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David Prescott, M.D. Interview for the Boonshoft School of Medicine 50th Anniversary Oral History Project

David Prescott

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Interviewed by: Kirsten Dilger

TRANSCRIPT

David Prescott
Kirsten?

Kirsten Dilger
Hi, are you able to hear better?

DP
Yeah, so I'm, I'm still getting an echo, but this is probably the best we can do. So, we'll just have to put up with it.

KD
That sounds good. All right let's get started. I just basically, I'm just asking about your experience as a student at the Boonshoft School of Medicine. So, the first thing is just state your name, your class and what you do right now.

DP
David H. Prescott. M. D. Class of 1981, which was the second class to matriculate and I am a family physician. In part time, heading towards full retirement practice.

KD
Very good. And so why did you decide to go to Wright State for medical school?

DP
I applied to the total of seven, I think seven medical schools. And by the time I graduated from Wittenberg University in June of 1977, six of those schools had decided not to invite me to join them. Wright State had me in a limbo. I guess I was on a waiting
list, and it was in the middle of July of 1977 that I received acceptance. So, it was one of the schools I was interested in attending, and it was the only one that was interested in my attendance. So that was, made it kind of simple.

KD
And what was the application like for Wright State?

DP
The application… well, of course that was quite a long time ago so I don't remember specifics. I remember I filled out a lot of forms for all of the schools and corresponded back and forth. I think I had personal interviews that, well, I know I did at Ohio State, I know I did at Wright State, at Cincinnati, at Case Western Reserve, and met with several individuals who would have been probably on the faculty at that time. Beyond that, I don't remember that it was terribly stressful, other than I hoped to go to medical school and these were the people that would make that decision.

KD
Alright, and so then can you tell me about some of your experiences during your first year at Wright State?

DP
Okay. As I indicated, I was in the 2nd class to enter the medical school. The 1st class had had 32 students, our class had 48 students + 2, so we started with 50. There were two women from the first class who had not been able to advance, so they joined our class, so we started with 50. I lived in an apartment by myself near the school, within a mile, made a few friends fairly quickly as the school year began. But one of my earliest recollections was the change from high school and from college. Because, I would say, I went through those programs fairly easily, and if I can use an analogy of big fish in a small pond. When I got to medical school, even though I had a small class, I quickly realized that I was now the small fish in the bigger pond. For the first time, I really met people who were significantly intellectually superior to me, in terms of their grasp of material and ability to understand the material seemingly instantaneously, and it was a struggle for me. And at some time during that first year, I made a good decision. I realized that I was struggling and I reached out to the school for help, and got some help academically, but also some help from a mental health standpoint and had some counseling sessions and such, and was able to develop a strategy that worked for me that allowed me to make it through that first year, which was especially challenging.

KD
Okay, and so-
DP
Um…

KD
Yeah, keep going.

DP
Well, I'm just thinking, you know, having only 50 students, we had all in-person lectures, and I think we took a recommendation from the class ahead of us and set up an organization within our class who… someone was assigned to take the notes for every class. All of the classes were videotaped at that point, so that person could go back to the videotape and complete their notes in a comprehensive fashion. We had students who transcribed and typed up the notes. We had students who saw that the notes then were mimeographs probably at that point. And it was not a requirement that you do this, but there was a small fee if you chose to take advantage of it and by the next day, with very few exceptions, those transcribed notes were in our individual mailboxes. So that was a big help. I still took notes in all the classes but it helps to fill in gaps that you might miss and that helped us to study. I had several other students that I studied with a good bit, and they were very helpful to me and encouraging and it was just- it was exciting to be in that situation to have achieved that portion of my goal. Another thing that has always been pleasing to me, or impressive to me- and I've mentioned this to many people through the years- since being in just the second class, we actually could see evidence that the faculty and the administration was interested in our feedback, and we would fill out evaluations at the end of each class session, at the end of each quarter, if you will, and we could actually see things change from quarter to quarter and from year to year. So, it wasn't like they just took all those evaluations and put them someplace. It was pleasing to me to see that my feedback was helping to formulate and grow the school's academic program.

