
Chapter 9

“Happy Days” Merge With Troubled Times

(1960–1965)

As the century from the 1860s to the 1960s can be classified as the era of cellular pathology, so can the next few decades be expected to see the development of studies within the cell, or so-called molecular pathology. With its rich heritage from the past, the Institute today finds itself in the forefront of the newer developments.

Lt. General Leonard D. Heaton’s Foreword
in Robert Henry’s book, *The Armed Forces
Institute of Pathology; Its First Century*.⁶¹³

IN JANUARY 1960, President Dwight D. Eisenhower declared in his State-of-the-Union speech that this year would be the most prosperous in the America’s history.⁶¹⁴ There were signs of hope and progress throughout most of America.

Science and technology were bringing more revelations to light both abstractly and literally. Light, in fact, was being turned into energy. For some time, Russian and American scientists had been working on the concept of the laser and this year the American Theodore Maiman demonstrated the first one.⁶¹⁵ The early 1960s also would bring relief to the dread and suffering caused by poliomyelitis as Albert Sabin’s live attenuated virus vaccine became licensed for use in the United States in August 1961.⁶¹⁶

Having nurtured social and scientific revolution, however, the post-World War II years now gave way to a new era of unrest that

would divide America. For Texans, the 1960s would become a time of both exhilaration and despair—soaring to heights unknown with development of the space program in Houston and sinking to the depths of despair with the assassination of an American president in Dallas.

Except for the stirrings of advanced automation in laboratory operations, the issues in Texas pathology, however, remained the same. They could be categorized broadly as (1) assurance of quality; (2) fair reimbursement or payment for services, and (3) clear recognition of pathologists as physicians. In each area, there would be a few rocky roads ahead.

There were, however, new faces joining familiar ones in Texas pathology—new faces to help with the old challenges. Despite the underlying changes, there was continuity and a sense of normality.

Among the new faces was **Domingo H. Useda, MD**, who chose 1960 to make his home in McAllen, in the Lower Rio Grande Valley of Texas. Born in 1926 in León, Nicaragua, he had obtained his bachelor of science degree in 1948 and his medical degree in 1952 from the *Universidad Nacional de Nicaragua*, the valedictorian of his class. After an internship at Touro Infirmary in New Orleans and a pathology residency at Grady Memorial Hospital in Atlanta, he had come to Texas to complete his training with Dr. A. O. Severance at Baptist Hospital in San Antonio between 1954 and 1957. Working first at the Torbett Clinic-Hospital in Marlin and serving as a consultant to the Veterans Administration Hospital there, he had been invited to return to Nicaragua as a professor of pathology. However, after “much agonizing and considering the political climate in his native country,” he decided to work and bring up his children in the United States. In 1962, he became a naturalized U.S. citizen, a proud moment in his life.

He would become director of pathology at the HCA Rio Grande Regional Hospital, McAllen; laboratory director at Mission Hospital, Mission, and a consultant for the Edinburg General Hospital. Later, he also would become medical director of United Blood Services in the Rio Grande Valley, serve as director of medical technology at The University of Texas-Pan American Program and become an associate professor of The University of Texas Health Science Center at San Antonio. He also would become active in pathology issues by working with the Texas Society of Pathologists and other groups.⁶¹⁷

Another new practitioner in the early 1960s would be **Marcelo (Marc) Garza, MD**. From a pioneer Brownsville family, he had enlisted in the Army Air Force immediately following Pearl Harbor, serving as a flight engineer until December 1945. He then returned to school, received his medical degree in 1955 from The University of Texas Medical Branch in Galveston, completed an internship in Colorado and a pathology residency in Galveston. First practicing pathology at the Dow Hospital in Freeport, in 1961 he joined Dr. A. B. Cairns in Dallas, where the Cairns-Noteboom-Garza Clinical Laboratory was formed, serving Methodist Hospital.

Margie Barnes Peschel, MD, a native of Granger, graduated cum laude from Southwestern University in Georgetown, and received her MD from The University of Texas Southwestern Medical School. She interned at Harris Hospital in Fort Worth, and served as a resident in pathology there and at St. Joseph Hospital in Fort Worth between 1961 and 1964.⁶¹⁸

She became medical director of the Carter Blood Center in Fort Worth and would earn national recognition in blood banking. She also would provide "monumental" dedication to many professional medical organizations, leading a number of committees and becoming a member of the Texas Medical Association Board of Trustees. She would serve as president of many groups, including the South Central Association of Blood Banks; hold several academic appointments, and become known for her clever writing.

Merle W. Delmer, MD, a native of Cisco, graduated from Abilene High School, received his MD from The University of Texas Southwestern Medical School, and was initiated into pathology by Dr. A. B. Cairns at Oak Cliff Methodist Hospital in Dallas before moving to Baptist Memorial Hospital in San Antonio and serving a pathology residency under Dr. A. O. Severance. He then became a resident in pathology at Columbia Presbyterian Hospital in New York under Dr. Arthur Purdy Stout; served as an instructor on the faculty of the Department of Pathology at Columbia University School of Medicine and as assistant pathologist at Presbyterian Hospital in New York.

