



First Pediatric Orthopaedic Fellow at the Children's Hospital of Philadelphia: A Success Story

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In 1958, the Children's Hospital of Philadelphia (CHOP) was located on Bainbridge and 17th Street in Philadelphia, Pennsylvania (Figure 1). During this time, the hospital staff consisted of individuals revered today as pioneers in medical history. Primitive surgical techniques, in conjunction with evidence based medicine and clinical research, helped to develop some of the procedures used by surgeons today. One doctor from Argentina by the name of Jorge Groiso (Figure 2) was the first pediatric orthopaedic fellow at CHOP, beginning his fellowship in 1958 and finishing 18 months later in 1959. Since completing his training at CHOP, he has become the President of the Pediatric Orthopaedic Society of Argentina, in addition to designing surgical instruments and owning fourteen U.S. granted patents. In this article, Dr. Groiso graciously recounted his experience at CHOP in a way that vividly depicts hospital life during this time.

Dr. Jorge Groiso began his pediatric orthopaedic fellowship at CHOP on July 1st, 1958. As a foreigner from Buenos Aires, Dr. Groiso lived at the hospital where room, board, uniforms, and laundry were provided. Considering his 100 dollar a month salary, such services were much appreciated. As a means of assimilating and welcoming him to the American way of life, a family provided by the Junior League invited Dr. Groiso to participate in their Christmas, Thanksgiving, and Independence Day celebrations. As Dr. Groiso recalled, "it was the most wonderful experience for a lonely foreigner."

The hospital also strived to provide the best in educational resources. "We were invited to travel once a month for lectures at [other hospitals such as] the duPont Institute [in Delaware]... we attended lectures by Risser, Cobb, Kite, Aegerter, and many other famous orthopaedists." In addition to visiting Boston Children's Hospital for two weeks, Dr. Groiso also traveled every two or three months to a clinic referred to as the Seashore House in Atlantic City (Figure 3). The Seashore House was originally built for the treatment of tuberculosis; however, in later years, it was dedicated to the care of orthopaedic patients who required longer hospital stays. In 1990, as a result of monetary issues, the Seashore House relocated to CHOP, where it now serves as the hospital's musculoskeletal center.

Dr. Groiso worked alongside many well-known individuals in the field of orthopaedics.

Dr. Jesse T. Nicholson, a man known for directing the orthopaedic service at CHOP, was chief of orthopaedic surgery at the time. Dr. C. Everett Koop, the chief of surgery and president of the medical staff, established the nation's first neonatal surgical intensive care unit two years prior to Dr. Groiso's residency. Dr. Joseph Stokes, chief of internal medicine, laid the foundation for scientific research at CHOP by establishing research fellowships and acquiring space within the hospital for research labs. Dr. Eugene Spitz, chief of neurosurgery, designed a valve for the release of pressure build-up related to hydrocephaly. His device cured patients who would have otherwise died from their conditions, and consequently boosted the reputation of the hospital.

Dr. Groiso was expected to care for patients in the ward under the guidance and supervision of the attending staff. His duties included updating clinical charts and choosing surgical instruments the night before an operation. According to Dr. Groiso, some of the more popular surgical implants included Steinman pins, Kirschner wires, Rush pins, and threaded wires. Bosworth splints for interochantheric osteomies, Lane plates for osteosyntheses, Sherman screws, and Kunstchner clover nails were used only in extreme surgical cases. As Dr. Groiso remembered it, however, "almost all surgery could be done with crossed wires and a cast."

During his time at CHOP, Dr. Groiso saw a variety of orthopaedic conditions. "The most frequent consultation at the clinic was flat feet... sole wedges and arch supports were prescribed.



Figure 1. A photograph of the Children's Hospital of Philadelphia during Dr. Groiso's fellowship.

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Figure 2. A current picture of Dr. Jorge Groiso.



Figure 4. Dr. Jorge Groiso's certificate of completion of the residency program in orthopaedic surgery at the Children's Hospital of Philadelphia (dated 18 months from July 1st, 1958).



Figure 3. A photograph of the Seashore House during the 1950s.



Figure 5. A picture of Dr. Jorge Groiso and Dr. John P. Dormans during Dr. Groiso's visit to the Children's Hospital of Philadelphia in February of 2010.

Many parents asked for orthopaedic shoes because they were paid for by someone else and, faithfully, they [would] return every six months for a new pair of shoes." Long bone fractures were treated with a soft tissue traction (either Buck's, or Russell's skeletal traction) until a soft callus was formed. Then, a plaster cast was applied. Regarding humeral supracondylar fractures, if no reduction could be performed or if the swelling was pronounced, a wire was passed through the olecranon and overhead traction was applied. Treatment for scoliosis included the old model of the Milwaukee brace with a chin support. The more pronounced cases required a full-body plaster cast with the neck and chin included within the cast as well. Clubfoot, another common condition seen at the time, was treated with the Kite cast wedging technique. For simpler cases, doctors taped the patients' feet to a Denis Browne bar, which allowed for more freedom of movement. Any recurrences were treated with tendon releases or tendon transfers. As doctors' understanding of these conditions increased, many of the treatment protocols changed as well.

Dr. Groiso noted, however, that the only surgical procedure fully retained from this time was the triple arthrodesis, or the surgical fusion of the talocalcaneal, talonavicular, and calcaneocuboid joints of the foot.

Dr. Groiso finished his fellowship at CHOP in January of 1960 (Figure 4). Looking back on his fellowship, Dr. Groiso admitted that his time at CHOP "was the most important part of [his] professional career." Following his return to Argentina, Dr. Groiso joined the staff at the Children's Hospital of Buenos Aires where he officially started his career as a pediatric orthopaedic surgeon. Dr. Groiso has kept in contact with CHOP's orthopaedic division, and had recently sponsored Dr. John Dormans' visiting professorship to Buenos Aires (Figure 5). Fifty years after completing his training at CHOP, he still aspires to infuse within his younger staff the spirit of his residency: to be kind to the person as well as to the future specialist.