10-26-1984

Robert Stuhlman interview (2) conducted on October 26, 1984 about the Boonshoft School of Medicine at Wright State University

Robert Stuhlman

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

Stuhlman, R., & St. Peter, J. (1984). Robert Stuhlman interview (2) conducted on October 26, 1984 about the Boonshoft School of Medicine at Wright State University.
https://corescholar.libraries.wright.edu/med_oral_history/65

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 corescholar@www.libraries.wright.edu, library-corescholar@wright.edu.
JSP  Dr. Stuhlman you were, in our last interview this spring, talking last about the pace of the development of the two programs you are with and how they tie in with the school of medicine’s overall development. Where would you say the programs were at when Dr. Beljan stepped out to Dean and Dr. Sawyer stepped in?

RS  It's really hard to remember exactly where they were because in reality the transition from Dr. Beljan to Dr. Sawyer was stretched over several months. The IPL program was very well-established as far as the degree of support services relative to the medical students and the surrounding community I think we were just barely beginning to get into the support of the Biomed PhD program and some of the other postgraduate programs that the course had been fairly well laid out from early on and it’s been just one fairly smooth progression really. There haven't been any major changes. Dr. Sawyer has been very supportive of both the programs The only major change that could have occurred as far as the interdisciplinary teaching laboratories is they required a major change in the curriculum, and that would really come down from the executive committee as opposed to any one individual, regardless of who the Dean is. There have not been any, in the time Dr. Sawyer has come, and most of the programs were in place. There has been some minor changes and hopefully some growth, and progress. Problem areas either resolved or eliminated and other changes and other methods of providing the required material introduced.

JSP  What was the-

RS  The IDTL was essentially well-established, almost to the point of being in concrete. Although we’re certainly not in concrete at any time. The lab animal program, again the groundwork has been laid, the implementation had occurred, the rough spots, to whatever degree possible had been smoothed out and it's really just a continuum. We’re always growing or developing or trying to improve support services. There have been no major changes really from early on.

JSP  What was required of the interdisciplinary teaching laboratories to cope with the advent of a new Biomed PhD program?

RS  Basically to expand, to cover additional students, because the majority of the program
fit in with what was ongoing. The Biomed program of course would take it a couple of 
steps further, be more detailed, more complex etc then for undergraduate with medical 
education. In the area of physiology they would do additional studies, once the students 
had completed there's, they would look at additional data, look at additional readings, 
whatever. It was basically for the program director to supply us with what the needs 
were in terms of the laboratory experiences. There were few, if any, lab experiences 
and where it's only the Biomed PhD individuals involved. They are generally a part of 
one of the other ongoing classes. And so it means a little more time because they do 
some things afterward and they may have their own prep, but it's carried on at the same 
time so it's really, it was not that much different, there weren't that many things that 
needed to be added, anymore supplies, an understanding of some additional pieces of 
equipment, the acquisition of equipment of course and the maintenance of it. But those 
are all in line with what we do anyway.

JSP  What was the feeling and the attitude in the department when Dr. Beljan left?

RS  Of whom?

JSP  Of Dr. Beljan

RS  The feeling of who?

JSP  In your two areas in your two programs?

