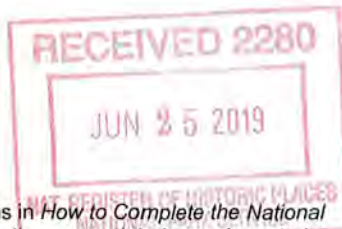


United States Department of the Interior
National Park Service

National Register of Historic Places Registration Form



This form is for use in nominating or requesting determinations for individual properties and districts. See instructions in *How to Complete the National Register of Historic Places Registration Form* (National Register Bulletin 16A). Complete each item by marking "x" in the appropriate box or by entering the information requested. If an item does not apply to the property being documented, enter "N/A" for "not applicable." For functions, architectural classification, materials, and areas of significance, enter only categories and subcategories from the instructions. Place additional entries and narrative items on continuation sheets (NPS Form 10-900a). Use a typewriter, word processor, or computer to complete all items.

1. Name of Property

historic name DELAWARE AVENUE MEDICAL CENTER

other names/site number _____

name of related multiple property listing N/A

2. Location

street & number 1275 Delaware Avenue [] not for publication

city or town Buffalo [] vicinity

state New York code NY county Erie code 029 zip code 14209

3. State/Federal Agency Certification

As the designated authority under the National Historic Preservation Act, as amended, I hereby certify that this [X] nomination [] request for determination of eligibility meets the documentation standards for registering properties in the National Register of Historic Places and meets the procedural and professional requirements as set forth in 36 CFR Part 60. In my opinion, the property [X] meets [] does not meet the National Register criteria. I recommend that this property be considered significant [] nationally [] statewide [X] locally. ([] see continuation sheet for additional comments.)

R. Daniel Meehan
Signature of certifying official/Title

6/20/2019
Date

DSY/PO
State or Federal agency and bureau

In my opinion, the property [] meets [] does not meet the National Register criteria. ([] see continuation sheet for additional comments.)

Signature of certifying official/Title

Date

State or Federal agency and bureau

4. National Park Service Certification

I hereby certify that the property is:

- ☒ entered in the National Register
[] see continuation sheet
[] determined eligible for the National Register
[] see continuation sheet
[] determined not eligible for the National Register
[] removed from the National Register
[] other (explain) _____

Signature of the Keeper

date of action

[Signature]

8/8/19

Delaware Avenue Medical Center

Name of Property

Erie County, New York

County and State

5. Classification

Ownership of Property

(check as many boxes as apply)

☒ private
☐ public-local
☐ public-State
☐ public-Federal

Category of Property

(Check only one box)

☒ building(s)
☐ district
☐ site
☐ structure
☐ object

Number of Resources within Property

(Do not include previously listed resources in the count)

Contributing	Noncontributing	
<u>1</u>	<u>0</u>	buildings
<u> </u>	<u> </u>	sites
<u> </u>	<u> </u>	structures
<u> </u>	<u> </u>	objects
<u>1</u>	<u>0</u>	TOTAL

Name of related multiple property listing

(Enter "N/A" if property is not part of a multiple property listing)

N/A

Number of contributing resources previously listed in the National Register

N/A

6. Function or Use

Historic Functions

(enter categories from instructions)

COMMERCE/restaurant/café

HEALTH CARE/clinic/doctor's office; clinic/dispensary

medical business/pharmacy; medical office/dentist's office

medical office/doctor's office

Current Functions

(Enter categories from instructions)

VACANT

7. Description

Architectural Classification

(Enter categories from instructions)

MODERN MOVEMENT/International Style

Materials

(Enter categories from instructions)

foundation CONCRETE

walls BRICK

roof MEMBRANE

other

Narrative Description

(Describe the historic and current condition of the property on one or more continuation sheets)

Delaware Avenue Medical Center

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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 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 that 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 boxes that apply.)

- ☐ **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

Areas of Significance:

(Enter categories from instructions)

Architecture**Period of Significance:**1956-1958**Significant Dates:**1956, 1958**Significant Person:**N/A**Cultural Affiliation:**N/A**Architect/Builder:**Backus, Crane & Love**Narrative Statement of Significance**

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

9. Major Bibliographic Resources**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. **NPS #38,956**
- ☐ previously listed in the National Register
- ☐ previously determined eligible by the National Register
- ☐ designated a National Historic Landmark
- ☐ recorded by historic American Building Survey

- ☐ recorded by Historic American Engineering Record

Primary location of additional data:

- ☐ State Historic Preservation Office
- ☐ Other State agency
- ☐ Federal Agency
- ☐ Local Government
- ☐ University
- ☐ Other repository: _____

Delaware Avenue Medical Center
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10. Geographical Data

Acreage of Property 0.52 acre

UTM References

(Place additional UTM references on a continuation sheet.)

1 17 674034 4753996
Zone Easting Northing

3 17
Zone Easting Northing

2 17

4 17

Verbal Boundary Description

(Describe the boundaries of the property on a continuation sheet.)

Boundary Justification

(Explain why the boundaries were selected on a continuation sheet.)

11. Form Prepared By

name/title Kelsie Hoke, Asst. Director of Technical Services, Karen A. Kennedy, Director of Architectural History, Joseph Duggan, Associate Architectural Historian

organization Preservation Studios date 4/29/2019

street & number 170 Florida Street telephone (716)725-6410

city or town Buffalo state NY zip code 14208

Additional Documentation

Submit the following items with the completed form:

Continuation Sheets

Maps

A **USGS map** (7.5 or 15 minute series) indicating the property's location

A **Sketch map** for historic districts and properties having large acreage or numerous resources.

Photographs

Representative **black and white photographs** of the property.

Additional items

(Check with SHPO or FPO for any additional items)

Property Owner (Complete this item at the request of the SHPO or FPO)

name _____

street & number _____ telephone _____

city or town _____ state _____ zip code _____

Paperwork Reduction Act Statement: This information is being collected for applications to the National Register of Historic Places to nominate properties for listing or determine eligibility for listing, to list properties, and to amend existing listings. Response to this request is required to obtain a benefit in accordance with the National Historic Preservation Act, as amended (16 U.S.C. 470 *et seq.*)

Estimated Burden Statement: public reporting burden for this form is estimated to average 18.1 hours per response including time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding this burden estimate or any aspect of this form to the Chief, Administrative Services Division, National Park Service, P.O. Box 37127, Washington, D.C. 20503

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Delaware Avenue Medical Center is located at 1275 Delaware Avenue in the City of Buffalo, New York. It sits two-and-a-quarter-miles north of city hall on the east side of Delaware Avenue, two blocks south of Forest Lawn Cemetery (NR listed) and just south of Gates Circle (NR listed). Delaware Avenue is a major north-south artery through the city and is lined on both sides by turn-of-the-century mansions and a number of large-scale, handsome apartment buildings from varying decades throughout the twentieth century. Gates Circle, meanwhile, is an expansive traffic roundabout with a grand circular fountain at its center that serves as one of the elements in Frederick Law Olmsted's parks and parkways network for the city. In the immediate vicinity of the building and clustered around the periphery of Gates Circle, there are several large multi-story apartment buildings from the early twentieth century, as well as a large, recently completed condominium building just to the north and a sprawling mid-century parking ramp adjacent to the east. Otherwise, the surrounding area is composed of handsome residential housing stock dating from the late-nineteenth to the early twentieth centuries, with more modest homes to the north and east and more substantial, grander homes to the south and west.¹ The building itself sits back approximately seventy-five feet from the street with its side elevation facing Delaware Avenue and a long driveway from the street running along its north-facing facade. The west side of the parcel, facing Delaware Avenue, is planted with grass and some shrubs while asphalt paved parking areas are present on each of the three remaining sides. The nominated property includes all extant parking areas that were historically associated with the building. A large parking garage, not associated with the medical center, was built by the city in 1974 just to the east of building, which provided additional parking in later years.²

Built between 1956 and 1958, Delaware Avenue Medical Center is a five-story medical office building designed in a modest International style. It was constructed to provide both a centralized and a state-of-the-art office building for practicing physicians, one that was not only replete with modern amenities, but which provided access to numerous specialists within a single building and was conveniently situated in what had become a medical corridor. Through the 1970s the building was fully occupied by various medical practitioners but, as additional hospitals were built throughout the city and into the suburbs, the number of medical tenants declined, and other office tenants moved in. The building has been only partially occupied for the past two decades and, since 2017, has been vacant although properly maintained. True to the International style, the building has a simple exterior, emphasizing the expression of the materials and horizontality, which has remained intact over the years. The interior was originally designed with a central corridor that bisected each floor, vertical circulation, and a lobby and snack bar at the first floor with the remainder of the space available for build-out by tenants. Currently, the corridors, vertical circulation, lobby and snack bar remain in place with their original finishes largely intact, while the spec-built areas have seen much more change over time and most

¹ Just across the street, on the west side of Delaware Avenue, is the National Register-listed Elmwood Historic District (East), a large area dominated by large, high-style middle and upper-middle class residences.

² Gabriel F. Deyo to Byron Brown, Dec. 2017, Office of the New York State Comptroller, <https://www.osc.state.ny.us/localgov/audits/swr/2017/Parking-Structures/city-buffalo.pdf>.

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Delaware Avenue Medical Center

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now have largely non-historic finishes. Overall, the building is in good condition and quite intact on both the interior and the exterior and represents an important chapter in both the history of medical office buildings in Buffalo and in the history of this neighborhood.

Exterior

The Delaware Avenue Medical Center is rectangular in form, measuring approximately 170 feet long by seventy feet deep and five stories in height with a smaller sixth floor penthouse floor present just at the center of the building. Designed in the International Style, it is built of steel frame construction with eight inch concrete block and brick faced curtain walls. The building is simple and minimalist in appearance and is clad in pale yellow brick over a short concrete base and has a flat roof. The exterior walls are flat and planar with sliding, aluminum ribbon windows wrapping all sides of the building at each floor. Deep window wells run along the long north and south sides of the building to light the basement.

Overall description

Each elevation of the building is identical and is symmetrically composed of a continuous blond brick spandrel with a concrete sill across the base and a continuous ribbon window above so that the building has the appearance of stacked layers. On the front and rear elevations, seven pairs of small, square vents are evenly spaced across the spandrels, providing airflow to the interior but also articulating the otherwise unbroken surface. The ribbon windows are made up of narrow sliding aluminum units with structural wall components incorporated as mullions, encased in brushed aluminum so that they blend seamlessly into the glazed band. The structural members at the corners are also wrapped in brushed aluminum and sit back from the wall in the plane of the windows so that the ribbon is uninterrupted and wraps around the corner. At the first floor, the windows are slightly taller than at the upper floors. On the front elevation, the main entry is present just west of center, consisting of a set of three glazed aluminum doors with matching sidelights and transoms all sheltered by a simple projecting awning. Though very similar to the building's original design, this awning is a replacement and consists of a flat metal roof structure that projects at ninety degrees from the building and is supported by round steel posts on a round concrete base. Extending to either side, there are original steel pipe railings that surround the lightwells. The sixth floor of the building exists just at the center third of the plan, flush with the front elevation, and so has the appearance of a large monitor crowning the elevation.

On the first floor of the west elevation, there are no windows, but instead, a large field of glazed, green terracotta tiles covers the base of the building almost from end to end. Set into the field of green tiles, the words "Delaware Medical Center" are spelled out in large, three-dimensional, brushed aluminum letters. On the south elevation, just off center, the ribbon of windows is broken to accommodate a single flush metal entry door.

