

Wright State University

CORE Scholar

Boonshoft School of Medicine Oral History
Project

Boonshoft School of Medicine

5-5-1984

Richard DeWall interview conducted on May 5, 1984 about the Boonshoft School of Medicine at Wright State University

Richard DeWall

James St. Peter

Follow this and additional works at: https://corescholar.libraries.wright.edu/med_oral_history



Part of the [History of Science, Technology, and Medicine Commons](#), and the [Medicine and Health Sciences Commons](#)

Repository Citation

DeWall, R., & St. Peter, J. (1984). Richard DeWall interview conducted on May 5, 1984 about the Boonshoft School of Medicine at Wright State University. .

https://corescholar.libraries.wright.edu/med_oral_history/34

This Oral Recording is brought to you for free and open access by the Boonshoft School of Medicine at CORE Scholar. It has been accepted for inclusion in Boonshoft School of Medicine Oral History Project by an authorized administrator of CORE Scholar. For more information, please contact library-corescholar@wright.edu.

WRIGHT STATE UNIVERSITY
School of Medicine Oral History Project

Interview date: May 5, 1984
Interviewer: James St. Peter
Interviewee: Richard Dewall, M.D.
Chief of Surgery, Cox Heart Institute
Interview 1

[Beginning of recorded material]

James St. Peter: My name is James St. Peter and this is first in the series of interviews with Richard Dewall, prominent Dayton surgeon and author and co-author of major feasibility studies calling for the development of the Wright State University School of Medicine. The date is May 5th, 1984. The time is three thirty p.m. and we are in Dr. Dewall's office in the Bank of Ohio building in downtown Dayton, Ohio. Dr. Dewall, can you tell me a little bit about your background before you came to Dayton?

Richard Dewall: I took most of my upper education at the University of Minnesota which was undergraduate school, medical school, residency and faculty at the University of Minnesota beginning after service. January of 45' I began and I left Minneapolis in the fall of 62'. While at the university, I was in the medical school and became interested in research activities. I did a moderate amount of scientific writing and had good research experience as part of my surgical residency training program. The university had a very attractive academic atmosphere which was very exciting and a great deal of enjoyment and as I saw it the medical school had a great enhancement to the total community much beyond its original walls. From Minnesota, I went to Chicago Medical School was Chairman and Professor of Surgery.

J.S.: That was your first position after you residency?

R.D.: Yes. While I was on the faculty of the university, when I finished my residency for a couple years before I left for Chicago and of course after then the education, research and all that goes with the so-called academic scene and surgery at Chicago Medical School for four years. I certainly enjoyed the community experience with my various colleagues in the academic sphere and also the private practice sphere in Chicago. They were very generous and kind to me there

and certainly felt that participation and an educational scene was an opening experience and made a . . . added a great deal of substance to the practice in medicine.

J.S.: When did you come to Dayton?

R.D.: I came to Dayton in September, August I believe it was, of 1966. The Chicago Medical School, at the time, I left a number of the department chairman had become quite disenchanted with many of the policies of the school as unfortunately happens in medical or in academic situations now and then, and was brought to Dayton actually by Dan Talbert to participate in the Cox Heart Institute and surgical research and activities there. Of course through Dan Talbert (?) for a clinical outlet and surgery, I was introduced to Robert Taylor and Charles O'Brian and joined them in practice in Dayton. The participating aspect at the Cox Heart Institute and my salary was quite inspired by Eugene Kettering in part for that first year in order to uneven my transfer.

J.S.: When you came to Dayton did you get involved with the Montgomery County Medical Society?

R.D.: Not terribly active in the society, no, but I did appreciate that the high quality of practice existed in Dayton, high level of patient care, and high level of education within the hospitals with the ongoing residency training programs and continuing my past experience was interested in an educational activity and it is of consequence I started the general surgeon residency program at the Kettering Hospital shortly after I came to town within a couple of years.

J. S.: Where were most of your residents coming from? The Ohio State and Cincinnati Medical Schools?

R.D.: As the Kettering Hospital, a Seventh Day Adventist Hospital, a member of our residents came from the Seventh Day Adventist School at Loma Linda. Probable at least half of them and others were from scattered sources.

J.S.: Did your experiences as a faculty member in Chicago and Minnesota lead you to get involved at Wright State or the Miami and Ohio State Branch Campus as it was in 1966?

