly Tribune* noted his arrival: "Harry K. Engleman, of Georgetown, has been granted a license to practice medicine. He is a son of Former County Commissioner Jefferson Engleman and is a graduate of the medical department of the Louisville University."

It took time for Engleman to build a thriving practice in Georgetown. The four or five hundred people in the immediate area were already served by four doctors when the newcomer opened his office. In addition, there were nine other country doctors within a ten-mile radius of Georgetown. The countryside surrounding the village, however, was anyone's territory, provided the doctor had the means to reach his rural patients.

Engleman's transportation early in his practice was a horse, "Old Prince," who was either saddled or harnessed for a road cart and buggy, depending on the condition of the weather. On one occasion the mud was so deep that Prince mired down and could not take another step until help was obtained. When Engleman finally "reached the patient's home he was told he would never be called again as it took him too long to get there." After six years of using a horse as his mode of transportation, the doctor changed with the times and in 1917 bought a new Ford car, remaining a "Ford man" for the rest of his days.⁵

A country doctor worked hard. He was on call twenty-four hours a day and seven days a week. Infectious diseases in the pre-antibiotic era made the days and nights even more strenuous and hectic. Doctors did not earn much, even when paid in cash or in farm produce such as spareribs, sausage, or sacks of flour. All too often, medical bills were never paid. The first page of Engleman's ledger, begun in 1911, indicates he had billed patients for \$27.05 but had collected only \$8.25.6

During the early years of his practice, Engleman generally charged between fifteen and thirty-five cents for an office visit and fifty cents for a house call. The fees naturally varied according to the severity of the case or the amount of work involved in the

⁴ Robinson, "Last Country Doctor"; Seacat, "Some Facts"; New Albany Weekly Tribune, October 20, 1911.

⁵ Seacat, "Some Facts"; Robinson, "Last Country Doctor"; interview with Gayle Arganbright Engleman.

⁶ Robinson, "Last Country Doctor"; Seacat, "Some Facts"; Dr. Harry K. Engleman, medical ledger, 1911–1917, October 12, 1911.

treatment. Since Engleman dispensed his drugs and medicines from the office or from his medical bag if he were on the road, the final charges were conditioned by the amount of medication given. Engleman apparently found counting pills time consuming and repugnant and thus charged a certain amount for one handful of pills in a small envelope and a higher price for two. Later his wife convinced him that he had been losing money, especially after costly antibiotics were developed. Engleman apparently was more interested in his practice than in making money and collecting fees.⁷

The practice Engleman found so challenging was similar to that of many other country doctors during the first decade of the twentieth century. As a general practitioner, Engleman had to be a jack-of-all-trades: he had to make the right diagnoses, administer the proper medications, dress wounds, set broken bones, deliver babies, consult with other doctors, give anesthetics and inoculations, and be prepared to meet any kind of medical emergency.

Engleman and other rural Indiana physicians were better prepared to treat their patients than their pioneer predecessors had been because of the great changes in the structure and practice of medicine during the nineteenth century. National and state professional organizations such as the American Medical Association and the Indiana State Medical Association promoted high standards and provided a certain amount of influence over the qualifications and education of physicians. Great strides in science made medical practice for the early twentieth century physician widely different from that of pioneer doctors. The work of Louis Pasteur, Robert Koch, and many others prepared physicians by 1900 to understand and treat a score of diseases that stumped nineteenth century physicians. Anthrax, tuberculosis, diphtheria, pneumonia, gonorrhea, cholera, malaria, leprosy, tetanus, dysentery, and bubonic plague were no longer so mysterious.⁸ New scientific discoveries helped

⁷ Robinson, "Last Country Doctor"; Seacat, "Some Facts."

⁸ The first meeting of what would become the American Medical Association was held in 1846. The AMA's program sought to establish higher standards for medical degrees and to eliminate "irregular practitioners." The organization, however, had limited success in achieving its objectives until the turn of the century. Paul Starr, The Social Transformation of American Medicine (New York, 1982), 90-91. For a discussion of late-nineteenth century diseases and medicine, see Harry F. Dowling, Fighting Infection (Cambridge, Mass., 1977); and John S. Haller, Jr., American Medicine in Transition, 1814-1910 (Urbana, Ill., 1981). For an overview of the development of medical care in Indiana in the nineteenth century, see Madge E. Pickard and R. Carlyle Buley, The Midwest Pioneer: His Ills, Cures, and Doctors (Crawfordsville, Ind., 1945); Jacob Piatt Dunn, Indiana and Indianans: A History of Aboriginal and Territorial Indiana and the Century of Statehood (5 vols., Chicago, 1919), IV, 797-835; Gerald O. Haffner, "Some Aspects of Medicine in Pioneer Southern Indiana," Filson Club History Quarterly, LI (April, 1977), 167-89. See Clifton J. Phillips, Indiana in Transition: The Emergence of an Industrial Commonwealth, 1880-1920 (Indianapolis, 1968), 469-81, for a discussion of public health in Indiana in this period.

