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Dr. Edwards House	Page 2	Garrard Co	unty KY	
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See continuation sheet(s) for Section No. 7

Dr. Edwards House

CONTINUATION SHEET

. Edwards House

Garrard County, Kentucky

Section 7 Page 1

Narrative Description

The Dr. Edwards House (GD-L-56) stands at 572 Danville Street in Lancaster, seat of Garrard County, Kentucky. It was constructed sometime between 1917 and 1928. When built, the property was owned by David C. Sanders, one of the owners of 3S Lumber Company, located on Hamilton Street in Lancaster.

History of the land and character of the site

The lot on which the house is located was part of a larger tract of land purchased by John M. and Mollie A. Sanders, the parents of David C. Sanders, in 1913. In 1917, John and Mollie Sanders deeded a 9.05 acre portion of the original purchase to two of their sons, Samuel Boone Sanders and David C. Sanders. In 1924, this 9.05 acre lot was divided between David C. and his wife Relda (2.11 acres) and Samuel B. and his wife Eva. When Dr. John and Laura Edwards purchased the 2.11 acres from David and Relda Sanders in 1928, the house was on the property. The Edwards owned the property until 1973, when Laura Edwards died. The Edwards' daughters sold the house in 1973.

The house, which faces south, sits on a rectangular lot that fronts along, and lies north of Danville Street, one of the main residential streets in Lancaster. The north side of Danville Street is a residential neighborhood of well-maintained older homes set on ample lots dating, for the most part, from the late-19th and early-20th century. The house immediately to the east was constructed at approximately the same time by Samuel B. and Eva Sanders, brother and sister-in-law of the builder of the Edwards home. The Sweeny-Lusk House and the George Denny-Ben Hudson House, three and four doors to the east, respectively, were constructed in the late 1880s and subsequently owned by prominent members of Lancaster business community.¹ The houses on the south side of the street date from the early 1980s. The back field of the property, to the west, is adjacent to a largely empty Garrard County Industrial Park.

The property displays a broad cultivated lawn that slopes toward the street. A **low stone fence** is next to Danville Street, built from concrete blocks and stone of the same style as the foundation of the house. A cistern is located on the west side of the house's back portion. On the east side and slightly behind the house is a **large detached garage** with a pyramidal roof. The garage has the same style of block foundation as the house. The 20' x 18' garage was originally clad in horizontal siding, but is now covered with white vinyl siding, added in the 1980s or 1990s to match the house. The original doors have been replaced since Edwards' residence.

Behind the garage is a **small garden shed**, 8' x 14'. The shed has a wooden floor, wooden shelves for storage, and the walls are constructed with rough vertical boards that have been painted white. The original back door to the house is stored in the garden shed. According to Mary Jo Hammonds, the owner of the house immediately after the Edwards, both the garage and the shed date from the years of the Edwards' residence. A chicken house and large outdoor fireplace were also located on the property during the time that the Edwards' owned the property, but these structures no longer exist. A garden plot was located behind the house during the Edwards' tenure. Mrs. Hammonds noted that in the years that she plowed an area behind the house for a garden, numerous discarded items were uncovered, including small glass medicine bottles and part of an old black doctor's bag.²

Property: Dr. Edwards House

CONTINUATION SHEET

Garrard County, Kentucky

Section 7 Page 2

Behind the house are a fenced field and a **small livestock shed** built sometime between 1973 and 1983. Behind the property are fields that are currently used for cattle farming. The setting of the house has not been altered since the Edwards' association with the property ended, with Dr. Edwards' death in 1957, and his wife's passing in 1973.

Description of the residence's exterior

The Dr. Edwards house is a 2-story frame Craftsman-style bungalow with a rectangular plan, and dormers piercing the front and back slopes of the roof. The house has a basement with a concrete block foundation. The back of the house contains a one-story kitchen and enclosed porch sitting on a concrete block foundation over a crawl-space. The house has decorative braces under the gables, and the house's many original windows have a decorative moulding across their top.

The front of the house has a porch across the front and a one-story porte cochere on the east side. The porch and front of porte cochere are supported by four square brick columns, two on each side of the front door. Two additional brick columns support the back of the porte cochere on the east face. The paneled front door has eight square beveled glass panes (four-over-four) in its top third. To the left of the front door are two six-over-one wooden-sash windows. The front dormer has a ribbon of six-over-one wooden-sash windows.

The east face of the house has four individual six-over-one wooden-sash windows—two on the second floor, one between the first and second floor that opens over the stairway, and one on the first floor. At the first floor is a set of two six-over-one wooden-sash windows and a smaller rectangular window with eight panes. The one-story porte cochere is attached to the front corner of the east face.

On the house's north (back) face is a one-story section with truncated hipped roof that covers the kitchen and what was originally a back porch. The porch was enclosed to provide additional living space prior to 1973. A small laundry room was added after 1983. This one-story section has one six-over-one wood-sash window on the east side and one six-over-one wood-sash window on the north side. The remaining 5 windows on one-story kitchen and laundry room are the same size as the original wood sash windows, but are newer metal windows with one-over-one panes. One enters the back of the house through a ca. 1980s door and storm door that gives access to the laundry room. On the north face, the second story dormer is visible above the one-story section. A ribbon of three six-over-one wood-sash windows, a modern one-over-one replacement window, and the original rectangular stained glass window, are visible.

On the first floor of the west face is a built-out bay protruding from the dining room. This feature has two six-over-one wood-sash windows. Two smaller rectangular windows, each with eight panes, frame the brick chimney. On the second floor is a ribbon of three six-over-one wood-sash windows and two smaller six-over-one wood-sash windows.

CONTINUATION SHEET

Property: Dr. Edwards House.

Garrard County, Kentucky

Section 7 Page 3

The residence's interior description

The interior of the house retains its original woodwork, mantel, brick fireplace, staircase, doors, windows and other features. The four front rooms of the first floor have their original oak flooring. Each room's floor has a different geometric pattern. The entry and living room have the original elaborate light fixtures. The living and dining room are divided by the original French doors. The upstairs bedrooms have the original pine floors. Original glass-fronted built-in cabinets are located downstairs, one set next to the fireplace and another in the large pantry/study adjacent to the kitchen. Built-in under-the-window storage benches are located in the living room, dining room, and two of the bedrooms. Built-in storage cabinets are also located in the bathroom. The dining room and upstairs bathroom have the original large rectangular stained-glass windows.

Changes to the Dr. Edwards House

The layout of the house and the room configuration has not been altered since the house was constructed, with the exception of the Edwards' choice to enclose the open back porch prior to 1973. A small laundry room was added to the enclosed porch after 1983 and a small half-bath was added in the enclosed porch area. The changes to the porch and creation of the laundry room required the addition of 5 metal-framed windows in a one-over-one configuration. During the 1980s or 1990s, the original horizontal wood siding, painted white, was covered with white vinyl, and the roof was replaced which now shows black asphalt shingles.

Resources Counted (described in the Description narrative, above):

Main Residence	Contributing Building
Garage	Contributing Building
Garden Shed	Contributing Building
Stone Retaining Wall	Contributing Structure
Livestock Shed	Non-contributing Building

Dr. Edwards House Name of Property

8. Statement of Significance

Applicable National Register Criteria

(Mark "x" in one or more boxes for the criteria qualifying the property for National Register listing.)

- A Property is associated with events that have made a significant contribution to the broad patterns of our history.
- B Property is associated with the lives of persons significant in our past.
- C Property embodies the distinctive characteristics of a type, period, or method of construction or represents the work of a master, or possesses high artistic values, or represents a significant and distinguishable entity whose components lack individual distinction.
- D Property has yielded, or is likely to yield, information important in prehistory or history.

Criteria Considerations

(Mark "x" in all the boxes that apply.)

Property is:

- A owned by a religious institution or used for religious purposes.
- B removed from its original location.
- C a birthplace or grave.
- D a cemetery.
- E a reconstructed building, object, or structure.
- F a commemorative property.
- G less than 50 years of age or achieved significance within the past 50 years.

Narrative Statement of Significance

(Explain the significance of the property on one or more continuation sheets.)

9. Major Bibliographical References

Bibliography

(Cite the books, articles, and other sources used in preparing this form on one or more continuation sheets.