R.D.: Well I had a certain amount of background for my interests in it. Coming to Dayton I could see the medical community was very receptive to educational activities, at least I thought they were, and had talked to various people that at one time Dayton actually did compete in competition with Toledo and other areas for a medical school some years earlier and of course Dayton lost out at that time because they did not have a basic state-university system which was the necessary component certainly. But while I was in the stage, after I came to town, I was interested in a medical school and medical school participation and thought that certainly one could be very well adapted to Dayton. In doing this, I did talk to L. Martin who was the manager of one of the Kettering Foundations or I don't know if it was called a foundation or what it was anyway the Kettering family activities over in the Winters Building. Of course through Mr. Kettering and Mrs. Kettering I had become acquainted to Mr. Martin. My conversations with Martin were to just get some understanding and background of Dayton as a potential medical school community and relationship to its past history and competition for a medical school for which they lost out. This gave me a good feeling that the survey was a basic feeling for acceptance of a medical school here if everything could be brought together. Martin sent me over to talk to Bill Ingler who was working with Bob Oelman, I think, at the NCR at the time on his staff in Public Relations. Ingler, of course, had extensive background and understanding of the Dayton community. Bill was very generous and gave me several hours of his time just to discuss the educational scene, the potential acceptability of such a medical possibility in Dayton and other factors of that sort. It became apparent that Toledo had gained the medical school largely because political measures not because the scene was right for it. This created disenchantment throughout many areas. Also paralleling a great bit of this activity was conversations with various people around the community, both lay people and physicians, that the area was basically understaffed for physicians. You would hear lay people complain having to wait many weeks sometimes to get various doctors' appointments just because everyone was too busy. You heard the complaints repeatedly that the men of medical schools in Ohio were least bit interested in the Dayton area. Surveying the County Medical Society membership rolls, less than half were graduates of Ohio colleges. That didn't seem to be quite right. It seemed to me that Dayton would be a very ideal place for a medical school because medical school graduates will tend to stay within a fifty to seventy mile radius of their school of training. This would be one way to bring more physicians into the area, would be to have your medical school right here. Of course, at that time, Wright State University was gaining more momentum as a basic state university and institution.

J.S.: When you were getting your background with L. Martin and William Ingler did you get any sense that the momentum that started in 1958 from the medical school? Did you feel that it was still going and gaining momentum or had it died down?

R.D.: It was very low-key if it existed by that time. I think everyone had pretty much given up hope. To my attention and from what I could see it hadn't been rekindled at the moment. This may not be correct, I might not have talked to the right people but from my vantage point that

had been that case. Of course talking to various people around the medical community relative to that.

J. S.: Was the Dooley committee still operating?

R.D.: I had not familiarity of that at the time. I think it was probably, as far as I am concerned, did not exist. It was probably beyond its function by then and out of activities as far as I know.

J.S.: So in your conversations with L. Martin and William Ingler you kind of got the background about what was going on. What was your next step after finding out?

R.D.: Well, let's see, my next step I think was probably to conceptualize how a medical school could logically be brought into the Dayton community because a medical school is a political animal beyond all else. It isn't something that you just wish was there, whatever the case, it has to go to a political base and it has to be sold on that basis. In order to sell on that basis you have to look at what your competition is and what the precedence are. The tremendous expensive that had gone into the current state schools, the private school at Western Reserve, and the state school at Columbus and Toledo . . . Columbus and Cincinnati, which was getting state funds by then was a city school until a number of years before then state support came into it. Then Toledo, never was really off on the right foot for a horrendous amount of money and from what I could see disorganization that took place and as a consequence the state legislature was extremely disenchanted with the idea of any medical school type of activity.

J.S.: When you came to the area in '66 you hadn't been here very long before you started getting an idea for medical schools. What brought on the idea? It was kind of ambitious for somebody who hadn't been here for very long, wasn't it?

R.D.: It was just an interesting idea. It was an interesting scene, it looked like an ideal fit that should go together. I think I had conversations with Mr. Kettering at one time or another and Don Talbot and others that was a basic interest in the medical school in the area in some fashion or another, certainly in the research activities that existed at Cox, with the new Kettering Hospital, with significant residency training programs that already existed in city in other hospitals. There was a significant mashing of concepts that were drifting out in the community weren't really tied together specifically. Then referring back to the tremendous difficulties at Toledo and the tremendous cost that went into there, you have to look at the cost of putting in a medical school and hitting the cost would be the so-called university hospital so immediately you are talking about one hundred million dollars or more.