Upon returning to San Antonio, Dr. Delmer would become an active leader in many local, state, and national organizations. He would also serve as chair of the Board of Trustees of the Texas

Medical Association and become a trustee of the American Board of Pathology. A member of the Arthur Purdy Stout association, he would also be appointed as a member of the Texas State Board of Medical Examiners and serve as a member of the Federation of State Medical Boards.⁶¹⁹

He would be a consultant to the Veterans Administration Hospital at Kerrville, consultant to the Fifth U.S. Army Area Laboratory at Fort Sam Houston, and become clinical professor at The University of Texas Health Science Center at San Antonio. He also would serve on the latter school's Admissions Committee. In addition, he would succeed Dr. Severance as chairman of the pathology department of the Baptist Memorial Hospital System in San Antonio.

Wm. Gordon McGee, MD, of El Paso, also would become a leader in many organizations.⁶²⁰ He graduated from The University of Texas in 1954, and received his medical degree from The University of Texas Southwestern Medical School in 1958. First attracted to internal medicine, he was "lured" into a pathology program, and then in 1961, to the department of Dr. Ashworth and Dr. Stembridge.

"I enjoyed pathology, but it was hard," he remembers, "I got dizzy at the microscope and moving slides around on the stage, and I thought I would never become a pathologist." He completed his pathology residency in 1964, and when **Charles Green, MD**, died unexpectedly at age thirty-eight following an asthmatic attack, Dr. McGee moved to El Paso, joining Dr. Maynard Hart. The group at first included radiology and pathology, and the two areas did not split until 1975.

Dr. McGee would form PathLab, PA, in 1975, serving as senior partner for many years.

He covered many isolated West Texas towns—Van Horn, Alpine, Fort Stockton, Pecos, Iraan, Eldorado, and others in the oil patch. Most of the towns had from only one to five or six doctors.

He would sell his laboratory in 1991 to Nichols Institute. Dr. McGee would continue his work, on contract, providing tissues, Pap smears, and consultation. His new group would have national Indian Health Service contracts, requiring regular on-site visits, travels taking him into Mexico, Arizona, and even Montana.

Dr. McGee would become chairman of the board of trustees and president of the Texas Medical Association.

Harlan J. Spjut, MD, of Houston, born in Salt Lake City, Utah, received his medical degree from the University of Utah, and served as an instructor in pathology there in 1953. He moved to St. Louis as an American Cancer Society fellow in surgical pathology and instructor in surgical pathology at Washington University School of Medicine. In 1959, he advanced to associate professor of surgical pathology at Washington University School of Medicine, a position he held until 1962. At that time he moved to Baylor College of Medicine in Houston, as professor of pathology and chief of anatomic pathology at the Jefferson Davis Hospital.

"His remarkable diagnostic abilities in surgical pathology have been well recognized in Houston," said one writer, "where he is consultant in pathology at the M.D. Anderson and Veterans Hospitals. From 1969 to 1970, he was acting chairman of pathology at Baylor College of Medicine. He then became chief of anatomic pathology at St. Luke's Episcopal Hospital of Houston from 1971 to 1980. In 1980, he would return to Baylor College of Medicine, named to the Clarence and Irene Fulbright Chair of Pathology and again serve as acting chairman of pathology from 1987 to 1988.

Dr. Spjut specialized in orthopedic, gastrointestinal and cytopathology and became recognized throughout the nation as an outstanding leader in the research, practice and teaching of these areas of anatomic pathology. He would serve on several training and education committees for the National Cancer Institute, act as advisor to the American Cancer Society, and write more than 150 publications, including twenty-two chapters and books.

In 1988, the Houston Society of Clinical Pathologists would establish the Harlan J. Spjut Award, given annually to a distinguished physician or scientist "currently or formerly in the Houston community, who has demonstrated sustained and distinguished scholarly achievement in pathology or a related discipline."⁶²¹

John Daniel Milam, MD, was born in Kilgore but grew up in Louisiana. He completed his MD in 1960 at Louisiana State University Medical School in New Orleans, undertook a rotating internship in Shreveport, a pathology residency at LSU and Charity Hospital, and a fellowship at Memorial Sloan-Kettering Center in New

York. In 1966, he joined the pathology staff at St. Luke's Episcopal Hospital in Houston.

Years later, a writer would say, "His pathology career in Houston has been one of great contributions. He has been an outstanding leader in patient care. As a pathologist he proved competent in anatomic and clinical pathology, nuclear pathology, and developed an outstanding Blood Bank and Transfusion Service. He is regarded by his clinical colleagues as one of themselves, and is an active bedside consultant, particularly in problems that arise concerning transfusions, coagulation, and in the past several years in directing pheresis for treatment of selected autoimmune disorders.