Previous documentation on file (NPS):

preliminary determination of individual listing (36	
CFR 67) has been requested	

- previously listed in the National Register
- previously determined eligible by the National Register
- designated a National Historic Landmark
- recorded by Historic American Buildings Survey

recorded by Historic American Engineering Record # Garrard County, KY County and State

Areas of Significance

Medicine

(enter categories from instructions)

Period of Significance 1928-1957

Significant Dates

Significant Person (only if Criterion B selected)

Edwards, Dr. John

Cultural Affiliation

Architect/Builder (use last names first for individuals) Unknown

See continuation sheet(s) for Section No. 8

Primary location of additional data:

X State Historic Preservation Office

- Other State agency
- Federal agency
- Local government
- University
- Other Name of repository:

See continuation sheet(s) for Section No. 9

Property: Dr. Edwards House Garrard County, Kentucky

CONTINUATION SHEET

Section 8 Page 1

Statement of Significance

The Dr. Edwards House (GD-L-56) meets Criterion B and is locally significant for its association with Dr. John E. Edwards, an important local physician who practiced medicine for 41 years in Garrard County Kentucky, from 1916 until 1957, the year of his death. The Period of Significance extends through the years that Dr. Edwards lived and worked in the house, 1928-1957.

Dr. John Edwards' significance in the history of Lancaster, Kentucky can be demonstrated in three areas. First, Edwards's entire career was spent practicing in a small Kentucky town and the surrounding rural county. Other physicians that practiced in Lancaster chose to relocate to more lucrative practices in larger towns and cities. Second, Edwards and other small town doctors throughout America witnessed sweeping changes in diagnosis, treatment, health care technology, and in the organization of health care services and how patients paid for these services. Edwards' career demonstrates these revolutionary developments. Third, Edwards was valued in Lancaster and Garrard County for far more than his professional medical knowledge. Because of their intimate acquaintance with their patients, small town doctors like Edwards were considered the friend of every family in the community. Small town doctors "lived a double life – half benefactor, half business man."³ In an age before health insurance, small town doctors often treated patients who were unable to pay for the service; some doctors exchanged medical care for goods or other services. Because of their prominence in small communities, they were often called upon to serve in many community service roles.

The importance of doctors in small towns and communities in the United States during the first half of the 20th century is often overlooked. The multiple roles played by the small town doctor are often remembered in oral accounts, antiquarian autobiographies and biographies, and by the occasional local museum, but deserve far more attention.

Dr. Edwards' Training and Practice in Lancaster / Garrard County

John Edwards was born in Mars Hill, North Carolina on August 2, 1885. Edwards was educated at Mars Hill College (founded in 1856) and Eastern State Teachers College in Richmond, Kentucky (founded in 1906). He moved to Kentucky in 1904 and taught school in Pulaski County, Kentucky until 1912.

Edwards attended the University of Louisville Medical School between 1912 and 1916. It is not known how Edwards financed his medical training, but he may have saved his earnings from his years as a teacher in Pulaski County. His experience may have been similar to that of Dr. Mack Roberts of Wayne County who practiced medicine between 1932 and 1993. Roberts financed his education by stints of teaching school, working in Louisville City Hospital and working during the summers in his home town. At school, he shared living quarters with other students.⁴

In the early-twentieth century, medical students in Louisville gained clinical experiences at City Hospital treating indigent patients.⁵ One of Dr. Edwards' medical texts, *Human Anatomy* (published 1911), was purchased by Thelma Clark at the sale of the Edwards' estate at the death of his wife, Laura, in 1973. Edwards wrote his name and Louisville address in the inside front cover – 651 South Floyd Street. Among the pages of the text are various class notes and a receipt for a coat and trousers, purchased Sept. 19, 1913 at 300 West Market Street for the cost of \$25.00. Money may have been short because Edwards had made a \$10 down payment and still owed the remainder.

Property: Dr. Edwards House

CONTINUATION SHEET

Garrard County, Kentucky

Section 8 Page 2

Edwards received his medical degree June 1916 from the University of Louisville. In July 1916, he received a certificate of authorization to practice medicine (filed in Garrard County Clerk's Office.) During his first two years in Garrard County, he practiced medicine in the Buckeye community of Garrard County. He volunteered and served for one year as a First Lieutenant in the Medical Corps in World War I. Edwards began practicing medicine in Lancaster in November 1919. He was one of the physicians at the Garrard County Hospital that opened in 1950. Edwards died at age 72 on November 27, 1957, only a few months after his retirement from the medical practice. He had practiced medicine for 41 years.

His wife was Laura Vetoria Manley. Dr. and Mrs. Edwards had two daughters. Erwina (b. 1916; d. 1999) and Edwina (b. 1917; d. 1982). Mrs. Laura Edwards continued to live in their home until her death April 22, 1973 at age 81.

In 1928, Dr. and Mrs. Edwards purchased the house on 572 Danville Street. According to the deed, Dr. and Mrs. Edwards paid \$7,000 for the house; \$4665.00 was paid in cash and the remainder was paid the following year with an interest rate of 6%. No doubt, Dr. and Mrs. Edwards were considered quite wealthy by small-town standards. Dr. Edwards' income at that time is unknown, but in 1929, the average annual net income for non-salaried physicians was \$5,224.⁶ One must keep in mind that the income gap between general practitioners like Edwards and big city specialists was great. The average net income for general practitioners was under \$4,000.⁷ When the average salaries of physicians are compared with per capita income of Edwards' patients, Edwards does indeed seem wealthy. In 1926, the per capita income in Kentucky was only \$369.⁸

Dr. Edwards kept an office separate from his home, probably located on Danville Street between his home and the Public Square. The 1955 Garrard County Directory located his practice on Danville Street.⁹ Four different locations are possible - 112 Danville Street in a building that is now used for rental apartments, 114 Danville Street in a building that is now a private residence, 79 Public Square in a building that is now empty, or in the house across the street and slightly east of his home. (discussed in more detail below in "Evaluation of Historical Significance") The memories of local residents vary, and Edwards may have moved his office during the years he practiced. In fact, local memory places far more importance on the location of Edwards' house than upon his office. The words of a local librarian echoed the reports of most residents who recalled Edwards: "I don't know exactly where his office was located, but I can tell you where he lived."¹⁰

One must keep in mind that a doctor's office during Edwards' era was quite unmemorable when compared with a modern medical office that is equipped with specialized medical equipment. The practice of a small town doctor was not limited to his office; the tools and common medications required by a doctor were usually contained in a "portable office" – the doctor's medical bag. Obituaries in the local newspaper between the 1910s and 1940s regularly noted that the deceased had died at home.¹¹ In Edwards' time, house calls were very common. Garrard County resident Lucian Clark recalled that house calls cost around \$2 – \$3. Mr. Clark also recalled that Dr. Edwards often prescribed "gray headache pills" and always carried these with him in his bag.¹² Prior to the opening of Lancaster's hospital in 1950, patients seeking emergency care after office hours would either have been seen in their own home or would have been required to visit the doctor's home. While prominent residents of the city of Lancaster had access to telephone service, ¹³ many of Edwards' patients in both the town and county could not afford or did not have access to telephone service prior to the 1950s. Contacting the doctor often meant visiting the doctor's home if his office

Property: Dr. Edwards House

CONTINUATION SHEET

Garrard County, Kentucky

Section 8 Page 3

was closed. The wife of Dr. Mack Roberts, a contemporary of Edwards who practiced in Wayne County, Kentucky, recalled that patients came to their home at all hours for treatment or to fetch the doctor. The visits to their home often disrupted the lives of the families, but these disturbances were taken in stride.¹⁴

In 2007, Dr. Edwards is most commonly remembered as the doctor who delivered many local citizens' babies, as babies were delivered at home until 1950, when the Lancaster hospital opened up. For example, Lucian Clark (b. 1927) credited Dr. Edwards with delivering him and the majority of his 9 siblings. Those born prior to 1916 were delivered by Dr. Kinnaird.¹⁵ A memo by Forrest Calico, the first chairman of the Garrard County Memorial Hospital, noted that Dr. Edwards delivered the new hospital's first white baby to Kenneth Hume and wife on Friday, July 7, 1950. That qualification provided a sign of the times, as the first baby delivered at the new hospital was actually born on July 1; she was "of color."¹⁶

Dr. Edwards, a general practitioner, spent his entire career serving patients in Lancaster and Garrard County. Edwards' choice, to remain in a small community, when many contemporaries chose to relocate to urban areas and more lucrative practices, speaks of his dedication to his patients and community. The following recalls other doctors practicing in the area at the time Dr. Edwards did.