J.S.: So you started out thinking of a traditional school of medicine?

R.D.: That was the current concept of all medical schools but as you would think out the whole proposal it would never be possible, politically, to get a medicine school in Dayton on the basis of building a hundred million dollar university medical school hospital at the onset or any projectile period of time. When you look back through history you'll see that actually at Boston Harvard University Medical School that is reasonably well-known for some time, probably the oldest medical school or second oldest in the country doesn't have a university hospital and it never has had a university hospital or such. It had functions through several private hospitals, although the rule now is extremely dominate but I do not believe any of the hospitals are under Harvard Medical School jurisdiction even yet. So this sets a very interesting precedent that you have an outstanding educational institution functioning through community resources. What do we have here in Dayton? A lot of potentially outstanding educational resources and a lot of community resources that were already in existence, it's just a matter of tying them together. That moved on to the next consequence of how would you develop a curriculum and program for a medical school educational activity here essentially using existing hospitals in scene because there are already well over one hundred million dollars, several hundred million dollars, of physical plant in Dayton providing very excellent medical care. There was really no need for a university hospital if you could get a cooperative venture and tie everything together which I thought would be in everybody's best interest. I was consulting with the *FDA*[?] on some programs at various times along there. Minneapolis, Chicago, and down here. I was in Washington at one time and went over to see Dr. Cooper, I forgot his first name, who was the Director of the American Association of Medical Colleges whose main office was in Washington. We discussed the whole possibilities of medical school activities as existed in the United States and the feasibility of bring in new schools. At that time there was a significant feeling that the country was turning out an inadequate number of physicians to meet the needs. The government was starting to put more attention on assisting all medical schools to increase their size and actually bring new schools into being. There is a national credit at that time that was encouraging medical education on that sense. Dr. Cooper very generously gave me a few hours to discuss and mull over ideas on this thing and believe that using existing hospitals in the medical school teaching environment was discussed at some length with him. He directed me to the new dean of the medical school that was getting established in Kansas City, Missouri. I do not remember the man's name, unfortunately because he was very generous with his time, or the official title of the school but it was in Kansas City at that time. This must have been '68 or sometime in that range. I was in Kansas City one time and arranged to see the dean of the school there to discuss with him how he participated in bringing his school into existence and again largely using community hospitals in the sense of tying in the educational picture. I conceptually put a lot of material together in my mind before I started any writing. Then, of course, in order to have it any use whatsoever you would have to tie in one of the universities. I did not think that, I don't really know why I thought that Wright State would be the logical source. I suppose there are much deeper pockets of funding for education than Dayton University would have, that might not necessarily have been true. Whatever the case, I focused on Wright State University

which was getting a lot of attention at that time. It was a growing and exciting school but I didn't really know how to get in contact with anyone out there to get a program functioning, how to develop an interest out there. As far as I understood, Brage Golding the president out there at that time was totally disinterested. Compounding his problems with a medical school with a whole new university that is just getting well underway which he beautifully got on its feet when it received university status. It was just another thing that he did not need at that time. I did not know him and I did not know how to get to him . . . met at a social gathering at Dr. Shuster, Benjamin Shuster's, home one night one of his friends was there, Professor Norm Anon, who I believe was the chair of the Department of Economics at Wright State. I spent a good bit of the evening just talking to him about what the advantages of a medical school would be to the community both providing more physicians to serve the area and providing an exciting educational menu and providing a great many things that schools can do, research activities and many things that a school can do for a community including a very sizable payroll which all communities appreciate. Dr. Anon was very receptive and he said that he would see what he could do to set up a meeting. He arranged a meeting with Dr. Golding and myself just to discuss this possibility. The lunch meeting with Dr. Golding one day,

J.S.: Do you know when that was?