Dr. Milam would serve his profession and community in many positions, including Chief of Staff of his hospital, and have faculty appointments to Baylor College of Medicine and The University of Texas Medical School at Houston.

He would serve as president of many organizations, among them the American Association of Blood Banks and the American Board of Pathology. He also would be active in the American College of Cardiology and the American Heart Association.

Deeply involved in teaching, investigation, and patient care, Dr. Milam also would publish considerable work on the rejection phenomena following heart transplantation; blood banking and transfusion, and immunology and coagulation.⁶²²

Another physician with Louisiana ties was **Peachy Ridgway (Ridg) Gilmer, Jr.**, born in Shreveport.⁶²³ He became professor and acting chairman of the department of pathology, and director of the clinical laboratories at the University Hospital, University of Texas Medical Branch in Galveston. The son of a chest surgeon and pulmonary specialist who practiced in Shreveport, he had graduated from the Tulane University School of Medicine, completed a rotating internship at Charity Hospital in New Orleans, and was a resident in general surgery at Charity Hospital on the Tulane service. He also served a fellowship in pathologic anatomy at Louisiana State University School of Medicine at New Orleans, and a residency in clinical pathology at Charity Hospital on the LSU service. He began practice in Shreveport in 1964, during which time he was consultant pathologist to Panola General Hospital in Carthage, Texas, and to hospitals in Shreveport. He would become a professor of pathology at UTMB, and would be a principal investigator or co-investigator

on many evaluations of instruments and reagents used in the clinical laboratory, particularly in hematology. He also would write numerous papers, pamphlets and books, become editor of *Summing Up*, and a member of the editorial board of *Pathologist*, the publication of the College of American Pathologists, which he also would serve as a governor. He later would join the faculty of The University of Texas Medical School at Houston.

William L. (Dub) Crofford, Jr., MD, a native of Victoria, Texas, graduated from The University of Texas Medical Branch at Galveston. He completed a rotating internship at the Robert B. Green Hospital in San Antonio, followed by a pathology residency at UTMB with Drs. John H. Childers, Kenneth M. Earle and Gwendolyn Crass. Dr. Crofford would become a pathologist at St. Paul Hospital in Dallas, leaving to fulfill a military obligation and returning to remain many years. While in the service, he was in the 4th Army Medical Laboratory (a reference laboratory) at Fort Sam Houston, and would study with Dr. A. O. Severance and many other nationally known leaders in pathology. He would become a leader in the Texas Society of Pathologists.⁶²⁴

Pathology on the move

RICHARD KEFFLER, MD, had moved to Lubbock in the late 1950s as the first fully trained, permanent pathologist in the area, reports Dr. Louis Nannini, and he was joined soon by **William Long, MD**. By then, there were pathologists in Amarillo, El Paso and Midland/Odessa.

"When I came to Lubbock to join Dr. Long in 1963, there were two other pathologists, **Andy Gwynne, MD**, associated with Dr. Long, and **John Ray, MD**, associated with Dr. Keffler." Other pathologists joining Dr. Long were **Jerry Moore, MD**, and **William Strange, MD**, and later the group added **Hugh Paik, MD**.

Continuing the migration to Texas was **Francis Elbert Council, MD**, who moved to Sherman in 1962, and became staff pathologist at the Sherman Community Hospital. Born in Windom in 1900, he had graduated from Vanderbilt University School of Medicine in 1926, and interned at Fitzsimons General Hospital in Denver, where he was serving as an Army first lieutenant. He also earned a doctor-

ate degree in public health from the School of Hygiene and Public Health at Johns Hopkins University. Before moving to Sherman, Dr. Council had had "a long and distinguished career in the Army," and had done postgraduate work at the Army Medical School in Washington, DC, at Johns Hopkins University in Baltimore, and at the Armed Forces Institute of Pathology. He had served throughout the world, including Corregidor in the Philippine Islands and as chief of laboratory service at the Gorgas Hospital in Balboa Heights of the Panama Canal Zone. He had also served as a consultant in pathology to the Office of the Surgeon General of the U.S. Army and as deputy director for the Army at the AFIP. Having received many citations and awards for outstanding work, he retired in 1957 with the rank of colonel. The author of numerous papers, he also was active in a broad variety of medical and scientific organizations.⁶²⁵

Pathologists in communities previously served by only one or two practitioners now were getting reinforcement. In Waco, **Gardner Thomas, MD**, joined Dr. R. E. Henderson and Dr. W. W. Klatt at Hillcrest Hospital in July 1962. Shortly, thereafter **Walter Krohn, MD**, joined Dr. Wittstruck at Providence Hospital. In 1965, **Robert Walker, MD**, joined Drs. Wittstruck and Krohn at Providence.

