

Youngstown State University  
Oral History Program  
YSU History

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Ruth DeCicco  
Interviewed  
By  
Patricia Opsitnik  
On  
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YOUNGSTOWN STATE UNIVERSITY  
ORAL HISTORY PROGRAM  
YSU HISTORY

INTERVIEWEE: Ruth DeCicco

INTERVIEWER: Patricia Opsitnik

SUBJECT: YSU History

DATE: August 22, 2001

P: This is an interview with Ruth DeCicco for the Youngstown State University Oral History Program, on YSU History, by Patricia Opsitnik, at the interviewee's home in Youngstown on August 22, 2001 at 3:15 p.m.

O: First of all, how did you pick Youngstown Hospital association school of nursing?

D: I suppose because I just lived here and there might have been some members of family had gone there that were sick or something. So, that's the reason I picked it.

O: So you lived in the area all your life?

D: All my life. I was born in Youngstown on Homewood Avenue. After a short while, the family was in Struthers, maybe two years, and they came back to Youngstown and I've lived there ever since.

O: Let's talk a little bit about the dormitory. What was it like when you had to live there?

D: Oh, wonderful, didn't you live there?

O: Absolutely.

D: Well, it was wonderful. We had about two or three roommates. Some of the girls' rooms were larger, so there were three to a room, others were two. Twice during my nursing I had a single room, so I had two single rooms. We had one nurse, Helen Schmitt, she could sing and every night she would serenade me with beautiful songs and

we got along well and, of course, the night nurse would ring the bell – it was 6:00 to get up! We got up, got dressed, had breakfast, and then we had to go to chapel.

O: I've heard of this before [. . . inaudible . . .]

D: Chapel in the living room of the nursing dorms. They had chapel and sang songs and maybe, if the supervisors or nurses wanted to tell us something, they did, we had a little prayer, put our capes on, and walked across to the hospital; our capes were warm. Sometimes if it was raining, then they went down through the basement tunnel to the hospital .

O: What about your house mothers; what were they like?

D: Oh, very, very, nice, very good, very caring. They would check on us and we never had any arguments or nothing, unless you came in late, you know.

O: That was expected.

D: If I had an afternoon off and you had to be in by 11:00 p.m., I'd come on the bus to go to the center of downtown, I'd go on a bus to go up the hill to go up to the hospital, but I just couldn't be patient enough to wait for the bus to downtown, so I'd walk across Market Street Bridge to Ridge Avenue. Today, you wouldn't do that, you wouldn't dare do that.

O: Well, you know when I was in training, we graduated '69, I used to go and sit and study in the cemetery.

D: In Oakhill Cemetery?

O: Yes, yes.

D: I remember the girls used to do that because it was quiet. Many times, when we were off-duty, we would go down to Isly's Dairy to get an ice cream cone. We walked through the cemetery, down the hill, and then down Mahoning Avenue, and back up. And, oftentimes, we used to go down to downtown and had coffee and maple nut rolls . . . inaudible . . . down there and then go back up. That was our retreat.

O: There used to be an Isly's not too far down on Market Street. No, not on Market Street, Federal Street. When I was a little girl, my mother used to take me down with her on the bus to the doctor's offices, she would take me down to Oles Market to get me a hard roll with butter and chocolate milk. That's was the best thing in the world.

D: Oh, yeah, that was a treat.

O: How much of your time was spent studying? Did you have study hours?

D: Yes. The doctors used to teach us, too, as well as our instructors. All of the doctors were very good; there were doctors in surgery and one in neurology and one in ob, we would go to those classes at night and the supervisors and other teachers would go over that work with us. So, almost every night of the week we had a study period in the house, there was a house, an old house there that was still on the grounds, and we would study there for a good hour at a time, almost every night.

O: How did you find the food? Was the cafeteria to your liking?

D: Well, the food to me was always alright. I think it's because of the way you were raised, you know. There were some girls that would say was it or is it or was it or has it been but, on the whole, I think the food was good.

O: Well, you know, I think you're right about the food . . . inaudible . . . my mother always said that you eat what's on your plate.

D: Yes, any food was good if you were brought up during the depression. I was trained during the depression days, so that was good.

O: We didn't . . . inaudible . . . Frankly, I liked the food.

D: We always went down for a snack in the living room underneath the nursing home, crackers, crackers with peanut butter.

O: Sure. I liked the food better at North Side than at South Side.

D: Yes, I agree with you on that.

O: But mostly because, at North Side, they would make me sandwiches and I liked that Pastrami. Did you have a host burning ceremony?

D: A host burning ceremony?

O: Right. Remember the black stockings and shoes?

D: No, we did not.

O: I haven't figured out yet when that started. I talked to Ruth Healy, she graduated in '49, and she said they didn't do it, but it was something that had been done apparently prior to our class.

D: And then the nurses started wearing white, white hose.