In 2007/2008, Lancaster residents recall two general practitioners from the first half of the 20th century in the county seat of Lancaster, Dr. Edwards and Dr. Virgil Kinnaird. Dr. Kinnaird practiced medicine from 1915 until January 1959, the year of his death, just two years after the death of Dr. Edwards. Dr. W. M. Elliot practiced in Lancaster for a short time. He had practiced in Bryantsville, a small community north of Lancaster until 1912. In 1912, he moved his practice to Lancaster. But in 1925, Dr. Elliot accepted a position in western Kentucky. He moved back to Lancaster and died in 1932.¹⁷ In 1927, Dr. B. B. Montgomery was reported to have purchased the office that had belonged to Dr. Elliott in the same year.¹⁸ The same Dr. Montgomery is listed as one of the doctors of the Garrard County Hospital that opened in 1950. There is an absence of evidence, both written and oral, of other physicians serving the same area for a long period of time.

Several accounts in the town's newspaper give the impression that doctors often moved to more lucrative positions in larger towns. For example, in 1919, Dr. J.M. Action moved his medical practice to Muncie, Indiana, selling his Lancaster home and office to Dr. Virgil Kinnaird.¹⁹ The newspaper reported in 1935 that a local man, Dr. Morris Holtzclaw, had earned his medical degree and would be practicing medicine in Atlanta.²⁰ Two sons of Dr. Virgil Kinnaird earned medical degrees, but neither practiced medicine in their hometown.²¹

The few general practitioners in Lancaster must have been well-known, because they saw no need to spend money on advertising in the local newspaper in the decades between 1919 and 1957. Two optometrists, J.M. Metcalf and J. J. Byrne, did advertise regularly as well as two dentists, M.S. Hatfield in the 1920s and 1930s and W.A. Wheeler in the 1910s. By 1935, J. T. Blankenship, chiropractor, was also advertising in the local paper ²².

The need for general practitioners in small rural communities was a dominant theme throughout the career of Dr. Edwards. The optimal ratio of doctors to patients was 1 to 800.²³ According to U.S. Census data, the population of Garrard County in 1920 was 12,503; with 2,773 families.²⁴ A prominent local physician in the generation prior to Dr. Edwards, James B. Kinnaird, compiled a history of local physicians that listed doctors from or practicing in Garrard County up until 1916.

CONTINUATION SHEET

Property: Dr. Edwards House

Garrard County, Kentucky

Section 8 Page 4

The exact year in which Kinnaird wrote the history is unclear, but it was mostly likely composed during or soon after 1916, since the last entries are for that year. Kinnaird listed the names and various facts about 17 doctors that were from Garrard County or had practiced in Garrard County between the years of 1989 and 1916. Of the 17 doctors, only 6 were living in Garrard County in the year the account was written, the remainder had left the area to practice medicine elsewhere. Three of the six that were in the county practiced in the outlying communities of Paint Lick, one in Bryantsville, one in Buckeye and two in the county seat of Lancaster. The two doctors practicing in the county seat of Lancaster in 1916 were Virgil Gibney Kinnaird (the son of J.B. Kinnaird) and John Edwards.²⁵ If all six of these doctors were actually practicing medicine, the doctor patient ratio for the county would have been 1:2,083, well short of the optimal ratio of 1 to 800.

In 1922, the Kentucky medical profession was apprehensive about a physician shortage in the state. The development of specializations in medicine offered greater financial rewards to doctors who chose these careers and located their practices in large urban areas. At the same time, medical schools were demanding higher standards at higher costs, often barring access to the profession for many from modest, rural backgrounds. In 1932, Menifee County, Kentucky had only one 66-year old physician for approximately 5,000 inhabitants, and Elliott County, Kentucky had only one physician for 7,705 residents. At the other extreme were urban areas like Fayette County which had a doctor-patient ratio of 1:420.²⁶

By 1952, the average doctor: patient ratio in Kentucky was 1:1,353, but more than one-third of Kentuckians lived in counties, with only one doctor for 2,314 people. The population of Garrard County in 1950 was 11,029.²⁷ When Garrard County's Memorial Hospital opened in 1950, four doctors were recognized as the official hospital physicians John Edwards, Virgil Kinnaird, B.B. Montgomery (Garrard County native), and Paul Sides (native of Missouri).²⁸ Five years later, according to the 1955 Garrard County Directory, seven physicians and surgeons were practicing the county. Dr. W. M. Johnson's was listed under the category of "colored," so one can assume his practice was confined to only African American patients.²⁹ Based on this information, Garrard County's doctor: patient ratio in the 1950s was approximately 1:1,575, slightly higher than the state average.

The heavy patient load of Dr. Edwards in the early 1950s is confirmed by Vivian Sides, the widow of Dr. Paul Sides. Mrs. Sides said that her husband thoroughly researched his options for opening a medical practice even before he was discharged from his service in the military at the end of World War II. Dr. Sides, a native of Missouri, chose Lancaster partly due to the encouragement of Dr. Edwards. Mrs. Sides noted that Dr. Edwards was "a very good doctor" and "very well-liked in the community." "He was eager to have a young new doctor come to town because he was getting older and had always had far more patients then he needed," she said. "Dr. Edwards didn't mind giving up some of his practice and encouraged local residents to visit my husband."³⁰

Edwards' Career in Context of Advancements in Medicine - 1910- 1960

Dr. John Edwards' career demonstrates the sweeping changes in diagnosis, treatment, health care technology, and in the organization of health care services and how patients paid for these services. Four trends dominated the profession during the careers of small town doctors like Edwards –the amazing advances in medicine that occurred in the first half of the 20th century, the need for more physicians in rural areas, the growth of hospital care, and the development of health

Property: Dr. Edwards House Garrard County, Kentucky

CONTINUATION SHEET

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insurance. An examination of the impact of these trends is essential in understanding the importance of physicians like Dr. Edwards in the lives of many Americans.

The practice of medicine changed dramatically during the first half of the 20th century. During the first decade of Edwards' medical career, the discipline of virology promoted sterile working conditions; insulin was discovered, and awareness was growing of dietary insufficiencies as a cause for disease.³¹ Medical knowledge of the cause and treatment of the serious and sometimes fatal infectious diseases of malaria, scarlet fever, diphtheria, and smallpox had begun to make a positive impact by the 1920s. By 1940, these diseases had been mostly eliminated. Tuberculosis, typhoid fever, hookworm and trachoma continued to be threats into the middle years of Edwards' career. These diseases were often more prevalent among poor rural families. In 1920, Kentucky's death rate from typhoid fever was among the highest in the nation. By 1940, typhoid deaths in Kentucky had been reduced to 74. Hookworm and trachoma infections were reduced and practically eliminated by the 1940s.³² Other conditions were not so easily remedied; in 1918, a worldwide epidemic of influenza killed half a million Americans.

While childbirth and childhood diseases are rarely life-threatening in the 21st century, preventing infant and maternal mortality was much more of a challenge for Dr. Edwards. In 1915, there were 100 deaths among infants under 1 year of age for every 1,000 live births in the United States. By 1942, the ratio was 47.9 deaths per 1000 live births in rural Kentucky; nationally, 40.2 deaths per 1,000 was average.³³

In March 1927, Dr. Edwards volunteered his services as a part of three "Child Health Conferences" held in Lancaster and Paint Lick (a community east of Lancaster). Dr. Kinnaird and Dr. Montgomery of Lancaster and Dr. B. C. Rose of Bryantsville also examined the children that attended. Mrs. Laura Edwards and four other ladies served as "nurse's aides" to Dr. Ruth Boring of the State Board of Health in "advising the mothers as to the corrections of any defects."³⁴ This clinic was probably in response to nation-wide research on the health of children. In March 1927, the Kentucky State Health Nurse reported the results of a survey taken of children of the six largest schools in Garrard County. The report stated that of the 978 children examined, only 24% had been vaccinated and 93% of the children were "defective." Defects included problems with tonsils, teeth, glands, thyroid, nutrition, posture, eyes/vision, skin and nose.³⁵

In the 1920s, Prohibition created a new dilemma for many doctors: the only way to obtain alcoholic beverages legally during Prohibition was through a physician's prescription and the purchase the liquor from a pharmacy. Physicians could prescribe distilled spirits--usually whiskey or brandy--on government prescription forms.³⁶ A pint bottle was found in the basement of the Edwards' home with a Prohibition era "Caution Notice" warning about the sale of medicinal alcohol. Patent medicines, Calotabs, SSS, Borosone, Mother's Friend and Rexall Cough Syrup, were also heavily advertised in the local newspaper.³⁷

Sulpha drugs and the first effective antibiotic (penicillin) were not widely available until the 1930s and during World War II, respectively.³⁸ Small town doctors were faced with polio epidemics in the 1940s and 1950s. Mrs. Gilbert Wilson (b. 1925), of Lancaster, and her son Don (b. 1945) recalled visits to Dr. Edwards because Mrs. Wilson feared that Don, her first son, may have contracted polio. Don did not have polio, but he was prescribed special shoes to prevent flat feet.³⁹ By the last decade of Dr. Edwards' career, medical researchers were just beginning to study the causes of heart disease and the dangers of smoking.