Dr. Thomas left Hillcrest and returned to his hometown, Brownwood, becoming the only pathologist there. In 1970, Dr. Klatt died following aortic aneurysm surgery. Dr. Henderson then became the only pathologist at Hillcrest until a pathologist discharged from the Army in Vietnam, **Kent Smith, MD**, arrived. He left Hillcrest after a year for Fort Smith, Arkansas. **David McTaggart, MD**, a graduate of Creighton University with a residency from General Rose Memorial Hospital in Denver, after release from the Navy in 1972 would join Dr. Henderson at Hillcrest.

In 1974, Drs. McTaggart and Henderson would associate with **S. M. Bunn, Jr., MD**, then completing his tour of Army duty at Fort Sam Houston, San Antonio. He was a graduate of UTMB. About 1981, **Edwin B. Morrison, MD**, would join the latter group at Hillcrest and in July 1987, **Gary F. Geldmeier, MD**, would join them. Both had received training at The University of Texas Southwestern Medical School, Dallas. Dr. Morrison had attended UT Southwestern and Dr. Geldmeier UT San Antonio Medical School.

"In the meantime, at a date which I do not recall," reports Dr. Henderson, "Drs. Wittstruck, Krohn and Walters successfully pur-

sued a lawsuit against the Hycel Corporation, became overnight millionaires and retired from pathology. They had shortly before associated with **Jacqueline Torrell, MD**, who took the practice, associated with **Alan Northcutt, MD**, and subsequently with **Douglas B. Michaels, MD**." Dr. Torrell later would be employed part-time at the Veterans Administration in Temple.

In the Lower Rio Grande Valley, another pathologist arrived in 1961. He was **Pedro de la Vega, MD**, who practiced in Brownsville.

In 1962, Dr. Kenneth M. Earle faced another tough decision. He was asked by Dr. Frank M. Townsend, the director of the Armed Forces Institute of Pathology in Washington, DC, to become chief of the neuropathology branch. Dr. Townsend had arranged for him to have the highest rank possible through a little-known Roosevelt-era bill, Public Law 313, allowing scientists to work in government without having to go through the Civil Service process. He thus went to Washington ranked as a "PL 313," and would spend twenty years with the AFIP, receiving many commendations for his work.

In Temple, Dr. Robert F. Peterson, joined the Scott and White department of pathology in July 1965, in the division of anatomic pathology. In 1982, he would become chairman, a position he would hold until 1994.

In 1967, he became an officer of the Section on Pathology and Physiology of the American Medical Association and would serve as the first chairman when it became the Section Council on Pathology in 1972. He also would serve as speaker of the Texas Society of Pathologists' House of Delegates after it was formed. He would be on the delegation of the Texas Society of Pathologists to the College of American Pathologists and would serve as chairman of the Gastrointestinal Pathology Subcommittee of the Southwest Oncology Group. Dr. Peterson also had served as medical director of the Scott and White Tumor Registry.

Dr. Billy Bob Trotter chose Abilene as the place he wanted to practice pathology. As a sophomore at The University of Texas Medical Branch he had a little influence in making his decision to become a pathologist—preceding him was Vernie A. Stenbridge. After he took a rotating internship at Denver General, he decided to

return to Galveston for a pathology residency. On the faculty then was Dr. John Childers and Dr. Stenbridge; Bruce Fallis was a resident, "a nucleus there." He entered the Air Force during the era of the Korean Conflict, and when he'd returned all the Galveston faculty had moved to Dallas, so he finished his residency at Parkland.

In 1960, he moved to Abilene, having worked as a *locum tenens* for a time during vacation for Dr. Jarrett Williams. He liked the people and the city, and thus joined Dr. Williams.

Like Eleanor Irvine, Dr. Trotter knew he had to have quick, efficient transportation to cover the vast West Texas area, so he learned to fly, making rounds to hospitals in Alpine, Childress, and other cities. Most of his time, however, was spent between Abilene and Big Spring, which did not have a pathologist at the time.

As a pilot, Dr. Trotter said he never had a "hairy experience"—primarily because he never took a chance.

His longest single day's work in the plane occurred when he flew to Childress on the Red River in North Texas, turned and headed to Big Spring, Fort Stockton, and Alpine, and returned, landed at McCamey, Sweetwater and then flew back to Abilene. "If it had been a straight line," he said, he'd have been in Canada.

When Dr. Trotter first arrived in Abilene, frozen sections were not done in West Texas, but rather by Terrell's Laboratories in Fort Worth. However, "doctors trained during and after the war wanted quicker services," he said, "such as frozen sections, and esoteric lab tests. The combination of rapidly advancing technology, frozen sections, blood banks, and the increase in requests for autopsies were the main drives that brought about expansion of pathology in West Texas."

The few pathologists in the area formed a West Texas Society of Pathologists, an informal group, although not every person attended each time because of the distance. Among those active were himself and Dr. Williams; Dr. Lloyd Hershberger and Dr. Billy Bob Trotter's brother, Dr. R. F. (known as Pat) Trotter, San Angelo; Dr. Martha Madden, Midland; Dr. Wray Storey, Odessa; Dr. Bill Long, Dr. Richard Keffler, and Dr. John Ray in Lubbock.