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Interior

On the interior, the building has a simple layout with an east-west double-loaded corridor bisecting the plan at each floor. The vertical circulation is centrally located, set against the south wall of the corridor, and consists of a pair of elevators to the west of the building's center and a simple, enclosed stair east of center. At the first floor of the building, there is a large lobby just inside the entry doors which faces the bank of elevators on the south wall and accesses the corridor extending to the east and west. Off of the lobby to the west is an original diner/café. The rest of the first floor, along with the basement level and all of the upper floors, contains office suites.

The lobby is largely intact and is a highly finished space very representative of 1950s design. It is a large, almost square room, anchored by the south wall, which is clad in boldly veined granite, contrasting with the polished aluminum elevator doors at the center. The west and north walls are largely glass with polished aluminum casings framing views into the adjacent diner/café and out to the exterior, respectively. The east wall was originally painted plaster with a coated fabric baseboard but has since been updated to a beige wallpaper. On the east wall, an original, full-height slatted wood screen composed of tall, stained members projects approximately two feet from the south end of the wall to articulate a seating area with benches along the length of the east wall. The whole of the lobby has a red terra-cotta tile floor and adhered acoustic tile at the ceiling that, though similar to the original finishes, are later updates to the space.

The café adjacent to the west is also quite intact to its original appearance. It has an L-shaped dining area which wraps around an enclosed kitchen area. The space has a vinyl tile floor with sheetrock at the walls and ceiling throughout. Visible from the lobby is an original dining counter together with its original built-in aluminum dining stools along the wall opposite the lobby and a bar with additional stools built in along the south wall beneath the windows. Just beyond the café, the west end of the corridor retains original, aluminum-framed, glazed partition walls to either side so that one can see into the café to the north and into an office space to the south.

The rest of the first floor, the basement level, and each of the upper floors were spec-built and so were designed with only the central hallway and vertical circulation, leaving the rest of the floorplan to be determined by the occupants. On each floor, the majority of the original corridors are still present and retain their original vinyl asbestos tile flooring featuring a mottled shade of beige at the center and a black and pink border. The exception is the basement corridor, which is carpeted. The walls are gypsum board and the ceilings are acoustic tile or suspended gypsum; at the elevator and stair doors, the openings retain their original metal frames and casings. Only one of the corridors still runs from the west to the east perimeter wall, as the others were slightly truncated

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at either end in order to accommodate an additional room. To either side of the corridor, there are office suites of varying size and configuration. Most have a set of shallow reception and storage rooms along the corridors with larger and deeper rooms arranged along the window walls. These have been updated and altered several times over the course of the building's history, however, and so there is no consistency in regard to the size of the suite or the configuration of its rooms. Throughout, the office suites have a mix of carpet and vinyl tile at the floors, gypsum board walls, and suspended or adhered acoustic tile ceilings. Smaller spaces range in size from 640 to 690 square feet and are generally empty and carpeted. These smaller spaces are typically located on the second through fifth floors along the northeast, east and south walls. Large office spaces range in size between approximately 1300 and 1500 square feet and contain a mix of the aforementioned carpet and/or vinyl tile floors. These larger office spaces dominate the basement and first floor. On the second through fifth floors, there are two offices on each floor; one along the central north wall and the other completely bordering the west wall. Although most of these larger office spaces are empty, there is an extant sink and some cabinetry in the north central office on the fourth floor.

At the time of its construction, the building was designed with state-of-the-art technology and some of these elements still remain. Notably, the building is wired for sound throughout and retains most of its brushed nickel speakers, which are set into regularly-spaced, flush-mounted fixtures in the ceiling. Many of the original polished aluminum diffusers are also present at the ceilings. Both the speakers and the diffusers are in a style very typical to the era and are indicative of the building's original aesthetic.

The sixth, or penthouse, floor of the building housed a dentist's office and appears to be quite intact to its original 1950s design. It has several small reception and appointment rooms clustered around the central hallway and most retain their original décor: a brightly colored dentist's chair, individual sinks, and some built-in office furnishings. Like below, the finishes throughout consist of sheetrock walls, vinyl asbestos tile floors and a dropped and textured gypsum board ceiling. In terms of plan, there are three entry doors off the main east-west corridor on the north wall. These doors lead to another interior corridor to the north with four separate spaces for consultation and treatment. On the west end of the north wall is a large storage and prep space containing a sink, upper and lower cabinets and equipment. Beyond this space is a large treatment room on the west wall which retains the aforementioned dentist chair, built in cabinetry, and an additional sink. There are two entry doors off the main east-west corridor on the south wall. The door to the east leads to a stairwell. The other door, mid-corridor, leads to the elevators and utility spaces

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Delaware Avenue Medical Center

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Statement of Significance:

Delaware Avenue Medical Center located at 1275 Delaware Avenue in Buffalo, Erie County, New York, is locally significant under Criterion C in the area of Architecture as a representative example of a mid-century medical office building significant as a modest example of the International Style. Developed by Bernard King of King Home Builders and designed by prominent local firm Backus, Crane & Love, the Delaware Avenue Medical Center contributed to Buffalo's expanding medical industry in the postwar era. Medical office buildings emerged in the early twentieth century in concurrence with advances in professionalization and specialization in the medical field. By 1935, the cost of medical education grew, and medicine became a profession of the privileged. Specialization was stressed and highly esteemed, while the family doctor (general practitioner) became lower in rank, smaller in number and older. Animosity began to increase between the specialists and the general practitioners and family doctors began to lose headway as they were prevented from performing hospital work, medical procedures and other activities.³ A second wave in the postwar era accompanied changing social norms and more medical advances. New antibiotics reduced the likelihood of postoperative infection and contemporary anesthetics hastened a patient's recovery from surgery, making hospital stays less necessary and less common. Procedures that had taken place in the hospital in the late nineteenth and early twentieth century were now being relocated to adjunct sites that were more convenient, easier to find and with a more commercial atmosphere. This postwar ideology centered around a type of design that offered easy accessibility in a single facility, a "one-stop-shopping approach" that would successfully meet all of a family's healthcare needs.⁴ The Delaware Avenue Medical Center reflected common design elements of this building type, with seventy office suites containing a variety of practices, a pharmacy, optician's office, snack bar, elevators, and air conditioning. It was known as "one of the most modern medical centers in the country" when it opened in 1958.⁵ The selection of the International Style suited the image and function of the Delaware Avenue Medical Center. The clean, modern aesthetic appealed to the medical industry's concern for modern technology and sanitary conditions, while the structural frame afforded flexible interiors appropriate for a speculative development. The building retains defining characteristics such as the rectangular footprint and ribbon windows that assert its functional and efficient design. The period of significance is 1956-58, the dates of construction of the Delaware Avenue Medical Center. When the facility opened for business, it represented modern American medical advancement and service. The building personified the postwar wave of medical office buildings.

³ Cecilia Gutierrez, MD, & Peter Scheid, MD, "The History of Family Medicine and Its Impact on US Health Care Delivery," University of California, San Diego, Department of Family & Preventive Medicine, May 29, 2002, 7.

⁴ Beverly Conant Stone and David Charles Sloane, *Medicine Moves to the Mall*, Baltimore: John Hopkins University Press, 2003, 6,10.

⁵ "New Delaware Ave. Medical Office Building," *Buffalo Evening News* (Buffalo, NY), July 17, 1957, 63.

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Buffalo's Medical Field and the Gates Circle Neighborhood

The “golden age” of medical advancement spanned the last two decades of the nineteenth century and the first four decades of the twentieth century, setting the stage for the highly specialized medical practices that would be established in the postwar period.⁶ American cities like Buffalo propelled this progress as centers of innovation with medical advancements such as the creation of the Children's Hospital, which was born of the idea that children should be medically treated differently than adults.⁷ The Sisters of Charity Hospital, the first hospital in the city, was run by a religious order of women who played a groundbreaking role in the establishment of medical care for the indigent in nineteenth-century Buffalo and in the transition of medicine to its modern practice.⁸ By the early twentieth century, Buffalo hosted a number of other nationally reputable medical facilities, including the University at Buffalo Medical School, Buffalo General Hospital, and Millard Fillmore Hospital. In post-war America, the rapid rise of specialization sparked the development of the Delaware Medical Center, providing state-of-the-art office space for physicians with attending privileges throughout the city, not solely those associated with Millard Fillmore Hospital. The construction of the Delaware Medical Center supported the modern medical industry in Buffalo generally and the medical hub in the Gates Circle Neighborhood. While not designed for in-patient treatment, it was built to accommodate a host of specialized practices that could provide adjunct services to local hospitals, allowing patients to visit one site for all of their medical needs.

The University of Buffalo School of Medicine, established in 1846, encompassed the city's leading advancements in medical research. The university contained medical, dental, and pharmaceutical departments which all contributed to its reputation as one of the most advanced medical institutions in the United States.⁹ One such example was Buffalo's establishment of the first laboratory for cancer research, operated by Dr. Roswell Park, a leading faculty member and early pioneer in treating the disease.¹⁰ Like hospitals, the University of Buffalo School of Medicine adapted its facilities to include the latest technologies. The university's, located on 24 High Street (1898, not-extant), was announced in 1898 to include the, “most modern ideas of heating, plumbing, and ventilation.”¹¹

⁶ James Ciment, *Postwar America: An Encyclopedia of Social, Political, Cultural, and Economic History*, (Abingdon: Routledge, 2006).

⁷ “Hospital History,” *John R. Oishei Children's Hospital*, <https://www.ochbuffalo.org/hospital-history>.

⁸ Jean Richardson, *History of the Sisters of Charity Hospital, Buffalo, New York, 1848-1900*, Lewiston, NY: The Edwin Mellen Press, 2005. (Intro).

⁹ Lilli Sentz, *Medical History in Buffalo, 1846-1996: collected essays* (Buffalo: School of Medicine and Biomedical Sciences, State University of New York at Buffalo, 1996), 17.

¹⁰ Sentz, *Medical History in Buffalo*, 191

¹¹ Sentz, *Medical History in Buffalo*, 17.

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Buffalo's first two hospitals, Sisters of Charity Hospital, founded in 1849, and Buffalo General Hospital, founded in 1855, preceded the establishment of a third hospital, the Buffalo Homeopathic Hospital in 1872. In that year, Dr. Augustus Hoxsie, one of the most prominent practitioners in Western New York at the time, founded the Buffalo Homeopathic Hospital in a three-story house at the corner of Washington and North Division Streets. The founding of the hospital pertained to Buffalo General's and Sister of Charity's refusal to accept homeopathic practitioners. Within two years, increased demand for healthcare in the city prompted the Homeopathic Hospital to buy the Bidwell family homestead at 74 Cottage Street. In 1911, the hospital opened a new facility, nurses' home, and administration building designed by architect George F. Newton at Gates Circle.¹² The 1911 pavilion style hospital featured improved ventilation, open space, and access to sunlight all typical to the design of nineteenth-century hospitals. The institution was both a local landmark and central medical facility to the Delaware Avenue neighborhood.

The Buffalo Homeopathic Hospital was renamed Millard Fillmore Hospital in 1924. Three years later, the hospital started to employ non-homeopathic doctors as residents and staff for the first time. The growing population of the Lafayette and Linwood Avenue neighborhoods spurred the expansion of the hospital in the following year with a 50,000-square foot addition to the nurses' home. Further building campaigns occurred in the 1940s and '50s with a four-story addition that faced Gates Circle in 1942, six stories to the center building in 1948, a new entrance to the hospital at Gates Circle/Delaware Avenue in 1955, and, lastly, a new nurses' home on Linwood Avenue in 1958. The rapid growth in cardiac medicine and neurology led to further hospital expansions in 1960s and 1970s. A new emergency room building, parking ramp, and entrance were all built to accommodate more patients as well as the growing needs of emergency medicine in 1966.¹³

Millard Fillmore Hospital anchored the southeast side of Gates Circle and was a landmark institution in the neighborhood for decades. Replacing the Frank N. Farrer Mansion in 1956, the Delaware Avenue Medical Center built upon the established presence of the hospital. In fact, hospital administrator Harold A. Grimm had advocated for a medical office building in proximity to Millard Fillmore since the 1930s, when the medical office building emerged in the American medical landscape.

