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I was born in Dawes County, Nebraska. My parents lived on a ranch. My father had homesteaded late in the last century. The home place was some four miles away from the little town of Marsland. My father had gone on to assemble a sizeable ranch in the area over several years, buying out the neighbors who had become discouraged and wanted to move to Colorado or California. I was taught at home, since we lived so far from school. At that time there were no automobiles; as a matter of fact I did not see my first automobile until I was about ten years old. This home teaching had been quite effective. Mother had been a school teacher before my parents were married. My earlier years in school were spent in the Grade School at Marsland; I lived with an aunt so that I would be within walking distance of the school. I was the first in a great many years to go on to high school. This was in Crawford, Nebraska, where I boarded with some friends of my parents. I went to Crawford at the beginning of the week and returned home on the weekends, traveling by train. Our high school class consisted of eight students. Incidentally, I was a member of the first football team that was organized at Crawford High School. I am not sure that any of the team had ever seen a football game by the time we played our first game.

The summer after I finished high school I took course work at Chadron State Teachers College preparing for a teacher's
certificate. The following year I taught a country school where there were grades Kindergarten through 8th. This was about six miles from my home and I rode horseback back and forth. With what I had saved from my salary as a teacher, it was time to go to the University. With a ranch background and with the advice of my parents and others, I decided to enroll in Ag College. One year there I roomed with George Beadle, who went on in Genetics to win a Nobel Prize. In the second year I decided to go into Pre-Medical work. At that time two years college work was required for Admission to the Medical College but since I did not have all of the required courses, I spent a third year at the University at Lincoln. Principal among my informal advisors at that time were Roscoe Abbott in Chemistry and T. J. Thompson in Bio-Chemistry. The advice of these people was a large factor in this decision.

My selection to the class was rather different than the present patterns. I had talked to the Pre-Medical Advisor, Dr. Barker, and filled out the application, furnished transcripts, and so forth. A short time later he came to my desk in Zoology Lab and told me that I had been appointed to the class. At that time I had not been on the Medical Campus or had any interviews with the Admissions Committee, or taken any examinations. The Freshmen Class was 100. It was generally understood that the class would be 75 going into the Sophomore Year, and it was. Our lead off teachers were Dr. John Latta teaching Embryology and John T. Myers in Bacteriology. The class was reduced
appreciably by the time those courses had been finished and in Gross Anatomy under Dr. Poynter which followed. Toward the end of the first year was my first experience with Pre-Medical Day. Pre-Medical Day at that time was a quite high point and one of the featured exercises was a surgical demonstration. The Surgical Amphitheater at that time was on the top floor of Unit 1 of the University Hospital, with a door leading out to the roof from the observers' seats in that amphitheater. Interns worked hard to have a good case ready for this surgical demonstration, which was usually a leg amputation. These were people who had circulatory difficulty and gangrene of toes, and so forth. The surgeon was generally John E. Summers who operated in Indian War style, using a long knife about 16 inches long; a few spurts of arterial blood were to be expected, and since the amphitheater had been conditioned ahead of time by some of the senior students literally sprinkling ether about, there was a rush to the roof for fresh air about that point.

The Sophomore year for me was notable, primarily, for Bio-Chemistry under Dr. Morgulis; Physiology was taught by Otis Cope, usually known as Skippy, and Dr. Guenther taught Pharmacology. Dr. Eggers taught Pathology through a major part of that year. He had a habit of walking back and forth across the front of the lecture room. In the class ahead of me were two men who knew shorthand. One sat on either side of the room and took down all of the lectures in shorthand
which were then printed up. They had a really good sale. 
Such commercialism was not looked on with much favor at that point.

Dr. Morgulisy had special experiments towards the end of the year for a few favorite students. I did one of these studies which he seemed to like very much. He asked me to spend the next year as a graduate student. This was done in several departments at that time with the student taking the year out to earn a Master's Degree. I was anxious, however, to continue a medical course and declined his invitation. Morgey wouldn't speak to me for several years after that.

During the Junior year we had hospital clerkships. One of the high points for me was on the Pediatric Service where one of my patients was a young girl who had Diabetes. She received the first insulin that was made available to the University Hospital. During the Junior year I think one of the high points was Dr. A. D. Dunn's conferences which he held at his home. Eight or ten students were invited, Juniors and Seniors, and along with a few doctors spent an evening once a week or perhaps every other week discussing a paper which was generally prepared by one of the students. In the summer between my Junior year and Senior year I spent the time in the office of Dr. R. L. Ivins in Crawford. He was a General Practitioner with a very busy practice. This amounted to the Preceptorship which was
instituted as a formal part of the Medical Course for a good many of the students a few years later. This was an interesting experience for me with several points standing out, such as an opportunity to deliver a baby in the home. Dr. Ivins was a contract surgeon for the Fort Robinson Military Post at that time. It was then a remount post for the Calvary and they had a modest number of soldiers. They had their own hospital at the post which we visited several times a week.