RS  Well the individuals involved that is the quote workers, the people who do the day-to-
day operations do not have that much contact with Dr. Beljan, as they don't have that 
much contact with Dr. Sawyer or any of the administrative people. There weren't that 
many changes that occurred in our operation, so they really didn't feel that much of an 
impact. They didn't know Dr. Beljan, they weren't really aware of how much support he 
had given, or how much nonsupport he given or whatever. So they didn't feel much 
change. I was really probably essentially the only one, other than Dr. Hallowell, who'd 
been a personal friend of Dr. Beljan's and had come here from California with him. 
And he was not really that much involved in our programs anymore. He had moved 
into curricular affairs type stuff and was involved in teaching and whatnot so he didn't 
feel the impact is much in the IDTL area as he would have had he really been totally 
assistant director. I thought it was a loss. I liked Dr. Beljan very much, I think he did a 
tremendous amount, I don't think anybody could deny that. Some of his methods might 
have been frowned upon by others, but if you sit back and look at the results, certainly 
there is some bad things there, some white elephants, things that occurred, but overall 
I'd say he was the very epitome of the driving force that pulled this school into line, and 
really moved things. I was the only one per se really that was concerned about where 
we were going from here because I didn't know Dr. Sawyer that well. I didn't know 
what his orientation would be, I didn't know his background really was, or what his 
support for nonsupport of service areas would be. So from the standpoint of programs 
and the personnel, I'm really the only one with direct feelings resulting from it because 
no one else really had that much direct contact. They attended the different functions or
whatever, nonetheless a him-and-them type situation. They didn’t have day-to-day dealings with them.

**JSP**  Were you involved with the search process for the Dean?

**RS**  Not directly, no.

**JSP**  Indirectly?

**RS**  Well everybody indirectly in the school was to one degree or another. You know we had the opportunity to meet him, to ask questions whatever. He was of course brought around through the facilities. He seemed to be impressed of course, noncommittal at the time did not have the opportunity to get into any real detail. Service facilities are always, third class second-class citizens, the academic programs are first-class and that's where any coming Dean or whatever really has to concentrate because it's a short time and there's a lot of things shoved at them at once and they have to worry more about the academics because everything else falls by the wayside if the academics is down. That's why academics is first-class. You could have the best support services in the world if you don't have good academics and you'll get the students you will get the support whatever and all the rest of it goes out the window.

**JSP**  In the time since the new Dean has been here how would you characterize your two programs? Have they continued the same pace of development?

**RS**  No. There's no fairly well-established program at the time of the change that has continued to develop at that rate because they've already been developed. And it wasn't a matter of establishment or implementation but a refinement at that time. There've been new programs of course that developed rapidly, but we'd been through the rapid growth phase and were beginning to plateau. There wasn't any real soul-searching, needing and direction, finding, dictating, all this started and established already and were already in place essentially.

**JSP**  Have any of the new programs than in your areas?

**RS**  No. What I'm talking about nuclear medicine and magnetic resonancy and some of the newer fields. The residency programs, there have been additional residency programs, or the existing ones have become fully accredited, once they've gone through their own early tenure and establishment track and had been manipulated and approved and whatever. They have, in some areas acquired additional support from us, but again it was already in place, it was known that this was coming, this was in the areas that we were working towards. We've not had to had any major expansions in relation to personnel or any drastic changes, be they good or bad drastic changes in the direction of what we are doing or the way we were supporting the program. And each program were each academic department establishes through the appropriate curricular manipulations, what their approved curriculum are, curricula are. And then what support services they need. These are presented to us and we work directly with either
the chairman or his faculty, and establish what exactly it is that they need and that's what we do. And since it's approved curriculum there's never been any problem because it's through the process, everybody agrees it's needed, everybody recognizes this is what is needed for us to do it and they do it.

**JSP**

Since your initial large grant that she received for the operations of your facilities here has your financial costs and financial benefits largely been picked up by the school of medicine? Are you still receiving major federal grants?

**RS**

No, we have no federal grants, individual federal grants through either of the programs. The teaching laboratories were and always will be funded state monies. Departmental money, school monies, whatever. The lab animal resources program is a cost accounting type operation in which monies are charged for services, per diem rates for the care of animals etc. That it is extremely difficult to totally isolate research versus teaching, but in getting a handle on it, there's probably a 60-40 split. 60% of our time and effort is research, 40% is teaching, 30% is probably pure teaching, 10% is that mix that always occurs. Consequently as far as the budget is concerned, approximately 30% to 40% should be supported by the school as teaching. The others have to be recovered by cost accounting, external grants or whatever. And this is what we do, we actually do a little better than that, we recover about 75% of our budget.

