

DATE: May 20, 1998  
TAPE: Tape 14  
INTERVIEWEE: Thomas Scully, M.D.  
INTERVIEWER: Eileen Barker  
PLACE: Dr. Scully's home, 1400 Ferris Lane  
TRANSCRIPTIONIST: Teresa Garrison

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**EB: Today is May 20, and we left off talking about when Dr. Daughtery was hired in the spring of 1981. I wanted to ask you about Dr. Anderson. His part in getting all this going. I assume that Dr. Anderson was a major factor in getting this medical school going because of his power, (more or less) over the medical staffs of these hospitals.**

TS: No, it wasn't that. His real authority came with the Board of Regents. He was a member of the Board of Regents with Louie Lombardi and with Proctor Hug who was the young member of the board, and Juanita White who was the wife of Tom White, a physician who practiced in Boulder City for years. I have forgotten who some of the earlier regent members were. Fred Anderson started talking about a medical school, I am told, I wasn't here, in the late fifties and early sixties. In those days, the population was mostly in the north and in the rural areas. Fred had been a native Nevadan. Fred was the first Rhodes scholar from UNR. He got out of here in the late twenties and went to Oxford and then Harvard Med. and came back and started his practice when the War came along. He was a well-known and well-trained surgeon. He was actually born and raised in Ely, eastern Nevada. He was in Reno from the time he started college. At any rate, he was on the Board of Regents and started looking at a medical school. While he was on the Board of Regents—he might actually have been the chairman, he encouraged Don Pickering to come to Nevada. Don was running his primate research. Don Pickering was the first one to do an intrauterine transfusion of a monkey. It was on the front page of "*Life Magazine*". Don was suppose to start the medical school and I don't know what happened there. I think Fred actually provided Don with some space for his monkey colony, and it didn't work out. The monkey colony left and Don took it to New Orleans. He also ended up having it in Oregon. But, be that as it may, Fred had talked about a medical school for at least ten years before it actually got started. Then George Smith showed up, in the mid- sixties, and was working in the emergency room with Sal. He married Norice Conant. He had divorced his first wife and come

here with Norice from Boston. George was asked by Fred and President Armstrong to put together a feasibility study. In about 1966. They took it to the legislature in 1967 and it didn't pass. Then of course they resurrected it in 1969. As far as I understand Fred Anderson was talking about a medical school here for ten to fifteen years. It was his authority on the Board of Regents rather than through the medical staff. Ken Maclean was essentially running the Board of Medical Examiners and Ernie Mack was running Washoe Medical Center. Those were the three big surgeons. I don't know what their personal relationship was like. It was Fred through the Board of Regents and Louie Lombardi who pushed the medical school. It was because of all of that and also as you know, he was friends with several of the governors up to that time including Paul Laxalt. They were all northerners. Grant Sawyer from Elko, Paul Laxalt from Carson City. Fred was able to get a lot of support out of the governor's office. He got all of the support he needed out the Board of Regents. He got a lot of support out of the legislature, which in those days was more northern and rural than southern. For all of those reasons, plus his powers of persuasion he was considered "the father of the medical school." He was essentially the main person, had he not been there, I don't know who else on the horizon would have been pushing it. Fred really wanted to make that part of his legacy. So, that is why he was considered the father of the medical school.

**EB: Do you feel that was fair.**

TS: Oh yes, from my understanding and certainly everything I ever learned from George, Ed Manville, or Neal Humphrey or anyone else, at that time. He certainly deserved that title. Fred you know had a very dry sense of humor. He used to say I am the "founder" and then he would use the dictionary definition of founder that is to "flounder around." Have you ever looked up founder in the dictionary?

**EB: No.**

TS: He uses it as play on words. I think to founder means to flounder around, to collapse, sink, or fail. I have a little dictionary here; I will just look it up. He has used that phrase many times. Fred was sort of self-deprecating. Also Fred was very involved with the Board of Medical Examiners. He had served on there at one time. (1940-'44). He also had been active in the State Medical Association. He was able to really bring together many different groups.

