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## Newland, Myrna, M.D.

University of Nebraska Medical Center

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**Oral History Interview with Myrna C. Newland, M.D.**

**Interviewed on November 15, 2017 by John Schleicher**

**John Schleicher (JS):** I am John Schleicher from the McGoogan Library of Medicine at the University of Nebraska Medical Center and I am very pleased to welcome today Dr. Myrna Newland. Dr. Newland is a 1964 graduate of the University of Nebraska College of Medicine. She is a long-time faculty member in anesthesia. She retired in 2013 and was named a professor emeritus of anesthesia and she is going to tell us today about her experiences as a med student and also her experiences throughout her career here at UNMC. Dr. Newland if you would tell us just a little bit about your life growing up and your background, your education, your training in medicine, and your career here at the University of Nebraska Medical Center.

**Myrna Newland (MN):** Thank you, John. I grew up in Southeastern North Dakota and—on a farm, and I was the youngest of five children. And there were actually four children in the family that were born ahead of me and I was kind of an afterthought. My oldest sister was 22 years older than I was, a brother was 20 years older, and then I had a sister 16 years older, and then my next oldest sibling to me was my brother Charles, and he was 12 years older. And so, the only one that was home on the farm where I grew up was my brother Charles and that was really fun, because we had a good time together and he is still living at the age of 90 in excellent health and it has just been a joy to have him to bounce ideas off of, and so forth. I grew up on the farm and I remember one time where I was about 10 or 11 years old—I was campaigning with my mother to get a bicycle, because I didn't have a bicycle, and my cousin who lived in the small town, Forman [Sargent County, North Dakota], close by, had a bicycle and I thought it would be fun to have a bike. And so, I was talking to my mother and I said I really would like to have a bicycle. And she kind of sat back and reflected and looked at me and said, "Why do you want a bicycle

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when you can drive the jeep?” And it was—that was a case closed there. I never did get a bicycle. But, growing up on a farm, you had a lot of freedom, and so I didn’t drive up on the roads, but certainly in the farm yard and in the fields, I could drive the jeep and I could drive the truck and I could drive a tractor, and lots of things that I just figured were normal when you were 10 or 11 years old. Anyway, later on, my brother got married and we moved off the farm and moved in to the small town of Forman where I went to junior high and high school. When I was a senior in high school, I was undecided about what I wanted to do, but I was ready to fill out the application form to go to nursing school at St. Luke’s School of Nursing in Fargo, North Dakota. And I just thought, you know, medicine and nursing would be what I wanted to do. Well, my older sister Millie, the one who was 16 years older, came home and she had met a physician—a woman physician, in . . . in her travels. And so, she came home and she said, “Why don’t you apply to the University of North Dakota and take a science background and maybe major in pre-med and you’ll have all of the requirements that you need and so you can apply to medical school? You can go to nursing school. You could do allied health. There are so many things that you could do. She was a graduate of the University of North Dakota herself, and she had majored in Home Economics, but in Home Economics, you take a lot of Nutrition and Chemistry and Biology and so forth. And so, anyway, that advice did pretty good and my mother thought it was good and my dad thought it was a good idea. So, I applied to the University of North Dakota in Grand Forks and was admitted there in the fall of 1957, when I graduated from high school that year. And so, I started out in premed and lots of Chemistry and Biology and Math and so forth and I enjoyed very much. And I got through the first year without any problem and the second year rolled along and took the second year of premed and still was doing okay, and I thought this was kind of fun. And I met a girl from Bismarck, North Dakota, Karen Geck [Scott], who was