KD
And that's kind of the benefit of having, like, being one the first classes is, helping.

DP
Yeah.

KD
With that, can you describe a little bit more about your experiences with the professors and the faculty? What was that like for you?
Just this morning I was, I was trying to think back through some, some faces and some names and I can't remember that very many, but, I remember that the clinical faculty with the basic sciences were paid faculty and they seemed to relate well, and provide information in a good sense and they were available to us out of class. And I think that the heads of the various academic departments, like surgery or anatomy, or Internal medicine, or whatever, I believe I'm correct, that those were also salaried positions, but I believe that a lot of the clinical faculty that we met along the way were volunteers from the community, being that it was a brand new program, and I can remember just feeling the excitement and the interest and the pride that they showed in having the opportunity to participate again in a medical school academic environment. And I was always very appreciative that, you know, so many people were taking time out of their schedules and their work situation to provide often, you know, one-on-one instruction and real-life experience and such.

And one of the super unique things about the Boonshoft School of Medicine is the fact that there isn't a hospital to do it. So, tell me about some of your experiences in the surrounding hospitals during your clinicals.

I've always thought that that was a bonus, was a plus, in having so many different experiences to learn in. We had both classes and rotations at the Brown V.A. hospital. We had the Dayton Children's Hospital. We had St. Elizabeth Hospital, Good Samaritan, Miami Valley. I never had any clinical rotations at the Air Force base, but I know some of my classmates did, but even those as the main ones in Dayton, and then had experiences in surrounding facilities in Xenia, and I just can't think of all of them right now. But again, you get a different experience in every place. You get an idea about different people’s priorities. It wasn't just a strict curriculum, you know, you've got a lot of individual background into that, and I think it made it a lot more interesting over the 4 years to be in all those different places and learn from so many different people.

So, one of the biggest things in medical schools is Match Day, do you remember what yours just like?

Match Day, you know, I don't think it was a big deal at that point. I don't remember an organized event. I don't, you know... I've seen pictures and read stories and such
through the years of Match Day, and I just, I don't have any recollection of how that came down, or what transpired, really. I think I got a piece of paper at some point that listed the program that I had matched with, which was Mount Carmel here in Columbus, and it maybe listed the others that I had entered in my match and the order in which they fell. But I think the excitement and the hullabaloo of Match Day I think that came after my time there. But I can remember interviewing and I interviewed at four. Not four, maybe six programs in Ohio. Three in Dayton at Miami Valley, and at probably St. Elizabeth and Good Samaritan and three programs here in Columbus, Mount Carmel, Grant, and Riverside. I don't think I interviewed at Ohio State, Maybe I did, and then I had taken in our senior year we had to complete, I think, seven months of elective rotations out of the ten months that were available, and I spent the month of October of my senior year driving around the South and I interviewed at, I think, nine different programs in Georgia and, South Carolina, North Carolina, Virginia, and Maryland, and that was… I spent about three weeks or so doing that and that was a great experience again, seeing a lot of different people in different environments and I think that helped me greatly when I completed that to feel confident and comfortable choosing the program that I did, and not going out of state. That just felt that worked out better. But, If I had not done that, I might have always wondered well, you know, was the grass greener on the other side of the fence. At least what I did, and how I did it, I think worked out well, and in my favor in helping me to make that decision.

KD
So, how did Wright State help your early career? Like, what lessons did you take from Wright State when you started out?