**JSP**

But you are not required as a general university services auxiliary agency to be self-sufficient self-supporting.

**RS**

Not totally no.

**JSP**

Where do you see your two programs going in the next five years, 10 years?

**RS**

That's extremely difficult to say. Because there's just no telling what the medical education certification group will require. When we started the only thing that was required was the advanced cardiological life-support, that is CPR or for students in BCLS, are basic cardiac life support and these were not very much quote unquote. At the time you have advanced trauma life support and emergency medicine systems you have trauma lab all of these things have been added as requirements for graduating medical doctors, as well as for recertification of a number of people emergency medicine people have to be recertified and continually updated on the newest systems, they have to go back and redo some of the less frequent things that occur but nonetheless you have to be ready for. If this continues of course, we will add more and more in terms of the additional support requirements that require specific types of instrumentation and whatnot. And a degree of expertise on the part of the service people to understand what it is and why it is and why something is malfunctioning. From the standpoint of the lab animal area that's very difficult to say because the cost and the go around we have with some of the anti-vivisection section groups the animal rights groups etc. in the next 5 to 10 years I don't see it that we will stop utilizing animals I see that would be much more difficult and a lot more expensive because of the restrictions they are requiring or pushing towards. So that eventually they reach
their goal that we don't use animals at all. I don't see that until we are essentially able to mimic life. I think the teaching program is fairly well stabilized and for the next 5 to 10 years I don't see any maximal changes or any drastic changes. Had we brought in say Dr. Jack word from Nevada as the chairman of physiology we would increase our support in the area of physiology from the laboratory standpoint which would also include an increase in the lab animal program because he was oriented towards hands-on better preparation of the students in these areas than was Dr. Coleman. However if we get somebody who is like Dr. Coleman or is of his persuasion that tape is good enough or you can tell them with 2x2 slides then we might have even less activity in support of that particular academic department. Those kinds of minor fluctuations are always occurring they are nothing drastic and they are nothing really significant. If on the other hand some of our investigators who are currently doing some work realize their potential or at least their goals in specific areas that bring about some major changes but again we would draw additional support additional attention, as Dr. Petrosky has done. There would be some interface there and some addition support that we would supply, but always kind of as the background situation, never really out in the forefront which in a way is fine too.

So you really don't see yourself as reducing many of your basic services or anything? Having to streamline any of your operations?

We can't get too much more streamlined, the budgetary crunch which occurred this really cuts down significantly. We are not that large in the first place. We're really very basic, if the community in the area of paramedics training, nurse training, in the ACLS, ATLS, CPR, areas decides to enter into a consortium type situation as opposed to everyone trying to kind of do their own thing. Then I can see where the university per se and the teaching lab per se would be very much involved in that. One of the early concept was to have a center fully staffed for which everyone in the surrounding areas as well as all of the hospitals came for this type of training which was fully specialized in fully equipped quote, properly done and everyone would be getting exactly the same saying exactly the same level of achievement. Of course the politics prevented that. We can have an individual who is very strongly motivated this way and was pushing it. By nature of his way he created too many people who would, may have been supportive in concept, but because of his abrasiveness - I'll be damned type situation and I'll show him. So we got a lot of splinter groups. A lot of that is resolving itself now, were picking up more and more, we do support many of the paramedic programs and whatnot in the community.

If you were to go to such a regionalized idea and centralized idea what would that mean in terms of your staffing?