dispel older beliefs that diseases were caused by poisonous miasmas floating in the atmosphere, and new diagnostic techniques caused turn-of-the-century doctors to put more emphasis on individual health examinations to prevent disease and preserve health.⁹

Engleman, then, began his practice in a period of great transition. His rural and urban colleagues straddled the practices and beliefs of the nineteenth and twentieth century. Engleman's ledger shows that he used techniques which were locally accepted practices but were not the latest scientific procedures. One of his most important responsibilities was the enforcement of guarantines for certain highly contagious diseases. Once he had lifted the quarantine, Engleman fumigated the premises by sealing the buildings and burning formaldehyde candles, as he did at the No. 5 School in Georgetown Township. By 1911, however, when the ledger begins, physicians in large urban, but not rural, areas had stopped the practice of fumigation. Other developments in medical science affected Engleman's practice greatly; as he began his career, the Georgetown physician became acquainted with large numbers of new drugs, which opened up new avenues of treatment but also increased the cost of medicine.10

Although the fees Engleman charged and marked in his ledger may seem incredibly low when compared to medical costs today, they were not out of line with the cost of food, furniture, and other necessities at the time. During the week that Engleman began his practice in Georgetown, the New Albany Weekly Tribune advertised butter for eighteen cents a pound, turkey for eight to twelve cents a pound, spring chickens for nine to eleven cents per pound, and geese for six cents a pound. Eggs were twenty cents a dozen. A year's subscription to the Weekly Tribune was \$1.00 per year, paid in advance. New kitchen cabinets, at \$30.00, could be purchased with \$1.00 down and \$1.00 per week. A three-piece parlor set, with settee, rocker, and chair cost \$18.75 on sale, reduced from \$30.00. The market quotation from Indianapolis listed wheat at ninety-three cents, corn at seventy-two cents, and oats at forty-eight cents per bushel.¹¹

With the above quoted figures in mind, Engleman's fees do not appear to be so unusual for his time. For twenty-five cents he swabbed a throat or extracted a tooth, lanced a carbuncle, treated a toe, or cauterized a baby's foot. Lancing a tonsil, removing a foreign object from the eye, cauterizing a dog bite, or bandaging a leg, a thumb, a neck, or an ankle cost the patient less than thirty-five cents. Higher charges were listed for more complicated procedures:

⁹ Starr, Social Transformation of American Medicine, 192.

¹⁰ *Ibid.*, 189-90; Engleman, ledger, February 10, 1914.

¹¹ New Albany Weekly Tribune, October 13, 1911.

opening an abscess or a nail puncture in a foot or removing an ingrown toenail and medication, fifty cents; catheterizing a male, seventy-five cents; cutting glass from a boy's foot, fifty cents; taping broken ribs, \$1.00; extricating a crochet hook, \$1.00; treating a broken jaw, \$1.50; eliminating a wart, \$1.00; dressing a gunshot wound to the leg, \$2.00; reducing a fracture of arm or clavicle, \$5.00; and attending a man's wife who had aborted a fetus, \$7.00.12

Engleman's medical ledger indicates he was in touch not only with local Hoosier physicians but with those connected with the hospitals in Louisville as well. He may have used New Albany's St. Edward Hospital, which had been built in 1902, but the ledger mentions only St. Anthony, St. Joseph, and Deaconess hospitals in Louisville. Time after time, Engleman noted trips across the Ohio River with patients to get x-rays, to check patients into a hospital, to attend operations and visit patients, and to bring patients home after treatments and operations. Going to hospitals in Louisville with his patients was only natural since he graduated from medical school there. 14

Engleman recorded his consultations with Indiana medical men in the ledger: "Went to Crandall with Dr. [Elmer] Taylor to see Dr. Dave Buley." He took a Saturday and Sunday off to visit Dr. Joe Byrne at Kurtz, Indiana, went to Crandall to see Dr. Guy D. Baker, visited Dr. L. F. Glenn at Ramsey, and discussed medical problems with Dr. Ben Teaford of Georgetown. These notations were just a few illustrations of the communications between Engleman and his colleagues in the vicinity. These physicians also filled in for each other whenever necessary and assisted each other when help was needed. Engleman gave anesthetic to Teaford's patient who had a painful fistula and to Taylor's patient who had to be circumcised. At various times, a governmental agency requested a physician's inquest. On May 22, 1913, Engleman wrote, "Went to Crandall to help Dr. Baker hold a Lunacy Inquest." At a later date, he billed Harrison County \$4.00 for an inquest on a person to be sent to an "Epileptic Home."15