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also in pre-med. And, at that time, there were very few women in pre-med, but she was interested in medicine because her next door neighbor was an obstetrician/gynecologist, who was a graduate of Creighton Medical School and so she had lived in Omaha and had gone to school here. And she had planted the bug in Karen's ear that she should go to medical school. So anyway, we made it through sophomore year, and then the junior year rolled around, and then things started to get a little tougher. We took serious Chemistry courses, and Physics courses, and Biology courses. And so, it was kind of a time for . . . for getting down to serious business. And then Karen decided that she wanted to apply to medical school after three years, because she was trying to save her parents money. And so, she said, "Why don't you apply to medical school with me and we'll apply as third year students, undergraduate students?" So, I said, "Oh. Okay, we can do that." And, lo and behold, we were admitted and so our first year of medical school counted as our last year of college. And so, we graduate for four years of college after one year of medical school. So, entered a medical school class of about 40 students at the time. And there were I think a total of three or four women in our class. And the University of North Dakota only had the first two years of medical school at that time, because the population of North Dakota was only 600,000 and they just didn't feel that they had the adequate clinical facilities for the junior and senior years of medical school. So, the students did their first two years of basic science at North Dakota, and then everybody transferred out. And some students went—they went to one or two all over the United States, wherever there was an opening that they could get in. And I decided to apply to just Iowa and Nebraska, and was accepted at both, and I decided to choose Nebraska over Iowa because in Iowa they wanted me to start at the end of June in my junior year, because, being a transfer student, they thought it would be nice to have the extra time to adjust, whereas in Nebraska I could start at the end of August. And I wanted to spend the

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summer up in North Dakota because I was going with my future husband Jim and wanted to have that time together, plus I had a little research project that I was working on. So, that's how I ended up deciding to come to Nebraska. And—just—it was fun to do the transition from North Dakota to Nebraska. There was a student in my class, and his wife, who were on their honeymoon, and they knew that I was coming to Nebraska, so they made a point of stopping by the Medical School in North Dakota to look me up and pay a visit and welcome me to the class. And I thought that was really, really nice. They were on their way to Canada on their honeymoon, and so that was my first introduction to actual Nebraska. So in late August, we came down, and my mother and my soon-to-be husband Jim came down, brought me down to Omaha, and I roomed with an elderly widow who lived up by the cathedral in Omaha. And she was the lady that the doctor that my good friend Karen Geck [Scott] knew from Bismarck, North Dakota. She had stayed and roomed at her house when she went to medical school at Creighton, and so that's how I got this connection with this lady, Mrs. O'Dowd, and stayed there and it was almost close enough where I could walk back and forth if I wanted to. Anyway, I got involved in my junior year—I think my first rotation at Nebraska was Surgery at the VA hospital and Dr. Paul Hodgson was my instructor out there and I remember what great small group conferences he had at the VA [Veterans Affairs] hospital. And so, we went ahead—the junior year went along and at Christmastime we had two weeks of vacation. And so, I called up Jim, my fiancé, and I said, “So, how would you like to get married at Christmastime?” [Laughter] His mother said, “What? So soon?” We had been going together for three years. And so, he came down, and my folks came down, Jim's folks came down, and his brother, my sister from St. Joe, Minnesota—or Nebraska—Missouri. And we got married here in Omaha, and then had a two-week honeymoon between classes. And so, then I came back to school, and then he went back up

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to North Dakota. And I just think how hopelessly naïve I was at the time. We didn't even really consider well what if he doesn't transfer to Nebraska, what if they don't take him? What are we going to do then? But, thankfully, they accepted him, and so in the summer he came down to Nebraska and started his junior year and then I got ready to do my senior year. So, I graduated in 1964 and my thought in going to medical school—I was interested in Pediatrics and I ended up doing some work in medical school with Dr. Gordon Gibbs, who was the chairman of the Pediatrics department here, and his area was the study of cystic fibrosis and so I did some research with him in the summer, but there was a new chairman of Anesthesia in town, and his name was Dr. John Jones, and he was just personality plus. And he was such a good teacher, very outgoing, just super. And so, my interest in Anesthesia kind of picked up, and I took another surgery rotation, and this time Dr. Joel Johnson was a resident and every day when we would be in clinic, Joel Johnson would say to me, "Myrna, you really should go into Anesthesia. We need anesthesiologists." And I would say, "Well Joel, I'm interested in Pediatrics." He said, "Well there are lots of people in Pediatrics that need Anesthesia. You'll do a lot of Pediatrics in Anesthesia." So, that kind of got things going in the back of my mind, and I ended up started an anesthesia residency here in Nebraska with Dr. John Jones. And yes I did do a lot of, probably a third of my practice, was in Pediatrics in Anesthesia. So, that was a good decision. Then my husband was a year behind me, and so he wanted to go out to the University of Oregon to his internship, whereas I did my internship here at the University Hospital and we rotated to the VA [Veterans Administration] and to the [Douglas] county hospital too, during internship. But he wanted to go out to the University of Oregon, so I left my residency after that one year and went out to Oregon with Jim while he did his internship. But then we came back the following year and I slipped into the residency in Anesthesia, because there was an opening in Anesthesia. And

