This report was written on February 6, 1979

1. **Name and location of the property**: The property known as the North Carolina Medical College Building is located at 229 N. Church St. in Charlotte, NC.

2. **Name, address, and telephone number of the present owner and occupant of the property**:

   The present owners of the property are:
The property is unoccupied.

3. **Representative photographs of the property:** This report contains representative photographs of the property.

4. **A map depicting the location of the property:** This report contains a map depicting the location of the property.
5. Current Deed Book Reference: The most recent reference to this property is recorded in Mecklenburg County Deed Book 4142 at page 412. The Tax Parcel Number of the property is 07801203.

6. A brief historical sketch of the property:

The North Carolina Medical College Building was officially dedicated on October 2, 1907.¹ The architect was James Mackson McMichael (1870-1944), a native of Harrisburg, Pa., who had moved to Charlotte in 1901. A specialist in church design, McMichael was the architect of several imposing edifices in this community, including Myers Park Presbyterian Church, (now Spirit Square), the old Public Library on N. Tryon Baptist Church, and the First Associate Reformed Presbyterian Church at N. Tryon and East Eleventh Sts.² The building was used exclusively for educational purposes. No one lived there.

The basement contained the showers and toilets, the cadaver vats, and service rooms. The entrance on Sixth St. provided access to the dispensary which consisted of a drug room, separate waiting rooms for black and white patients and several examination and treatment rooms. Each day between 11:00AM and noon, individuals could come here for free medical services. Also located on the first floor were administrative offices, a lounge, and several rooms equipped for clinical lectures and demonstrations. On the second floor were three 20 x 40 foot laboratories, a large lecture hall, a library, and reading room. The uppermost floor housed two laboratories and a dissecting hall with a concrete floor.³ The most impressive feature of the building is a two-story amphitheater at the rear. The Charlotte News called it the "crowning glory" of the edifice and boastfully exclaimed that it was "fully as large and handsomely furnished as the amphitheater in Bellevue Hospital." Sources disagree as to how many individuals could sit in this room, but the capacity was at least two hundred and fifty. It had windows on all sides and multiple entrances on the first and second floors.⁴

The North Carolina Medical College played an important role in the evolution of medical education in North Carolina. During the antebellum era, the overwhelming majority of physicians in this state secured their training under the tutelage of an established doctor. The first medical school in North Carolina was the Edenborough Medical College chartered in 1867 and located on a plantation near Raeford, N.C. This institution, which ceased operations in 1877, was a proprietary school, meaning that it was a profit-making organization that depended upon student fees for its income. An institution of this type might have been established in Wilmington, NC, in 1871; however, there are no records of anyone having attended or graduated from this school, known as the College of Physicians and Surgeons.⁵

The first proprietary school for prospective physicians that was nominally associated with an institution of higher learning was the Leonard Medical School in Raleigh, NC. Chartered in 1882, the school ceased operations in 1914. Throughout its hiatus, this institution provided medical training for students at Shaw University and was, therefore, open only to African American people.⁶ On February 12, 1879, medical instruction commenced at the University of North Carolina in Chapel Hill, NC. However, this enterprise was discontinued in 1885.⁷ Consequently, in the mid-1880's a medical college for the instruction of whites did not exist in North Carolina. This unfortunate situation ended in 1887, when Dr. Paul B. Barringer
(1857-1941) established a proprietary school at Davidson, NC, initially called the Davidson School of Medicine. Son of General Rufus Barringer and Eugenia Morrison Barringer, Dr. Barringer had become the physician for Davidson College in 1886. In 1889, he joined the faculty of the University of Virginia and sold his fledgling medical school to Dr. John Peter Munroe, his successor as physician of Davidson College.8

Dr. Munroe, a graduate of Davidson College in 1882 and of the medical school of the University of Virginia in 1885, moved quickly to expand the proprietary school that Dr. Barringer had begun. A second year of instruction was added in 1890. In 1893, the institution was chartered as the North Carolina Medical College, now a three year institution. Dr. Munroe secured a larger building for the college in 1896, and in 1901 a structure was erected for clinical teaching. It is important to note that the North Carolina Medical College had no official relationship with Davidson College, even though members of the Davidson faculty taught there under separate contractual arrangements. Indeed, high school graduates enrolled at the medical college. The college also offered a course for students from other institutions who sought to prepare themselves for licensing examinations required by the State Board of Medical Examiners.9

In 1902, the North Carolina Medical College began sending its senior class to Charlotte, where the students had greater opportunities for clinical training because of the numerous hospitals located there.10 The entire student body moved to Charlotte in 1907, when the North Carolina Medical College Building on N. Church St. was completed at a cost of $27,000.11 At the official dedication, Dr. Monroe explained why the institution had abandoned its facilities in Davidson, NC. He stated that the opportunities were greater, the scope for work broader in Charlotte than elsewhere.12 The North Carolina Medical College prospered in Charlotte. Eighty-two individuals enrolled as full-time students in 1907--25% more than had matriculated in 1906. Mary of the prominent physicians of the community taught at the institution on a part-time basis, as did all members of the faculty.13