Medical Office Buildings

In support of these larger medical facilities, a new type of smaller medical office building emerged as a new building type in North America during the early twentieth century, as practitioners specialized within medical subfields and medical technology advanced. Departing from the historical arrangement of physicians making

¹² "Millard Fillmore Hospital," *Buffalo as an Architectural Museum*, November, 2016, <http://www.buffaloah.com/a/gates/3/mf.html>.

¹³ Barbara A. Campagna, "Buffalo Homeopathic Hospital," DRAFT National Register of Historic Places Nomination Form, 2016, Section 8 Page 9. NOTE: the hospital, although NRE, was largely demolished and thus not listed on the NR

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house calls or having a home office, the professionalization of the medical field during this era coincided with separating diagnostic and treatment centers into separate, specialized facilities. Designers borrowed from developments in office building and hospital design, creating a distinct new building type that merged the professionalism of commercial office towers and the technological edge of modern medicine.¹⁴

During the 1920s, American and Canadian cities boasted new medical arts buildings whose location, design, and amenities embodied the changing role of medicine in society.¹⁵ Many of these new facilities were located in central cities and offered parking for patients traveling by private automobile. In some cities, like Toronto, clusters of medically oriented buildings created new medical hubs.¹⁶ In other cities, medical arts buildings located on established commercial streets or downtown, merging medical service into the professional sphere of the city. Some medical office buildings located near hospitals, and the proximity made it convenient for patients to get multiple opinions and visit multiple specialists in one day.

Visually, medical office buildings of this era resembled other commercial office buildings, displaying new building technology that encouraged unprecedented heights. Stylistically, many designers drew upon the vocabulary of historic architectural styles that frequently adorned other office buildings. The Beaux-Arts style Medical Arts Building in Atlanta, Georgia (1927, NR 2016), boasted twelve stories and the Gothic Revival inspired Medical Arts Building in Knoxville, Tennessee (1930, NR 1986), rose ten stories in height.¹⁷

In addition to these more traditional examples, other medical office buildings of this era also reflected a widespread quandary faced by commercial office tower designers who grappled with stretching historical styles, developed on lower profiled buildings, onto larger frames. The twelve-story Medical Arts Building (1924-25, NR 2016) in Oklahoma City, Oklahoma, reflected the American Commercial Style that negotiated this tension by paring down historical styles and emphasizing verticality. Designers of the Rhodes Medical Arts Building in Tacoma, Washington (1930, NR 1978), employed Art Deco design that eschewed traditional architectural styles in favor of modern aesthetics. In its form, the medical office building was very similar to other commercial office towers: “the key architectural innovation of the medical arts building was in designing an office tower-skyscraper expressly for medical use.”¹⁸

¹⁴ David Theodore, Stacie D. Burke, and Annmarie Adams, “Tower of Power: the Drummond Medical Building and the Interwar Centralization of Medical Practice,” *Medical Sciences and Medical Buildings* 32 (2009): 55, 56.

¹⁵ For instance, medical arts buildings in Memphis, Tennessee (1925-26); Atlanta, Georgia (1927); Oklahoma City, Oklahoma (1924-25); Amarillo, Texas (1928); Newport News, Virginia (1928); Rochester, New York (1929); Knoxville, Tennessee (1930); and Tacoma, Washington (1931), are listed on the National Register of Historic Places. For more information about medical office buildings in Toronto and Montreal, Canada, see “Tower of Power...,” 51-68.

¹⁶ Theodore, Burke and Adams, “Tower of Power,” 64.

¹⁷ While early medical office buildings were commonly called “Medical Arts Buildings,” the origin of that term is unknown.

¹⁸ Theodore, Burke and Adams, “Tower of Power,” 56.

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Construction methods that fostered unprecedented building heights also allowed for greater interior freedom, and flexible floorplates suited the needs of medical groups with different spatial requirements. Floorplates accommodated smaller offices for single practitioners and larger suites for practices with multiple doctors. While views and light of upper floors served patient-oriented spaces like waiting rooms, the lower floors and basements offered suitable space for special uses like x-ray facilities, which needed to block out light. Interior finishes were more hospital-like than other office buildings, reflecting the importance of sanitation in the medical field. Surfaces “not only had to be easily cleaned, but they had to look like they could be easily cleaned.”¹⁹ As a result, medical office buildings often featured materials such as terrazzo floors, linoleum, stainless steel, and nickel finishes.

Inside medical office buildings, public spaces and amenities represented the increasingly consumer-oriented role of patients as medical clients. Entrance lobbies welcomed customers into formal spaces with high degrees of finish and contemporary elevators that provided “luxury and status to a new, fee-paying clientele.”²⁰ The first floor of many medical office buildings contained commercial enterprises. Coffee shops and pharmacies offered practical stops for patients or those accompanying them to pick up prescriptions or enjoy a cup of coffee or lunch while waiting for an appointment or before driving home. Some facilities featured banks and other retail stores, further merging medical offices into a consumer experience.

Postwar Medical Buildings and the Delaware Avenue Medical Center

Constructed between 1956 and 1958, the Delaware Avenue Medical Center exemplifies the transition between early medical office buildings and postwar developments of the typology. The 1950s was controlled by a feeling of corporate standardization that was shaped by the method of production earlier established by the Ford Motor Company. Solidity, efficiency and new technology permeated the corporate and medical realms.²¹ Sociologist C. Wright Mills describes the evolution that influenced postwar office building design:

Few jobs rivaled in prestige and symbolic power that of white collar workers in mid-twentieth century America. The structures that housed them – like Lever House and the Seagram Building – would be among the most iconic buildings of the century.²²

While not on the level of these iconic structures, the Delaware Avenue Medical Center is a modest interpretation that embodies the elements found in postwar office buildings. By the 1950s, office layouts began

¹⁹ Theodore, Burke and Adams, “Tower of Power,” 62.

²⁰ Theodore, Burke and Adams, “Tower of Power,” 62.

²¹ “Office Design Trends Part 1: Throughout the Decades,” accessed April 24, 2019,

<https://www.criterionindustries.com.au/blogs/blog/office-design-trends-throughout-the-decades>, accessed on April 25, 2019.

²² C. Wright Mills, *White Collar: The American Middle Classes*, New York: Oxford University Press, 1951, 5.

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to shift and generally consisted of a ring of offices around the corner of the room, surrounding the support functions that were housed in the middle. Executives enjoyed privacy and, often, a nice view. Lower level employees began to work in more open and accessible spaces. Although Europeans referred to this type of design as *American Plan*, it was invented by two German brothers, Wolfgang and Eberhard Schnelle, of the German consulting firm Quickborner. Coining the phrase *Burolandschaft* meaning “office landscape,” the firm eschewed the outmoded scientific management theories that had grouped support employees in the pre-war manner of straight rows. Instead, they strove to employ the egalitarian ideologies of the postwar period to develop something more in sync with the new age. The firm’s application of *Burolandschaft* involved the enhancement of administrative space by incorporating informal break areas, tasteful plants and carpeting and employees clustered based on how they worked.²³ In the Delaware Avenue Medical Center, the concept of *Burolandschaft* was evident in the majority of the building, where most floors contained a set of shallow reception and storage rooms along the corridors with larger, more private, and deeper rooms for consultation and treatment arranged along the window walls.

Technological advances such as air conditioning and fluorescent lighting brought autonomy to office design which no longer relied upon natural light and fresh air.²⁴ Additionally, in an effort to contain and cut costs, ceiling heights were lowered and the need for new ventilation technology increased, creating opportunity for new design:

The availability of cheap energy and the widespread use of the new mechanical ventilation system had a significant impact on the planning of tall office buildings after World War II. Controlling indoor air temperature and humidity by mechanical means eliminated the design constraints such as limited plan depth and window areas... The reliance on air conditioning enabled deep planed, transparent, fully glazed facades, also influenced by the International Style of the era. High-rises, such as the Seagram Building (1958) in New York and the IBM Building (1972) in Chicago were all clad with glass curtain walls with no shading devices, and also fully air-conditioned to cool down the working places during the summer and heating during the winter.²⁵

²³ Ana Swanson, “Fascinating Photos Show the Best and Worst Office Designs for Employees,” *The Washington Post*, July 7, 2015, <https://www.washingtonpost.com/news/work/wp/2015/07/07/fascinating-photos-show-how-our-offices-have-evolved-over-the-decades/>; Jean McGregor, “Nine Things You Didn’t Know About the Office Cubicle,” *The Washington Post*, April 18, 2014, <https://www.washingtonpost.com/news/on-leadership/wp/2014/04/18/9-things-you-didnt-know-about-the-office-cubicle/>; “How Burolandschaft Took Over the World,” accessed on April 24, 2019, <https://www.area.co.uk/news/knowledge/how-burolandschaft-took-over-the-world-and-still-shapes-the-modern-workplace>.

²⁴ “Office Design Trends Part 1: Throughout the Decades,” accessed on April 24, 2019, <https://www.criterionindustries.com.au/blogs/blog/office-design-trends-throughout-the-decades>.

²⁵ Aysin Sev & Gorkem Aslan, “Natural Ventilation for the Sustainable Tall Office Buildings of the Future,” *World Academy of Science, Engineering and Technology. International Journal of Civil, Architectural, Structural and Construction Engineering*, Vol: 8, No:8, 2014, 855-856.

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In other words, the ventilation system allowed for efficient cooling of offices during the summer and efficient heating of offices during the winter.

The Delaware Avenue Medical Center contains a stack ventilation system that draws fresh air in from square vents on the front and rear elevations and exhausts it through a series of chimney-like stacks that run vertically through the building to the roof. The air flows upward through the stacks due to the temperature and pressure differences between the interior and the exterior of the building, allowing for efficient ventilation. The system enabled the architects to install the uninterrupted ribbon of windows on each floor, indicative of the International Style.²⁶

During the medical center's opening ceremonies, board president Dr. J. Frederick Painton stated that the idea for a medical office building adjacent to Millard Fillmore Hospital extended back to the 1930s, when Harold A. Grimm, the former hospital administrator, advocated for such a facility. Grimm's advocacy was consistent with the advances in medicine being driven by the American Medical Association in specialization and American Board certification in the early 1900s. By 1930, thirteen boards were added to the only two that existed, Opthamology and Otolaryngology. By 1940, four more boards would be added, for a total of nineteen areas of specialization eligible for American Board certification. The development of specializations had a profound effect on the nature of healthcare and its administration in the postwar period. A building such as the Delaware Avenue Medical Center would provide a space for modernized medicine which was advantageous to both doctors and patients. Specialized physicians were presented with an opportunity for private practice with nearby hospital affiliation and patients were provided with one site for all of their outpatient healthcare needs.²⁷

The first formal proposal for the project appeared in 1954 and closely resembled medical office buildings of the 1920s. On July 11, 1954, the *Buffalo Courier Express* published plans for a \$2,000,000 ten-story medical office building on Delaware Avenue with over 100 units above the first floor (Fig. 1). The lobby contained a drugstore, restaurant, bank, optician's office, and a stationary store, while modern technology included air conditioners equipped with thermostatic controls, high-speed elevators, and air-sterilizing equipment. Like its early twentieth century predecessors, the proposed skyscraper combined medical and commercial interests, featured up-to-date technology, and catered to automobiles. The initial plan called for 300 parking spaces in an adjacent parcel at 604 Linwood Avenue.