O: Well, actually, they didn't. We wore the black hose for the first two years; we didn't get white hose until our senior year and, you know, everybody was scratching a mile away.

D: Talking about black hose . . . inaudible . . . I had a classmate, Florence Kelly, she would put her hose on and there were so many holes in the feet it wasn't even funny. One day, I saw her with a safety pin pinning her hose. I said, "Kelly, give me your hose!" and I mended her hose for her. She was . . . inaudible . . . but a very good nurse.

O: I used to buy mine at McKelvey's and, I know, one time the clerk asked me what order the nun was in that was buying the stockings.

D: Oh my, dear me!

O: Did you have telephones on each level of the dorm?

D: No, the only time I remember there's a phone down by the house mother's office; we didn't have phones up on the hallway.

O: That came later. What about boyfriends? Pretty much relegated to the foyer area?

D: Yes. I never had a boyfriend up there, but we used to get in groups and I know Josephine Roscoe-Koherick had a boyfriend; she got married, in fact, the day she graduated. Paul would bring his truck and all the nurses were friends would pile in the truck and we'd go somewhere. I didn't date very much when I was in nurses training.

O: It's interesting; things are going back to the way they were. Kids don't go on individual dates anymore; they go on group dates.

D: Yes, this is true.

O: From a parent's point of view, this is wonderful. What kind of classes did you have? Nursing arts, anatomy, those kinds of things?

D: Yes, anatomy, and then we had the doctors, as I said, and the teachers that were there that taught us medication preparation, nursing, special care for urology patients and heart patients. We were taught well.

O: Oh yeah. You said that they were taught both by doctors and nurses?

D: That's why I think it was a really good school; it's just a shame that it dropped. I think it's wonderful how the doctors gave that much time to teaching; well, like they teach the interns, now. Dr. Noel, Dr. Brown, Dr. Sedwichc, Dr. Kaufman, even . . . I can't think of his name; it starts with an 's'.

O: Did you have a capping ceremony?

D: Yes.

O: When was that?

D: I think, when I was there, we were given our skirt and our bib and after, I think it was about six months or so, we got our cap. Then there's certain requirements of nursing and we got a chevron and then that was Miss Lindey's idea. She carried that from England; have you heard of that?

O: Yes, I heard that. I know them.

D: You know them? And after so many months, you got your second chevron.

O: After you completed certain procedures?

D: Yes.

O: What do you remember about the state boards? Anything in particular?

D: Just that we went in a group down to state board and we stayed in a hotel in the center of Columbus. We had fun, like all girls had fun, you know, silly billy, and we sat down and we did review and study our work, but it just seemed like, when we sat in those rooms and writing those answers to the questions, it was just taking forever, you know.

O: Were your state boards two days, three days?

D: I think it was two days, on the third day we come home.

O: I think I seem to remember ours were two days, also. You know what I spent doing the night before state boards? Memorizing the dimensions of the pelvis, okay, because I was positive that there was going to be a question on the test about all diameters and proportions, and frankly OB was my worst subject.

D: I still have my old book and I still have my state board grades. Do you know what the lowest grade was? In ethics.

O: Is that right?

D: I don't think I'm an unethical person.

O: What kind of things did they test you in?

D: Well, they basically, the state boards are based on your clinical knowledge, but they're done differently now.

O: You knew you had passed? You don't have to wait several weeks for them to mail you if you pass or not to find out your grades?

D: No, no, you immediately know if you pass.

O: Is that good?

D: Well, you know what, it kind of makes me wonder because, I mean no test is perfect, I'd be the first to agree with you there, but given the testing, it seems to me that 75 questions is sort of a light dip a fully vast pool of knowledge.

O: Each subject we used to answer questions.

D: We had . . . inaudible . . . , we had all the rotations on surgery, obstetrics, pediatrics, psychiatry, you know, all of those things and there were at least 300 questions in each section.

O: Yeah, we had that, too.

D: And we went down to the . . . inaudible . . . to be fair and we took our test. It was brutal, I have to say, it was brutal.

O: You knew your stuff.

D: Well, you know, I think so. But the thing that worries me is that the chance of a nurse to get through those 75 questions is sufficient to allow them a passing score, but with huge holes in the knowledge bin. What do you do with those people? Of course, if you had anyone in the hospital, you know what you need to do is sit by their bedside 24 hours a day.

O: If you get a chance, read in the Reader's Digest this month about that article on hospitals that says sometimes they're so short on nurses they take even the aides and the cleaning ladies, give them a week course on how to do an iv.

D: Oh, yeah, it's really grim, it really is grim.

O: It frightens people. They read that, you know. My husband keeps saying it's because of the state and the nation that's been demanding these things on the hospitals.

D: Well, first of all, the hospitals have not been comfortable in terms of staff. The patients that you see on a general-med floor now are the patients we had in ICU 20 years ago. They're sicker, the insurances are trying to dictate their care so they are going home sicker than they used to, and god knows they're sicker when they come in than they ever were. I mean, if you're not practically dead, you're not in the hospital.