DP
Well, I was always of the thought that I wanted to go into primary care, and there was debate in my mind between whether that was family practice or pediatrics. Primarily, I mean, I knew I wasn't of a mindset and such as a procedure person, and was not interested in being a surgeon of any kind, and I didn't think I had the… I don't know if I'd have had the aptitude, but I just didn't have the interest and the mindset and such. Perhaps the attitude. So, going to Wright State was very helpful, because that was then and I believe still is now, an emphasis of the program is in primary care, and three of the first five names that I wrote down this morning, as I was thinking about professors and teachers and mentors, were family physicians that I met at Wright State. One was the chairman of the department when I was there, Dr John Gillen. Another was Dr. Mary Pryor, who worked a good bit at Children's Hospital but did a lot with female adolescent health and such. Another was a family physician in the community, Dr. Clem Kirkland, whose practice was down near the Dayton Mall, down in that direction. Those were all people that I spent time with and did clerkships with, and I just think helped me to really
appreciate the impact that a family physician could have. So, going into a family practice residency where the residency director was a very experienced family physician from the Columbus community, he and his brother had been at a family practice group for many years together, and he was one of those folks who was pretty down to earth, said what he meant and meant what he said, plain spoken. And I remember, I think it was somewhere in my first year, we had rotations and we were starting to see some patients in the family practice center and he had some little interviews and mentoring sessions with each of us, and I can remember sitting down with them, and he said, “Dave, you know, you are a plodder”- P L O D D E R- and he said “That's okay”, because they were already seeing that I just wasn't comfortable in seeing the number of patients in the family practice center in a period of time- you know, in a morning or in an afternoon- that some of my peers were. And he said, “You're going to be a plodder, but that's okay. You're going to take time with people, you're going to listen to people.” I think he said, “and they're going to love you for it.”

KD
And so that's kind of why you picked primary care?

DP
Yeah, and he was right, and I had to overcome some others through the years who didn’t understand why. I can remember the first practice that I joined after I graduated from residency, which was I was the fifth doctor in that practice and the other… I had replaced the senior physician in that practice, who had retired at age 74. Several of the others were pretty high-volume providers and I can remember sitting in monthly meetings with them and they'd say, “Well, you know, you're coming along and you're kind of slow, but once you get to know the people, you'll go a lot faster.” Well, that never really changed, because I wasn't interested in that and I don't think they ever understood that. And I can remember we were in various business relationships with various entities here in Columbus, and the first one of those was with Ohio State University. I can remember sitting in one of those monthly meetings, and one of the bureaucrats from Ohio State, who was in charge of looking over our practice, you know, we're just sitting around having our meeting, and he turned to me and he said, “Well, you know, if Dr. Prescott only wants to work half as hard as everyone else here, I guess that's his choice and I guess that's your decision to make.” So, but it worked out well, and indeed my patients and I have had a wonderful relationship through the years, and I continue now to have just a very limited practice that I make house calls on, and I'm gratified to know that these people don't just see me as some doctor that they see, but they see me as a friend.

KD: And making that personal connection is important.
DP
Yes, it is. Yes, it is.

KD
So, my liaison at the medical school always talks about all the external activities that the classes had outside of the medical school. Do you have any really good memories about all the social events you did with your class, like tell me about your relationships with your classmates?