²⁶ Backus, Crane & Love, Architects, Architectural Plans for Delaware Avenue Medical Center, July 20, 1956, 4; Aysin Sev & Gorkem Aslan, "Natural Ventilation for the Sustainable Tall Office Buildings of the Future," *World Academy of Science, Engineering and Technology. International Journal of Civil, Architectural, Structural and Construction Engineering*, Vol: 8, No:8, 2014, 858.

²⁷ "Co-owner of pharmacy displays wares at new medical building," *Buffalo Courier-Express* (Buffalo, NY), March 10, 1958, 13; Cecilia Gutierrez, MD & Peter Scheid, MD, "The History of Family Medicine and Its Impact on US Health Care Delivery," University of California, San Diego, Department of Family & Preventive Medicine, May 29, 2002, 5-6.

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Linwood Avenue residents resisted the plans and the project did not proceed. While adjacent to a hospital, the building site was also located within a residential area, and property owners feared the project would negatively impact their property values. The city's Common Council Legislation approved rezoning of 1275 Delaware, but it denied the rezoning of the property at 604 Linwood Avenue necessary for the parking lot.²⁸ Consequently, this lot was not utilized in the final plans and subsequent construction of the medical center which only included the lot at 1275 Delaware Avenue. It is not known what dealings the developer had with the owner of 604 Linwood Avenue; however, the city of Buffalo eventually built a large parking garage on this and the adjoining lots in 1974.²⁹

In 1956, developer Bernard G. King, president of King Home Builders, offered a new plan for a medical office building on the site. Designed by Buffalo architectural firm Backus, Crane & Love, the plan scaled back to five stories (Fig. 2). While limited parking was available on site, a parking ramp built in the 1970s provided supplemental parking for the growing medical campus including the hospital and Delaware Avenue Medical Center. Despite these changes, the plan maintained many fundamental elements of the formerly proposed design. While the lower height of the building reflected the increasingly common siting of medical office buildings within residential areas, the design still utilized a steel frame structural system that allowed for a maximum freedom of interior buildout and implemented the latest building and medical technology.³⁰ The choice of the International Style communicated the shift from the medical field's "civic institutionalism... to [its] scientific functionalism."³¹ The lower height, residential siting, and modern aesthetic of the building aligned with the design of postwar medical offices across the country. The extant parking lot with spaces for 170 cars was constructed around the north, east and south side of the building.

King purchased the property from Millard Fillmore Hospital for \$130,000. In 1956, he created the Delaware Avenue Medical Center Builders, a consortium of builders for the project who were represented by Howard T. Saperston of the law firm Saperston, McNaughtan & Saperston. The project was one of the first of its kind to be privately owned in Buffalo, and while the medical center was still under construction, King sold the property to a group of local businessmen headed by Joseph Santoro, president of the Santoro Construction Company.³² Touted as "one of the most modern medical centers in the country," the building featured air-conditioning, high

²⁸ "Medical Building Rezoning Wins Committee Approval," *Buffalo Courier-Express* (Buffalo, NY), October 14, 1954, 10.

²⁹ Gabriel F. Deyo to Byron Brown, Dec. 2017, Office of the New York State

Comptroller, <https://www.osc.state.ny.us/localgov/audits/swr/2017/Parking-Structures/city-buffalo.pdf>, accessed May 10, 2019.

³⁰ Doug Moe and Alice D'Alessio, *Uncommon Sense: the life of Marshall Erdman* (Black Earth Wisconsin, Trails Custom Publishing 2003), 96.

³¹ David Charles Sloane and Beverly Conant Sloane, *Medicine Moves to the Mall* (Baltimore: The Johns Hopkins University Press 2003), 59.

³² "\$1,300,000 Medical Center To Adjoin Fillmore Hospital," *Buffalo Evening News* (Buffalo, NY), May 22, 1956, 27; "Medical Center Bldg. Purchased by Group," *Buffalo Courier-Express* (Buffalo, NY), Nov. 21, 1957, 30.

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speed elevators, a car port at the entrance, a pharmacy, an optician's office, and a snack bar.³³ The "AIRditioners," designed by the company Modine, appeared in a 1956 edition of *The Architectural Forum*, which lauded their ability to, "provide instant comfort and to increase employee efficiency."³⁴ Heralded as, "a doctor's dream come true," the Delaware Avenue Medical Center opened on March 9, 1958.³⁵

Tenants

At the time of the 1956 announcement, fifty of the seventy office suites in the planned Delaware Avenue Medical Center were already reserved.³⁶ By the end of the 1950s, the office housed the Delaware Center Pharmacy Inc. and a number of specialized physicians.³⁷ In 1954, Louis Borins, the attorney for the company erecting the Delaware Avenue Medical Center, touted the benefits of having multiple specialists in the same building:

The expanding utilization of specialized medical skills has often required a patient to travel from one part of the city to another. The... new medical office building is intended to overcome this problem and make a visit to one or more doctor's offices more pleasant and convenient for all.

Dr. Hans F. Kipping, a leading professional in dermatology, called the Delaware Avenue Medical Center home.³⁸ Other tenants, such as Dr. Donald R. McKay, a well-known chest physician in Western New York, was elected vice president of the American College of Chest Physicians in 1955.³⁹ Donald W. S. Stiff, a radiologist, set up x-ray devices in the basement, utilizing some of the new technology that set this building apart from other facilities.⁴⁰

Following the years of its opening, the Delaware Avenue Medical Center continued to attract specialized physicians and other medical professionals. As previously mentioned, many were associated with Millard Fillmore Hospital but not all. Retention was highest in the early years with a rate of sixty-six percent by 1961. Over the next thirty years, retention rates averaged approximately forty-eight percent. Physicians continued to be the dominant tenants within the building until 1980. Between 1980 and 1990, group practices such as the Hearing Evaluation Service of Buffalo Inc., Cardio-Thoracic Associates of WNYPC, Nephrology Associates,

³³ "Medical Center Bldg. Purchased by Group," *Buffalo Courier-Express* (Buffalo, NY), Nov. 21, 1957, 30.

³⁴ "Advertisement: Modine AIRditioners," *The Architectural Forum* 104, no. 3 (March 1956), 207.

³⁵ "Co-owner of pharmacy displays wares at new medical building," *Buffalo Courier-Express*, Buffalo, NY, March 10, 1958.

³⁶ "\$1,300,000 Medical Center to Adjoin Fillmore Hospital," 27.

³⁷ *Polk's Buffalo City Directory*, (Buffalo: Polk-Clement Directory Co. Inc. Publishers, 1959), 74.

³⁸ *A.M.A. Archives of Dermatology*, (Chicago: American Medical Association: 1959), iii.

³⁹ "Dr. Donald R. McKay: Takes Office as College President," *Chest Journal: Official Publication of the American College of Chest Physicians* 34 (July-December 1958): 34.

⁴⁰ *Polk's Buffalo City Directory*, 74.

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Hypertension Research, and Buffalo Amherst Allergy Associates began to emerge. These practices generally housed two to five physicians in one suite at the medical center.⁴¹

A major shift in the organization of healthcare in the United States during the last decades of the twentieth century precipitated the decline in occupancy of the Delaware Avenue Medical Center. Americans increasingly enrolled in healthcare plans offered by managed care organizations (MCOs) in the 1980s and 90s, and these consolidated health insurance providers created conditions that strained the market for private practice physicians. Large-scale MCOs offered their members plans that favored larger group practices and hospitals, which consolidated as a response. The rise in the median cost of medical education compounded the effect of the market conditions set by MCOs; more medical professionals graduated in debt in the early twenty-first century, and private practice became an impractical business model for entry-level physicians.⁴²

The decline in the number of occupied offices in the Delaware Avenue Medical Center corresponds to the period in which this shift in the organization of healthcare occurred. As the market turned in favor of large-scale medical practices, the number of healthcare providers interested in leasing office space designed for solo practice declined. Rather than retrofit spaces designed to accommodate increasingly outdated solo operations, medical practitioners around the country occupied facilities more compatible with group practice in order to survive the contemporary insurance market.

Many established tenants of the Delaware Avenue Medical Center reached the end of their careers around the new millennium and the majority of remaining individual and group practice physicians moved their practices to the suburbs. Many of these group practices experienced growth and most had at least two offices in suburban Buffalo.⁴³ By 2000, the number of tenants practicing in the building drastically declined, some floors having as little as one room occupied.⁴⁴ Other business such as the Delaware Snack Shop Inc. restaurant conducted business in the lobby for almost thirty years until it was replaced by Mary's Snack Shoppe and, eventually,

⁴¹ *Polk's Buffalo City Directory*, (Buffalo: Polk- Clement Directory Co. Inc. Publishers, 1959), 74; *Polk's Buffalo, Erie County, New York, City Directory: Street and Avenue Guide* (Buffalo: R. L. Polk & Co., 1961), 13; *Polk's Buffalo, Erie County, New York, City Directory: Street and Avenue Guide* (Buffalo: R. L. Polk & Co., 1971), 101; *Polk's Buffalo, Erie County, New York, City Directory: Street and Avenue Guide* (Buffalo: R. L. Polk & Co., 1980), 97; *Polk's Buffalo City Directory*, (Malden: R.L. Polk & Co., 1990), 92.

⁴² Peter D. Fox and Peter R. Kongstvedt, "A History of Managed Health Care and Health Insurance in the United States," in *the Essential Elements of Managed Care*, 6th ed. (Burlington, MA: Jones & Bartlett Learning, 2013), 16-30. <http://samples.jbpub.com/9781284043259/Chapter1.pdf>

⁴³ Note: In 1990, the retention rate for the building was forty eight percent. Internet research was conducted on the practitioners who represented the forty eight percent in order to determine relocation/retirement information. Information found on the relocation of the larger group practices was found on the following websites: "In Memoriam: Anthony John Federico, '51," *Niagara University Eagle*, www.eagleonline.niagara.edu/anthony-john-federico-51/; <https://www.hesooofbuffalo.org>; https://www.nephrology.com/dr_mainides.htm; <https://www.buffallergy.com>.

⁴⁴ *Buffalo, City, New York, Polk City Directory*, (Livonia: R.L. Polk & Co., 2000), 62.

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Sammy's Place.⁴⁵ As interest in the obsolescent single-unit offices continued to wane, the building fell into disuse in recent years after over a decade of declining tenancy rates.⁴⁶

International Style Architecture

In designing the Delaware Avenue Medical Center, Backus, Crane & Love drew upon the growing influence of International Style architecture. The modern aesthetic of the style traced its roots to Bauhaus Modernism, a philosophically driven design movement at the state-sponsored Bauhaus in Germany. The Bauhaus operated from 1919 to 1933 and promoted using smart design and modern technologies to improve workers' housing and eliminate class systems.⁴⁷ Theodore H.M. Prudon, FAIA, explains the impact of the style:

In the years following the early modern movement, modern architecture, with its links to social improvement, aesthetic change, and technological innovation, translated into a visible sign of modernity that redefined the built fabric throughout Europe and in parts of the Americas, Asia and Africa.⁴⁸

Architects and artists brought the style to the United States in the early 1930s, where it was coined the "International Style" in a 1932 exhibition at the Museum of Modern Art. Here, designers perpetuated the aesthetic of uniform facades, strip windows, and flat roofs without the utopian associations of its origin. With the onset of the Great Depression, the social and aesthetic components of modernism were considered in the application of the style. However, economics played the primary role in the typology's utilization in government-sponsored building programs during FDR's New Deal. Lower construction costs and high functionality combined with the need to deliver services and amenities to the larger public helped modern design gain influence not only with the government but also with private developers at the beginning of World War II. As construction came to a halt in Europe, the demand for industrial facilities and war-related housing in the United States grew exponentially. Developers employed the International style as a means of meeting this demand and experimentation with new materials and efficient production processes led to innovations (i.e., prefabrication) that were applied liberally in the postwar period.⁴⁹

The full expression of International Style design in the United States emerged after World War II. Its impact on a wide variety of building typologies was prolific:

⁴⁵ *Buffalo, City, New York, Polk City Directory*, (Livonia: R.L. Polk & Co., 2000), 62.