Well undoubtedly something of that magnitude would have a director would have to be almost its own group. People in my area may well have been the ones who would've gone into it to support it because they were already capable. In developing such a thing it means a better position of better income etc. and again I probably would lose about half my people in the teaching labs and have replaced them. I'd probably lose my
assistant director because she would probably be one of the best capable in the area. I'm sure there would be a lot of infighting for those positions because they do carry some status and some recognition, I shouldn't say power because again it's a service organization and service organizations don't have power. But she is extremely capable and I think she would probably be - unless of course it goes with the politics, the director has to be a nurse, or the director has to be a doctor, type of situation. There are those politics they get into it of course. But the service support people I would probably lose half because they are trained and are certified and already doing it. Now there others in the community that are doing it too and they might come in because it was certainly be much larger than what it is now. Oh about 16 or 20 in addition to the students of these types of courses a year in which they are two and three-day courses type situations. If they were combined we would probably be doing 2-3 week certifications and re-certifications. I'd lose part of my staff that I would have to replace. It would not be part of the IDTL or part of the lab animal resources program, it would obviously be an entity unto itself. It would have to be.

Let's turn to the overall medical school, where do you see the overall medical school going? Does it have to go anywhere?

It has to go, it has to continue to improve, because we never reach perfection. There is always new information new techniques, new things that are required through the community, through the medical field, whatever. The utilizer is demanding more of the old general practitioner, buddy thing, they don't want someone who stands off and plays God anymore we've been through that cycle now are swinging back to the folksy-wolksy types of medicine again and I don't mean that negatively by any means. But the utilizer's are becoming more intelligent also. We're getting into the group now that have been through school, that been through improved learning processes, they're better educated and are now using the services and are unwilling to accept that just because this guy's a doctor or a lawyer or any other field that he knows exactly what's going on, I want to know. And we're back to the family practice type orientation, we still need specialists we always will. Because there's no general practitioner that can simply be capable of doing all the things that we have in the way of medical advancement in technological advancement. How long that cycle will last and really to what degree it will go, it's very hard to say. The field of education must go and meet society's needs and wants. If society doesn't always know what's best for them but they always know what they want. And so we will have to go, we will have to try to keep aware of what these things are. We will have to try to educate the public as to what these new abilities that we see developing our, for instance the magnetic resonancy program, the nuclear medicine program, these are all advancements. People don't know what they are yet. They see TV and they see all of these wonderful pictures but they don't really mean anything. And a lot of what they are involved in and they are paying the bill for it. But we will go, and I hope what we do is to continue to improve in our quality of education and the tight individual that we turn out. In 5 to 10 years I don't see us changing much in direction. Swings just don't occur that rapidly, so we will continue to strive to produce good family practitioners as our basis for – we’re also certainly going to turn out physiology, anatomists, and surgeons. And because we have all these residency
programs, and they are part of the whole thing, you have to have them. The lab animal program, there is always a basic need in our program for hands on teaching with the animals. You simply can't go to a computer, you can't go to a Petri dish, you can't go to a television set and get the same information as the hands-on. I see that we will continue to watch this very closely however and minimize numbers utilized. Get more from each animal utilized. You don't simply cut open an animal and say see, here's the heart, then just throw it away. They'll be gathering data, they'll be reinforcing the basic information that they have seen you can use the slides to say here's a heart, here's a lung, here is, of course show moving pictures to show blood flow and a lot of reaction type things but you're still going to have to come back and allow the individuals to utilize them and see that although it looks nice up there when you get into doing it there is a difference. And that you do the variations, and this type of thing. And the research is much the same thing in 5 to 10 years, very close scrutiny, very much more expense involved, added restrictions and requirements and personnel, record-keeping etc., but hopefully here again a continued improvement in capabilities and in the interpretation of data obtained. Honing in on some of the things that we still really don't have down as well as we should there's just so many things that we don't know yet. People think they were so smart and we know so much. Why do this, we've already done it, and we know all there is to know, but we don't. There is still processes that occur in living things that we don't even have the foggiest idea about. How else we keep finding new enzymes, new metabolites, of the work that Murphy's lab related to cancer the materials that they are finding that seem to be being produced and are abundant and how can we counteract with these types of things we just don't know things. And we don't know how cancers work or why. We know that there are turn on and turn off mechanisms, genetic variations, at such a new level that we don't even know what's going on yet. And you can't find them in a computer and you can't find them using a mathematical model. So we will continue to use animals as long as there are diseases and societal problems that are related to these that we can mimic and study and learn. Unless societies decides that we can work on people, and we can have the concentration camps and whatnot again.