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then he found an opening in Pathology, so we've basically been here ever since. And this is in about 1965-66. And other than he spent a couple years in the military, basically our entire academic career has been at the University of Nebraska. And, along the way—I guess further developments—we had three children. Our first child was born in 1968, right after I finished my fellowship in Pediatric Anesthesia on the 30<sup>th</sup> of June, and Ann was born on July 10<sup>th</sup>. So, talk about critical timing. And she was our first child. And then our second child, Matt, our son, was born in January of 1970, a year and a half later. And then our third child was born in 1973. And so, all of those children were born in Nebraska and grew up in Nebraska. After I finished my training and so forth, I was invited to join the faculty in anesthesia here at Nebraska. And, at that time, we had a very small department. There were probably only 3 or 4 faculty at that time, in comparison to now when they have many, many faculty. But it was a small department. But it was interesting and it was rewarding. The Chairman of Surgery at the time was Dr. Merle Musselman; and, of course, Dr. Paul Hodgson was still here; Dr. [Robert] Grissom was the Chairman of Internal Medicine; and Dr. Warren Pearse was the chairman of OB/GYN. And, at that time, there—and Gordon Gibbs was the Chairman of Pediatrics. So, at the time there was very few full-time faculty and full-time chairs at that time. But it was a small school. But it was collegial and just enjoyed the time and practice. In 1970, Jim was in the Berry plan [military service deferment for medical students], husband Jim, and ended up going to Korea for thirteen months and I stayed here until he came back. And then when he came back, he was assigned to Fitzsimmons Army Hospital in Denver for about a year, and then I went with him out there for that period of time. And then we both had an opportunity to come back to Nebraska, and we did. So, that was just a little short period that we weren't there. Since that time, basically had been

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here ever since, continued on in the department and he continued on his department in Pathology, and I did Anesthesia, and that brought us along.

**JS:** So, how was it being a young, working, faculty physician and mother?

**MN:** Well, it was challenging in terms of time, but when I was in my residency here in our Department of Anesthesia, in the lounge area we shared with the nurses—but there was a nurse there who had a family, and she came in and she worked two or three days a week. And I looked to her kind of as a role model. And I thought here she is, she's got several children, but she's coming back and she's working part time a couple of times a week, maybe that is something that would work for me. And so, when Ann was about—our oldest daughter—was about 6 months old, I talked to my chairman and asked Dr. [John] Jones if I could work part-time rather than full-time because of our growing family. Then he said yes. So, I ended up working part time basically two days a week for almost 15 years when the children were young. And even so, with being on call, I would estimate that my hours actually spent at the hospital were at least 40 hours a week. So, that would be a traditional full-time job, but it was concentrated at those two days and nights and certainly made it easier to spend time with the family. I had excellent childcare and the lady that came and took care of the children when I was working was a retired nurse here in Nebraska. And she had actually been a public health nurse in Nebraska and had travelled all over Nebraska and helped do home deliveries and so forth. And after she retired she had worked in the student health clinic here at Nebraska, and then when she retired from that, she was looking for something to do on the side and she ended up being our children's nanny for almost those fifteen years. And she was just a lovely, lovely lady. Yeah. So, I had help. You can't do it alone. [Laughter]

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**JS:** Right. And as you said earlier—kind of continuing that vein—just a few women in your class at North Dakota. And how many in your class at Nebraska?