⁴⁶ Julie Shea, "What's Killing Private Practice," *Clinician Today*, <http://cliniciantoday.com/whats-killing-private-practice/>; Bitu Kash and Debra Tan, "Physician Group Practice Trends: A Comprehensive Review," *Journal of Hospital & Medical Management* 2, no. 1:3 (2016), 1-4.

⁴⁷ Carol Strickland, *The Annotated Arch: A Crash Course in the History of Architecture*, (Kansas City: Andrews McMeel Publishing, 2001), 133.

⁴⁸ Theodore H.M. Prudon, FAIA, *Preservation of Modern Architecture*, (Hoboken: John Wiley & Sons, Inc.), 2008, 4.

⁴⁹ Prudon, FAIA, *Preservation of Modern Architecture*, 4.

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Modern architecture became mainstream, and its ascendance continued, to the point of nearly worldwide omnipresence by the end of the century. It found applications not only in residential architecture but also in a wide variety of other building types, including buildings like schools, town halls, and libraries, as well as corporate structures, all generally categorized and visibly recognizable under the umbrella of the International Style, a term which itself became widely accepted.⁵⁰

The Philadelphia Savings Fund Society Building (1931) is one of the earliest International Style skyscrapers but the Lever House (1950-52, NR 1983) and Seagram Building (1954-58, NR 2005), both in New York City, are perhaps the most iconic American examples of the style. The clean aesthetic and conscious turn away from historical styles and ornament represented the modern era of progress and technological achievement here in the United States. Concurrently, postwar Europe, devastated by air and artillery bombing, was in need of immediate and extensive reconstruction. Here, the International Style was employed in the mass construction of high and low-rise multi-family housing in an effort to provide homes for as many people as possible in the shortest amount of time.⁵¹

In Buffalo, Backus, Crane & Love's design for the Delaware Avenue Medical Center furthered the firm's foray into the modern aesthetic. Their design of the three-story limestone and granite National Gypsum Company Building (1941, extant) at 325 Delaware Avenue contained the simplified forms and flat surfaces characteristic of modern architecture but still emphasized verticality. The ribbon windows of the Delaware Avenue Medical Center highlighted the horizontal lines of the building while expressing the non-structural nature of the walls. The flexible interior afforded by a structural frame suited the speculative medical office building, allowing individual tenants to customize spaces according to their particular needs.

Architects: Backus, Crane & Love

The partnership of Frederick C. Backus, Donald Love, and David Crane formed in 1941. Backus, the most senior partner, graduated from the College of Architecture at Cornell University in 1914 and worked for several Buffalo-based architecture firms, including Townsend & Fleming and Bley & Lyman, before forming his own practice in 1922.⁵²

Crane received a Master of Fine Arts in Architecture from Princeton in 1933. He apprenticed immediately with one of Buffalo's most prominent architects, E.B. Green. Crane worked as a draftsman handling a number of government office buildings and public housing projects. To supplement his experience, he was a member of the Buffalo City Planning Association and the Secretary of its Housing Committee in 1935 and 1936, as well as

⁵⁰ Theodore H.M. Prudon, FAIA, *Preservation of Modern Architecture*, (Hoboken: John Wiley & Sons, Inc.), 2008, 4.

⁵¹ Prudon, FAIA, 4.

⁵² Hamilton, Falzone, and Tidwell, "The Knox Summer Estate."

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Secretary of the Buffalo Chapter of the American Institute of Architects. Crane received his architectural license in 1937 and joined Backus that same year.⁵³

Love attended Bennett High School in Buffalo and graduated from the University of Notre Dame College of Architecture in 1935. That year, he met Backus while working at the City Architects Office in Buffalo and began working for Backus the following year.

Backus, Crane & Love occupied an office in the Delaware Court Building, a popular complex for distinguished architecture firms in Buffalo. Throughout the first half of the twentieth century, the building quartered several firms, including Lansing, Bley & Lyman; Kidd & Kidd; and Dietel & Wade.⁵⁴ Associated Buffalo Architects, Inc., an influential conglomerate of thirty-five different architects, including Backus, opened its headquarters in the now demolished Delaware Court Building.

The Willert Park Courts (1939, extant), designed by Backus, Crane, & Love, marked the first publicly funded housing project in the City of Buffalo. Constructed under the Buffalo Housing Municipal Authority, the buildings stylistically represent the prominence of modernism in its architecture.⁵⁵ The public housing was the first of its kind to be open to African Americans in the city. To place the development's fame into context, a 1940 publication by the Museum of Modern Art In New York City titled, a *Guide to Modern Architecture*, cited the Willert Park Courts, Louis Sullivan & Dankmar Adler's Guaranty Building, and various Frank Lloyd Wright commissions as Buffalo's best examples of modern design.⁵⁶ Other modernist style buildings developed by the firm in Buffalo included the National Gypsum Company Building (1941, extant), the Marine Drive Apartments (1950-1952, extant), and the Edward A. Rath County Building (1969-1971, extant).

Bernard G. King Associates

Bernard G. King Associates, played an essential role in developing health-related buildings throughout Western New York. He did so in an effort to "create a home-like atmosphere in a relaxed normal program for the general well-being and the comfort of the patient." One of King's early facilities was a nursing home on 3600 Harlem Road in Cheektowaga, New York. Built in 1961, the two-story Modern style building is currently vacant. King developed various other properties such as the King's Manor Nursing Home in Warsaw, New York, located on Purdy Avenue and North Main Street. Built in 1963, the three-story property also stands vacant. One year later,

⁵³ Timothy Tielman, "How Green Were My Acres: Builders, Designers, and Buyers in an Atomic Age Suburb, 1946-1956," Thesis, Buffalo State College, 2011, 14.

⁵⁴ Tielman, 14.

⁵⁵ Fred Schrock, "Is This the Most Architecturally Significant Building in Buffalo?" *Low Bridges: Upstate History* (blog). September 18th, 2013.

⁵⁶ Schrock, "Is This the Most Architecturally Significant Building in Buffalo?"

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King constructed the King Manor Nursing and Convalescent Home in Jamestown, New York. Located at Hazeltine Avenue and Baker Street it possessed a similar International Style of architecture and a multi-story frame comparable to the other nursing homes King constructed.⁵⁷ While all of these examples are currently abandoned, King's former nursing home on Prather Avenue in Jamestown is now Heritage Park, a rehabilitation center. Much like the Delaware Avenue Medical Center, King's nursing homes were "specially designed with attractive patient rooms, wide corridors, dining, and recreational facilities."⁵⁸

After the Period of Significance

After its opening in 1958, physicians made up the majority of tenants in the Delaware Avenue Medical Center. However, the neighborhood's decline as a medical hub heavily affected the number of physicians practicing in the area. In 1976, Millard Fillmore Hospital Suburban Hospital opened in Amherst, channeling a number of medical professionals away from the city and into the suburbs. The shift was clearly seen in the number of physicians practicing in the Delaware Avenue Medical Center. Leading into the twenty-first century, this number gradually declined. By 2000, a large majority of rooms in the building were vacant.⁵⁹ In 2012, the owner of Millard Fillmore Hospital Gates Circle moved several of its regional hospitals to the new Buffalo Niagara Medical Campus. The former hospital at Gates Circles moved all of its operations to the new medical campus that March.⁶⁰ The new owners of the hospital, TM Montante Development, demolished the main portion of the complex in 2015, ushering in a new era for the remaining buildings as a mixed-use development.⁶¹ The Delaware Avenue Medical Building also sold to the same group just two years later as the last remaining practice in the building moved out in 2017.⁶²

Changes to the nominated building after the period of significance are evident in the replacement of the front entry awning. Though very similar to the building's original design, this awning consists of a flat metal structure that projects at ninety degrees from the building and is supported by round steel posts on a round concrete base. Extending to either side, there are original steel pipe railings that surround the lightwells. It is not known when the replacement of the original awning occurred.

⁵⁷ Esther Watson, "Nursing Home Being Constructed at Warsaw," *Democrat and Chronicle* (Newark, NY), 1963, 3, and "Southside Nursing Home," *Jamestown Post-Journal* (Jamestown, New York), July 28, 1964, 11.

⁵⁸ "Construction of 2 New Nursing Homes Proposed," *Jamestown Post-Journal* (Jamestown, NY), May 25, 1963, 5.

⁵⁹ *Buffalo, City, New York, Polk City Directory*, (Livonia: R.L. Polk & Co., 2000), 62.

⁶⁰ Campagna, Section 8 Page 10.

⁶¹ *Polk City Directory*, Section 7 Page 13.

⁶² "Big Deal: Montante Buys Delaware Avenue Office Building," *Buffalo Rising*, December 21, 2017, <https://www.buffalorising.com/2017/12/big-deal-montante-buys-delaware-avenue-office-building/>

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Conclusion

The Delaware Avenue Medical Center at 1275 Delaware Avenue in Buffalo, New York, is a locally significant medical office building that reflects post-World War II medical office design trends and typologies, creating a flexible, modern, and efficient office environment to house a variety of medical specialists and professionals. Designed by local firm Backus, Crane & Love, the building symbolized Buffalo's post-war growth as a center for medical care and research. During this period, throughout the city, new medical developments were taking place. The University of Buffalo Medical School was built, Roswell Park established a Department of Pediatrics and initiated a pediatric cancer research program, and Buffalo had become well known nationally as a center for neurosurgery and the treatment of cerebral aneurysms.⁶³ When the Delaware Avenue Medical Center opened in 1958, it welcomed a variety of medical professionals that represented the post-war specialization in the medical field. With many of its features that made it, "one of the most modern medical centers in the country," still intact, the building remains a good example of the medical office building typology.

⁶³ "UB Unveils Dramatic Design for new Downtown Medical School," April 17, 2013, www.buffalo.edu/news/releases/2013/04/017/html; "Roswell Park: 1950s & 1960s," *Roswell Park Comprehensive Cancer Center*, <https://www.roswellpark.org/about-us/history/1950s-1960s>; "UBNS History," *University of Buffalo Neurosurgery*, accessed April 24, 2019, <https://www.ubns.com/patients-visitors/ubns-history>.

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Delaware Avenue Medical Center
Name of Property
Erie County, New York
County and State

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Section 9 Page 2

Delaware Avenue Medical Center

Name of Property

Erie County, New York

County and State

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Delaware Avenue Medical Center

Name of Property

Erie County, New York

County and State

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United States Department of the Interior
National Park Service

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Delaware Avenue Medical Center

Name of Property

Erie County, New York

County and State

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National Park Service**

**National Register of Historic Places
Continuation Sheet**

Section 10 Page 1

Delaware Avenue Medical Center

Name of Property

Erie County, New York

County and State

Verbal Boundary Description

The boundary is indicated with a heavy line on the attached maps with scale.

Boundary Justification

The nomination boundary corresponds to the historic and current property associated with the Delaware Avenue Medical Center.