O: That's one thing I say about some of the doctors. You know, if it's and outpatient and they have it done and go home, but the doctor will say, "This patient needs to stay over night" and that's a lifesaver, because I have a sister-in-law just had an angular hernia done, and they said she had to go home overnight and she's up in the air, and her doctor said, "No, she stays overnight," and that's a godsend.

D: But see, they can't do anymore than that, can they? It's difficult to get them to agree to anything.

O: Yeah . . . I can agree with that.

D: I hope Ohio has the sense to do the same.

O: Yes. Oh, who was your favorite teacher?

D: Their was a Miss Thompson and there was a Miss Aubrey. She taught obstetric nursing; she was good. She was a sister-in-law to Mrs. Aubrey or Miss. Neilson, and she was a good teacher. We had a Miss MacComus, too; she was a good teacher. I forget just what she taught.

O: What's the first thing you remember about being on a floor?

D: Well, you know, you hear sort of stories from the other girls, and that. I was a little shaky, I think. I did everything they told me to do. But, I thought it was wonderful, I know. I remember, too, when I was in OB, we used to observe at first in the labor room, and I had studied about babies being born, but I stood there and watched that baby be born, and I started to cry. I thought it was the most beautiful thing that ever could be, and it was beautiful.

O: Yes, it is, it's wonderful.

D: I remember that very well.

O: It's absolutely wonderful. That's one thing about obstetrics, you have to give it that. Every healthy baby that's born is such a miracle. I mean, my goodness.

D: Here's another thing about obstetrics. You know the long corridor in North Side, not delivery but maternity floor, we used to take each baby out to the mother to nurse, back again, go to the next mother, back again, well, you know, it wasn't too long before they had the stretches and they put three or four babies on the stretcher with a nurse watching them all the time. And then, an individual nurse would take them in to the mother to nurse. But, we used to walk back and forth all that time. No wonder my legs hurt me my whole life!

O: How many hours of clinical did you have?

D: You mean, each day?

O: In a week.

D: In a week I had . . . you mean in training? I think we worked about four hours and then studied four hours or something like that, so that would be in a week.



O: So, did you pretty much staff the units? Were their graduate nurses with you?

D: Oh, yeah, there was a supervisors on each floor, also an assistant supervisor.

O: Okay. What was your typical patient assignment?

D: A typical patient?

O: Assignment, yeah. How many patients did you care for at the same time?

D: Oh, it depended on their treatment, I think. We always took temperatures and pulse. We always did morning care, then the dressings that you had to do, then as you got older in nursing you gave the medication.

O: Yeah, it just gets more complex. Now, your uniforms had short sleeves?

D: Yes, we had short sleeves and stiff cuffs as a student.

O: What about the equipment? What changed over the years in terms of equipment that you used in taking care of patients?

D: Oh, well, we used to have these irrigation equipments, like they used to do bladder irrigations on gallbladders. Then, of course, the intravenous like that were always were, like for the bottle and the fluid. Then of course the dressing trays, there were instruments on the dressing trays. I'm trying to think of the solutions. The solutions were made in oil. I remember there was bottles on the shelves, irrigation saline. Then the men who had trans or usual irrigation, I believe that was a borg solution that they gave them. The intern would start it then you had to watch it, you know.

O: I think I remember seeing those big card boys up in, that was in surgery when I saw them, but they were up in where the big auto clips were up in the floor up above.

D: Oh, yes, because I worked there during, what did they call that? Where we made the solutions and the . . . inaudible . . . We did that during the war when there wasn't any, you know, a shortage of nurses. We used to go around and help.

O: Did you have anything like a care plan to write?

D: A what?

O: A care plan.

D: A care plan?

O: You know, nowadays one of the things that the nurses are required to do for commission standards is to write out a plan of care that they're going to deliver to the patient and the patient has to agree to it.

D: I see, and that's for when they go home?

O: No, that's for while they're in the hospital, and there's another for when they go home.

D: Oh, no, the only thing we used to do: keep a chart at night of the treatments and everything of the patients, but we never gave any care plans out that I remember, unless a supervisor did that.

O: Okay, very good. Did they give you an inspection, like with your hands and your uniforms and all that stuff?

D: No, no. I think when you went to the chapel service, your supervisor or whoever was the head of that checked over the girls to check that they were dressed right, clean uniforms and so on.

O: Did you wear a different outfit to class than you did on the units?

D: No, we wore our uniforms.

O: As a matter of fact, they changed the uniforms again when we started. They went to a one-piece permanent press. It was awful; they were ugly. We were so disappointed because we liked the uniforms, and what they did was that.  
... away from the microphone; inaudible ...

O: It was an ugly thing.

D: I agree with you; whose idea was that?