The Senior year at that time was filled with a considerable number of electives. There were required courses, especially exercises at the clinics taking part in several clinics that were held, and at that time they had what was called an Out-Call Service. On this service the students saw patients in their homes and there was also a number of home deliveries with one of the faculty in attendance. This was usually Harley Anderson, who was a very dependable and capable teacher in this field. One of the high points here was a young girl with diphtheria, whom I saw, in about the area of the present airport. At that time I had an old, high cab Dodge which enabled me to get around to see my out-call patients. In this particular instance it was in the winter time; the neighbors were watching and they all came out to help me through the snowdrifts to get to the home of this child. Fortunately, the child recovered and I think everybody was happy about the situation.
One of the electives I had during that year was a course in the history of medicine with Dr. A. J. Brown. Jim Donelan and I were the only students to elect this course, so it was arranged that we would meet evenings in Dr. Brown's home. I was quite intrigued with his ability to give a running translation of a number of his old Latin books by renowned names in early medical history. This friendship with Dr. Brown lasted over many years. During World War II Dr. Brown was very proud of some so-called subcontracts which he held. He had a machine shop in his basement and was able to do really very skillful work with this. His World War work was to make a number of special and unusual tools which were needed by one of the formal subcontractors in Omaha. The items which they needed were not available on the market, since they were in high demand at the time, and so he made a number of these particular items which helped this contractor to meet his obligations in turning out the special equipment.

During that time, also, I was doing some work with Aura J. Miller, who was Clinical Pathologist in the department for a time. In that period the idea of focal infection was much in vogue. This was a concept that an infection in a tooth root or a nasal sinus or some such place kept infection going in some other part of the body. My work was to make cultures from teeth which were extracted from patients in the hospital and then trying to establish tooth absesses in dogs to see if they
would subsequently develop infections like those which had been present in the patients from whom the teeth had been extracted. I had no success in any of this work and this proved to be the case in other studies around the country, and the ideas of focal infection gradually wore away.

With graduation coming up, I was married to Elizabeth McVey, whom I had been dating since our Freshmen year in Lincoln. As this is recorded we are preparing to celebrate our Golden Wedding Anniversary. My internship was at Peter Brent Brigham Hospital in Boston, primarily in Medicine, followed with training in the Department of Pathology. Dr. Burt Wolbach was at that time the Head of Pathology at the Harvard Medical School and pathologist to the Peter Brent Brigham Hospital. Toward the end of my training time there, I received a letter from Dr. Poynter inviting me to join the faculty as a teacher in Clinical Pathology. I learned later that Dr. Eggers, the Chairman of Pathology, apparently had not been consulted; but after a short period of adjustment, our relationships were always most harmonious. He was happy with teaching the General Pathology Course and with his research, while I looked after all of the hospital pathology and laboratory work and taught Clinical Pathology, mostly in the Junior year along with the Clinical Pathologic Conferences with Seniors and faculty.

There was then one medical technician in the hospital. This term has now become medical technologist. Helen Wyandt was
doing the technical work at that time. Most of the laboratory work was done by the interns, such as the blood count, urine analysis, and so forth, so Bacteriology and Chemistry were the principal things being done by the hospital laboratory.

In the first year I was there the Pediatrics Ward was closed down several times by outbreaks of diptheria. The custom to that time had been to do nose and throat cultures of children admitted to the ward and then if these proved to be positive, the patient was isolated. We reversed this procedure, isolating the incoming patients until the nose and throat cultures proved to be negative and the patient could then be transferred to the General Ward. This seemed to end the frequent epidemics that had closed the ward during this period.

Helen Wyandt had started to train young women as medical technicians or technologists. This was during hard times, since this was the latter part of the severe depression of the early 30's. As time went on the teaching program became better organized and additional students could be accepted on the one to one basis in relationship to the employed technologists in the laboratory. I remember that one of the early trainees, who finished the one year on-the-job training program, was not able to find a job and continued as a volunteer laboratory worker for the greater part of a year. At that time practically none of the smaller hospitals had medical technologists in their
laboratories. As laboratory work became more sophisticated it became evident that hospitals needed to have this type of personnel on hand and so the program has grown steadily. It was rather shortly accepted as an approved training program and eventually was designed to give academic credit for the time spent.