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Until the dramatic post-World War II growth in physicians' income, the financial status of rural physicians was often unpredictable. Barter and bad debts were common. During the early years of the Depression, collection rates fell to below 50% of billings.⁴⁰ By 1951, toward the end of Edwards' career, the average annual income for non-salaried physicians nationwide had risen to \$13, 432. In the same year, the median wage or salary income for farmers was only \$482.⁴¹

Medical care shifted from the homes of the patients to hospital facilities for many rural Americans during the early 20th century. When Garrard County's Memorial Hospital opened in 1950, John Edwards, Virgil Kinnaird, B.B. Montgomery and Paul Sides (a native of Missouri, Sides moved to Lancaster in the late 1940s) were recognized as the official hospital physicians.⁴² Othel East, a patient of Dr. Edwards, was the first to be admitted to the new facility.⁴³

The development of health and hospitalization insurance plans also must have had a great impact on the practice of Dr. Edwards. In the early years of Edwards' practice, health insurance did not exist for the majority of rural residents. Among the Farm Security Administration's (FSA) efforts to promote the interests of indigent rural families during the New Deal, were programs to provide low-cost insurance to farm families. At its peak in 1942, the FSA had over 650,000 poor rural famers enrolled in prepaid cooperative plans operating in a third of the rural counties in the United States.⁴⁴ Such plans were created in Kentucky, but it cannot be determined with certainty if any of Dr. Edwards' patients were enrolled in these plans.

An article in the local newspaper highlighting the opening of the Garrard County Memorial Hospital noted that hospital officials wanted "everybody, rich or poor, to benefit by this hospital, so we called in the representatives of the Blue Cross hospitalization plan to put on a sales campaign here. Approximately 800 contracts were sold. This means that about 4,000 persons, one third of the population of the county - now have the means of getting hospital care."45 The creation of hospital and medical insurance plans that were controlled by the medical profession were a central development in midcentury America. The majority of these plans came from the private sector, often tied to the policy-holder's employment.⁴⁶ The American Medical Association was on record until 1938 as opposing even voluntary health insurance, wary of outside involvement in medical care and concerned about the professional status of its members. By the late 1930s the AMA reconsidered it position and focused its energies on promoting physician-sponsored or commercial insurance and alternatives to government-sponsored plans.47 Concerns about medical costs and government versus private insurance plans continued to be voiced by doctors in the first half of the 20th century and remain controversial today. While Dr Edwards' views of medical insurance are unknown, they may have been very similar to many other physicians of his time and those of Dr. Mack Roberts of Wayne County, Kentucky who practiced from 1932 - 1993. Toward the end of his career, Roberts noted skyrocketing medical costs could be blamed on "the bureaucratization of medical costs created by state and federal government, ... health insurance companies"48

Dr. Edwards' Importance in Community

Small town doctors like Edwards were considered the friend of every family in the community. In an age before health insurance, small town doctors often treated patients who were unable to pay for the service. Because of their prominence in small communities, they were often called upon to serve in many community service roles. The following information is offered to substantiate the claim that Edwards is a significant individual within the context of local Medicine, as his social status and role as a local doctor were interdependent.

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Dr. Edwards was a prominent member of the civic community and a trustee, deacon, and Sunday school class teacher of the Lancaster Baptist Church. His efforts were recognized in September 17, 1957, in a special service at Lancaster Baptist Church.⁴⁹ Dr. Edwards was also a founding member of the Lancaster Rotary Club (the club was established in 1924).⁵⁰ In addition, he was also willing to donate his services as a physician, as evidenced by his participation in the children's health clinic in 1927.

Vivian Sides, widow of Dr. Paul Sides, recalled that when they first moved to Lancaster in the late 1940s, her husband was a little intimidated by the community expectations of the doctor created by Dr. Edwards. "Paul wondered if he could fill his shoes," she noted.⁵¹

Jean Johnston, the widow of local optometrist, Dr. Rodney Johnston, recalled that Dr. and Mrs. Edwards were prominent in community activities and considered to be leaders in the community.⁵²

Mrs. Laura Edwards was also an important inhabitant of the house on 572 Danville St, but unfortunately, little can be discovered about her life. The unique role of the doctor's wife has been explored by Esther Nitzberg who noted that while there is a special mystique to being a doctor's wife, there are also unique and often unreasonable expectations placed upon her. Along with usual duties of overseeing the home and children, the physician's wife was expected to be secretive about details of her husband's practice, a real challenge in a small town. The doctor's wife noted that "I am on twenty-four-hour duty and I can lie and lie when lying is necessary to save my husband an unnecessary call."⁵³

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Evaluation of Historic Significance

In conclusion, Dr. John E. Edwards was a significant member of Lancaster and Garrard County from 1916 until 1957. The importance of doctors in small towns and communities in the United States during the first half of the 20th century is often overlooked. Edwards and other small town doctors throughout America witnessed sweeping changes in the medical field while continuing to care for numerous patients in their communities. The medical services of small town and rural practitioners often became charitable contributions to their communities during hard financial times. Edwards and his colleagues were also expected to serve in community roles because of their financial and professional standing in the community. The social and financial prestige of the doctor in the small town often meant that the doctor's home was far more significant than the actual office for two reasons. First, medical care in the first half of the 20th century usually took place in the patients' home rather than the non-descript and simply equipped office of the general practitioner. Furthermore, the town of Lancaster did not have a hospital until the last seven years of Dr. Edwards' 41-year career. Patients would have sought the doctor at his home in emergency situations outside of office hours. Second, Dr. Edwards' home was larger, more modern than the homes of most of his patients and located in a prestigious area of town, creating a visual impression of his importance in the community.

Evaluation of Integrity and Eligibility

This document interprets the Dr. Edwards House's significance in his community in the following three areas:

- Edwards' choice to practice his entire career in a small town, when many of his colleagues choose to relocate their practice to more lucrative areas
- Edwards' career as an example of the sweeping changes in the medical profession in the first half of the twentieth century and
- Edwards' importance in the community as "half benefactor, half businessman."

The house is said to meet Criterion B, because of its association with Dr. Edwards, an important local doctor within this context. Given this perspective, the evaluation of the house's integrity focuses upon the ability of the house to provide information on Edwards particularly, and on this period of local medical services generally. The evaluation of integrity will explain how a significant property within this context can possess integrity of location, setting, and some integrity of materials and/or design. If the property is judged to possess these integrity factors, the property will then be said to possess an integrity of the important associations, which supports its National Register listing, and thus be eligible.

Modifications have been made to the Dr. Edwards House since its construction, as outlined in the "Changes to the Dr. Edwards House" section of the Description. The alteration of the back of the house, enclosing the back porch for additional living space, probably occurred while the Edwards were living the house, that is, during the Period of Significance. The application of non-wood siding occurred after the Period of Significance, and so, must be considered for its affect on our ability to recognize the house's basic identity—its status as the home of Dr. Edwards.

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A property within this context will have integrity of **location** if it has not been moved. The Dr. Edwards House meets this fundamental condition, so possesses integrity of location. The house's location is important, because it helps us to interpret the various social factors concerning the place of doctors in small communities. Dr. Edwards' chose to buy a large house and lot adjacent to several large homes of other prominent members of the community. The row of houses in which the house is located was once called "doctor's row" because an optometrist, veterinarian, dentist and Edwards lived there.⁵⁴ This choice represents the perception of a doctor's prominence in a community, as well as to an income that was far beyond that of most of his patients.