R.D.: It could have been '69, could have been '70 . . . '69. Probably '69 I would guess. We talked about the whole possibilities conceptually of why we would want to do it and what it would mean and how it could possibly, politically, be brought about by keeping economic within reasonable view and then some preliminary work at the economics at that time. If you avoid having to build a hospital you are just looking at a basic curriculum and basic staffing format curriculum. Some of the staffing could be shared with the general university as well as the medical school so you can have a lot of shared faculty and that way it can help keep your cost in reason and help tie everything together. In that fashion, he was really receptive to that idea. I don't recall right now how, if it was Dr. Golding that had me meet Fred White or if I talked to Fred, I think probably Dr. Golding introduced me to Fred White which was his Vice-President just to review everything I had in mind and to get Fred's reiteration of good things I had learned from Bill Ingler. Fred had been in the community for many, many years and had known a lot of the local politics.

J.S.: When you discussing this with Dr. Haddon and President Golding, was there any discussions being that had taken place in the medical societies at all?

R.D.: Not that I knew of.

J.S.: You did not have any contact?

R.D.: I hadn't pushed it that far. It had not come to my attention that there was any interest as such at that time.

J.S.: What about the people at the Kettering Center?

R.D.: There was no act of interest of doing anything about it. I don't recall any real conversation about it, even actually Kettering Hospital was initially meant to be just a 200 bed community hospital that just kind of grew in-spite of itself from that point. A lot of my thoughts together on the issue.

J.S.: In discussion with Dr. Golding, did you convince him right away or did he have to think about it?

R.D.: Well he didn't say no. He introduced me to Fred White and ultimately to Bob Conley. I don't remember how that took place, if there is more conversations in there. I know at one stage, some in that span of time, after I talked to Golding and most of these others, I think I probably already started to gather materials for a proposal because I thought that if one thought medical school was a political animal all they would need to do is develop a good proposal, get all the material together, and then give it to a very interested legislator who would then lobby it on through if you could muster enough forces behind it. So I gathered a lot of material that I thought would answer the very necessary questions that would arise as far as organization and so no. I think Dr. Cooper and the Association of Medical Colleges were very helpful supplying material and I am very sorry that I forgot the name of the doctor in Kansas City that provided me with material. I was able to gather from many, many different sources. So Clara Weisenborn was very kind to me one day and agreed to see me and discuss the whole thing. So I went out to see her at her place and spent an afternoon talking to her about medical education, what it could achieve, how one could go about it, and at that time there was the idea and concept of not really building a medical school because it seemed to rub a lot of people the wrong way, just the idea of a medical school.

J.S.: Why is that?

R.D.: I think that the basic faculty at the university were afraid of a medical school, for one thing. The people in the community just really weren't sure. Some of your positions weren't sure what this would represent in a way and politically a medical school means very big dollars. So when

you say medical school you really turn people off right off the bat. So the idea at the time was not to come forth with an idea to build a medical school but to develop, to build a curriculum and a program to institute a new Ph.D. program and append it to the Wright State Activities and introduce a new Ph.D. in Medical Sciences or a doctor of medicine. It sort of really went through the back door and then agree not through medical school agents but through another doctorate offered by the university. I talked a number of aspects of this nature with Clara Weisenborn and she was very receptive and certainly seemed to be very interested and willing to participate in such activity. Then I believe, I don't what transpired there but ultimately I had the direction from Brage Golding to be in touch with Bob Conley, he of course, obviously talked with Bob. Then as I got in contact with Bob Conley, who was the Dean of Engineering at the time, and worked with him on the idea of writing a proposal. So I talked to Bob to some extent about it, we set deadlines, and I actually wrote a proposal which you don't have here. I don't know if it still exist or not. I gave all my copies out to the Dean's Office.

J.S.: It's still around.

R.D.: It was in a black cardboard copy. It was my original notes and data that I put together out there and then, of course, I spent some time with Bob. With his time we used to go over faculty and salary bases as they existed at the university. Planning what basic salary numbers and budget would be required and kind of come up with a ball park figure of the cheapest it would be to be possible to get into a medical school or a Ph.D. type of medical program.

J.S.: Was this in March of '70?

R.D.: Could be. Could be about that.

J.S.: Cause that was the day of the feasibility study and the first proposal.

R.D.: That's when it was submitted or September of '70? A lot of it could be it might have been the date that I gave my first proposal into the school. That black, hard copy – that black copy that I had out there.

J.S.: How long did it take you to write the proposal?