**EB: He was a definite presence.**

TS: Oh yes, but you have to understand that at that time, most of Nevada was in the north. We should really call him the father of the medical school.

**EB: We were talking about you giving your resignation.**

TS: Yes, and Joe Crowley who then had been just appointed president named Ernie Mazzaferri as acting dean. Ernie took the job with the agreement that he would be out of there by the legislative session of 1981, which he was. Then a national search was done. I don't really know, because I was on sick leave and I didn't participate in that very much. I have forgotten how many people actually showed up, but Bob Daughtery came from Michigan State, at the time. Ultimately, Joe offered him the job and he showed up in the spring of 1981. I think the legislative session was all ready open. He had come out several times, actually did the presentations for the medical school. I had done the legislature of 1979 and 1977, those two sessions. The rest is really Bob Daughtery's story, not mine.

**EB: I do remember that was one of his great strengths, his relationship with the legislature.**

TS: Yes, he liked that.

**EB: He was good at that.**

TS: Yes, and he spent a lot of time in Carson City. Of course, at that point, it was clear the shift was taking place, you could see in the reapportionment in the next few years and the population growth in Las Vegas, the shift of power ultimately being in Las Vegas. Bob paid attention to that. I had hired an associate dean for Las Vegas to get started down there. When Bob showed up I am not sure what happened to that relationship. So, then Bob offered Tom Cinque the job. Tom had been an associate dean or assistant dean at Michigan State along with Bob. So, Bob brought him out here. Bob also hired Joe Lampher who he had known at Wyoming. This is Bob's story, but it is also public. Bob went to Wyoming about the same time that we were starting the school here in 1974, 1975, and 1976. He was there attempting to put together a feasibility study at the request of the Board of Regents in Wyoming, to start a medical school there, but as you know, there wasn't enough support, or money, or population. Wyoming never grew in population the way Nevada did. It was from Wyoming that he then went to Michigan State. I think that he went from Indiana to Wyoming to Michigan State. At any rate, he brought Joe Lampher here who had been one of his associates and assistants there. Joe had been working for the Pathology

Department as an administrator in Sacramento at UC Davis. That is his story and I don't want to say anymore about that. I then started on another career essentially.

**EB: You were still on sick leave?**

TS: Yes, for about six months.

**EB: What did you do during that time?**

TS: I sat around and healed mostly. I tried to get healthy. I read a lot. I started to try to think what my future was going to be. What was I going to do? So, around January or February of 1980 I got a phone call from a man by the name of DiSibio who had been the head of the state department of human services. I am trying to think of his first name. He called me and said, "We need a physician to help out at the special children's clinic," which was then on California Avenue." Joanne Edwards was the psychologist running it. They had speech pathology and all of that. Since I was a pediatrician, they wanted me to work there part-time. When I was no longer the dean, I went back to my department, which was now the department of pediatrics. My faculty rank was professor of pediatrics. I had tenure; the Board of Regents had given me tenure. Burt Dudding, whom I had recruited and hired as chairman of pediatrics, was now my boss. Which I told you earlier, he came from the University of Kansas. I talked to Burt and he said, "Yes, that is a good idea, why don't you start coming back to work slowly. In the meantime, Burt was starting a residency in pediatrics, which was being done essentially at Washoe Medical Center, and having an office with several faculty. He said, "Why don't you come and join us part-time doing general pediatrics." In the spring of 1980, I started working part-time at the special children and Burt's office, and slowly getting back into pediatrics. For many years I was doing mostly medical school planning, development and administration. I had the basic medical skills, but I had certainly gotten rusty. So, it was very nice to be able to work with Burt, students, and residents and sort of get back into it. I was asking Burt, Don Pickering and others that were there, all sorts of questions. I took some continuing education classes and eventually got back into the swing of it and started seeing some patients. There were other good pediatricians in town, Steve Missal and others who I could refer to, if I was uncertain. I also then went to California Avenue a couple of mornings a week and I would do the general physical examinations on the little children, most of whom were disabled, mentally retarded, cerebral palsy, hearing loss, and various things.