**MN:** I think there were either four or five. And one of the students here at Nebraska was Mardelle Buss, and she was a Nebraska native and she'd had a career before she went to medical school. She was an airline stewardess. And just very accomplished. She'd been all over the world, just very outgoing, and she ended up finishing medical school here and taking a pediatrics residency. Then there was another woman that ended up being a pathologist, and I think that the fifth woman ended up being—fourth or fifth—ended up being a family practitioner. So—and we had a total of 84 students in the class. So, it was, you know—but at North Dakota we had forty students and a couple of women. So I wasn't surprised by the . . . the small numbers.

**JS:** Yeah. Do you think that time as a young medical student with very few females influenced your work? Later, you were very involved in the gender equity commission and you were gender equity officer on campus. Could you tell us a little bit more about that?

**MN:** Well, that was rather interesting, and that came about kind of circuitously. I don't remember the year, but I would imagine that it would have been in the early 80's. Probably the mid-eighties. But it was a time that Dr. [Robert] Waldman was the dean of the medical school. And, for some reason, I had occasion to meet with him in his office and we were visiting, and he said, "Would you be interested in being the representative to the American Association of Medical Colleges [AAMC] for the University of Nebraska Medical Center?" And Dr. Carol Angle, who had been a pediatrician here for many, many years, had been in that position but she was retired and moving on and could no longer do that. And so, I really didn't know anything about the AAMC and about what exactly I was supposed to do, but he asked me and I thought, well, that sounds kind of interesting, I'll do that. So, I was sent to the annual meeting, which

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occurred just annually, and at the time the Association of American Medical Colleges was interested in promoting leadership among women. And so, they had a program of faculty development, basically for women in medicine. And so, I went to the annual meeting and would go to the special programs for 2-3 days, and heard about all kinds of things that I really hadn't thought about and I thought this is very interesting. And, at the time, they encouraged those of us that were the representatives to take some of this information back to our own medical schools and offer programs for women to increase their leadership. But, at the time, I was full-time in anesthesia again, very busy, and didn't have a budget and really didn't know how to go about this. And so, I just kind of put it in the back of my head and didn't take it any further. But, when I had the opportunity in 1998 to go to the equity office—and how that happened was that then-chancellor at that time, Dr. [William] Berndt, met with me and also Dr. David Crouse, and had asked me if I would be an ombudsperson for the campus. And I said, “You know, doing what I'm doing now, I'm so busy that I really just couldn't take on anything extra.” And then they said, “Well, but we have another opportunity if you might be interested in.” They'd had a committee put together to set up an equity office to promote faculty development and look at gender issues and so forth. And I said, “That sounds kind of intriguing.” And so as it turned out, in 1998, I ended up coming up to the chancellor's office area and a space that Dr. [William] Berndt created to a conference room and another office to become equity officer and an ombudsperson. And, at that time, I was basically three-fourths time—and that rule—and then just cut my time in anesthesia down to 25-35 percent. And so, I could do that then. So that was my opportunity to take what I had learned at the double AMC and put together committees and so forth and look at faculty development. And I thought it was important to offer it to an inter-professional group of colleagues, so we included nurses, and allied health, and dental people, and

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so forth. And make it available to men and women. And so, that's kind of what I did and that was a very rewarding experience.

**JS:** And would you talk a little bit more about that faculty development work? I know your husband Dr. Jim Newland was involved in that also but growth from a committee to now—really a department and expansion of that over the years.

**MN:** Yeah. What had happened—and I think my husband Jim got involved with this because there was interest to—and this was before 1998—I would say this was probably 1995, something like that—funds were made available to have a series of teaching conferences to enhance educator's teaching skills. And Jim worked with people from across the campus with the committee to put together a teaching conference. And I think they had one one year, and one the next year, and then one the next year. And so, it was over a series of . . . of two or three conferences and when I became the equity person. Dr. Jim Linder, who was Associate Dean for Faculty Affairs, at that time, was interested in putting together something related to mentoring. I think the first conference that we ended up—he helped put together a committee and made his secretary available to be able to support our group to plan a mentoring conference that we had outside speakers come in and I think we ended up with 30 or 40 participants in that. And it was very successful. And so, then after the mentoring conference, then we went on and did some more things that were related to leadership and teaching skills and so forth. And so, it kind of morphed into something more.