During these hard times the Legislature was always rather critical of the large amount of money that the University Hospital was spending. The majority of patients were referred from the various counties of the state and these were all, for practical purposes, patients unable to pay for their hospital care. I remember at one point Dr. Poynter, then Dean, was meeting with the Legislature and was asked if there wasn't some way in which he could reduce the amount of money that was being spent in caring for patients in the hospital. He responded, "Yes, we could put straw on the floor and probably reduce expenditures to a degree." It was at about this time that the Legislature passed a law that the counties must pay for the care of patients admitted from their county to the University Hospital. The statement was that the county should pay two-thirds of the cost of hospital care but not to exceed four dollars per day.

During this period we worked out an arrangement, primarily with Dr. Esley Kirk who was in charge of the Clinical Clerk Programs
in the hospital, to coordinate the lecture and didactic work that was being given in Clinical Pathology and in the Clinical Lecture Exercises. This worked very well for some parts of the program and was carried on for several years before it was decided that this coordination was too difficult to maintain.

During much of this period through the 30's I was assisted in the autopsy service by parttime student assistants. These young men were paid a very modest stipend to assist with the work in the Autopsy Service. I was quite pleased that several of these young men subsequently went on to become trained pathologists.

The functioning of the Medical College changed rather abruptly with the outbreak of the war. First, of course, a number of the faculty members joined the Armed Services reducing the coverage of the wards and all of us felt the pressure of having to do more work. Rather shortly the teaching program was put on a three year cycle. The general format of the educational program was not significantly changed at first, but simply vacations were eliminated so that we were working around the year. Rather shortly the students were mostly in uniform. This led to some variations in the students' program. The Army instituted a Saturday drill program. We, of course, had representatives of the Army on campus and the students had to make their reports regularly. Those who were in the Navy program were not in uniform and had no drill. This led to a considerable amount of needling between the services. Shortly, a student
selection pattern was instituted by the Armed Services in which a representative of each of the schools met at intervals at a central location to review the applications of students whom the service was considering for admission to medical school. The selection committee would review all of these applications and their function was to indicate which students were acceptable for admission to a medical school and which were not. We did not choose individual students for our particular schools but these were assigned by the military in whatever fashion they chose. Due to this program John Tupper was assigned to our school. Dr. Tupper later became Dean of the University of California Medical College at Davis. Rather recently his school has been in the news very much because of the Bakke reverse desrimination case.

At about this time the department was approved to offer formal residency training in pathology. The first resident we had in the department was Frank Tanner. Frank later became a pioneer in fulltime pathology service in Lincoln. The program grew gradually in acceptance and in the number of residents. It is a matter of real pride that two former residents are Chairmen of Pathology and of Microbiology, respectively. The number of residents increased appreciably after the war. Many of the men who had been in the service wished to take up specialty training in many fields and the numbers in Pathology increased as they did in many other programs.
The war years brought about a number of changes. An early one, as mentioned earlier, was a three year program with only a few short breaks. This led to having two graduating classes in one calendar year. With the war over, however, the faculty decided to go back to the four year program. But with the pressures for more training and with much new information to be incorporated into the general instructional program, the classes began to encroach on the summers so that the total time spent by the majority of students was really more than the typical four nine-month years. Somewhat more recently, under the pressure to provide more physicians, it was decided to return to the three year program. I think the problems of the three year program had been forgotten by the time it was tried again, only to find that it really wasn't the panacea that some thought and has been recently abandoned, going back to a four year program again. With the war over there was a return to a more normal schedule. But a very great deal of new information had been developed and new and better techniques were available in most fields in medicine. Research had become very much more important and was being emphasized in most fields.

About 1948 Dr. Poynter retired and Harold Lueth was named Dean. He had been in the Army for a considerable period during the war. He wanted a military type organization on the campus. This caused a very great deal of unrest. By this time I had
a number of well trained people in the department. I had been frozen in my faculty position during the war and it seemed appropriate that I should do a stint in military service. My contacts were closest with the Air Force and in discussions with them I was offered a commission as lieutenant colonel in that service. I reported for duty in July of 1951. My assignment was to the Training Command in charge of pathology at Scott Air Force Base Hospital, near St. Louis. I was also appointed to the staff of the Command Surgeon, Coloney McElroy. There were many training bases about the country at that time. We made a number of trips to inspect the hospitals and the training programs. I visited many parts of the United States in that capacity. Less than a year later Dr. Lueth had resigned and I was approached by Dr. Reuben Gustafson, then Chancellor, about an appointment as Dean. There was considerable discussion with the Air Force, since my normal appointment was for two years. They agreed that I could be released at the end of the year and I returned to Nebraska in July of 1952 as Dean of the College of Medicine.

There were a considerable number of problems facing the college at that time. One had to do with faculty composition. On the past several reviews by accrediting organizations the college had been criticized very severely for not having full-time instructors in the clinical departments. As a matter of fact there were only two full-time instructors on the campus
at that time; one was Willis Brown in Obstetrics and Gynecology and Dr. John Gedgoud in Pediatrics. Both of these men were supported by funds from the Maternal and Child Health Program and each of them held relatively junior appointments in their departments.