**EB: This was a state agency?**

TS: Yes, a state agency, run by the state, which is why DiSibio offered me the job. Joan Edwards was sort of the administrator, she had some social workers there and she had people in speech pathology. So, for two years, I would go in a couple of days a week and do the general physical exam and then I would go to Burt's pediatric office several afternoons a week and see children. I did some hospital work, but very little. I would say...

**EB: Some hospital work?**

TS: To take care of sick children. Children who needed to be hospitalized.

**EB: Not working in the emergency room?**

TS: No, I didn't do that. I would take some call, but Burt was very good and whenever there was a child that was fairly sick, I would usually consult with them. Slowly I recaptured over time a lot of my skills. I was reading and attending meetings and watching. That went along fairly well. I guess I was restless. I guess, I was aware, that really finishing my career I was then only forty-seven, forty-eight, forty-nine. I certainly didn't want to continue practicing pediatrics.

**EB: You still had children at home?**

TS: Oh sure, some of them were in college and others in college.

**EB: So, retiring was not in the future?**

TS: Oh gosh, no. I had no money.

**EB: When you quit the medical school and went on sick leave did you?**

TS: No, I didn't quit the medical school, I was on sick leave as a part of the faculty. I never quit the medical school; I resigned as the dean.

**EB: Well, as the dean.**

TS: I was still on the faculty, I just resigned as dean. I was just on sick leave.

**EB: Right, but when you resigned as dean, was there a transition period or?**

TS: No it was almost cold turkey.

**EB: You didn't go back into the meetings?**

TS: No, but remember that Ernie had been there for a year and a half, and I had been meeting with him weekly, along with the other chairs. Ernie had a good feeling for what was going on with the school. The other chairs were very supportive.

**EB: You had a good relationship with him, so he could call on you for things.**

TS: Oh yes, occasionally, sure. He had been my physician who had made the diagnosis of hyperparathyroidism.

I have always felt, and I will come back to this later, nobody wants to hear from the past. When you are past, you are past, get out. Don't be giving advice, don't stand around and say "this or that." If you are asked for your opinion, you give it freely and properly. Ernie and Bob, subsequently, asked my opinion occasionally, I would try to be as helpful as possible. I didn't hang around the hallways telling them what to do. No one likes that. I didn't appreciate it when someone told me what to do and I wasn't going to do that to either of them. I also, at that point, was not very well and I wasn't thinking very clearly. So, Ernie took over immediately and got a lot of support from others. Also, we had a very good staff and Ernie didn't have to hire anybody else. He had people in public relations, business, accountants, assistant deans, and a student affairs officer - Dr. Grant Miller. He had all the chairs, so he knew the departments were going to survive. He had a tough road I am sure. I essentially resigned and I disappeared.

Then four or five months later, when I started at the special children's clinic and with Burt, I began to see people in the hallway. I still was invited to come back and give some lectures and some patient demonstrations. I would occasionally show up at what we called a medical school council. At that point, one of the reasons DiSibio asked me to do this job was that they were going to build a new special children's clinic up behind the medical school, which they did that year. We moved out of the California office in that old building, now there that still stands on the corner of Arlington and California.

**EB: You were still part-time there?**

TS: Yes, I was part-time. I then went and we opened the new lovely special children's clinic. I never worked at the special children's clinic for more than fifty percent of the week. I was always about half time. The way it was worked, they would give my salary to the medical school, so the medical school would then pay it to me. I didn't get a check from the state; they contracted with Burt Dudding and the medical school for my services.

**EB: So you could keep your tenure?**

TS: I got my tenure and all of the benefits. Paid my income tax and withholding and all of that stuff. The medical school would just offset forty or fifty percent of my salary. The same for the money that I generated from Burt's office, part of that would offset my salary. Another part of my salary, I guess, twenty-five or thirty percent was for my teaching at the medical school, but I stayed a faculty member like everybody else. We moved up to the special children's clinic. They built a little pediatric area to my specifications. I had two examining rooms with a two-way



mirror between the two of them so that I could have students and pediatrics residents come and learn out to examine and evaluate disabled and handicapped children.