What does the next five years hold for Dr. Robert Stuhlman?

Right now I can't tell you - there are a lot of external forces and things going on right now. I don't know. I have been here longer than I have been anywhere since I was 18 years old. It's not in my nature really to stay in any one place. I like to move. I don't know whether I'll be looking to move in the next couple years, or whether I'll be having put down so many roots that I'll want to move, its personal. As far as the professional development and growth. I'm having a lot of fun right now and I'm enjoying what I'm doing. I get to dabble in all sorts of things that are going on. Problem solving, helping students, individual students, rather than masses of students, develop certain things, trying to feed their curiosity. You know some of these people might turn out to be the next Albert Einstein, it's fascinating, it's enjoyable. As long as things continue and I don't see why not of course no one knows what could happen tomorrow. I've been very fortunate I feel because I've had administrative support for everything that I've tried to do. I've been very careful in trying to ensure that what I do is justified. Either justified
because it's “right” or justified because we have certain requirements put on us by the law by accrediting bodies, by her own innate self, our own morals and ethics whatever. I've been able to present this to the administration when necessary, and they've always been supportive. I might not have gotten everything I wanted by any means, no one has, but, and I don't think I've gone out and said that I want more than what is appropriate. And I think because of that I've always had cooperation. And you know you really don't find that in a lot of places. And this is one from the higher ups all the way down, all the way from Dr. Kegerreis down, there are individuals but the entire environment atmosphere whatever is one, of we kinda want to go this way how do we get there what input you have, how will that lend to where we're going how, does that improve our procedures or how does that improve the quality of the students we turn out, how does that improve our reaction or interaction with the community of which we are very close knit and make sure everything goes that way. They've always been supportive.

JSP In the second part of this interview I'd like give your some names and I'd like for you to react to them. With any thoughts or recollections that you might have had with them. Some of them might have left the school of medicine some of them are still here. The first one, you've already addressed him somewhat, is Dr. John Beljan.

RS I came here in 1975 which was essentially just shortly after Dr. Beljan and was one of the early 5 or 6, if you will, that were involved. As a result I guess I was much more involved than I would have been had I come on a year later or whatever. Dr. Beljan at that time worked very closely with everyone because he only had quote X number of people. He was building or gathering or trying to attract, and I don't mean this in a bragging sense but quote experts and he relied heavily on what they told him. He did not try to be the all knowing he simply wanted to know all that was going on. And he was very supportive. There were as I say a number of times where Dr. Beljan, I don’t know if you heard the term, assume you have if you've talked to many people, shot from the hip, a gut reaction type thing which was not always right and had to be changed. But aside from that he was the real driving force behind this thing. He made some enemies by virtue again of his full steam ahead type attitude and behavior, but that's really what carried this through and if he'd stopped every time somebody had said wait a minute we'd still be sitting around the table trying to figure out when we get our first class. Because there a lot of people who say wait a minute; first we have to look at this first we have to you know then you begin to get into this mishmash of red tape and bureaucracy and you don't go anywhere. I have very positive feelings for Dr. Beljan I think he’s an extremely capable organizer and establisher. I was sorry to see him go but I think he tried to move ahead too fast and the system wasn't ready for him and in essence he burned his own bridges. But I think he did wonders for the school, and I think he did some things for this University too. And it's just unfortunate that by virtue of his, let's get it done and move forward, let’s not dillydallying, let's not go in circles, let's move, he created a lot of hard feelings. And those people were perhaps a little more entrenched and had firmer roots as a result. Say he burned his bridges, tried to move ahead before the system was ready.