In the summer of 1910, however, the Carnegie Foundation sent a representative to the North Carolina Medical College to evaluate the institution. In a published report, the Carnegie Foundation criticized the college for not having adequate facilities. In 1914, Dr. Monroe and his associates, unwilling or unable to spend the money required to bring the college into conformance with the Carnegie standards, closed the facilities in Charlotte and enrolled their students at the Medical College of Virginia in Richmond, VA, where they received their degrees as graduates of the North Carolina Medical College. The last degrees were awarded in 1917.14 The building on N. Church St. was sold and converted into luxury apartments, initially known as Churchill Suites.15 The North Carolina Medical College was an important institution, not only for Charlotte and Mecklenburg County but also for the State of North Carolina. The definitive history of Medicine in North Carolina, Medicine in North Carolina: Essays in the History Of Medical Science and Medical Service, 1524-1960, states that the school was "obviously important in the growth of medical education and medical practice in the state."16

Seven hundred and thirty-two students attended the college, and three hundred and forty Doctor of Medicine degrees were awarded by its faculty. Robert H. Lafferty, an official of the institution, contended that "the impetus it gave medicine in Charlotte and this section of the State was both great and lasting."17 Among its graduates were Mary Martin Sloop and her husband,
Eustace Sloop, who established a hospital at Crossnore, NC. Portia McKnight, another female graduate, was a co-founder of a clinic in Sterling, Colorado. Dr. B. C. Nalle, founder of the Nalle Clinic in Charlotte, was a member of the faculty. A group of the faculty established the Charlotte Sanatorium at N. Church and Seventh Sts, the hospital where the first x-ray machine was used in this community. The most significant legacy of the North Carolina Medical College, however, were the rank-and-file graduates who established medical practices in communities throughout the State of North Carolina.

NOTES

1 The Charlotte Observer (October 3, 1907), p. 6.


4 The Charlotte News (October 2, 1907), p. 5.


6 Ibid., pp. 377-379. Medical instruction resumed at Chapel Hill in 1890.


11 The Charlotte News (October 2, 1907), p. 5.

12 Ibid.

13 Lafferty, The North Carolina Medical College, p. 25. A list of the faculty of the North Carolina Medical College is included in this report.
7. A brief architectural description of the property: This report contains an architectural description prepared by Jack O. Boyte, A.I.A.

8. Documentation of why and in what ways the property meets the criteria set forth in N. C. G. S. 160A-399.4:

a. Historical and cultural significance: The historical and cultural significance of the property known as the North Carolina Medical College Building rests upon two factors. First, the building was designed by an architect of regional and local importance, James Mackson McMichael. Second, the building was the only Charlotte location of an institution which occupies an important place in the development of medical education in North Carolina.

b. Suitability for preservation and restoration: The building retains its essential exterior integrity. The interior was massively changed in 1915, when the edifice was consorted into an apartment building. The building could be easily restored to its configuration as of 1915.

c. Educational value: The North Carolina Medical College Building has educational value because of the historical and cultural significance of the property.

d. Cost of acquisition, restoration, maintenance or repair: At present, the Commission has no intention of securing the fee simple or any lesser included interest in this property. The Commission presently assumes that all costs associated with restoring and maintaining the property will be paid by the owner or subsequent owner of the property.

e. Possibilities of adaptive or alternative use of the property: The property is highly suited for a variety of adaptive or alternative uses. The property is zoned B3.

f. Appraised value: The current tax appraisal of the structure is $22,750. The current tax appraisal of the .123 acres of land is $21,500. The most recent tax bill on the land and improvements was $752.25 The Commission is aware that designation would allow the owners to apply for an automatic deferral of 504 of the Ad Valorem taxes on all or any portion of the tract which becomes "historic property."
g. **The administrative and financial responsibility of any person or organization willing to underwrite all or a portion of such costs:** As stated earlier, the Commission presently has no intention of purchasing the fee simple or any lesser included interest in this property. Furthermore, the Commission presently assumes that all costs associated with the property will be paid by the present or subsequent owners of the property.

9. **Documentation of why and in what ways the property meets the criteria established for inclusion in the National Register of Historic Places:**
The Commission judges that the property known as the North Carolina Medical College Building does meet the criteria of the National Register of Historic Places. Basic to the Commission's judgment is its knowledge that the National Register of Historic Places, established by the National Historic Preservation Act of 1966, represents the decision of the Federal Government to expand its recognition of historic properties to include those of local, regional and state significance. The Commission believes that its investigation of the property known as the North Carolina Medical College Building demonstrates that the property possesses local, regional and state, historical, and cultural importance. Consequently, the Commission judges that the property known as the North Carolina Medical College Building does meet the criteria of the National Register of Historic Places.

10. **Documentation of why and in what ways the property is of historical importance to Charlotte and/or Mecklenburg County:**
The property known as the North Carolina Medical College Building is historically important to Charlotte and Mecklenburg County for two reasons. First, the building was designed by an architect of regional and local importance, James Mackson McMichael. Second, the building was the only Charlotte location of an institution which occupies an important place in the development of medical education in North Carolina.