Dr. Edwards maintained a separate office on Danville Street, between his home and the Public Square, but the exact location is not fixed in the community's consciousness, and may have actually been located in as many as four different locations during Edwards' career. Several residents noted that his office was located at 112 Danville Street.55 But, according to the Kentucky Historic Resources Inventory, the building located 112 Danville Street ceased to be a medical office in 1912 and was used in subsequent years as a boarding house. This property is currently subdivided into low-rent apartments. 56 Tommy Montgomery, who currently lives at 114 Danville St, maintains that his home was the location of Dr. Edwards' office at one time.⁵⁷ Mrs. Gilbert Wilson recalled that his office was located in a large building on the public square, 79 Public Square.⁵⁸ But the Kentucky Historic Resources Inventory does not note Dr. Edwards as a tenant of this building. Opal Lamb, who currently resides across the street and slightly east of the Edwards' house, stated that he had bought the house she now lives in so that he could locate his office closer to home. The Edwards' did indeed own this house and the 271/2 acre farm adjacent to the house. These properties were also auctioned at the death of Mrs. Edwards in 1973.59 Local memory primarily recalls the location of the Edwards' home, rather than his office. The offices of general practitioners during the first half of the century were small, simple spaces and a large part of the actual medical treatment took place in the homes of the patients, rather than in the office. In emergency situations after office hours, in an era when many did not have telephones, patients would have been required to actually visit the doctor's home for treatment or to ask the doctor to visit their home. Vivian Sides, widow of Dr. Paul Sides who began his medical practice on Lancaster in the late 1940s, noted that even then, patients sometimes visited their home in emergency situations.⁶⁰

The town of Lancaster did not have a hospital until the last seven years of Dr. Edwards' 41year career and is therefore not representative of the majority of the years that Edwards practiced medicine. In fact, hospital care and the technological advancements offered in hospitals were relatively new developments in small towns like Lancaster. It is safe to say that the majority of babies delivered by Dr. Edwards in his career were delivered in the homes of his patients. Details about Edwards' role in the opening of the hospital are unavailable. The Garrard County Memorial Hospital, owned by the county and administered under the oversight of the Garrard County Fiscal Court (county government) closed in 2003 due to financial mismanagement. The location hospital records (medical and administrative) seems to be a mystery, therefore details relevant to Dr. Edwards' role in opening the hospital and practice in the hospital, aside from those mentioned above, are unknown.⁶¹ The actual building still exists; part is used as a private nursing home and part has been remodeled and serves as office space for local government.

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In contrast to Edwards' nondescript office, his home was large and quite luxurious in the eyes of many of his patients. Edward's 2400 square foot home had electricity, a coal furnace in the basement, a full bathroom with running water, and three spacious bedrooms. Most of Edwards' patients lived with far less; the national average home size in 1950 was 983 square feet. This contrast may explain the importance placed upon the Edwards' home, rather than his office, in the community's memory.

It is also an important part of the story that Edwards did not feel compelled to change his residence during the years when he delivered medical care, while his office may have been located in up to four different locations. His choices, to open a practice in a small town, and then to stay in one town during a career that was defined by changes in practice, represents a series of choices made by thousands of physicians nationwide, and so, defined the experience of many Americans in need of medical care. The Statement of Significance speaks of the valuable social role played by local doctors, who became community stabilizers while working in a field identified with change. Dr. Edwards' continuity of location enables this property to provide important information about this doctor and about doctors in general.

A property within this context will have integrity of **setting** if it possesses sufficient on-site space and features to help relate the property to its context. Dr. Edwards' property had a generous acreage for an urban lot, even among lots found within smaller towns. Possession of a 2-acre site, as well as the care taken to maintain that property, surely communicated to the citizens of Lancaster messages about the status and financial wherewithal that came to be associated with the local doctor. The combination of the property's location along a state route, its situation near the edge of town and adjacent to farmland, and the site's generally open character, all would have made patients from rural Garrard County feel greater access and ease than they would have felt at a more restricted and urban feeling site, such as one located in downtown Lancaster.

The property's location and setting seem consistent with the level of technology that characterized medicine in the first half of the 20th century, at least in contrast to the higher level of technology that seems to characterize medicine today. That is, this setting is more human and less clinical, as could be said of medicine during the period of significance in contrast to the practice of medicine today. The setting of the Dr. Edwards House has changed very little since his death in 1957, when the property ceased to be identified with local medical practice. The intactness of the setting today enables the property to continue conveying messages about medical service delivery in small towns during the Period of Significance.

Both the **location** and **setting** of Dr. Edwards' home place it in the period between 1820 and 1939 in which the American "borderland" dominated the consciousness of American professionals. This "borderland" can be defined as actual and imagined space in which many genteel professionals chose to live straddling two worlds. On one side was the hectic professional life of the city, and on the other side lay the poor, hard reality of the farmer. Historian John Stilgoe described the borderland as the place where the houses were far apart in order to preserve privacy, pedestrian transportation was discouraged, country vistas were maintained, and horticultural pursuits were popular among both the male professionals and their wives. These "rural" residences required the income of the professional classes to maintain, but created the illusion of living in a romanticized agrarian past.

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The borderland concept was popularized by numerous turn-of-the century publications such as *Countryside Magazine*, *Suburban Life*, *Country Life in America* and *Ladies' Home Journal*.⁶² The characteristics of the Edwards' house - a deep front yard; large back lot with a chicken house, garden shed, and garden; location at the edge of town with views of farmland to the north and south; and a spacious modern house with windows to enjoy the bucolic views - all suggest the rural imagery of the imaged life of the successful professional in Edwards' time. This widely accepted imagery of success was both created by Edwards' prominent role as a doctor in the community and confirmed by the appearance of his residence.

A property will have integrity of **design** if it retains sufficient form and details so that its basic historic identity can be recognized through the changes that have added to or subtracted from that historic design. Assessing the design integrity for a historic resource associated with the history of local medicine will concentrate on identifying those areas of the property that directly communicate that identity and historic use of the property. Thus, superficial or external changes to the property might have lesser impact than do interior changes, where the important activities occurred that stand at the heart of our consideration of significance within the field of local medicine. So, with Dr. Edwards' former residence and office, the house is being judged to have design integrity because its interior is very intact. The only room that does not retain its original woodwork, space, and cabinetry is the kitchen. The kitchen cabinets were replaced in the 1970s, but these cabinets are white painted wood in a style that is not out of place in the house.

In addition to strong interior integrity of design, the exterior of the house, especially the street facing side, retains much of its historic identity. All of the windows in the home are original with the exception of those in the additions on the back of the house and one replacement window on 2nd floor, also in the back of the house. The windows' strong Craftsman style lines and the house's bungalow form remain to indicate the house's late 'teens or early '20s design origin. Hundreds of thousands of American homes of bungalow form and/or Craftsman styling were erected before 1945. The range of design possibilities was very wide, so that Craftsman styling and bungalow forms could be applied to virtually any situation and income range. Because Craftsman styling and the bungalow forms of design did not draw heavily from clear historical antecedents, these modes had a more modern feel than did the historicized borrowings of Victorian-era styles, which Craftsman style and bungalow forms replaced. Craftsman-styled bungalows, such as the Edwards House, surely seemed more modern than the Colonial Revival modes that competed for popularity for residential design in the early 20th century. Perhaps Dr. and Mrs. Edwards were attracted to their house's form and style because it connoted modernity, as did the medical field in which Dr. Edwards' worked. Today, they would certainly recognize their home's design and form, despite the vinyl covering that a later owner added after 1980.

A property will have integrity of **materials** if it retains sufficient historic materials to support the view that it retains the important design elements that transmit its identity as a property related to the main topic, local medicine. The relatively high retention of interior materials and most historic windows in the Edwards House help us recognize its design identity. The materials support our ability to interpret the house's significant function as a residence and medical office for Dr. Edwards.

Because the house is judged to have integrity of location, setting, materials, and design, the house is judged to retain is important **association**, with Dr. Edwards and the history of medicine in Garrard County during the Period of Significance. With this integrity of the important association, the house is said to be eligible.

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Endnotes

Property: Dr. Edwards House

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¹ Patricia Ballard & Helen Powell, Historical Sites of Lancaster and Garrard County, Garrard County Historical Society and the Woman's Club, 1987.

² Interview with Mary Io Hammonds, July 2007. Mary Jo and Ray Hammonds bought the house after the death of Mrs. Laura Edwards in 1973. They owned the house until 1983. Ray Hammonds is a former county-judge executive of Garrard County.

³ Richard Harrison Shryock, Medicine in America: Historical Essays, Baltimore, Maryland: The Johns Hopkins Press, 1966, p. 162.
 ⁴ Alma Dolen Roberts, House Calls: Memoirs of Life with a Kentucky Doctor, Ashland, Kentucky: The Jesse Stuart Foundation, p. 151-158.

⁵ Dwayne D. Cox and William J. Morison, The University of Louisville, Lexington: University Press of Kentucky, 2000, p. 62.

⁶U.S. Bureau of the Census, Historical Statistics of the United States, Colonial Times to 1957, Washington, D.C., p. 97)

⁷ Medical Care for the American People, The Final Report of the Committee on the Costs of Medical Care, Chicago, University of Chicago Press, 1932, p. 22.

⁸ Medical Care for the American People, The Final Report of the Committee on the Costs of Medical Care, Chicago, University of Chicago Press, 1932, p. 16

⁹ Garrard County Directory, compiled and edited by Billy Swope, Fall 1955, located at Garrard County Historical Society.

¹⁰ Interview with librarians at Garrard County Library, January 2008.

¹¹ The Garrard County Central Record, 1910s, 1920s, 1930s, 1940s.