**EB: Not be in the room?**

TS: No, I had a microphone speaker, I could hear what was going on. I would tell him or her that I was there and even the family. I wouldn't sit there in the corner, which was sort of intimidating. I could watch and hear what was going on from the room next door. I could also review some papers or I could dictate.

**EB: Was this something innovated to have a two-way mirror?**

TS: No, they do that at the Family Medicine Center. Two-way mirrors have been used in speech path, psychiatry and psychology for a long time, primarily to put the young trainee, the resident or student at ease. I didn't do it deceptively, they all knew. I always told the family. I am going to be next door, I'll be back in a few minutes and I will check in.

**EB: The children would never be effected. The children were totally unaware of the two-way mirrors.**

TS: Yes, totally unaware. Most of the children we are talking about were under the age of five. Most of them are pre-schoolers. Having a bunch of adults sitting around of course could be intimidating. Many pediatricians for years never wore white coats and ties and shirts, that made them look formal like other doctors, we would try to be as informal as possible, to try to put the children as ease. So, I did that.

**EB: \_\_\_\_\_? My kids use to scream when he would walk in the room. They were use to doctors because I worked in a hospital, but that man, he scared the hell out of them.**

TS: So, my life from 1980 to 1982 was essentially part-time pediatrics, part-time special children evaluating. The system they used at the special children's clinic when a child was evaluated, involved all of the professionals, speech pathology, social workers, physiologists, pediatricians, we would all sit down once or twice a week and we would discuss the children and because of federal laws we would bring the parents in and talk to the parents.

I recognized that I wanted to do something else, but I wasn't quite sure what. I was sitting at home reading through the literature and there was an article about the Hastings Center in New York written by Dan Callahan, who is wonderful friend now. Dan is a Ph.D. philosopher, who had been editor of "*Common Wheel*" for a number of years. He had hooked up with Wil Gaylin,

M.D. a psychiatrist in New York. They saw the “ethics” handwriting on the wall, I am not sure why, I think that part of it came out of the holocaust, the experience of the German Nazi physicians. It came out of a number of things. There was a concern then about the use of human subjects in research and how do you ethically use humans to test drugs. They decided they were going to start the Hasting Center in an old mansion in Hastings overlooking the Hudson River. It was the home that was owned by Billie Burke the good witch of the west in the wizard of Oz. She was married to Flo Zigfield. Billie Burke got her start in Zigfield Follies. The home was left in somebody’s will, probably hers, to the town of Hastings on Hudson. They rented it from the City of Hastings and they started the ethics think tank. It became a place for professionals of all kinds, mostly philosophers, many doctors, and others to talk in workshops and seminars, about the various ethical issues that were confronting this country. Shortly after its founding the issue of Karen Quinlan, one of the first big cases in life support arose. There were issues of experimentation with human subjects; transplantation was on the horizon, what we were going to do about allocation of scarce organs. All of these issues began to bubble up in the seventies.

The Hastings Center was founded in 1969, but they really didn’t get moving until the mid seventies. By the end of the seventies and early eighties, they were beginning to have a national impact. They put out the Hastings Center Report, in which experts would discuss all of these issues. I was reading one of their articles and I said to myself you know I have always had an interest in medical ethics. This article was talking about Hastings developing a fellowship program wherein they hoped to train the next generation of physicians and philosophers in medicine and philosophy in the issues of medical ethics. I just picked up the phone, dialed the number, got on the phone and introduced myself. I told Dan who I was briefly and my background. He said, “Oh, very interesting, we would like to get physicians to come here.” I said, “I would apply for a sabbatical, because I had now been at the University for ten years and the sabbatical program was that every seven years a faculty could have one. I said I am going to apply for a sabbatical and if I get the sabbatical would you take me there for a year. One of the reasons was Celia and I had kids in college.