A second problem that faced the college at that time was an antiquated building for the clinical teaching. The most recent building had been completed in 1928. Both the two units of the hospital had been built on the large ward plan with only one to three rooms for isolation of patients and individual patient care when this was needed. A Building Committee was appointed and spent a great deal of time in considering the needs of the several departments (basic science as well as clinical) and the pattern of development that would be most appropriate for that campus. Dr. Lowell Dunn was chairman of that committee for the greater part of the period of its studies.

Another facet or problem was the School of Nursing. It was apparent that this needed very considerable strengthening because the whole pattern of instruction in nursing was tending toward a broader and more comprehensive background training as well as good training in good nursing techniques at the bedside.

In relation to clinical faculty development, much discussion was carried on with the faculty. There were a good many on
the clinical faculty, all of whom were volunteer faculty members, who felt that the addition of fulltime clinical faculty members was not necessary and as a matter of fact probably not desirable if our intention was to educate practitioners of medicine who would go into the numerous communities of the state needing additional physicians, as well as around other parts of the country. With the pressures that had been placed on the faculty, however, it was decided that fulltime instructors in internal medicine, in surgery, in pediatrics, and in obstetrics-gynecology must be recruited. Dr. Moody was Chairman of the Department of Internal Medicine, Dr. Herbert Davis in Surgery, Dr. Herman Jahr in Pediatrics, and Dr. Earl Sage in Obstetrics. These men, and especially with the assistance of Dr. Leon McGoogan, a plan was drawn up proposing that well qualified men should be brought into these departments, one to each of the four departments, in an Assistant Chairman capacity essentially for at least a year, and if they were found to fit well into the faculty pattern that they would then become chairman of the several departments.

Search committees were developed in each of the several departments and they searched the country for capable men to fill these positions. Nominations which came in and were approved after discussion were Dr. Robert Grissom in Internal Medicine, Dr. Merle Musselman in Surgery, Dr. Gordon Gibbs in Pediatrics, and Dr. Lester O'Dell in Obstetrics. These men were brought
into the departments and after a year's experience it was felt that they should become chairmen of the departments. This worked out very well with the exception of the Department of Obstetrics and Gynecology. Dr. Lester O'Dell was relatively soon at odds with a great many people on the campus and decided that he would much prefer to go into private practice, so he resigned from the faculty and left the community. Dr. McGoogan was appointed as an interim chairman and an additional search was carried out. Dr. Roy Holly was selected as the next chairman of the department. He proved to be a very energetic and effective person in that position, strengthening his junior faculty and increasing the amount of research work that was done very considerably. A few years later he was designated as a Vice Chancellor for Research and moved to the Lincoln Campus, however, resulting in Dr. McGoogan's functioning as interim chairman once again.

Another problem facing the campus was strengthening the School of Nursing. Erma Kyle had been named as the Head of the School of Nursing at the retirement of the founder and longtime director of the School of Nursing, Charlotte Burgess. She worked most energetically, and against considerable odds I must say, in trying to modify and update the teaching programs of the School of Nursing. There was also increasing pressure to increase the size of the School of Nursing and the classroom facilities needed for a more effective program. Miss Kyle had
considerable difficulty in bringing about the change in pattern of teaching. A number of the faculty members on that School of Nursing Faculty had been there a long time, all had been trained in the old hospital type training program, and she labored against the resistance of this group to bring about a more academically oriented curriculum.

I mentioned earlier that a building committee had been appointed to develop plans for improved facilities for the College of Medicine. After a great deal of study a proposal was presented that a new University Hospital be built on the east side of 42nd Street. This created quite a furor among the faculty. A very large number of the volunteer faculty, particularly, opposed this idea, feeling that the campus should remain on the west side of 42nd Street. A point which I sensed in the attitudes, particularly of voluntary faculty, never openly spoken but I think a very strong factor, was a fear that the strengthened faculty in the clinical departments, coupled with the new hospital facility, would be unwelcome competition to the practitioners of the city and to the affiliated hospitals. In any event a decision was made to enlarge the buildings on the west side of 42nd Street. This plan was set up in several sections and the first unit of new construction eventually got underway.