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¹³ Dr. J. B. Kinnaird obtained the first telephone franchise for 100 phones in Lancaster in 1899. Lancaster Woman's Club, *Patches of Garrard County*, Danville, KY: Bluegrass Printing Co., 1974.

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¹⁸ The Garrard County Central Record, January 13, 1927.

¹⁹ The Garrard County Central Record, October 23, 1919.

²⁰ The Garrard County Central Record, June 6, 1935.

²¹ Obituary of Dr. Virgil Kinnaird, The Garrard County Central Record, January 11, 1959.

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²³ Frederick D. Mott & Milton I Roemer, Rural Health and Medical Care, New York: McGraw-Hill Book Company, 1948, p. 156.

²⁴U.S Census, retrieved January 3, 2007, <u>http://www2.census.gov/prod2/decennial/documents/4108456no554ch3.pdf</u>

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²⁵ J. B. Kinnaird, "History of the Medical Profession in Garrard County", presented to the Woman's Club, no date, Garrard County Library, Lancaster, KY. Kinnaird's account is unclear. One of the doctors listed as still living in Garrard County may have been retired. J. B. Kinnaird was also still probably a practicing doctor.

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 Frederick D. Mott & Milton I. Roemer, Rural Health and Medical Care, New York: McGraw-Hill Book Company, 1948, p. 66-69.

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³⁵ The Garrard County Central Record, March 31, 1927.

³⁶ Ohio State University Department of History Website, "Temperance and Prohibition", http://prohibition.osu.edu/content/medicinal_alcohol.cfm, retrieved January 6, 2008.

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³⁹ Interview with Mrs. Gilbert Wilson and Don Wilson, Lancaster, KY, December 24, 2007.

⁴⁰ Michael R. Grey, New Deal Medicine: The Rural Health Programs of the farm Security Administration,

Baltimore, Maryland, Johns Hopkins University Press, 1999, p. 7

⁴¹ U.S. Bureau of the Census, Historical Statistics of the United States, Colonial Times to 1957, Washington, D.C., p. 97, 168.

⁴² Forrest Calico & Delores Wilson, The History of Garrard County Memorial Hospital, 1950, pamphlet in Garrard County Hospital file, Garrard County Library, Lancaster, KY.

⁴³ Memo by Forrest Calico, the first chairman of the Garrard County Memorial Hospital, located in Garrard County Hospital clippings file, Garrard County Library, Lancaster, KY.

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⁴⁹ Photograph / documentation located in Garrard County Library, Lancaster, KY.

⁵⁰ The Garrard County Central Record, February 7, 1935.

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⁵¹ Interview with Vivian Sides, August 31, 2008.

52 Interview with Jean Johnston, August 31, 2008.

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⁵⁴ Interview with Jean Johnston, August 31, 2008.

⁵⁵ Interview with Lucian and Thelma Clark, Lancaster, KY, December 9, 2007. Interview with Leonard Smith, Garrard County Historical Society Meeting, June 2008.

⁵⁶ Kentucky Historical Resources Inventory, Site No. GDL 38. Copy located in Garrard County Library, Lancaster, KY.

⁵⁷ Phone interview with Tommy Montgomery, August 31, 2008.

⁵⁸ Interview with Mrs. Gilbert Wilson and Don Wilson, Lancaster, KY, December 24, 20007.

⁵⁹ Auction Advertisement of the Edwards' estate, The Garrard County Central Record, June 28, 1973.

⁶⁰ Interview with Vivian Sides, August 31, 2008.

⁶¹ Attempts to access hospital records are fruitless. In fact, since the closing of the hospital in 2003, the Garrard County Fiscal Court has been sued by a local resident, David Wilson, who filed numerous open records requests but was denied access to many administrative and financial records.

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CONTINUATION SHEET

Property: Dr. Edwards House Garrard County, Kentucky

Section 9 Page 2

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Dr. Edwards House Name of Property		Garrard County, KY County and State
10. Geographical I	Data	100
Acreage of Property	2.11 acres	
UTM References (Place additional boundarie	s of the property on a continuation sheet.)	USGS Topographic Quad nameLancaster
1 16_ 712 447 41 Zone Easting No	166 374 _{rthing}	2 / //////////////////////////////////
3_/ Zone Easting No	//////	4 // Zone Easting Northing
Verbal Boundary De	scription (Describe the boundaries	of the property.)
Boundary Justifie	cation (Explain why the boundaries were se	elected.)
Sec 1		See continuation sheet(s) for Section No, 10
11. Form Prepared	Ву	and the second se
name/title	Dr. Cynthia Resor	
organization		date
street & number	572 Danville Street	telephone
city or town	Lancaster	state_KY_zip code 40444
email address	Cynthia.Resor@EKU.EDU	·
	ntation er requires each nomination consist Sheets for narrative graphic quad map (7.5 or 15 minute	of the following beyond this 4-page cover form:
 A USGS topo A Sketch mag A Photo iden 	p for historic districts or properties have tification map for districts; one map c	an serve both as sketch and photo ID map. e policy statement for acceptable use of digital photographs
 A USGS topo A Sketch may A Photo iden black and wh The Kentucky Herita An additional Floor plans of 	p for historic districts or properties have tification map for districts; one map c hite photographs of the property. See ge Council requires the following for l set of black and white photographs of properties whose significance is base	ing large acreage or numerous resources an serve both as sketch and photo ID map. e policy statement for acceptable use of digital photographs or all nominations: s that remains at the KHC
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name/title	Dr. Cynthia Resor	
organizatio <u>n</u>		date
street & number	572 Danville Street	telephone
city or town	Lancaster	state_KY_zip code 40444

Page 4

CONTINUATION SHEET

Section 10 Page 1

Verbal Boundary Description

The area proposed for National Register listing is a 2.11-acre tract in Garrard County, Kentucky with street address of 572 Danville Street, Lancaster. This property boundary is defined on the deed, and with that boundary filed with the Garrard Property Valuation Administrator under the account number of 27B-03-005.

Boundary Justification

The 2.11-acre area proposed for listing was considered appropriate to the historic basis for listing. This area contains the historic land with which to understand Dr. Edwards as an important figure in local medicine. The Statement of Significance explains that, in addition to the house, the property's location and its entire setting are two important dimensions of the property by which Dr. Edwards' status as a local doctor is known, remembered, and appreciated.

Property: Dr. Edwards House Garrard County, Kentucky

CONTINUATION SHEET

Section Photographic Identification Page 1

Property: Dr. Edwards House Garrard County, Kentucky

Same information for each print:

Name of property: Dr. Edwards House

Location: Garrard County, Kentucky

Date of Photograph: 2008

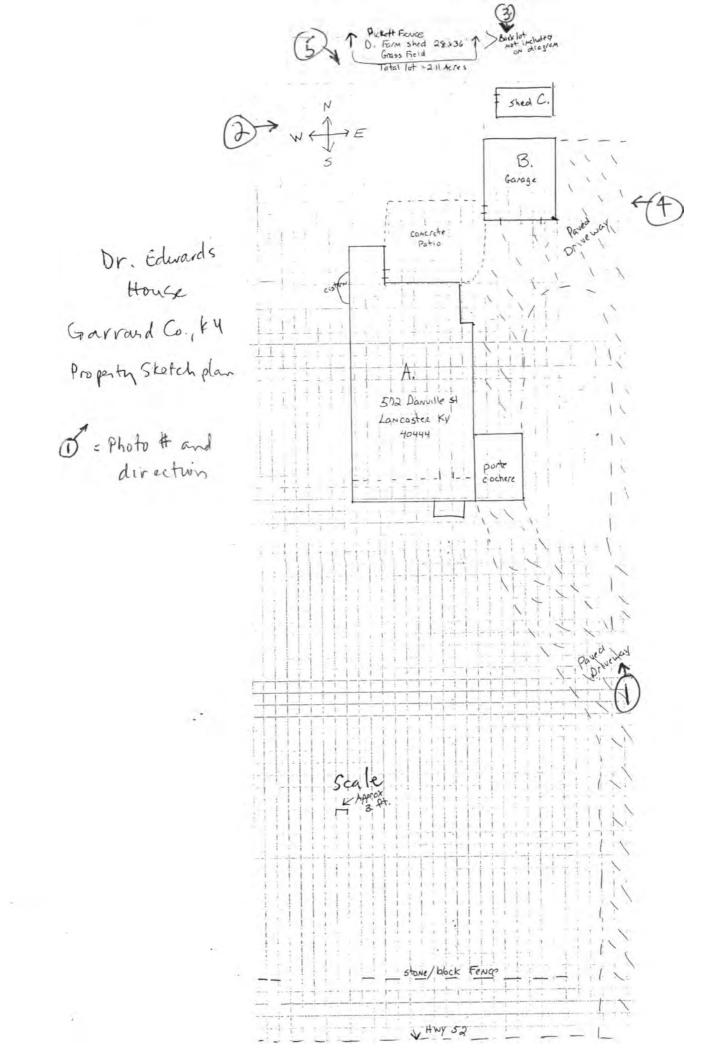
Photographer: Cynthia Resor

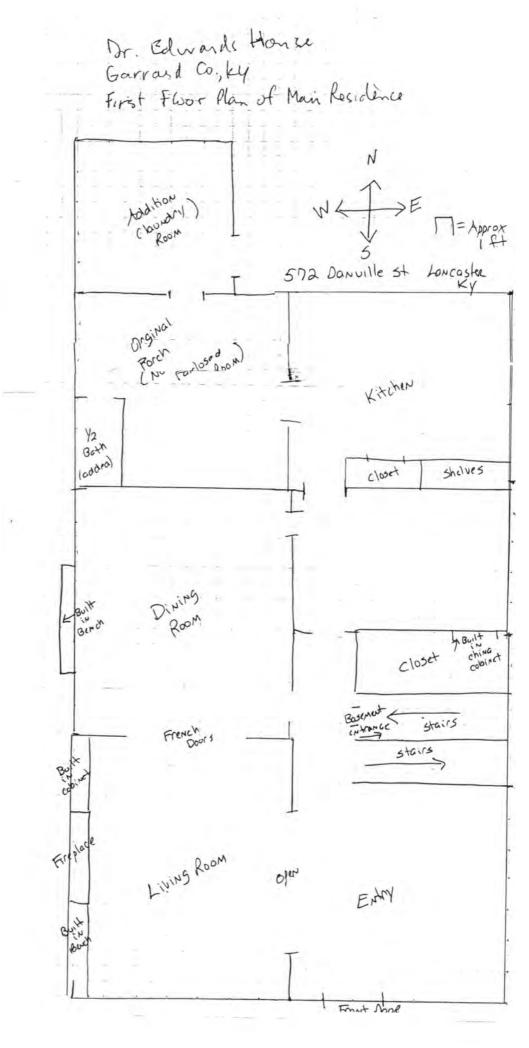
Location of digital media: Kentucky Heritage Council, Frankfort, Kentucky

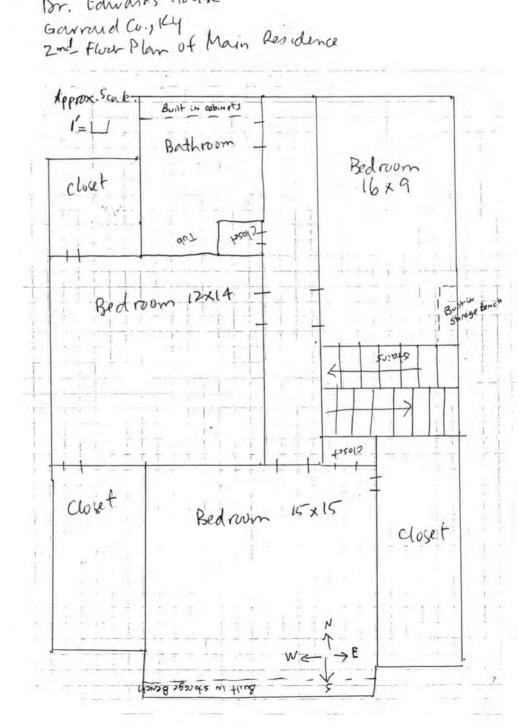
Information specific to each print:

- 1. House and garage, shot to northwest
- 2. Garage (at left) and shed, shot to east
- 3. Shed (in foreground), garage (with pyramidal roof), and back of house, shot to south
- 4. Shed (at left), garage (middle), and back of house (right), shot to west
- 5. Shed, garage, and house, shot to southeast

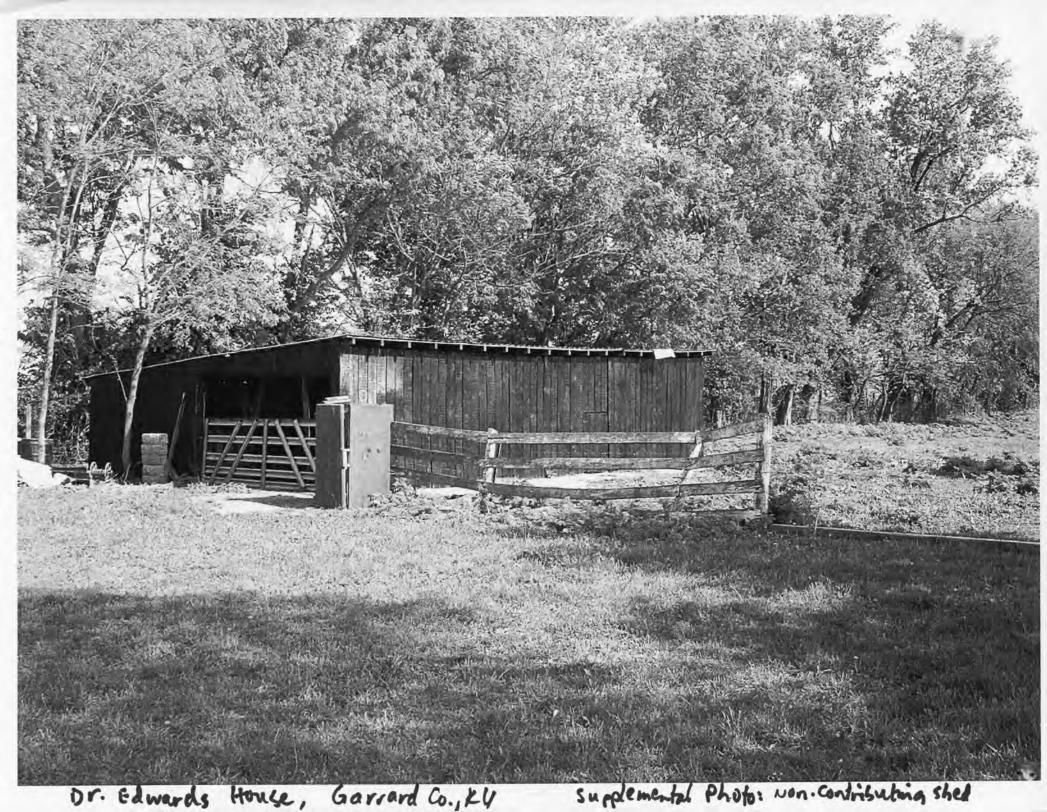
Additional documentation: image of non-contributing farm shed that measures 28' x 36'







Dr. Edwards House



Recommendation: SLR_Return Action: SLR_Return_None

State Name: K/County Name Gasrard Resource Name Dr. Folwards Hows Reference No. 650 Multiple Name Solution: Problem: NO VIM coordinates on Form (only on map) - Sec. 7 p. 2 P. 3 - There are 5 brick columns not y - insufficient versal boundary description - does not state exactly which resources are contributing Resolution: SLR: Yes No Database Change:		Documentation Issues-Discussion Sheet
Reference No. 650 Multiple Name	State Nam	e: K/County Name Garrard Resource Name Dr. Folwards Hous
Problem: -NO VIM condinates on form (only on map) - Sec. 7 p. 2 P 3 - There are 5 brick columns not y - insufficient verbal boundary description - does not state exactly which resources are contributing Resolution: SLR: Yes No		1
- Sec. 7 p. 2 P 3 - There are 5 brick columns not y - insufficient verbal boundary description - does not state exactly which resources are contributing of non-contributing Resolution: SLR: Yes No	Solution:	
- Sec. 7 p. 2 P 3 - There are 5 brick columns not y - insufficient verbal boundary description - does not state exactly which resources are contributing of non-contributing Resolution: SLR: Yes No		
- Sec. 7 p. 2 P 3 - There are 5 brick columns not y - insufficient verbal boundary description - does not state exactly which resources are contributing of non-contributing Resolution: SLR: Yes No		
- Sec. 7 p. 2 P 3 - There are 5 brick columns not y - insufficient verbal boundary description - does not state exactly which resources are contributing of non-contributing Resolution: SLR: Yes No		
- Sec. 7 p. 2 P 3 - There are 5 brick columns not y - insufficient verbal boundary description - does not state exactly which resources are contributing of non-contributing Resolution: SLR: Yes No	Problem: -	NO UTM coordinates on form (orlig on map)
-does not state exactly which resources are contributing of non-contributing Resolution: SLR: Yes No		
-does not state exactly which resources are contributing of non-contributing Resolution: SLR: Yes No		-insufficient verbal boundary description
Resolution: SLR: Yes No		
SLR: Yes No	T	of non-contributing
100 110		
	Resolution	