We would leave our house and they would go to college and live here. We would go and live in New Rochelle with Celia’s mother. Her father is now dead. We would have free room there and I would just drive over the Cross County Parkway everyday and go to the Hasting Center. And I would study about medical ethics. Dan said I will write your dean a letter that we would be



happy to accept you. I want to meet you first. He said, "One of my colleagues, Art Caplan, who is now the head of the program at the University of Pennsylvania, is going to be giving a talk in Las Vegas. If you could go down and meet him, and interview with him, if he likes you and thinks you would fit in here, (it is a very small group of people) and you get your UNR sabbatical, we will give you a year's fellowship. It wouldn't cost them a nickel. They would give me a small office.

I applied for the sabbatical and I got a lot of support from Burt Dudding. When Burt came here as chairman of the department of pediatrics, one of the reasons he came here was the episcopal bishop agreed to let him finish his seminary work here. Burt ultimately was ordained by the episcopal bishop of Nevada and now actually works on Sundays up at Episcopal Church on Seventh Avenue. He was interested in medical ethics so he supported it. Ernie Mazzaferri supported it and Bob Daughtery had just shown up as the dean, and he supported it. I said to them and I wrote a long proposal that I would go to the Hastings Center for a year, I would study medical ethics and I would come back and introduce medical ethics into our curriculum in a formal way. Also nationally the AAMC pushing for changes in curriculum. We wanted more primary care that we talked about earlier. They also felt the need to have more experience with business. They saw managed care on the horizon, but also issues in ethics, because of all the things that I have mentioned, transplantation, people being kept alive on machines, do not resuscitate orders and all of that stuff. So, I applied and I got the sabbatical and Joe Crowley supported it.

In August of 1982, my son, Geary, and I drove across the country; he was going to school in New York. He was a student of the Parsons school of Design. My number three son Geary. We drove across the country, stopped along the way and visited relatives. A few weeks later, Celia, after getting the house in order, and having the other kids here all organized in college, and two were still in high school. She flew to New York. We got ensconced in her mother's home. For the next ten months I would drive fifteen minutes over to the Hastings Center, just like any other businessman. I guess so nine to five I would go to meetings and on the weekends, I would make rounds at the various hospitals in New York. I would go to various places with members of the Hastings. I was essentially a student. Dan Callahan and Art Caplan were my mentors. They helped me learn the literature. I bought a big library. Actually Claude Howard gave me a grant, he had also given money to the school, but he had given me a couple thousand bucks worth of

books and journals. I totally got out of pediatrics and I essentially studied and read ethics until I was blue in the face.

**EB: Where was your salary coming from?**

TS: The sabbatical. Oh sure, you get two choices in a university sabbatical. You can go for six months at full salary or you can go for twelve months at two-thirds salary.

**EB: But, you weren't working at the special clinic anymore, so your salary had to come down?**

TS: No, it came from the university. Remember children's only reimbursed the university for my salary, at that time.

**EB: If you didn't have that, you are still entitled to the salary.**

TS: I could have done anything else for the university, but the university set my salary. I was full-time and I had tenure. For the sabbatical year I think that may be the regents who pick up part of it. I decided to go there for a year at two-thirds salary. One of our former residents Kay Walker, who was just finishing her residency went over to the special children's and worked there for a year. The money went to her salary, because she was on the faculty. She covered that until I came back. I did come back and work at special children's for another three years after I got back. Because we had to generate part of my salary. While on sabbatical for that year, I didn't have to worry about that. I got my check every month in the mail.

**EB: What was it like there?**

TS: It was marvelous. It was like fifteen or twenty very bright people who came in the morning at eight o'clock and had coffee and a few donuts; probably more fat and sugar than they needed, then they would all disappear, until lunchtime. They would all go into their offices and they would hook up their computers and read their literature and they would write papers and they would respond to Peter Jennings, the New York Times, or anyone calling and asking what do you think about Karen Quinlan or what do you think about transplanting the heart of a baboon into someone. All of the basic ethical kinds of questions and then they were writing their papers.