The group met usually in Big Spring, brought their slides, discussed difficult cases, and enjoyed dinner and fellowship. The organization would do well from 1960 to the mid-1970s when everyone became too busy, and the group disappeared for lack of continuity.

The Trotters have a family legacy in pathology. Dr. John Chil-

ders is their cousin. Dr. Pat Trotter's daughter, Maureen, became a pathologist like her father and uncle, and joined her uncle in practice in Abilene. All have been members of the Texas Society of Pathologists.

Dr. Thomas H. McConnell of Dallas was born in the old Parkland Memorial Hospital, where his father, a surgeon and general practitioner, and his mother, a registered nurse, had trained.⁶²⁶

After graduating from Southwestern Medical School in 1962, he undertook a rotating internship at University of Mississippi Medical Center, then a pathology residency at Parkland Memorial Hospital under Dr. Charles T. Ashworth. He then served as Captain, MC, USAR, at the Pentagon in Washington and at Fort Campbell, Kentucky, and practiced clinical pathology briefly in Abilene, Denton, El Paso, and Dallas before joining Dr. Ashworth at what became the Ashworth-McConnell Laboratory in Dallas.

He served as president of the Dallas Academy of Pathology, North Texas Society of Pathologists, and Texas Society of Pathologists; and as a governor of the College of American Pathologists and a member of the Board of Directors of the Dallas County Medical Society. He also served as a clinical professor of pathology at Southwestern Medical School and published numerous articles, several dealing with advanced computer programs in clinical pathology.

"Tom has a truly brilliant mind," a colleague writes, "presumably inherited both from his father, an honor graduate of UTMB in Galveston and a singularly dynamic individual, and from his mother, who supported Tom and his brother after his father's early death from heart disease. He writes both novels and scientific articles, some of which were to break new ground in the field of algorithm-derived, computer-generated-interpretations of clinical pathology data."

Dr. Owen becomes TMA president

IN 1960, DR. MAY OWEN of Fort Worth became the first woman chosen president of the Texas Medical Association. She had long been a leader in medicine and the Texas Society of Pathologists.

Blair Justice, PhD, reported several accolades bestowed upon Dr. Owen by her colleagues. Dr. Truman Terrell, her associate and owner of Terrell's Laboratories, observed, "She was elected the first

woman president of the Tarrant County Medical Society in 1947 with only one dissenting vote—her own. She was named one of the Southwest's nine outstanding women in 1951. In 1952 her fellow physicians awarded her the second annual Gold Headed Cane, which is traditionally presented to 'the doctor's doctor.' The Altrusa Club named her 'first lady of Fort Worth' in 1948. Alpha Kappa Kappa, a men's medical fraternity, gave her an honorary pin in 1955 for being the patron of so many young medical students and physicians."

Chairman of the Texas Medical Association's Council on Scientific Work for many years, Dr. Owen in 1936 had discovered talc granuloma—finding that the powder used by surgeons was not absorbable and the body would treat it as a foreign substance. As a result of her finding, pharmaceutical firms altered the ingredients of talcum used in surgeon's gloves. She also received an honorary master's degree from Texas Christian University for her discovery.

After serving as president of the state medical association, Dr. Owen would continue her string of honors and contributions. She would help more than 400 students complete their educations through the May Owen Irrevocable Trust to be administered by the Texas Medical Association, and in 1974 she would endow the May Owen Chair in Pathology, the first endowed chair at Texas Tech University School of Medicine, Lubbock. In 1986, she would be inducted into the Texas Women's Hall of Fame.⁶²⁷

Aided by her brother, she had attended TCU's medical department in 1917, and started work at Terrell's Laboratories. In 1921, she was graduated from Louisville Medical College, was an assistant pathologist at Mayo Clinic in Rochester, Minnesota, and studied in the department of legal medicine and toxicology at Bellevue Hospital in New York. Following her death in 1988 at age ninety-six, her authorized biography, written by Ted Stafford, would be published.⁶²⁸

Goodbyes

TWO PIONEER MEMBERS of the Texas Society of Pathologists, James E. Robinson, MD, Temple, a founding member, and L. O. Dutton, MD, of El Paso had died in 1960.

The paradoxical sixties

THE WORLD WAS looking to the future in the 1960s, and in January 1961, John F. Kennedy was inaugurated as President of the United States.⁶²⁹ In May 1961, the National Aeronautics and Space Administration put a man in space—Alan Shepard, Jr., making a suborbital flight in the Mercury capsule.⁶³⁰ Also that month, President Kennedy committed the United States to landing a man on the moon and returning safely to earth by the end of the decade.⁶³¹

In August 1962, researcher and FDA official Frances Kelsey was cited by the medical profession for her stance against the tranquilizer thalidomide, a drug found responsible for birth defects, and her opposition to its use prompted the FDA to enact stiffer drug control regulations.⁶³² Then, in the fall of 1962, the Cuban missile crisis demanded America's attention.⁶³³ Civil rights disturbances increased, and violence resulted.⁶³⁴

By 1962 two formal medical examiner systems had been established in Texas—in San Antonio and Houston. Fort Worth City Commissioners had not yet appropriated the money for a system, and Dallas was currently setting up a modified forensic pathology program.