DP
Again, this may have had more to do with the time that we were there and that the school was just getting started. I remember going to a few informal parties, especially in the first year, maybe on campus, maybe just for a few beers or something. I remember playing softball in the spring, and I don't know if we played anybody else other than the class ahead of us, I can't recall that. I remember a triple that I hit, one of my few athletic achievements of note in that game to score a couple runs. As I said, I had probably out of our 50 students, probably a half dozen that I palled around with more who were… that we studied with and kind of hung out together. I was engaged at that point. I got married just before my sophomore year began. So beyond that first year, we had, I think maybe we had a Christmas get together and some things like that, but I don't recall that I was terribly involved, and most all of us, as I recall, you know, lived independently and around the community, and at least for me, I was not allowing myself a lot of free time at that point, because I really felt the need to study and things still weren't, you know, coming that readily or quickly or easily, and so I really had to burn the proverbial midnight oil to try and stay in contact. But I don't remember any bad experiences. As I said earlier, you know, I appreciated it early on that I was in a different stratosphere, a different level as far as students and academic performance. I was truly in awe of a few of the students in my class and their perception and their grasp of information and tying it together and the context that they were able to come up with, which were just above me, and so it was fascinating to watch. To see what they were able to accomplish and, you know, I'm just trying to think- and this is sad- but some of this may be just kind of be the mindset of physicians who are kind of trained to be independent and think on their own and such. I can't say that I have any close friends within my medical school class. I'm trying to think of the last time that I spoke with anyone in my medical school class, and it may be [when] I went to a couple of alumni association events through the years. There was one here in Columbus at the Ohio stadium when we went on tours of the stadium and had a meal and such together, and that's been at least ten if not fifteen years ago, and that may be the last time that I've seen any from my class in person. There are several others who are here in the Columbus area that I used to run into
when I was more active in a hospital setting, we’d see each other in a hospital and such, but that hasn't happened in a long time. One of my classmates who had married another of my classmates, he died unexpectedly four or five years ago or so, and I remember sending my classmate, who was his widow, a sympathy card, and finding out about that. But I would just say this for what it's worth, I think that's something that the medical school could do a lot better job of, other than hearing occasionally from someone looking for a donation. I can't remember the last time that I've really heard from anyone representing the medical school about any kind of an event promoting any way of keeping in contact with other classmates, and then, I guess it hasn't been as important to me that I haven't launched a campaign to address that. But that would be one thing that I would certainly recommend, right from the outset of graduation, that the school could do a much better job in helping students from each class to stay in contact if they chose to, and because there are so many people in my class, I'd like to know how they're doing after all these years, and I just have no good way... and I guess I could contact the school and maybe they could help connect to me, but there hasn't been anything done to make it easier.

KD
Yeah.

DP
Yeah.

KD
Yeah, that's fair. And it's hard to.

DP
Yeah.

KD
You get out of school and then, like, what happens with everyone?

DP
We get into residency, you get into marriage, you get into children, you get into activities. And I've spoken with other friends that I have who are physicians from other areas and other schools, and I hear about them having reunions, and I hear about them getting together, and I hear about them having conversations, or I read about it, you know, and that just has not been something that has been a part of my experience. So, I'm sorry if I'm getting off topic a little bit, but just some of the thoughts that I have.
KD
No, you're totally good, and this is an interview about your experiences. So, I want to hear it all.

DP
Okay, fair enough.

KD
So, we're kind of coming to our final questions. So, how do you think that medical school has changed over the years? Like, what have you seen since you graduated?

DP
Well, I continue on that same thing. You know, I live in Columbus, I went to undergraduate school at Wittenberg University in Springfield. I was very active in my fraternity there, and have continued to be ever since I graduated. I've served on our graduate association board ever since I graduated, so, that's 1977, so you can add it up. I go to Wittenberg, I give money to Wittenberg, you know, not as much as they'd like, but some. I remember giving money to Wright State once through the years, at least. I guess, you know, it's a different time, a different mindset, a different expectation, but you have your first love and that, for me, has always been Wittenberg, and I've always been more involved there and more interested. And I hate to say it, but I don't think I've been on the Wright State campus since I graduated in June of 1981.

KD
Oh my goodness!

DP
And I don't think I have been inside the medical school building since that time. So, how it has grown, how that has changed just from a physical plant standpoint and such, you know, I've driven by it and can tell differences and such. But for whatever reason, I've just never felt the need or the desire to do that. So, in terms of how it has changed, you know, I know it's grown, I look at periodic information that I receive in terms of, like, match day results and where students are going and what they're going into, and it seems to me that some of that primary care emphasis has been lost through the years. I understand difference in people's expectations, and I was just reading an article in the Journal of the American Medical Association the other day that talked about the... well, several things, it talked about the decrease further in primary care in just private practice and that the percentage of residents going into practice situations owned by a third party, whether that be university or private health organization, continues to rise. I think the latest numbers were like upwards of 70%, and I never wanted to start my own
practice- I guess some of those towards the end were third party owned- but I always felt as if for the most part that it was my practice. The last one that I was in kind of punctured that bubble, but we won't go there. But just some things like that have kind of certainly changed through the years, and I would say this. If I were turning the clock back forty years and looking to start medical school at this point, if it involved all of the information that's now available and the technology and everything, I would like to see... every so often you see a percentage about the amount of information that has been grown, whether in medicine or whatever field it is, you know, since a certain time, and I can only imagine that since the time I graduated from medical school forty years ago, the amount of information, medical information, that's known now as compared to what was known for me to learn in 1981, I would probably pass out immediately. So, to try to know, or even think I knew that much more or would have to know that much more, I am totally in awe of today's students still taking on that task and that challenge. I had a couple of my colleagues through the years who have had children who have gone into medical school and just talking with them a little bit and what their experiences have been like, I'm really just in awe and I'm so appreciative that, you know, people still want to do that. But, you know, I'll just leave it at that.