A country doctor did not have much idle time on his hands. It took many hours to keep the office open. There were urinalyses to run; physical examinations to conduct for civil service, pension, and insurance applicants; vaccinations for smallpox and antitoxins for typhoid and diphtheria; and tuberculin injections to give. Once in

¹² Engleman, ledger, August 21, 1913, passim.

¹³ Betty Lou Amster, *New Albany on the Ohio: Historical Review, 1813–1963* (New Albany, 1963), 87; Engleman, ledger, July 21, September 21, 1913, and August 22, 1915.

¹⁴ One item in the ledger states that Engleman administered anesthetics for two doctors in New Albany, for which he charged \$15.00. This may have been done in the local hospital, but the record is unclear. Engleman, ledger, November 5, 1915.

¹⁵ Engleman, ibid., June 26, 1914, passim.

a while the tranquility of Georgetown was disturbed by quarrels and fisticuffs. One lad's pugilistic ability did not measure up to his opponent's, and he had to be carried into Engleman's office for examination and treatment as a result of a titanic blow to the stomach.¹⁶

With patients from Georgetown, Lanesville, Corydon Junction, Byrneville, Edwardsville, Crandall, Bradford, and the surrounding countryside, as well as a few coming to his office from Scottsburg and DePauw, Engleman depended on others to perform household tasks he had no time to do himself. He often traded his services with others; he credited \$2.25 toward a man's medical bill in exchange for the man's work on his buggy. On December 22, 1913, he gave another patient \$1.00 credit for the installment of a "tel box," an indication that the telephone had arrived in Georgetown.¹⁷

The arrival of World War I in Europe eventually produced a price increase in the United States. This inflationary trend was slowly reflected in Engleman's ledger. Hypodermics went up from fifty cents to \$1.00 and then to \$1.50; a similar rise occurred in house visits, from fifty cents to \$1.00 in 1914 and to \$1.50 in late 1915. Office visits rose in a proportional manner to \$1.50 by the end of 1916. Drugs, antitoxins, and medical supplies all were affected by the inflation.

Times were rapidly changing. Developments such as the first automobile electric self-starter in 1911 meant there were no more broken arms from trying to crank the popping, back-firing engines. But other accidental consequences of the gasoline age began to appear on Engleman's doorstep. The doctor was called to an automobile wreck on May 9, 1915. The victim of the accident was seriously injured, and the doctor stayed four nights by the patient's bedside. Through the holiday, July the Fourth, Engleman maintained the vigil, but the patient succumbed at 8:45 p.m.

As a physician, Engleman was all too familiar with death. He frequently logged in his ledger a somber and painful phrase indicating that his patient had died. Once two patients died on the same day. Engleman had known many of these men and women for years and had treated some from the first days of this medical practice. His notations were brief; a patient "died at 5:45 a.m. of apoplexy," and after an emergency call to a home, a girl "died in 1 hr. after arriving." ¹⁹

He could not save all his patients, despite his efforts. Engleman worked long hours even on holidays. On December 25, 1911,

¹⁶ *Ibid.*, September 21, 1913.

¹⁷ Ibid., July 21, 1913.

¹⁸ William E. Leuchtenberg, *The Perils of Prosperity*, 1914–1932 (Chicago, 1958), 16-17.

¹⁹ Engleman, ledger, March 28, October 12, 1915, August 8, 1916.



Dr. and Mrs. Engleman on Front Porch in Georgetown ${\it Courtesy} \ {\it of} \ {\it Mrs.} \ {\it Harry} \ {\it K.} \ {\it Engleman}$

the first year of his practice, he had six patients in for treatment; on Thanksgiving Day, 1916, the record shows that he saw fourteen. It was not an easy life, but once in a while he slipped away from his busy schedule. He attended various medical association meetings; a note for September 25, 1913, reads: "Went to West Baden to State Medical Meeting Thursday and Friday. Arrived home Saturday morning." He was a member of the state society, and the national and county societies. He also took time to attend medical lectures in Louisville. One afternoon he saw a patient in a Kentucky hospital and then recrossed the Ohio to New Albany to see the fireworks at the popular Glenwood Park on the bank of Silver Creek before he returned up the Knobs to Georgetown.²⁰