The American Society of Clinical Pathologists had now created four boards dealing with medical technology affairs: the Board of Schools, the Board of Registry, the Board of Continuing Education, and the Board of Certifying Laboratory Assistants. (Dr. Goforth had been appointed chairman for one year of the Board of Certifying Laboratory Assistants.) The Board of Schools would provide materials, programs and seminars—including conjoint programs.

There also were growing concerns that allied health care personnel were expanding their "scope of practice," Dr. George Race noting the tendency of "para-medical groups to shift away from the basic practice of medicine." He stated that a national nursing association had pushed bills for licensure so broad that they included medical technology. A nurse licensure bill offered for the Texas Legislature at the time also was being opposed by the Texas Hospital Association.

Dr. John Andujar reported a complaint from a physician in Texarkana that the State Health Department was performing pre-

marital serological tests for syphilis on individuals who were not indigent. Dr. Andujar also presented a United Press International (UPI) news release regarding the article, which declared that "Texas Doctors Want Physician Supervised Laboratories."⁶³⁵

Tragedy in Dallas

ON NOVEMBER 22, 1963, American optimism met total shock as President John F. Kennedy was assassinated, and Governor John B. Connally was severely wounded in Dallas. Texas physicians not only cared for them at Parkland Memorial Hospital, but they would be the last to care for the alleged perpetrator of the shootings, Lee Harvey Oswald, and for the man who subsequently shot him, Jack Ruby.

The clinical pathologists at Parkland Memorial Hospital provided their usual services for President Kennedy; however, the forensic pathologist was not allowed to do his job.

Brief citations of the clinical pathology provided at Parkland Hospital in Dallas are mentioned in "Three Patients at Parkland," (*Texas State Journal of Medicine*, January 1964)⁶³⁶—the published dictation of physicians caring for Kennedy, Connally, and Oswald.

For President Kennedy, the dictation cited only the blood match requested and the fact he was immediately administered unmatched type O Rh negative blood—300 mg cortisone added to the intravenous fluids. For Governor Connally, in whom a bullet had passed through the chest and struck the arm and thigh, the report of Dr. Charles F. Gregory, an orthopedic surgeon who debrided the arm wound and reduced the fracture, was that "Small bits of metal were encountered at various levels throughout the wound. Wherever they were identified and could be picked up, they were submitted to the Pathology Department. Throughout the wound there were noted fine bits of cloth like mohair. Dr. Gregory was told that the patient was wearing a mohair suit at the time of the injury thus accounting for the deposition of such organic material within the wound."

Dr. A. H. Giesecke, Jr., an anesthesiologist, stated that blood was drawn for typing and crossmatching, and hemoglobin was reported at 15.2 gm. per 100 cc; urine was normal.

There also was a notation about the blood administered to

Oswald. According to Dr. M. T. Jenkins, anesthesiologist, it was type-correct blood (A-1, Rh negative).

The Warren Commission later concluded that a single bullet had resulted in the President's death,⁶³⁷ and this view was maintained by pathologists at the Naval Medical Center in Bethesda, Maryland, where the autopsy was performed (*JAMA*, May 27, 1992).⁶³⁸

Nevertheless, there would be much debate regarding the wounds of the President and the Governor. Conspiracy theories often would be projected.

By Texas law, the autopsy should have been performed in Dallas. *JAMA* writer Dennis Breo reports the predicament faced by the Chief Medical Examiner of Dallas, Earl Rose, MD.⁶³⁹

Jenkins recalls that Secret Service agents . . . 'grabbed the President's gurney on each side and wheeled it out of the room, all but running over Dr. Earl Rose, the Dallas medical examiner (whose office was right across the hall from the emergency room).'

Dr. Rose, who is now [1992] retired in Iowa City, also gave *JAMA* a rare interview to pick up the narrative. "I was in their way," Rose recalls. "I was face to face with Secret Service Agent Roy H. Kellerman, and I was trying to explain to him that Texas law applied in the instant case of the death of the President and that the law required an autopsy to be performed in Texas.

"Agent Kellerman had experienced tragedy on his watch and, although had no legal authority, he believed that his primary responsibility was to transport the body back to Washington, DC. He was very distressed, apparently taking the death as a personal affront, and he and I were not communicating. It was not a hostile discussion, but he and I were expressing differing views on what was appropriate."