Among all of the things that went on in these years of planning, two or three side issues come to mind. Very early in my tenure
in the Dean's Office, Senator Terry Carpenter asked to come to the campus to visit to see what was going on on the Medical Campus. Terry Carpenter was a very long time member of the Nebraska Legislature, a very strong individualist who was not adverse to debating any topic on either side and challenging practically any other member of the Legislature. His background was that of an entrepreneur in Scottsbluff and Gering. One of his early enterprises was developing a series of gasoline service stations and eventually a small refinery. His string of filling stations was known as Terrible Terry's Stations and I think he took some pride in trying to maintain that kind of a public image. Terry and his wife came to the campus and we spent a long day going over all facets of the operation of the campus, reviewing the faculty and its composition, the budget and how we arrived at the requests we were making of the Legislature, and our methods of managing financial affairs particularly. I must say that from that point on I felt that Terry was always favorable to the Medical Campus and I think he had an appreciable understanding of the problems that we had and the needs that faced the campus in trying to develop a strong medical and related educational program.

Another little side issue in an earlier period was when negotiations were underway for the Clarkson Hospital to be built across the street. One of the problems was that the University owned one of the lots that would be included in
the grounds of the Clarkson Hospital. This meant several, 
really many, trips to Lincoln for discussions with the 
University people and once or twice with committees of the 
Legislature. Al Gordon at that time was a leading member 
of the Board of Trustees of the Clarkson Hospital and I made 
several trips to Lincoln with him. On one of these trips, we 
went out West Dodge Street, and beyond 90th was a very large 
corn field. At the time I think the western edge of residential 
construction was 92nd Street, and the tract of land extended 
then on out to approximately 114th Street. He told me that 
this land also extended from Dodge on the north to Pacific 
Street on the south. He indicated he had purchased this in 
the early days of the Depression of the early 1930's for $135 
an acre. It had been farmed continuously and had always 
provided a return on his money. At that time he was expecting 
to hold it and will it to his children. Some years later 
his daughter having died, he apparently changed his mind 
and sold the tract, which subsequently became the Regency 
Development. The price he received for this land was never 
announced although when the Interstate was designed it cut 
across the western part of the tract and the price was settled 
in court. He got a few dollars less than $4,000 an acre for 
the condemned land for the freeway. His friends were sort of 
kidding him that he couldn't even get $4,000 an acre for that 
land.
Back to the Campus and some of the changes that had occurred there. When I first saw the Campus in 1925 there was a large athletic field to the west of the hospital which then consisted only of Unit No. 1. As a matter of fact for several years there had been the Medical Relays held as one of the official track meets in which Nebraska and a number of the adjacent states competed. There was also a baseball diamond used primarily by the students in the college. The remainder of that area extending on west was principally an alfalfa field. For a long time some sheep were pastured in that area. During those years sheep blood cells were extensively used in one of the laboratory tests that was very commonly undertaken, and so somebody from the Pathology Department had to go out every few days and draw some blood from the veins of one of the sheep. Eventually, with developments on the north side of Dewey Avenue and with the building of the 2nd Unit of the University Hospital, a road was built still leaving high banks on each side.

In the 40's an arrangement was worked out between Douglas County and University and the State of Nebraska for the combined operation of a Psychiatric Unit. Dr. Cecil Wittson had been brought in to head up this operation, which was housed in the Douglas County Hospital some blocks south of the campus. This proved to be a very effective operation and with the enlarging number of patients, the space pressure, as well as some
disagreements among the individuals involved at the county hospital, it was decided that there really should be a separate building to house the psychiatric unit. A space was set up on the western part of the campus and with funds from several sources, Nebraska Psychiatric Institute was developed. Dr. Wittson continued as Director of this Institute which made a very considerable name for itself in the innovative management of psychiatric problems and the amount of research that was done in conjunction with it, and for its relationships between the several counties of the state, the University, and the Medical School.

During the period of Dr. Poynter's Deanship, discussions had gotten underway about building a Children's Hospital. After very extended discussions, land was made available west of the University Hospital for the building of the Children's Hospital. I am sure the affiliation never did develop with the closeness that Dr. Poynter had hoped. This hospital, Children's Hospital, had a separate board and there was always a considerable distance in thinking between the University people and the Children's Hospital Board and the medical staff of Children's Hospital. Somewhat later the J. P. Lord School was built on land fairly close by. The Lord School had first been housed in the Field School at quite some distance from the University Campus. Dr. Lord had been Chairman at the Orthopedic Department at the University for a considerable
time and he was quite influential in working with the School Board to develop a school where handicapped children could be in a school situation. In the Field School the ground floor level was developed so that the handicapped children could be taught in a school setting. With the increasing number of children it became apparent that a separate facility would be desirable. This was then built on the west side of 44th Street. There was a relatively close relationship between the school, the Medical School, and Children's Hospital during this period. A subsequent development had to do with the Hatty B. Monroe Home. The Hatty B. Monroe Home had once been in the Benson area of Omaha and was a facility for the care of very severely handicapped children. With the passage of time the composition of its patients changed considerably. Osteomyelitis and poliomyelitis had been the chief causes of severe handicaps for the children cared for at the Hattie B. These illnesses and the severe cardiac conditions resulting from rheumatic fever, all declined very considerably. There came a time when the Board felt there should be a reconsideration of its mission. In the course of these discussions it was decided that a building adjacent to Children's Hospital and to the Lord School would be an appropriate modification, so the Children's Rehabilitation Institute was built at the corner of the Medical Campus. This facility has been working very closely with the University from the time of its move to that location.
In the meantime automobile transportation had increased tremendously and so parking lots had to be built in a number of places; some adjacent to Children's Hospital and eventually the pressure became great enough that a separate parking garage was built on the east side of 42nd Street.