**EB: Who was supporting this?**

TS: It was all supported by grants.

**EB: Who?**

TS: Ford Foundation, Robert Wood Johnson, and others. Tons of grants plus an enormous fund raising effort.

### **EB: Pharmaceuticals?**

TS: No, I don't think that they took pharmaceutical money. Then lots of people who died left money to the Hastings Center, and they had several thousand members who all contributed money on a volunteer basis. It is mostly grants and also a lot of federal and state contracts to do a study. The congress for example wanted to know what policy decision should be for example, organ donor program, so they would go to places like this. There are a lot of them in this country now. The Hastings Center was the only one, at the time. It was the first and only.

### **EB: It must have been great minds?**

TS: It was wonderful minds. At about the same time, the Kennedy's (whole family) funded the Rose Kennedy Center for ethics at Georgetown University. They put out The Encyclopedia of Bioethics and they are very well known. Over the country these places were springing up because local hospitals and medical schools were all dealing with the same problems. When do we turn off the machines that support life? What are the ethic issues to transplant organs? So, it was wonderful. Then what they would do was usually on Thursday or Friday each week, people from all over the country would come and they would put them up in some local motel or hotel. They might have in their conference room forty or fifty people, all of whom from around the country were studying the same issue. The issue was let's say, how to establish a transplant organ donor bank that would be ethical, fair, etc. They would sit around and discuss, then they would write papers and publish them. A lot of that became policy at the state and federal level. I was just sitting around like a sponge soaking up as much as I can. They didn't ask me my opinion; I didn't have anything to give really. Although having been a dean of the medical school, I was the first dean ever to go there, they didn't have that many physicians. Initially there weren't that many physicians. Most of this was philosophers, theologians and lawyers. So, what they were trying to do and I was one of the first there. They wanted to get more and more physicians knowledgeable and trained with the hope that medical schools would begin to introduce these issues into the curriculum, but also hospitals would have some physicians who understood both sides of the fence, understood what medicine was about to take care of sick people. So, when I came back Sister Peter Damian asked me to help them start their first ethic committees at Saint Mary's which I did. I helped start the one at Washoe and I helped start the one at the VA. I am not sure they need them anymore, but anyway I was there for one full year.

My daughter, Leslie, the youngest, decided to come and spend six months at Iona College, which was the college associated with the Prep school that I went to. We lived through one of the largest blizzards on record; it was the blizzard in March of 1983. Celia and I had gone to an ethics conference at Harvard in Boston and they closed the conference very early on Friday afternoon and told everybody to go home because they were going to close the airport in New York. We got on train and took it to New Rochelle. By the time we got into New Rochelle that night, I will never forget it, there had to be three or four feet of snow. The train almost couldn't get through.

**EB: It crippled the whole East Coast.**

TS: Leslie and her grandmother looking out the window at home seeing the snow. We were on this train; we finally get into New Rochelle about midnight. I walked through the snow, three or four people got off of the train, and there was one cab there. He said we are finished. We are closed down for the night. I said, "My wife and I can't stay in this dingy railroad station, please, take us home up North Avenue." He said, "Well I will try it, but we may only get half way." There wasn't a soul to be found. He gets to maybe two or three houses from Celia's house and essentially we are stuck. We trudge home and finally walk in the door.

That summer, June 1983, we took Leslie and we and did our grand tour of Europe and came home. My mother had been here living in Reno. We brought her out in 1980. She lived with us for a while and then we had her in a nursing home because she needed to be cared for. We got home on the Fourth of July weekend and I think that she died a couple of days later. So, the summer of 1983 was an eventful one. I came back quite flushed with all of this new stuff I had learned. A few days later the dean and Burt Dudding, said, okay we want you to start putting together a curriculum so we can introduce it. Go through the usual process of the University, which can be very tedious. You have to go through committee after committee. So, I wrote up this proposal.