Theron Ward, a Dallas Justice of the Peace, was at the hospital to assert applicable Texas law, but, in Rose's words, "he did nothing . . . he was frozen with fear. In effect, no one was in charge of the situation. Agent Kellerman tried three tactics to have his way—he asserted his identity as representing the Secret Service; he appealed for sympathy to Mrs Kennedy; and he used body language to attempt to bully, or, should I say, intimidate. I don't recall the exact words, but he and I exchanged firm and emotionally charged words. At no time did I feel I was in physical danger because he and the others were armed. I was not looking at Agent Kellerman's gun, I was looking at his eyes, and they were very

intense. His eyes said that he meant to get the President's body back to Washington."

In 1963, Rose was 6-feet, 2-inches tall and solidly built. He was not the kind to back down from a fight if he believed he was right. "I was raised in western South Dakota," he said, "and I carried that baggage with me. People raised in western South Dakota may lose a fight, but they don't get bullied or intimidated." The standoff, however, was soon over.

Rose says, "Finally, without saying any more, I simply stood aside. I felt that it was unwise to do anything more to accelerate or exacerbate the tension. There was nothing more I could do to keep the body in Dallas. I had no minions, no armies to enforce the will of the medical examiner."

Later that day, Rose autopsied patrolman J. D. Tippit, who was killed by Oswald; two days later, he autopsied Oswald himself, who was killed by Jack Ruby; a few years later, he autopsied Ruby.

It is 29 years later and Rose, who has a law degree as well as a medical degree, still feels strongly that the Kennedy autopsy should have been performed in Dallas. "The law was broken," Rose says, "and it is very disquieting to me to sacrifice the law as it exists for any individual, including the President. Having one set of rules for the rich and famous and another for the poor is antithetical to justice. There have been many arguments to try to justify the removal of the body, but to me they all seem like retrospective and self-serving theories. People are governed by rules and in a time of crisis it is even more important to uphold the rules, as this case amply demonstrates."

Rose believes that a Dallas autopsy, which he would have performed, "would have been free of any perceptions of outside influences to compromise the results. After all, if Oswald had lived, his trial would have been held in Texas and a Texas autopsy would have assured a tight chain of custody on all the evidence. In Dallas, we had access to the President's clothing and to the medical team who had treated him, and these are very important considerations."

Further, Rose believes that the removal of the body was the first step in creating disbelief about what had happened. "Silence and concealment are the mother's milk of conspiracy theories," he says. "If we have learned anything in the 29 years since the President was shot, it is that silence and concealment breed theories of conspiracy and the only answer is to open up the records, without self-serving rules of secrecy, and let the American people judge for themselves."

Rose, who is a board-certified forensic pathologist and who has personally examined Kennedy's autopsy materials and records, next turned his attention to the claims made by Dr. Crenshaw [Fort Worth] who is a surgeon. "I believe that Dr. Crenshaw believes what he is saying when he argues that the shots came from the front," Rose says, "but he is mistaken." Pressed on his degree of confidence in this statement, Rose finally says, "I am absolutely sure that he is in error."

Dr. Vernie A. Stembriage, then chairman of the department of pathology at The University of Texas Southwestern Medical School, had been asked by Dr. Rose to accompany him to talk with the Secret Service—to persuade the agents that the autopsy should be done in Texas. They, however, were not successful. Dr. Stembriage then urged Dr. Rose to accompany the body and the Kennedy entourage to Washington, but Dr. Rose felt strongly, "as a very principled person," that the autopsy should be done according to law in Texas, and that he should not make the trip to Washington. Dr. Stembriage and others agree that the ensuing secrecy helped foment the conspiracy theories that were to surround the autopsy.

In 1992, Dr. Stembriage also would encourage Dr. Rose to participate in the interview with Dennis Breo to provide an accurate record of the situation in Dallas following the Kennedy assassination.⁶⁴⁰

Dr. Rose was a member of the 1977 House Select Committee on Assassinations, and supported its autopsy conclusions. He agreed that the two wounds to the neck and head came from behind and above and that there was no room for doubt on the finding.^{641,642}

Several years after the situation, Dr. Rose resigned as medical examiner in Dallas.

By raising consciousness of the need for a strong, autonomous medical examiner system in Dallas, the incident, Dr. Stembriage believes, led to the development of a better system. One aspect of the system was the requirement that the medical examiner in Dallas serve on the faculty at Southwestern—and therefore adhere to criteria for faculty.

Similarly, in later years, this approach would be essentially adopted in San Antonio and other medical examiner offices.

Among other physicians present during the events at Parkland Memorial Hospital in Dallas in 1963 was Dr. Wm. Gordon McGee, a

pathology resident and future president of the Texas Society of Pathologists and the Texas Medical Association.

Later, when Jack Ruby shot Lee Harvey Oswald in the Dallas Police Station as millions of America watched events unfold on television, Dr. Thomas Hugh McConnell was a pathology resident at Parkland Memorial Hospital. Still later, when Jack Ruby died of lung cancer, Dr. McConnell observed his autopsy, and muses about the conspiracy theories of the era.