**JS:** Very good. You also served a term as Faculty Senate president and a number of years in the Faculty Senate. Could you tell us a little bit about that?

**MN:** Well, that just kind of happened too. Somehow, I got on the ballot and was elected.

[Laughter] You get asked and I came to say yes without really thinking that this is going to

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require time and effort and so sure enough I said, “Yes, I’ll run.” And I was elected and it was fun. And I really didn’t know anything about faculty senate. And—but it was good to get to know people, the representatives across the campus, and to look at the issues related to academic life on campus and it’s opened up a whole new perspective. And when I had the opportunity to become the president of it. That was fun. And one of the fun things was that you got to go down to the Board of Regents meetings down in Lincoln and I didn’t have any clue. [Laughter] You know, I had heard about the Board of Regents, but I’d never actually sat at a Board of Regents meeting. And all the representatives from the faculty senate, the presidents from the four faculty senates from all the campuses, got to go to that meeting and you all got to sit together at a little table in front of the Board of Regents and they would call on you, occasionally, to, you know, “What do you think of that?” And so, it was fun. It was very interesting.

**JS:** Also, administratively, you served at least a couple of times as Interim Chair of Anesthesia. Would you tell us a little bit more about those roles?

**MN:** Yeah. And that was, again, in the mid-90s. And we had had a number of people, Dr. John Jones, who was my chairman way back when I was a resident, eventually left campus, I believe, in 1973; and Dr. Warren Pearse, who had been the chairman of OB/GYN became the dean, I believe, at the University of Virginia in Richmond; and he recruited Dr. Jones to become the associate dean for—I don’t remember what the final title was. But anyway, Dr. Jones ended up leaving in 1973 and going out to Virginia to become an associate dean out there. So, then we had a new chairman, and we had several chairmen over the years. And, finally, in the mid-nineties, our chairman at the time was Dr. Dennis Landers, and I believe that he left to go down to Texas. And, at that time, I had been an assistant chair. I had some title. I don’t remember exactly what it was. And so, I was asked to serve as an interim basis while they chose a full-time chair. And then

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we were successful in recruiting a chair, but he lasted here about one year and then decided to go back East. And so, then I was temporary chair for another short period of time, until Dr. John Tinker was recruited as full-time chair.

**JS:** Also, you have been on, in the past, for a number of years, on Faculty Senate committee, the library committee of the Faculty Senate, and also involved in the Friends of the McGoogan Library. Would you tell us a little bit more about that service?

**MN:** Well, I got to know Dr. Nancy Woelfl, who is the leader of the library here at the McGoogan Library. She was the parliamentarian of the faculty senate, and so, got to know her through that work. And that involved. I just enjoyed the library. And when I was an undergraduate, actually, before I went to medical school, one of my first, one of my various jobs as an undergraduate, was I worked in the medical school library at North Dakota for one summer and I just loved it. It was so much fun. It put me back in the stacks and I was filing away books, or whatever. I was happy as a clam and one of my other tasks was to order re-prints for one of the professors at the medical school. And, at that time, you didn't copy it off of a copy machine, you sent it away on a post card to request this reprint of whatever person it was. So, that was fun. And so, I had a soft spot in my heart for the library and I thought if I worked in medical school I would like to be a librarian. [Laughter] So, that kind of gave the background of the importance to the interest in the McGoogan Library.

**JS:** That's great. And would you talk a little bit about your memories here during the time of the hospital merger—of Clarkson Hospital and University Hospital? Could you talk a little bit about that time?