R.D.: Couple years. Time to gather my material. In that proposal I had the directors of medical education of all of the hospitals in town and they were all quite cooperative to draw up a summary on how they would see their institution participating. I had one of the chapters of all the hospital activities and how each hospital would participate. I talked to every medical organization within a five county radius area, all the county medical societies in a five or six county area and had letters of support from all the medical societies that were included in that original proposal.

J.S.: Did they all cooperate to the same degree?

R.D.: No, I didn't really run into anyone who said this was no good and didn't want to participate even the [unintelligible] Medical Societies, I think it goes out to Preble and Hamilton and Greene. I went to a number of these hospitals and I remember going out to Greene and talking with Herman Menapace, the good surrounding area, and I suppose I spent a couple of years gathering material and putting it together and organizing it to see how it goes. When I finally had that proposal together after some discussion with Bob Conley, I gave Bob what I had done and he transformed it into a more university format which is this blue copy.

J.S.: Did you do most the writing during those two years yourself?

R.D.: Well editing and writing, except where I had the Directors of Medical Education at each of the participating hospitals, they wrote their own sections but other than that I wrote it. I added a little bit of what they had in order to fit it all into place as I saw it and not really know how it would ultimately go and of course it had to go into the university format which Bob handle from that point on largely.

J.S.: So how did you feel when you gave them the study? Did you feel like your role was more or less at an end or did you feel you had to go with it?

R.D.: I figured I had contributed as much as I could at that stage because it started to get into the political arena where Clara Weisenborn and the Dayton Delegation with their past political background and political fights with the Toledo situation knew where to go. I remember Governor Gilligan gave an address out at Wright State, a commencement exercise I guess it was, and he stated at that exercise that he did not want to see any new medical schools in the state of Ohio, knowing that there was a little pressure coming from Dayton. I understand that there was a great deal of pressure brought to Gilligan on all of the existing medical schools because obviously they did not want any competition for the state funds. I think there is a lot of the political documentation

that goes on in this paper by Dr. Beljan that went on to state legislature who ultimately bring that to pass. It was initially the original proposal sent to the Chancellor of whatever board that is.

J.S.: Ohio Board of Regents?

R.D.: Yeah, Ohio Board of Regents. I think basically directed towards developing a Doctor of Medicine program and not with the high falootin' context of building a medical school, the idea of trying to plan that down. Of course, they threw that out right off the bat which Clara Weisenborn and our other local representatives and senators went to bat and did a beautiful job and said okay, on that basis, we will go for a full fledged school as I see it. That's obviously what ultimately took place in a very beautifully illustrated political battle.

J.S.: What were some of the highlights of that political battle, do you remember?

R.D.: Dr. Beljan goes into that much more than I.

J.S.: Were you called to come into Columbus to come before a committee or anything?

R.D.: No. No.

J.S.: Did they keep you updated on the events as they took place?

R.D.: Largely through about Conley.

J.S.: What happen after that? They had the one hundred thousand dollar allocation which led to fifty thousand dollars. Were you brought in at that point?

R.D.: I was pretty well... well that was a part of the planning money that was used to coverage expenses. Also I should mention that the county medical society here gave us ten thousand dollars.

J.S.: Why would they do that?

R.D.: To help out the feasibility studies. This was before we got the fifty thousand dollars from the state and through my friend G. B. Price who was on the Board of Directors of the Iddings Foundation, we got a very sizable contribution from them also to help fund the original drafting of these proposals. Their costs weren't very much because they are primary papers and secretarial expenses and things of that nature. There were no salaries, there was nobody hired.

J.S.: When did you get those pieces?

R.D.: I don't remember. Probably '70. Probably before then this came out in '70, so it has to be '69. '69, maybe '70.

J.S.: So after they got the allocation and the vote came back to Conley to develop a more detail study, did you get involved with that?

R.D.: Not too much with that next drafting.

J.S.: Was is that? Did you feel your role was finished?

R.D.: I didn't really have anything to contribute to that stage. I put together what I was able to do and the rest of it was largely just boiler plate. Putting it into proper frames and references and context. It largely everything that I had put together was incorporated into the ultimate draft.

J.S.: So did you become involved any further in the development of the medical school, like on a consultant basis?