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Section 10 Page 2

Delaware Avenue Medical Center

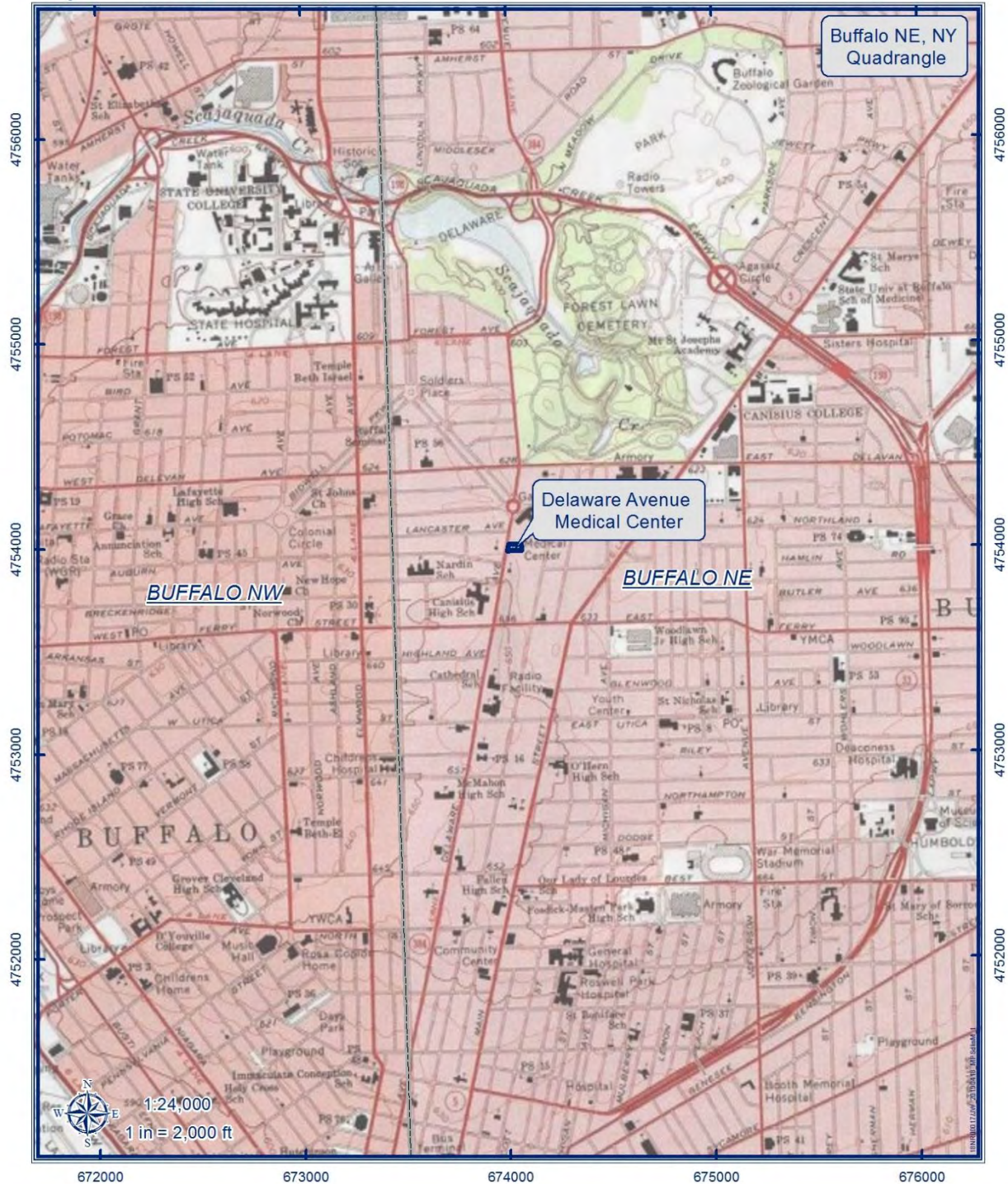
Name of Property

Erie County, New York

County and State

Delaware Avenue Medical Center
City of Buffalo, Erie Co., NY

1275 Delaware Avenue
Buffalo, NY 14209



Coordinate System: NAD 1983 UTM Zone 17N
Projection: Transverse Mercator
Datum: North American 1983
Units: Meter

0 5501,100 2,200 Feet



Delaware
Avenue Medical
Center



NEW YORK
STATE OFFICE OF
Parks, Recreation
and Historic Preservation

United States Department of the Interior
National Park Service

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Section 10 Page 3

Delaware Avenue Medical Center

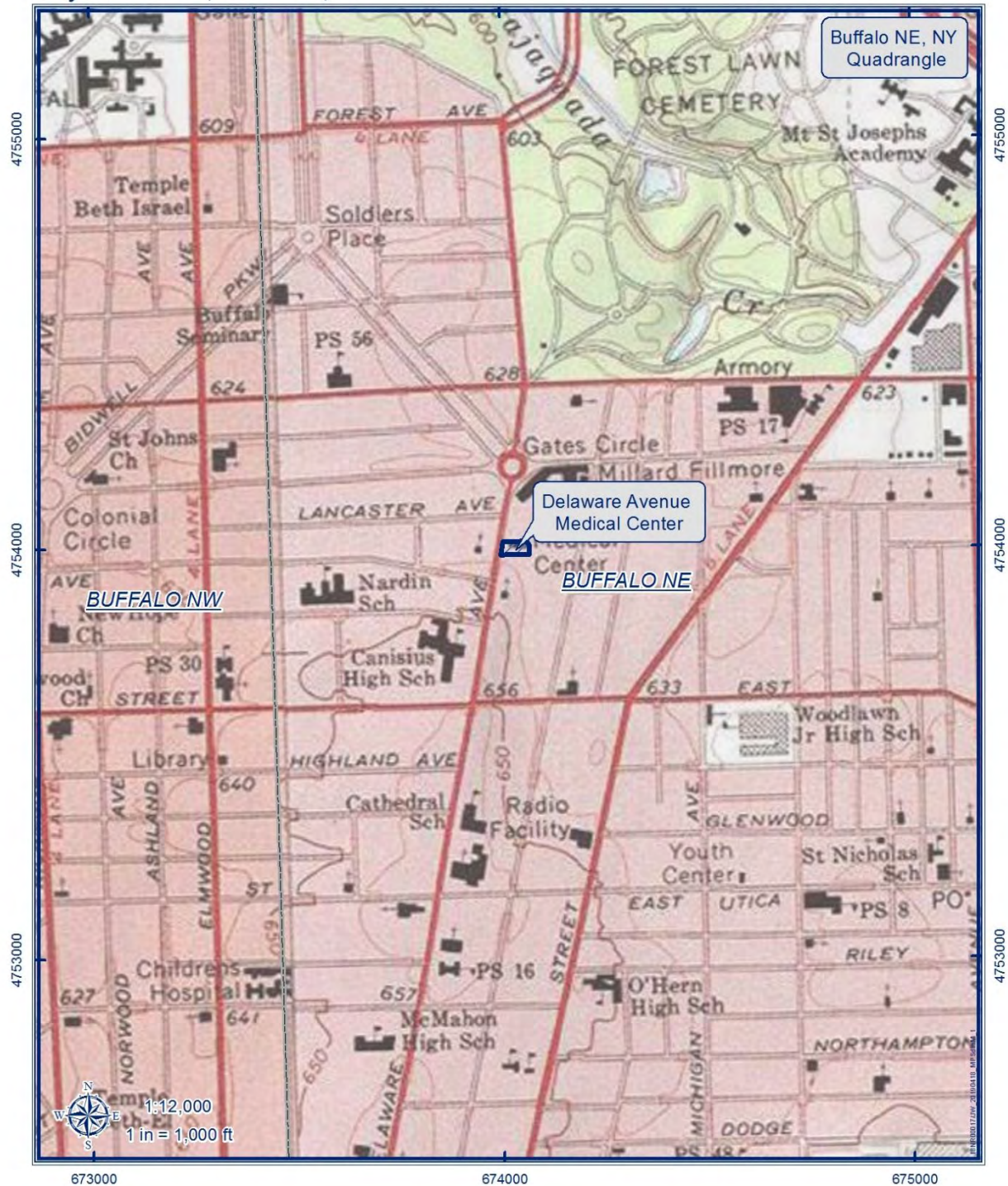
Name of Property

Erie County, New York

County and State

Delaware Avenue Medical Center
City of Buffalo, Erie Co., NY

1275 Delaware Avenue
Buffalo, NY 14209



Coordinate System: NAD 1983 UTM Zone 17N
Projection: Transverse Mercator
Datum: North American 1983
Units: Meter

0 290 580 1,160 Feet



Delaware
Avenue Medical
Center



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Delaware Avenue Medical Center
Name of Property
Erie County, New York
County and State

Delaware Avenue Medical Center
City of Buffalo, Erie Co., NY

1275 Delaware Avenue
Buffalo, NY 14209



Coordinate System: NAD 1983 UTM Zone 17N
Projection: Transverse Mercator
Datum: North American 1983
Units: Meter

0 95 190 380 Feet



Delaware
Avenue Medical
Center



Parks, Recreation
and Historic Preservation

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Delaware Avenue Medical Center
Name of Property
Erie County, New York
County and State

Delaware Avenue Medical Center
City of Buffalo, Erie Co., NY

1275 Delaware Avenue
Buffalo, NY 14209



Coordinate System: NAD 1983 UTM Zone 17N
Projection: Transverse Mercator
Datum: North American 1983
Units: Meter

0 95 190 380 Feet



Delaware
Avenue Medical
Center



Parks, Recreation
and Historic Preservation

United States Department of the Interior
National Park Service

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Section 11 Page 1

Delaware Avenue Medical Center
Name of Property
Erie County, New York
County and State

Additional Information

Photo Log:

Name of Property:	Delaware Avenue Medical Center
City or Vicinity:	Buffalo
County:	Erie
State:	New York
Name of Photographer:	Michael Puma
Date of Photographs:	June, 2018
Location of Original Digital Files:	Preservation Studios, 170 Florida St., Buffalo, NY 14208

NY_Erie County_Delaware Avenue Medical Center_0001
Looking southeast, showing main façade and north elevation

NY_Erie County_Delaware Avenue Medical Center_0002
Looking northwest, showing south and east elevations

NY_Erie County_Delaware Avenue Medical Center_0003
Looking north, showing main entryway

NY_Erie County_Delaware Avenue Medical Center_0004
Looking southeast, showing elevator lobby

NY_Erie County_Delaware Avenue Medical Center_0005
Looking west, showing first floor hall

NY_Erie County_Delaware Avenue Medical Center_0006
Looking south, showing first floor examining room

NY_Erie County_Delaware Avenue Medical Center_0007
Looking northeast, showing second floor ribbon windows

NY_Erie County_Delaware Avenue Medical Center_0008
Looking east, showing third floor hall

NY_Erie County_Delaware Avenue Medical Center_0009
Looking east, showing fifth floor office

NY_Erie County_Delaware Avenue Medical Center_0010
Looking south, showing penthouse utility

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Delaware Avenue Medical Center

Name of Property

Erie County, New York

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Construction of 10-story medical building will start next fall

. . . architect's sketch of new office building

Fig 1. Original proposed design. Ralph Kazarian, "Medical Building to Be Started in Fall," *Buffalo Courier Express*, July 11, 1954, 18-B.

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Delaware Avenue Medical Center

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Erie County, New York

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Fig. 2. Revised design. "\$1,300,000 Medical Center To Adjoin Fillmore Hospital," *Buffalo Evening News*, May 22, 1956, 27.

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Delaware Avenue Medical Center

Name of Property

Erie County, New York

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Fig 3. Picture of the Delaware Avenue Medical Center under construction, c. 1956. Courtesy of the Buffalo History Museum.