During the period I was in the Dean's Office discussions were opened with the Eppley Foundation. Gene Eppley had been a hotel man operating the Fontenelle Hotel and at least two others in the city, as well as having hotels in several other locations. Mr. Eppley was a bachelor and in his later years he became considerably handicapped and began to give some thought as to what should be done with his estate. Out of this came the decision to set up a Foundation with a Board of Directors, mainly men who had been associated with him in the operation of this hotel empire. I thought the most understanding and the most effective of the group was Jake Reifschneider. The estate was said to amount to something between thirty and forty million dollars, which at that time was rather a considerable sum of money. Allocations were made to a number of situations; one significant amount was put into the development of the Omaha Airport, enough that Eppley's name was attached. The story goes that the University of Omaha had built a new building and one day when Gene was riding with some of his associates he saw this new building. He had been discussing some possibilities with Milo Bail, then President
of the University of Omaha, and the story goes that as he saw this building and in the next conversation with Milo Bail some comment was made that with enough money to finish this building they would be happy to have Eppley's name on the building and Gene said, "Fine," so they immediately took out the stone that had had the previous building title on it and it became the Eppley Library Building. Gene Eppley also gave appreciable amounts of money to the school he had once attended.

In the beginning of our discussions the concept of the Board had been a type of hospital building in which patients with cancer would be cared for. As our discussions continued the point was raised that undoubtedly a great deal more could be done in behalf of many more patients potentially or actually suffering from cancer if this were to be a research institute with the work related in some reasonable fashion to a better understanding of cancer, methods of its prevention, and control. After many discussions this idea was accepted and so the Eppley Foundation provided a significant part of the construction costs of the building which was built along the north edge of the medical campus and is known as the Eppley Institute.

Somewhat after this the central administration of the University of Nebraska had decided on a pattern of asking administrative officers to retire from their administrative posts on reaching age 60. I think I was probably the first of the administrative
types to approach that age and in light of the general situation it seemed appropriate that I should retire, which occurred in July of 1964. At this time Cecil Wittson was named as Dean of the College of Medicine. At about this same time significant amounts of Federal funds became available for strengthening medical educational facilities. Dr. Wittson was in an unusually good position, in my estimation, to take advantage of this change in Federal attitude. I think a number of men in responsible positions in the Department of Health, Education and Welfare, which administered these funds, had been acquaintances or good friends of his during his several years in the Naval Service. He was then able to get information and to present his proposals much more effectively probably than anybody else available at the time. He was thus able to bring about the very striking developments of the Medical Campus in the next several years.

At the time I retired I was given a sabbatical leave but very shortly after my retirement I was approached by the Dean of the College of Medicine at the University of Illinois to undertake a year's time at least assisting with a development of a new medical school in the north part of Thailand. The University of Illinois had an Agency for International Development contract to provide a number of visiting faculty members to work with the new faculty in this medical school at Chiang Mai, Thailand. One of the people who had been on our faculty
for quite sometime was Charles Richards. Dr. Richards had
been a student at the University up to the early part of the
war and had been in the Navy during the war. He had been
associated with Health, Education, and Welfare for some
little time in Washington and when the application for Thailand
came in for consideration he had been approached to go out
and carry on the discussions in the early stages when they
were trying to develop this affiliation. He worked with the
Thai and American people involved in the design of the contract
and what sort of things could be developed out there. When
the University of Illinois then became the affiliating
institution in the United States and they heard of my availa-
bility, I think this led to their approach of me. I also
had known Granvil Bennett, the Dean, for a great many years;
he was also a pathologist, he had been at the Brigham Hospital
in Boston during the time I was in training there. At any
rate Mrs. Tollman and I went to Thailand and spent a year in
Chieng Mai. I worked predominately with the Department of
Pathology but also was one of the people working with the
Dean at intervals. This was really a most enjoyable experience.
It was frustrating at times since the Thais are quite deliberate.
I had realized quite early that the best way of working with
the people in the department particularly, was to discuss with
them a variety of approaches to some of the problems they
recognized without making formal recommendations as to what
their decision should be. Obviously, I was probably more
enthusiastic about certain options than others, but at any rate it would frequently be anywhere from two to perhaps four months when the Chairman of the Department would make an announcement of some changes we had discussed that long before.