UNITED STATES DEPARTMENT OF THE INTERIOR NATIONAL PARK SERVICE

NATIONAL REGISTER OF HISTORIC PLACES EVALUATION/RETURN SHEET

REQUESTED ACTION: NOMINATION	MBREIMPER
PROPERTY Dr. Edwards House NAME:	KRUCEIAED
MULTIPLE NAME:	JUL 28 2008
STATE & COUNTY: KENTUCKY, Garrard	COUNCIL,
	OF PENDING LIST: 6/16/08 OF 45TH DAY: 7/11/08
REFERENCE NUMBER: 08000650	
REASONS FOR REVIEW:	
APPEAL: N DATA PROBLEM: N LANDSCAPE: OTHER: N PDIL: N PERIOD: REQUEST: N SAMPLE: N SLR DRAFT:	N PROGRAM UNAPPROVED: N Y NATIONAL: N
COMMENT WAIVER: N	Nofe: the image
ACCEPTRETURNREJECT _7	8/2008 DATE desc submitted with the nominiction was not
ABSTRACT/SUMMARY COMMENTS: See Returns Com	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
See ile wind	have a duplicate of F.
	ine do have a dife -
	with 20 jpg mades
\hat{O} , \hat{I}_{1}	
RECOM./CRITERIA Return- Patrick Ande	us seawh to see if you can find the disc or ignically submitted to you
	Ly this office.
	LINE practice the Marth
TELEPHONE DATE	7/8/2008 Perry.
DOCUMENTATION see attached comments Y/N	see attached SLR Y/N

If a nomination is returned to the nominating authority, the nomination is no longer under consideration by the NPS.



United States Department of the Interior

NATIONAL PARK SERVICE 1849 C Street, N.W. Washington, D.C. 20240

IN REPLY REFER TO:

The United States Department of the Interior National Park Service

> National Register of Historic Places Return/Evaluation Sheet

Property Name:

Dr. Edwards House, Garrard County, Kentucky

Reference Number:

08000650

This nomination is being returned for substantive and technical problems.

The nomination claims significance under Criterion B for the house's association with Dr. John Edwards, a physician who practiced in Lancaster and rural Garrard County. While the nomination endeavors to make a case for the significance of small-town physicians in general, it lacks sufficient information in which to evaluate the significance of Dr. Edwards. Information provided for Dr. Edwards is primarily from his earliest years of study and practice (prior to 1919) and the end of his career (1950 to 1957). There is little information about his career or analysis of his significance to the community during the bulk of his occupancy of the house, beginning in 1928. With the dearth of written records, perhaps more anecdotal evidence can be supplied. It would be interesting to know the Doctor's place in the town - was he the only doctor? Was he viewed as the primary doctor of the town? Please provide more information on Dr. Edwards' particular significance to the community.

The nomination does not fully explore the relationship of Dr. Edwards' practice to his residence. Is the house truly the best property to associate with him? A possible location of his office is mentioned, but there is no analysis of this building or its significance in relation to the Doctor. In 1950, Dr. Edwards is associated with the new hospital in town. Does this building still exist? Did Dr. Edwards have a significant role in its formation? Are the hospital's associations with Dr. Edwards' practice more suitable for illustrating his significance to the community? Assessing other sites and buildings associated with the Doctor's career is an important aspect of establishing the significance of his residence.

There are no UTM coordinates provided on the nomination form. Please enter the appropriate coordinates.

The narrative description does not clearly differentiate which resources are contributing and which are noncontributing. Please clarify the resource count.

We appreciate the opportunity to review this nomination and hope that you find these comments useful. Please feel free to contact me if you have any questions. I can be reached at (202) 354-2275 or email at <<u>James_Gabbert@nps.gov>.</u>

Sincerely,

Jim Gabbert, Historian National Register of Historic Places 7/8/08

UNITED STATES DEPARTMENT OF THE INTERIOR NATIONAL PARK SERVICE

NATIONAL REGISTER OF HISTORIC PLACES EVALUATION/RETURN SHEET

REQUESTED ACTION: RESUBMISSION

PROPERTY Dr. Edwards House NAME:

MULTIPLE NAME:

STATE & COUNTY: KENTUCKY, Garrard

DATE RECEIVED: 10/24/08 DATE OF PENDING LIST: DATE OF 16TH DAY: DATE OF 45TH DAY: 12/07/08 DATE OF WEEKLY LIST:

REFERENCE NUMBER: 08000650

DETAILED EVALUATION:

ACCEPT _____RETURN _____REJECT 11/25/06 _____DATE

ABSTRACT/SUMMARY COMMENTS:

Locally Significant for its Association with Dr. John E. Edwards. Edwards was a prominent physician in the Lancestin area, providing Priming Medical line both out of this house and in the New hospital he helped Found. Dr. Edwards representes the transition From local, rural medicine to moderne, response medicine in Lancasta.

RECOM. / CRITERIA Accept Crit B	
REVIEWER Jin (rubbert	DISCIPLINE Hishin
TELEPHONE	DATE

DOCUMENTATION see attached comments Y/N see attached SLR Y/N













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NAT. RE	GISTER OF HISTORIC F ATIONAL PARK SERVIC	PLACES

COMMERCE CABINET

KENTUCKY HERITAGE COUNCIL

Steven L. Beshear Governor

The State Historic Preservation Office 300 Washington Street Frankfort, Kentucky 40601 Phone (502) 564-7005 Fax (502) 564-5820 www.kentucky.gov Marcheta Sparrow Secretary

Donna M. Neary Executive Director and State Historic Preservation Officer

May 22, 2008

Jan Snyder Matthews, Ph.D., Keeper National Park Service 2280 National Register of Historic Places 1201 "T" (Eye) Street, NW 8th Floor Washington DC 20005

Dear Dr. Matthews:

Enclosed are nominations approved at the May 15, 2008 Review Board meeting. We are submitting these Kentucky properties for listing in the National Register:

Woodford-Fishback-Venable Farm, Clark County Hollywood Terrace Historic District, Fayette County Dr. Edwards House, Garrard County Mary Alice Hadley House, Jefferson County Progress School, Jefferson County Rhea Stadium, Logan County Ross-Hollenbach Farm, Oldham County

The following nominations were returned, and have been revised according to comments provided by the National Register staff reviewer. We are resubmitting these Kentucky properties for reconsideration and listing:

Fort Thomas Commercial District (Campbell County) South Park Neighborhood (Clark County) Jesse Whitesell Farm (Name Change, Boundary Increase) (Fulton County KY and Obion County TN) Feltman Mound (Kenton County)

We appreciate your consideration of these nominations.

Sincerely, m. Alan

Donna M. Neary, Executive Director Kentucky Heritage Council and State Historic Preservation Officer



An Equal Opportunity Employer M/F/D

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COMMERCE CABINET KENTUCKY HERITAGE COUNCIL

The State Historic Preservation Office 300 Washington Street Frankfort, Kentucky 40601 Phone (502) 564-7005 Fax (502) 564-5820 www.kentucky.gov October 20, 2008

Marcheta	Sparrow
S	ecretary

Steven L. Beshear Governor

> Jan Snyder Matthews, Ph.D., Keeper National Park Service 2280 National Register of Historic Places 1201 "P" (Eye) Street, NW 8th Floor Washington DC 20005

Dear Dr. Matthews:

Enclosed are nominations approved at the August 27, 2008 Review Board meeting. We are submitting these Kentucky properties for listing in the National Register:

- Wurtland Union Church, Greenup County
- Cherokee State Park, Marshall County
- · Battle of Mill Spings Historic Areas (Boundary Increase), Pulaski and Wayne Counties
- New Zion Historic District, Scott and Fayette Counties

The following nomination was returned, and have been revised according to comments provided by the National Register staff reviewer. We are resubmitting these Kentucky properties for reconsideration and listing:

Dr. Edwards House, Garrard County NR ID: 08000650

The following properties are submitted for listing. Their owners previously had objected to their listing, so these properties currently have Determined Eligible status. Included are notarized letters from owners withdrawing any objections to listing:

- Stoddard Johnston Elementary School, Jefferson County NR ID: 82005031
- Creel, Elijah, House (Green County MRA), Green County NR ID: 85003589

We appreciate your consideration of these nominations.

Sincerely,

Mark Dennen, Acting Executive Director Kentucky Heritage Council and State Historic Preservation Officer