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Delaware Avenue Medical Center
Name of Property
Erie County, New York
County and State

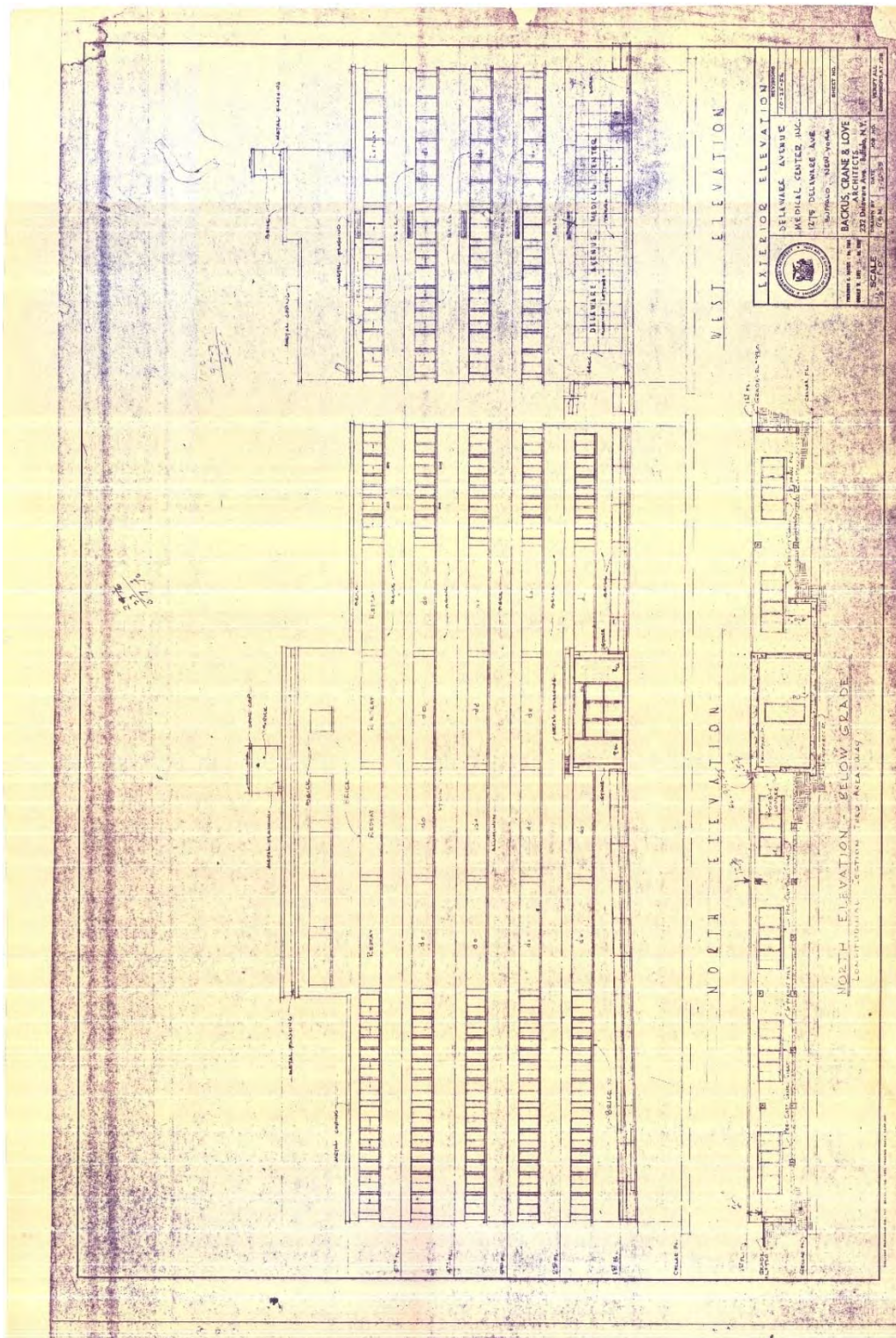


Fig 4. Blueprints of North and West Elevations (1956, Backus, Crane & Love, architects)

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Delaware Avenue Medical Center
Name of Property
Erie County, New York
County and State

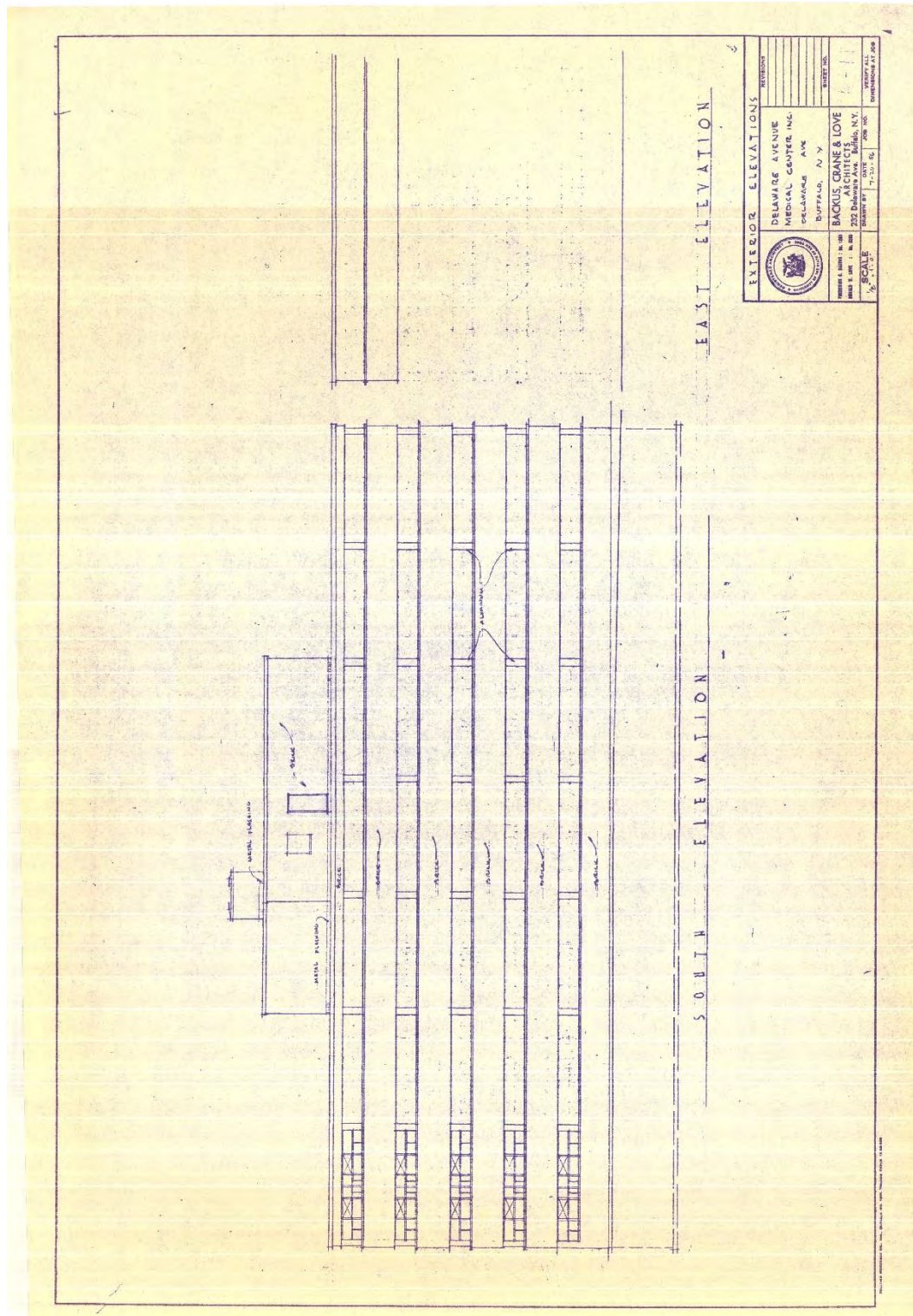


Fig 5. Blueprints of South and East Elevations (1956, Backus, Crane & Love, architects)

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Delaware Avenue Medical Center
Name of Property
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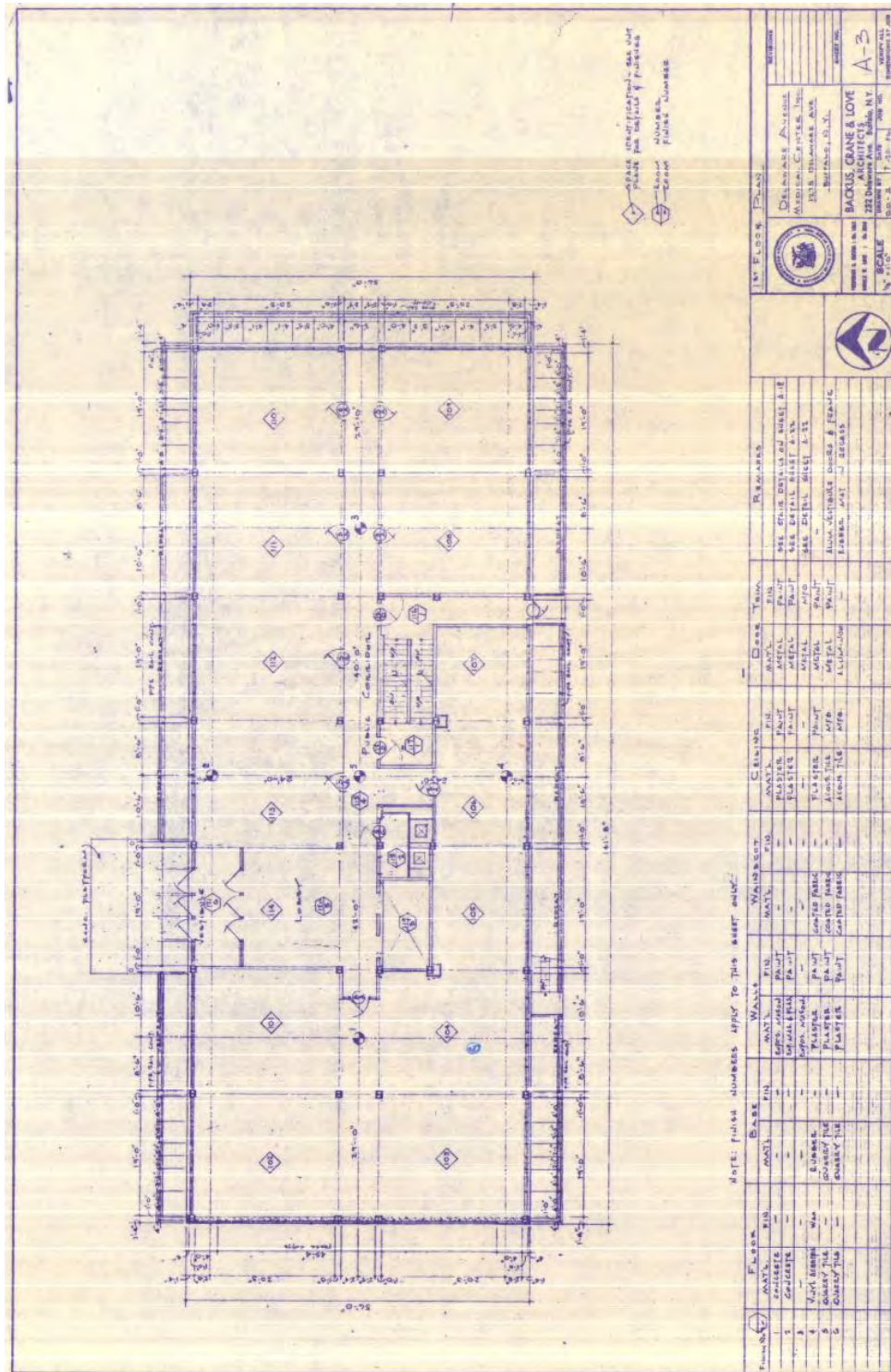


Fig 6. Blueprints of First Floor (1956, Backus, Crane & Love, architects)