KD
Alright, any final thoughts? Anything you want to share with me before we kind of end this?

DP
Well, as I said when you asked me the first question about why I chose Wright State… bear with me just for a minute. I'll just say that, [long pause], as you might sense, Kirsten, I'm kind of an emotional person.

KD
Yeah, that's okay.

DP
Especially about things that are important to me.

KD
Absolutely.

DP
And I would just say, I would just say that I remain very appreciative [long pause] that Wright State gave me the opportunity, and that I hope, and that I would like to think, that
I've done the best I could to show my appreciation for having had that opportunity, and for upholding my end of the bargain.

**KD**
You make me teary eyed now. But you definitely, I mean, you're an excellent graduate for sure.

**DP**
Well, you're very kind to say that. But I appreciate having the chance to speak with you, and if I can offer anything more, feel free to get back in touch with me, and what is the intent of the work that you're doing, and I'm sure others, in compiling this history? What will be the final result?

**KD**
The final result is it's going to be put online for the university archives, so people can listen and share in your guys' experiences. It will be a part of - the Boonshoft School of Medicine is going to have its fiftieth anniversary soon, and so it will be part of that celebration.

**DP**
Okay, so, can I expect to be notified in one way or another when your work is completed, and when it is placed in the archives that I might review it?

**KD**
Absolutely.

**DP**
That Would be great. That would be wonderful. Yeah.

**KD**
The one thing I do need from you is the release form. I think I sent it to you. That just details some of the legal things. Yeah, it's kind of like you have to have it, but it will tell you about the legal things and the restrictions that you can and cannot have, but. we can talk more about it.

**DP**
Okay. But would that be on the... you sent me two emails yesterday. The one was the one from Cisco Webex, and then there was one from you. Was it on that one?
Um, it might have been. I'll just send it in the form again.

**DP:**
Why don't you resend it, please? You know, I would appreciate that. The start of this session indicates at least for me, you know, that I'm not real technologically savvy, I feel like most of the time anymore. Anyone that's, you know, 20 years or more younger than I am, that they and I are speaking a different language, and that I've not availed myself very well of the opportunity of learning that new language, and, you know, knowing how a lot of these things work. So, if you will forward that to me again, I'll be happy to review it and sign it and send it back to you.

**KD**
Perfect, and let me know if you have any other questions. I'm- you've got my email, and this project is ongoing. I have around 17 interviews to do, so-

**DP**
Okay, okay. And are you doing all the interviews for this, or do you have others helping?

**KD**
I and doing all the interviews as, like, the archives graduate assistant. So.

**DP**
Okay, and that is your role?

**KD**
Mm Hmm.

**DP:**
Archives, yeah, very good. Well, that's great. Well, I love history, so I appreciate it and applaud you for helping create some history here, or at least to detail and compile.

**KD:**
It works out really well, because I'm the only historian in my family, and the majority of my family members have gone into the medical field.

**DP:**
Oh, okay.

**KD:**
So, it's like, I don't know as much as them, but I have a good grasp of it, I think.
DP:
Sure, very good. Well, that's great. That's great. Well, it's been a pleasure speaking with you. Thanks for putting up with me.

KD:
Of course, thank you for putting up with me.

DP:
Okay, that's great. Well, you have a wonderful day. All right?

KD:
You, too. Thank you.

DP:
Thank you. Goodbye, Kirsten.