Thus he sporadically managed a little time away from medical matters. His trips to Louisville to buy a new suit of clothes and in 1915 to spend the Christmas holidays are instances listed in the ledger. He also attended the "Corydon Fair," technically known as the Harrison County Fair, which had been held annually since 1860. Engleman enjoyed the pastimes of hunting, trapshooting, and euchre playing. Hunting, especially, found its way into his record. He expressed his musical talent through the violin and trombone; he played both of them in the local orchestra, which was in demand for public functions such as school commencements. He went to New Albany for concerts whenever he found the time and circumstances favorable.²¹

Small-town doctors who served a large rural area had schedules that did not leave much time for personal affairs. Engleman was forty-three years old before he married in November, 1922. Gayle Arganbright, whom he had treated since 1911 for head colds, sore throats, earaches, and the like, was seventeen years younger than he was. Their marriage ceremony was simple. The "I do's" had just been uttered when the groom received an urgent call from Bradford to treat a seriously sick woman, so the couple was on their way; after ministering to the patient, who had no money, the doctor and his bride accepted a rag rug for service rendered.²²

Gayle Arganbright Engleman learned from the first day of marriage what it was to be a doctor's wife. She was a housewife in their home and a medical assistant, secretary, and bookkeeper in the office. Evidently the doctor leaned on her heavily to manage his fiscal affairs. Prior to his marriage he neglected sending bills to those patients who had not paid at the time of treatment—he was too busy delivering babies (late in life he estimated he had deliv-

 $^{^{\}tiny 20}$ Amster, New Albany on the Ohio, 82-83; Engleman, ledger, November 30, 1916.

²¹ Engleman, ledger, April 10, 19, 1916; interview with Gayle Arganbright Engleman; Seacat, "Some Facts."

²² Interview with Gayle Arganbright Engleman.

ered abut one thousand) and tending to other aspects of doctoring. The couple had no children of their own, but they took "different children into their home" and helped them. A foster daughter is mentioned in a newspaper obituary. In addition to membership in the medical societies, Engleman was a member of the United Brethren church, Masonic Lodge, and the Louisville Rifle and Revolver Club. In 1942, at the age of sixty-three, he suffered a "cerebral accident," or stroke, which resulted in paralysis of his arm. He prescribed himself trapshooting to regain control. Eventually he was able to hold office hours and to make house calls with his wife doing the chauffering.²³

During his days of good health and his post-stroke practice, Engleman saw changes in medicine and its profession accelerate, in both therapeutics and structure, even faster than the advancements made in the previous century. Drug research progressed remarkably. Alexander Fleming's discovery of the "germ-killing power" of the mold penicillium led to the development in the early 1940s of the first antibiotic. Other new, sophisticated drugs were found to combat high blood pressure, diabetes, and other maladies. The structure of medicine and the delivery of medical services changed also. Corporate clinics, company doctors, and health insurance altered the environment of the private practitioner. Country doctors also witnessed the shift in United States population from predominantly rural to urban communities. Many physicians followed patients into the cities. And an increasing number of Engleman's colleagues became specialists. The small-town practitioner became a declining breed.24

Ill health eventually forced Engleman to retire from active practice, but he tried to keep his office door open as long as he could. He and his wife spent his last five winters in Tucson, Arizona. An open house was held in his honor on his eighty-first birthday. The Indiana State Medical Society presented him with a plaque, recognizing his fifty years of medical care for the people of southern Indiana. He died at the age of eighty-three, on February 5, 1963, and he was buried in Wolfe Cemetery, west of Georgetown in the midst of the hills and countryside he served.²⁵

This man from Georgetown labored for half a century as a country doctor. Harry K. Engleman probably was not concerned about leaving any historical account when he logged his daily rou-

²³ Robinson, "Last Country Doctor"; Seacat, "Some Facts."

²⁴ For a discussion of changes in medicine in the first half of the twentieth century, see Starr, *The Social Transformation of American Medicine*, 199-353; and George Rosen, *The Structure of American Medical Practice*, 1875–1941, 1-116.

²⁵ New Albany *Tribune*, February 6, 1963; interview with Gayle Arganbright Engleman; Louisville *Times*, February 6, 1963; and Louisville *Courier-Journal*, February 6, 1963.

tine in his record books. Nevertheless, as a result of the preservation of his first ledger covering the years 1911 through 1917, those who are interested in the past are his beneficiaries, because in this document he revealed much about himself, his colleagues, and the nature and practice of medicine in southern Indiana during the years immediately preceding World War I.