After this I came back to the department and participated in the teaching and some of the service work of the department, but rather shortly Dr. Wittson approached me saying that he had some committee work that he would very much like to have me undertake. As a matter of fact he had approached me before I had returned to the campus about taking on the direction of military service association which persisted for the next two or three years before that was phased out. At any rate over the next few years I became more and more involved in administrative activities. One of these, which I found really very rewarding, was working with the development of the affiliated educational programs. There had been developed the quite new program in physical therapy, and of course, I had had many years of association with the medical technology program, but at any rate medical technologic, radiologic technology, physical therapy, eventually inhalation therapy, and then physician's assistants programs were all associated in this division which I was supervising.

One other interlude (really two other interludes) that were most interesting to me were trips to a new medical school in
Erzurum, Turkey. These came about because the University of Nebraska had an Agency for International Development contract to assist this new Araturk University in Erzurum in the development of their College of Agriculture. They had apparently been very effective in this relationship. The University then set about developing a new medical school. The medical schools of Turkey at that time had been in either Ankara, the capitol, or in Istanbul. A related story I thought rather interesting. There was a medical school in Ankara, Turkey which had been developed with the assistance of German teachers and advisers. Turkey had been an ally of Germany in the first world war and the Germans had been very helpful in developing a number of their institutions. However, as time went on many of the younger Turks were trained in either England or France or particularly in the United States. These younger members were not particularly enthusiastic about the German pattern of instruction. One young Turkish physician, with I gather very good relationships with the ruling members of the country, had decided to develop a Children's Hospital in Ankara. This had been built with funds from some of the foundations in the United States, particularly the Rockefeller Fund, I am told, plus appreciable support from governmental agencies and private agencies in Turkey. The building had been almost completed when it was gutted by fire. The story is that this man then got on the telephone and before the embers were cool he had lined up enough money to rebuild the
Children's Hospital, which was carried out. As time went on these younger and western oriented physicians decided that they really needed a medical school. As a first move in their development, however, they built a nursing school fairly close by and then went on to the development of the medical school in Ankara with the western orientation. When the government decided on developing a new medical school in the far eastern end of the country at Erzurum, this medical school in Ankara was approached to provide some assistance in getting faculty members to start the new school. The story is that this man who had been managing the medical school simply checked off fifty names of faculty members in all of the various departments and told them they were to go out and help get this new medical school started; each of them to stay a minimum of three years and possibly longer, and this was done. As the new medical school was being built in Erzurum, these faculty members decided that some assistance in some of their planning and particularly in equipment and library support would be helpful. The approached the Americans at the Agriculture College and they in turn got in touch with the University of Nebraska and out of that I was approached to go out and spend two relatively short periods of advising those people as to equipment, library, etc. This was certainly a "gung ho" group. They were most enthusiastic, feeling that they were professionally competent. They did not want advisers in the medical fields but they did want assistance on these related facets of the development of the medical school.
One of the points of great pride of the University at Erzurum was their very large campus. They insisted that it was the largest campus in the world and I have no reason to doubt it, because this campus was a tract estimated at something like ten miles by twenty miles; it crossed the valley along which Erzurum is built and so includes most every kinds of landscape that the people in the eastern part of the country might encounter. They were certainly an enthusiastic group, and I felt a very competent group. So then back to the campus.

Along about this time I was reaching the end of the customary period of possible annual reappointment. I had become very considerably involved in the development of teaching aids in the department after I moved out of the administrative activities, so I spent parttime with the department for a couple of years in developing more of their teaching aids.

Then, I reached retirement. We had decided quite sometime earlier (my wife and I) that we would like to move to Tucson. There were a couple of things pushing us in that direction. The winters no longer appeal to us very strongly, and we had visited Tucson a number of times. Mrs. Tollman's sister had been living in Tucson for a number of years. She had married Dr. Francis Bean, who was Assistant Superintendent of the University Hospital during the latter part of my term as a
medical student. He had gone on to Vermont and later to Tucson as Hospital Superintendant, so we had visited there winter times particularly, on a number of occasions. My older son, Dan, had become so enamored with the Tucson area that he attended the University of Arizona from which he was graduated. At any rate we then moved to Tucson and have spent a very pleasant several years here as this account is prepared.
CONVERSATION WITH  
J. PERRY TOLLMAN  
10-26-79

TOLLMAN  
(Donald Griess) When I first knew him, his father was Dean of the 
Dental School. Well, Don came down here (Omaha) to Medical School 
and my guess is that he graduated in middle to late 30's (1942). 
He's a surgeon in Tucson and I see him relatively frequently, 'cause 
I've been going to a particular conference at Tucson Medical Center 
which he attends with fair regularity.