In the meantime I had to make a living, so I went back to the special children's clinic and back to Burt's office part-time. Now I was doing approximately half time at the Special Children's Clinic and about a quarter time with Burt in his office and about a quarter time putting together this curriculum which eventually was approved by the faculty of the school. Starting the next year, which would have been the fall of 1984, I started teaching medical ethics to medical students in a formal way.

**EB: That was the first program they had here?**

TS: Yes.

**EB: What about other schools, at this point?**

TS: Others were beginning. Some were ahead of us of course. As a matter of fact, I almost did the same thing that I had done when I was putting together the conversion grant in 1976 and 1977. After it was approved I traveled around the country, not only to see how our transfer students had done, but also I wanted to see how various schools were developing their curriculum. I repeated that process in 1983-4 and got a grant. I think that may be Burt Dudding gave us the money out of his travel budget and I think maybe the dean. I am not sure. I went to a number of schools, which had already started programs in medical ethics. One was at Penn State, Southern Illinois University, Eastern Tennessee College of Medicine, etc. I went and spent two or three days at each. I sat in like a student and listened to their lectures and talked to their faculty. At that time, all of those places and many others had mostly Ph.D. philosophers and theologians as their faculty. They themselves were looking for physicians. I learned a lot from others watching how they did it. Things that worked and things that didn't. This whole movement was now beginning to explode all over the country.

When I was a medical student, I don't even remember a discussion of the Holocaust or the Nazi doctors. I think that in those days medical ethics was more medical etiquette. You didn't advertise. You didn't perform abortions because it was illegal.

**EB: That was not on a religious basis?**

TS: No, it was just illegal. You didn't have sex with your patients. There were things, that I would call professional etiquette and professional ethics, not medical ethics in the sense of patients and physicians sharing and making difficult decisions, particularly in a world that is multicultural and diverse group of people. Not everybody believes the same way about abortions, in vitro fertilization, and life support systems.

**EB: When you were at the Hasting Center, did you have any problems with your own religious beliefs and their decisions on certain things, such as abortions?**

TS: To some extent, but you have to understand that these were all independent thinkers, they didn't come up with a decision.

**EB: But they were called on for a group decision.**

TS: No, they weren't, they were called on for individual decisions, and often I would hear Dr. Callahan say one thing and one of the other people working there contradicting or argue the other way. That is what made the place so fascinating. There was no company line. They argued among each other. They were civil about it. They didn't scream and yell and hit each other. As a matter of fact, if you look at the Hasting Center report on many issues there would be three, four or five sign their name to one position and there would be three or four or five who signed their name to an alternate position.

**EB: Okay, that might.....**

TS: There wasn't a company policy.

**EB: I see.**

TS: They weren't putting out the Hastings Center's opinion. There were many opinions of many professionals.

**EB: You could extravate from those whatever you wanted?**

TS: Absolutely, if they asked my opinion, I would give it, but as a student, I was essentially a student there studying, I didn't say an awful lot, occasionally, they would say to me, "What do you think?" I would respond. To the extent that it challenged by thoughts about medicine, yes it did. It challenged lots of my thoughts, not only what I knew was the essential feeling about medicine, at least organized medicine and of course generally organized medicine tends to be conservative. The AMA does put out positions and they are frequently challenged, if not in Congress, in courts, or whatever. So, there was a lot of intellectual ferment and differences of views, tough decisions, right down to the one on abortion, when did the life begin. If you feel that life begins at the moment of conception, then an abortion is immoral. If you don't believe that life begins later than conception or at birth, or if you believe the mother's rights supersede the infants rights, whatever you happen to believe from your background, you have to work through all of those arguments. Was it legitimate to mix an egg taken out of a woman and a man's sperm in a petri dish and call it a jar and call it a human being, at some point, All of these issues were looking at fundamental value systems, basic values of people. What makes it difficult in today's medical world is you have a mixture of patients, physicians, nurses and hospitals that come to an interaction, all with different value systems. Part of it was a challenge to myself. Celia and I would sit at night and talk about these issues. Also, how would I go back to Reno and how would I introduce these things to medical students without proselytizing. It wasn't my role