“He was quite dead, I assure you,” he reports. In addition, Dr. McConnell also was involved in the autopsy of Lee Harvey Oswald’s landlady, who had heart disease and thyroid problems. Likewise, there would be no evidence of conspiracy in her death.⁶⁴³

While at Parkland Memorial Hospital, before a substantive medical examiner system was in place, Dr. McConnell also saw first-hand other situations that were worthy of court cases, including an abused, murdered child—but under the former justice-of-the-peace system, coroners often ruled otherwise. In addition, often because of the primitive nature of toxicology, individuals “could get away with” things that no one knew about. With the much more sophisticated testing that came into being, together with complete data bases, perpetrators no longer would be able to escape with such deceit.

A new ruling by the Attorney General

IN A COVERING letter with the April 1964 minutes of the Texas Society of Pathologists, Dr. Vernie A. Stenbridge stated that “As a result of the Attorney General’s ruling that Clinical Pathology is the practice of medicine, the TMA Council on Medical Jurisprudence heard testimony from both the lay laboratory group and the pathologists. The Council on Medical Jurisprudence recommended to the TMA Councilors that the Medical Practice Act be upheld. At the recent TMA meeting, the House of Delegates passed a Resolution to the effect that Clinical Pathology was the practice of medicine, and that TMA members should abide by the Medical Practice Act.”⁶⁴⁴

As a result of the ruling by Attorney General Waggoner Carr, a special committee of the Texas Medical Association was formed to determine whether there might be problems attributable to closure of the lay laboratories.

Preparing for Medicare

DR. MERLE DELMER joined Dr. A. O. Severance as a partner in 1963. Both initially had been employees of Baptist Hospital in San Antonio, but agreed, rather than remaining as employees, to become independent. They worked out an agreement with the hospital to provide clinical and anatomic pathology—and to assume oversight for hospital employees in the laboratory. Their foresight would prove valuable in the next few years as Medicare and Medicaid—just around the corner—would change the way hospital-based physicians conducted their business. In fact, Drs. Delmer and Severance would be among the first—if not the first—to perceive the immediate impact of the government-health-care programs on hospital-based physicians. That included the need to strengthen their own position by becoming independent of the hospital—to have the ability to establish their own professional fees and to look to the insurance company and the patient to cover the fee rather than “dickering” with hospitals as other physicians would have to do.

The arrangement with the Baptist Hospital System would allow them to add qualified physicians as needed. By 1995, there would be twenty-three pathologists in their group.

Drs. Delmer and Severance also quickly learned to “float with the tide” as the city and hospital grew. Later, their group would cover several hospitals, all private, in San Antonio and surrounding areas.

Another factor would have particular influence on their practice and the practice of medicine generally in San Antonio—the development of The University of Texas Medical School at San Antonio. It would set in motion tremendous growth in the medical field in the city.

The early 1960s indeed was a time of contrast and of varying experiences, and in 1963, Dr. Thomas Hugh McConnell had direct experience with the era’s civil rights’ disturbances. He had graduated from The University of Texas Southwestern Medical School in Dallas, had started his pathology residency at Parkland, and, needing more clinical medicine, had taken a ten-month rotating internship in Mississippi.

He arrived in Oxford in 1963 at the height of the civil rights’ revolution. He was assigned to the emergency room when Medgar Evers was shot.

"We felt like almost any moment troops might occupy the city," he said, and a disaster plan was in place.

In the midst of the situation, he tended a young Black girl, bleeding vaginally, who passed a red rubber catheter following an abortion. At that time abortion was illegal, and at the trial in Vicksburg, Mississippi, he testified before the all-white, all-male jury.

He was asked only one question, put quite sarcastically:

"Doctor, do you have a license to practice in the great state of Mississippi?"

He replied he did not. (As an intern, of course, he had only an institutional permit.)

The jury gasped.

Within ten minutes, it rendered a not-guilty decision. The abortionist, after all, was performing a valuable social service in the community at the time, and no one wanted to convict the individual.

Such was the nature of the early 1960s.

But it had another side, too. Along with rapid scientific development, the tools of pathologists also were progressing at an amazing rate. Dr. Jack Abbott of Houston, in discussing the contributions of the clinical pathologist in the June 1965 *Texas State Journal of Medicine*, stated that in one large hospital in 1940 there had been thirty-two laboratory determinations and in that same hospital in 1964, there were 273 different tests, not counting radioisotope procedures.⁶⁴⁵

Retirements and goodbyes

DR. STUART A. WALLACE, Baylor University College of Medicine in Houston, retired in 1964, and a commemorative fund was begun in his name. Reported in 1964 was the death of Dr. A. C. Broders, Sr., formerly of the Mayo Clinic, Rochester, Minnesota, and Scott and White Hospital, Temple.⁶⁴⁶