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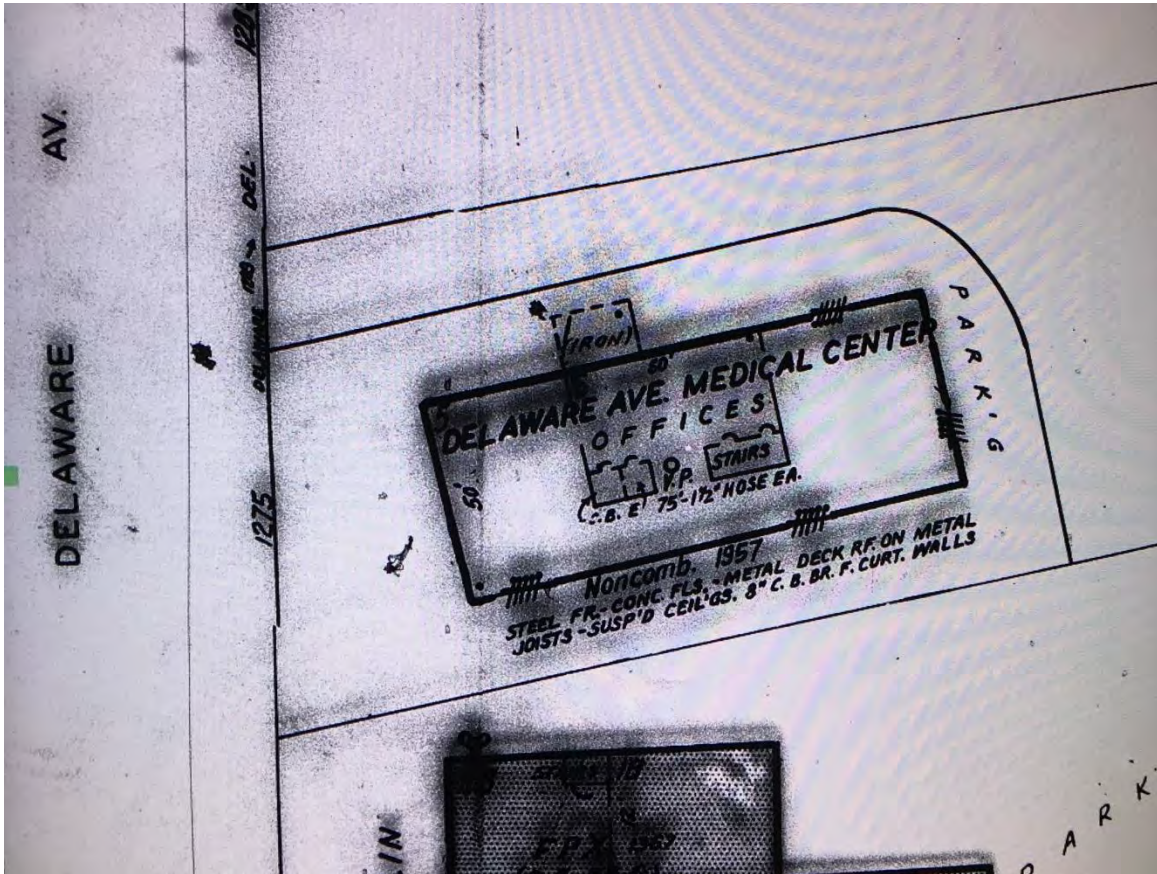
Section 11 Page 8

Delaware Avenue Medical Center

Name of Property

Erie County, New York

County and State



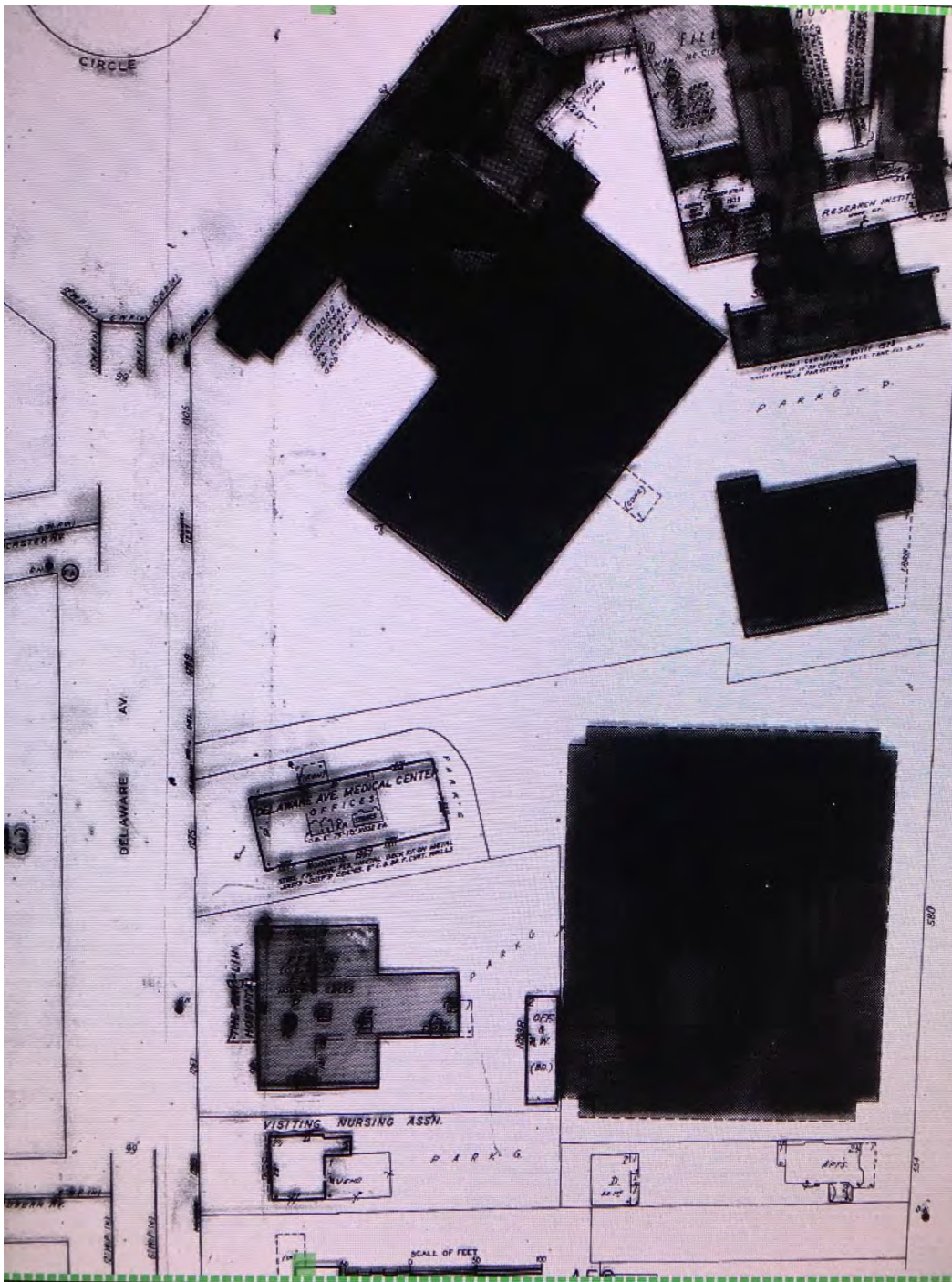
1986 Sanborn Map

United States Department of the Interior
National Park Service

National Register of Historic Places
Continuation Sheet

Section 11 Page 9

Delaware Avenue Medical Center
Name of Property
Erie County, New York
County and State



1986 Sanborn showing surrounding context.



1275 Delaware Ave. • 716-822-1802

DELAWARE AVENUE MEDICAL CENTER

1275

1275 • X-RAY

SUITES IMMEDIATELY
AVAILABLE
OR BUILD TO SUIT
716-822-1802



PARKING RESTRICTED
EXCEPT TO PHYSICIANS & TENANTS OF
1050 DELAWARE AVE. WITH PERMIT
ALL OTHERS KEEP OUT
VIOLATION OF THIS ORDER MAY BE
POLICE ENFORCEMENT

PRIVATE IMAGING CENTER
BOARD CERTIFIED RADIOLOGISTS
We're Welcome
MONDAY - FRIDAY
7:00 AM - 5:00 PM
WE PAY FOR PARKING
MON - FRI 9:00 AM - 5:00 PM
SAT 9:00 AM - 1:00 PM
SUN 10:00 AM - 1:00 PM







☆1

1275 Delaware Ave.

Advanced Imaging of Buffalo	Suite B1	LAZAR-MILLER, ROBIN, MD	812
AMHERST BUFFALO OB GROUP	406	LYNCH, MICHAEL, MD	403
Burns, M.D. & Hage, M.D., P.C.	Suite 411	David S. Nathanson PhD.	511
Daniel A. Barnes, M.D., F.A.C.S.	Douglas S. Hage, M.D.		
Charles J. Emerson, WHNP	Nurse Practitioner	NEHMO, DONALD J. II, MD	110
Farkad Balaya, MD	Suite 555	WEISSMAN, SAMUEL A., MD	406
John L. DeBerry, M.D.	500	WNY Orthotics & Prosthetics	Suite 300
HASHIM, JUNAID, MD	303	X-RAY, MAMMOGRAPHY, ULTRASOUND	81
IMAGING CENTER	B1	Keep In Touch Massage Therapy	Suite 412
		Patricia Williams LMT	
106		2nd Fl.	
411		INTERMAN, ROSEANNE L., MD	











UNITED STATES DEPARTMENT OF THE INTERIOR
NATIONAL PARK SERVICE

NATIONAL REGISTER OF HISTORIC PLACES
EVALUATION/RETURN SHEET

Requested Action:

Property Name:

Multiple Name:

State & County:

Date Received: 6/25/2019 Date of Pending List: 7/19/2019 Date of 16th Day: 8/5/2019 Date of 45th Day: 8/9/2019 Date of Weekly List: 8/9/2019

Reference number:

Nominator:

Reason For Review:

<input type="checkbox"/> Appeal	<input checked="" type="checkbox"/> PDIL	<input type="checkbox"/> Text/Data Issue
<input type="checkbox"/> SHPO Request	<input type="checkbox"/> Landscape	<input type="checkbox"/> Photo
<input type="checkbox"/> Waiver	<input type="checkbox"/> National	<input type="checkbox"/> Map/Boundary
<input type="checkbox"/> Resubmission	<input type="checkbox"/> Mobile Resource	<input type="checkbox"/> Period
<input type="checkbox"/> Other	<input type="checkbox"/> TCP	<input type="checkbox"/> Less than 50 years
	<input type="checkbox"/> CLG	

☒ Accept ☐ Return ☐ Reject 8/8/2019 Date

Abstract/Summary
Comments:

Recommendation/
Criteria

Reviewer Alexis Abernathy Discipline Historian

Telephone (202)354-2236 Date _____

DOCUMENTATION: see attached comments : No see attached SLR : No

If a nomination is returned to the nomination authority, the nomination is no longer under consideration by the National Park Service.



**Parks, Recreation
and Historic Preservation**

ANDREW M. CUOMO
Governor

ERIK KULLESEID
Acting Commissioner



21 June 2019

Alexis Abernathy
National Park Service
National Register of Historic Places

Mail Stop 7228

1849 C Street NW
Washington DC 20240

Re: National Register Nominations

Dear Ms. Abernathy:

I am pleased to submit the following two nominations, both on disc, to be considered for listing by the Keeper of the National Register:

Delaware Avenue Medical Center, Buffalo, Erie County ✓
Alexandra Apartment Hotel, Schenectady, Schenectady County

Please feel free to call me at 518.268.2165 if you have any questions.

Sincerely:

Kathleen LaFrank
National Register Coordinator
New York State Historic Preservation Office