R.D.: No, not a whole lot. I did get involved to some extent with the Wright State Foundation trying to, I had experience at the University of Minnesota where they had a very excellent medical school foundation and seemed like a very good source of funding for the school so I did do a little bit of lobbying through Bob Oelman and the university to see if we could get a medical school foundation. A lot of that time was to get aggressively organized in Wright State University's Foundation in which part of it was a medical foundation at one time but I think that's been absorbed now, just one university foundation now.

J.S.: When Dr. Beljan came to Wright State to interview as Dean, did you take part in the interview proceedings?

R.D.: Yes. I was on the search committee.

J.S.: What was the search committee like? Were there a lot of candidates to be considered?

R.D.: Quite a few candidates came through.

J.S.: How did the committee operate? When was it established?

R.D.: I don't recall. Probably about a year before the dean came on board.

J.S.: Did you narrow considerably?

R.D.: Pardon?

J.S.: Did you have a number of cuts that you made?

R.D.: Yeah, I think it was down to eight or nine prime candidates. I remember that at one time there was a stack of fifty candidates and putting them in order is what seemed to be the most appropriate to narrow it down to a select group to bring in for interviews.

J.S.: Do you know was on the interview committee?

R.D.: I would hate to hesitate to mention right now. There was probably twenty to thirty people on there. A variety from the Children's Hospital was on, a number of doctors and ley people from throughout the community but I am sure those records are available some place.

J.S.: Did you have, when Dr. Beljan and some of the other candidates came in did you have a long series of interviews with them or was it more or less everyone was limited to a small amount of time?

R.D.: Every candidate was in for a couple of days. Three or four days. Some of them were brought back at a later time, I think.

J.S.: Why did you and the other members of the search committee finally settle on Dr. Beljan?

R.D.: I believe he certainly seemed like the strongest candidate.

J.S.: What were some of the things you were looking for?

R.D.: Organizational ability, leadership ability, past experience in a range of activities. Certainly, Dr. Beljan has a considerable amount of organizing experience in medical education at Michigan and in California.

J.S.: How long did it take to actually run the process through? Did it take a year?

R.D.: Well, maybe six months. By then I was not as actively involved with the day to day operations of what was necessary to get going. By the time you are planning a dean, you already have all the state work done to bring the school into existence. Once you have the school in existence, you have to bring in a leader for it.

J.S.: Did you go back Ed Spanier?

R.D.: Yes, I worked with Ed and Bob Conley. They did a lot of work putting together the proposal.

J.S.: What kind of work did you do with Dr. Spanier?

R.D.: Nothing much directly but that was pretty after I was through my report.

J.S.: Did he use your report largely as the basis for the writings further down?

R.D.: Yes.

J.S.: What were your thoughts watching the medical school evolve?

R.D.: It was very exciting to see new faculty come in and new programs develop, search committees and student committees, and that type of thing.

J.S.: Did you feel the development process was faster than you thought it would take?

R.D.: I think Dr. Beljan probably set a worlds record putting things together in a very admirable way.

J.S.: As far as the medical school now, do you see it growing anymore?

R.D.: Growing in stature but not necessarily numbers.

J.S.: What do you mean by getting more quality or developing the quality?

R.D.: More widely known throughout the region and country by whatever means one does. By academic excellence, by research, by the very means of existence.

J.S.: Do you feel it can expand more into the community?

R.D.: Well it certainly can. It is doing a very good job right now. I don't think it is necessary to expand a whole lot more. I am sure there are varying levels of acceptance of this school and students in various areas. To my knowledge, my experience is that students are very well

accepted. I believe that there is still room for improvement and cooperation between city institutions and the medical school. I think there is a certain fear in some of the local hospitals of not wanting to be dominated by the medical school and I don't know if that is a realistic fear. I am not sure if the school want to dominate everybody. They just want to do a good job but you always have people who are guarding their turf.

J.S.: Is there an element of competition between the hospitals and the medical school?

R.D.: I don't necessarily know that there is competition between hospitals. I don't know if the medical school enters in this area as a competition. I think they function pretty comparable throughout all the institutions.

J.S.: Well, thank you very much. I appreciate talking to you and you talking the time to talk to me in your busy schedule.

R.D.: I think I don't have a lot of stories but that's the thumbnail.

J.S.: You provided a view that I don't think anyone else could have provided for me. So, thank you very much.