**MN:** Well, that was originally—that came up and it was a topic of conversation during the time that I was Faculty Senate President. And, preceding the merger, there was a period in which our

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then-chancellor, Dr. Carol Aschenbrener, had a particular vision for the campus. And that vision was not necessarily shared by the majority of the campus people. And certainly the question of the merger with Clarkson was just in its very early stages, at that time. And so, there was a fair amount of discussion and some degree of turmoil and political unrest and so forth. And—but that resolved and after—there was actually a vote of no confidence in the chancellor. And so, she ended up going, I believe, to the double AMC. And Dr. Bill Berndt, who was a professor here, who was the interim chancellor for a full two years—and that was the time—about the time that I was recruited then, for the equity office. Some of the concerns were that—over that period of turmoil, there were some concerns, at that time, that perhaps nurses were not necessarily treated with the respect that they deserved, and they might be yelled at or disparaging comments made, or something. And so, some of this overflowed and actually ended up on the front page of the World-Herald [newspaper]. And this was not good. And so I think that, in many ways, stimulated the creation of the equity office and so forth. And then as time went on and the political winds changed, there actually was the merger then with Clarkson and Nebraska. And, at that period of time, Dr. John Tinker was the chairman of our Department of Anesthesia and he was very instrumental in that merger and putting the two departments of anesthesia together and help facilitate that transition to that merger.

**JS:** Dr. Newland, would you tell us a little bit about your interests outside of medicine? Hobbies, things like that?

**MN:** Well, I love to read. I have always loved to read. And growing up in North Dakota at home, there were not a lot of books. We didn't have a library, but my parents had subscribed to the Reader's Digest, and so we had stacks of old Reader's Digests. And as I got a little older—10, 11—8, 9, 10, 11, I read those from cover-to-cover. And things like, I don't know if you

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remember, but it pays to increase your word power, was one of the features in there. I know ten or twenty things where they would give a word and then give the possible answer to it. And I just loved those. And that was one of the things that I really enjoyed doing. But I would read any article on any topic. And then they had condensed books and that was even more fun to read the condensed books. So, that was kind of my library. And then when I went to—well, in our country school, I went to a one-room country school for the first three years of my life. And my mother was on the school board committee and our library at that country school was contained in one cabinet that would, say, sit in your living room with five or six shelves on it, and, I don't know, maybe a hundred books or something. So, mother arranged that over the summer. I could check out books from that cabinet and take them home and read—and I don't even remember what they were—and then bring them back. And so, I think I read every book in that cabinet before I left school there. And then when we got to the small town of Forman, in which there were 24 in my class—we had a small library, and there was a small library in town, and so I had my nose in a book a lot. So, reading, certainly. And I took piano lessons for years, so I was an accompaniment—accompanist to singers and the choir and so forth in high school. And then I didn't pursue that in college, but I did take private piano lessons until I went to medical school. So, music and reading. And then, as I got older and had the opportunity, in high school I learned how to swim. And so, I enjoyed swimming and I still swim at least once a week if I can possibly do it. And so—and then I enjoy cooking, and I know how to sew—my mother taught me how to sew, so I use the sewing machine and do a little knitting. So, that's the kind of stuff that I enjoy doing.

**JS:** And is there anything else that you've thought of that you would like to tell us about that we haven't covered or haven't mentioned?

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**MN:** Oh gosh, we really covered a broad range of topics. I guess one thing that I would like to say is that I was very impressed when I came to Nebraska. The openness and friendliness of people here, and both the faculty and my classmates. I remember when I had my first baby, the lady who was—Lila Moffat was her name. She was the head OR nurse in the operating room and she ran a very tight ship and nobody got by with anything. She was very, very strict. But I always got along with Lila Moffat. She knitted a beautiful pink sweater and booties for our little girl. I just—I couldn't hardly believe it. I just was amazed. And, not only that, but the wife— and I don't remember if it was the wife of the chancellor or the wife of the dean, my memory fails me now, but she also brought a hand-knit outfit for my little girl. And I think, my goodness. That just really impressed me. That just really impressed me, the quality of people that would think enough of somebody to do that. That . . . that is just amazing.

**JS:** Well, it's really been good to talk to you today. I appreciate having you here today, Dr. Newland. Thank you very much.

**MN:** Thank you. My pleasure.

END OF INTERVIEW

Alison Concannon, 5/3/2018, transcription

John Schleicher, 5/9/18, edits