HETZNER  
Is there a Dr. Janssen there?

TOLLMAN  
Yes, I see Dr. (G. Arthur) Janssen from time to time.

HETZNER  
I always remember him because there's two "s'es" in his name.

TOLLMAN  
(Laughter.) I can't now get this surgeon's name, but he's made 
himself a good reputation in Tucson. I see him quite occasionally. 
Oh, the head of Orthopedic Surgery of the Medical School is Professor 
Peltier's son. Peltier was head of Microbiology or Bacteriology as 
they may have called it on the Lincoln Campus, back year's ago. His 
son was not a graduate of this school. I've forgotten where he went 
after the University of Nebraska. I see Dr. Sorenson of the Nursing 
College there occasionally. I think she was here for some kind of 
dedication a year or two ago.

HETZNER  
Yes, she was.
Gladys Sorenson.

Wasn't she here when they dedicated the new College of Nursing?

That's probably the time I'm thinking of.

Well, the young Karrer boy that graduated last (I say young because there are seven or eight of them in all laughter)) June is training, I believe, at Tucson in orthopedics.

I haven't encountered him. I guess I hadn't known he was in the city.

It would be only since last July. It just seemed to me -- yes, because Mrs. Karrer, this is Bill Karrer's son, Bev Karrer, was so happy that he was able to go there and I think Neil Vancelow helped a little bit, get him started you know. We have an exhibit downstairs of the Karrer Family. What is it, two hundred and ten years of medical practice, when you add up all the years.

Wasn't that in the Alumni bulletin?

Yes, it probably was.

Yes, I saw that some months ago.
HETZNER: Yes, we did this in June so we could get all the people together and his uncle, no it would be Bill's uncle, is going to be here. He was in your class. (This should read... "his grandfather, Bill's father, ...")

TOLLMAN: Oh, yes.

HETZNER: He's going to be here for the reunion. I saw his name on the list. Well, I just wondered if you had any information or interest in talking to some of these people. I'd be glad to furnish the tapes.

TOLLMAN: Yea, I can see what I could do on that. I can probably scrounge a little time with one or another of them from time to time.

HETZNER: (Laughter.) Well, I think it would be helpful. We have committees all over the place for the Centennial celebration, you know; and hoping to get a lot of information that will make the publications that might come out a little more interesting than somebody just sitting down and saying this happened and that happened and on June 12, "X" number of people graduated and things like that. Little personal things that will make this much more interesting.

TOLLMAN: Are they aware that there were once on this campus the name stones of the Omaha Medical College? I don't know if they still exist or not.

HETZNER: They do, they do. Do you see changes on the campus since you left?
TOLLMAN: Yes. A very great deal because the developments across 42nd Street have happened; the ambulatorium is new, and of course, that has led to a great many internal shifts. So occasionally, I see something familiar (laughter) and that's only five years ago.

HETZNER: Yes, and then the development over here by Clarkson.

TOLLMAN: Yes, yes.

HETZNER: That was a surprise wasn't it when you tried to come up 44th Street, or aren't you driving?

TOLLMAN: Yes, I am driving but although I had seen some little note about that office building and parking area going up over there. Sounds as if the medical facilities are all being concentrated in here in a relatively few blocks, although as we went by I noticed Bergan Mercy had a big addition which I understand is offices, outpatient, etc., which is new.

HETZNER: I'm not sure. Yes, that's new and of course their extended care is out there, too. Have you been by Methodist Hospital, to see the Children's Hospital?

TOLLMAN: Yes, enough to see the skeleton of the building that's going up, and I also read an account somewhere, some piece of paper that crossed my desk in Tucson, that they have decreed that Omaha has made too many hospital beds.
Yes, we're "over bedded" (laughter).

Of course, that has been developing for close to twenty years, I guess, because that was the beginning of the conversation about how many hospital beds are appropriate for a certain size community, and immediately I think all of the hospital boards in Omaha got very busy because it was clear that sometime somebody was going to say that this is the number. So the new units all had to be built and very quickly.

Before they were cut off.

Yes. Oh, I was seeing and to a degree unrelated about the Regency Area development. Did I put that in my tape or not?

Oh, you did. You told about going to Lincoln with A. W. Gordon. We happened to drive around that today and it brought it fresh to mind again, because all that office area of development is new since we were here.

Yes, because some of that has just gone up in the last year. That new Shepler's Building and now they are going to build a Mariott Hotel out there, 300 rooms or something like that, and I heard that the Mormon Church was going to build a building out there. At least in that area, whether it's this side of Dodge or the north side, I don't know. That was passed on to me, sort of a rumor, I don't know whether it's true or not.