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**Bibliography**

Charlotte City Directory: 1916.

Estate Records of Mecklenburg County.


Records of the Mecklenburg County Resister of Deeds Office.

Records of the Mecklenburg County Tax Office.
In Charlotte's Fourth Ward near the center city area the original three story red brick home for the North Carolina Medical College remains today much as it was when first built. Opened in 1907 to wide acclaim, the college prospered for only a short time. Following a critical report from the Carnegie Foundation, which from the perspective of history appears unfounded, the college soon ceased operation, and the building was altered in 1914 for residential use. Designed by Charlotte architect, James McMichael, the structure reflects many turn of the century details common to multi-storied masonry and wood late Victorian buildings. Exterior walls are solid brick, varying from twelve to sixteen inches thick. Face brick coursing is American Bond (called English Bond by some) showing five stretcher courses for each header course. Sited on the southwest corner of Fifth and Church Streets, the building measures some fifty-five by one hundred and twenty five feet. The main entrance is on Church, with a secondary access from Fifth. The exterior facades at the left side and rear, obviously designed to closely abut adjacent structures, have no decorative trim. On each of three stories are closely spaced wooden windows with two large single glazed sash. Window openings have arches above formed by three rows of brick headers. Sills are double corbeled brick headers. On the front and right sides, the architect followed the popular mode of the time with applied classical ornamentation.

The building, therefore, in its visible facades could be styled "Colonial Revival." Facing east on Church Street the pilasters rise from low molded pedestals to Doric order Abacus. Above this is a broad, projecting entablature which frames the square opening for recessed double entrance doors. The recessed entranceway has a smooth marble wainscot (now painted, but in good
condition) at each side which continues to the interior foyer. The floor rises from here a half
dozens steps to the first floor center hall. The entrance step treads and risers are also of smooth
white marble and retain essentially their 1907 condition. Above a low foundation wall which
encloses a partial cellar, the front and right sides have a wide water table band of corbeled brick
on which a smooth cement plaster surface is applied to simulate limestone. In the symmetrical
front facade there are two closely spaced windows at each side of the entrance. These windows
are repeated on each of the three floors with varying architectural treatment. On the first floor
the windows have simulated cast stone sills with small square support brackets. Window heads
are rounded with added transom lights. Above this are arched brick heads with center keys of
simulated stone. Second floor windows have much the same treatment. Variation is achieved
with flat brick jack arches featuring centered key stones. These windows, however, have no
transom lights.

At the third floor the window treatment is much simpler. Sills are simulated stone and window
heads are rounded. No other elaboration is used. In the spandrel between the second and third
floors there are molded rectangular panels of simulated limestone at each window bay. These
panels give emphasis to the contrasting simulated stone pattern of applied facade details. Further
elaboration is achieved with equally spaced brick pilasters which divide the front into three
balanced segments. Rising from the low stone foundation band to a corbeled brick band also at
the second floor, the pilasters are interrupted here with a simulated stone base molded of tin.
This band creates a stacked effect, with the upper two stories accented. Above the elaborately
framed entrance are additional classical elements of massive proportions. At the second floor a
molded tin gable pediment rests on curved support brackets. Under this are tall twin windows
with a fan light transom. Above the parapet cornice is a heavy molded arch fabricated of tin,
which crowns and dominates the entire front facade. Finally, of course, there is a tall wooden
flagpole. At the parapet line on the street facades the wide molded tin entablature unifies the
whole with heavy classical ornamentation. Along the Fifth Street side of the structure all of the
decorative details of the front are repeated in equal segments defined, again, with Doric
order pilasters. Inside the building one finds an array of early nineteenth century details and
furnishings. From the small white hexagonal ceramic floor tile remaining here and there to the
repeated glass transom windows at hallway doors; from the patterned brass hardware to the
clawfoot ceramic bathtubs, the structure retains an astonishing variety of original materials.

A seven foot wide center hall runs the full length of each floor -- altered in 1914 to provide
access to luxury apartments created when the medical school ceased. Ceilings are approximately
eleven feet on each floor, the plaster finish appears to be original. Floors are narrow tongue and
groove strip pine throughout, except where ceramic surfaces occur in baths and on the original
undisturbed first floor area. Walls are all plaster featuring -- a wide molded chair rail installed
consistently. Doors vary from the front portion to the rear and indicate a departure in design
where the changes were made. At the front rooms doors are typically single panel with wide rails
and styles. At the back they are three panel and likely came with the 1914 remodeling. Near the
front entrance a wide wood stair rises in two runs to the second floor, then similarly to the third.
Worn brass nosings occur on these treads and appear original. The stair balustrade consists of
turned painted wood balusters, three on each tread, supporting a wide-molded stained
mahogany rail. At the rear hall where the secondary entrance from Fifth Street occurs, there is
another stair which appears to have been installed later. The balusters are noticeably different
from those at the front, and the handrail smaller. A careful reading of the interior would likely
determine the original building plan with its classrooms, laboratories, amphitheater and other
facilities. But the alterations were accomplished at such an early period in the building's life that
the present conditions have enough historic and architectural merit in themselves to be
preserved.