JSP Mrs. Regina Borum.
Mrs. Borum, my dealings with Mrs. Borum were of course related during the time that she was working directly under Dr. Beljan. Extremely capable organizer and establisher. Extremely hard worker and always very pleasant person, very cooperative, rolled with the punches and to me was dedicated to seeing the job done and done well. And of course I didn't have any dealings with her once she moved out of the area of the school of medicine, but I'm assuming she's probably doing just as well there and I hope she hasn't changed. She is a very pleasant person very enjoyable to work with.

Dr. David Buzzard came on a bit later and consequently I was not able to work with him quite as long or quite as closely. As we had already begun to sift out into our areas and develop our own thing. I didn't get as close to David because as I say he didn't come on until later, but he seemed to me from the types of turnout material that we got from him, again he's very capable, he's had to struggle a bit I think, to quote fit into the system, but he's done very well. My dealings and most of my contact is through what he turns out, as opposed to dealing with them directly and I think he's done a very good job.

Dr. Robert Conley.

My dealings with Dr. Conley were in the area of course of construction and development. I felt at the time initially when I was dealing with him that he was probably at least in some areas, overstepping the bounds of his authority. He was kind of pulling power and in using power that he didn't have. I think he was capable. Again I was strictly involved in the development of facilities. There was a lot of the stuff I thought he was a bit abrasive in some areas and unwilling perhaps, and maybe rightfully so, for having his head against a brick wall enough times, to drawbacks from things that I thought he should've challenged. And I think had he done so, some of the things might've been accomplished more readily. That is strictly at that time from a novice point of view from my side, in those days I was still tipping over windmills I was willing to beat my head against the wall because by gosh it needed to be done in the system wasn't right the hell with the system we'll move the system. I've mellowed to some extent or I've beat my brains out and I’m softheaded, whichever. I think Dr. Conley did a good job, I would not say a superb job. But again I did not have the benefit of working with him when I was a bit mellower, and was more willing to look around at or recognize that there were degrees of limitations that I wasn't aware of. And I thought that some people working for him that I think he should not have had but again we get back to the system in what you accept. Do you spend all of your time trying to remove one or two people who maybe are not really all that important, or do you spend your effort trying to get done the things that you know you can do? And that's a question we can't answer.

Dr. Ira Fritz.
Initially with Dr. Fritz he was extremely positive person. Extremely supportive, cooperative and in things obviously the initial chair of the department. Somewhere along the line as things developed and we kinda went our separate ways I more or less lost contact with Dr. Fritz. I like him. I think he’s pulled back because he ran into some stone walls and didn't know how to get around them or couldn't get around them, and couldn't go through them. And I'm sorry to see that because I think he had a lot to offer. I think he did give his all. Unfortunately, either because he really didn't understand what was wanted, or he wasn't able to meet that on a personal basis, not a professional basis, he drew back and unfortunately, we don't hear much from him now. I like Dr. Fritz and I think he was very instrumental, again in at least getting the program established and keeping up with everybody else, in order to make sure that we got started and where went. What happened and why I don't know, I know some things, but I don't think they really enter into this. Dr. Fritz I think is very capable and I'm afraid I think he's pulled back and I think he can add more, maybe he got hurt someway I don't know.

Dr. John Halki.

Dr. Halki, I have only worked with very briefly and have only had very limited contact. Here again he's a mover, he's a doer. Being from the military he knows how to accept what is handed down and then to make it work, to go ahead. And he's a very pleasant man and very cooperative. Right now we do some support services for him, and our dealings are always very positive. He's not demanding or over demanding and he listens. If there’s something he needs that you can't do quite that way, he’ll listen. He doesn't say I don't care, this is it, I'm a major, I'm a colonel, and etc. He's a very very enjoyable man, very enjoyable to work with.

Dr. Robert Jewett

I didn't have a lot of dealings with Dr. Jewett. In fact I guess I tried to stay away from Dr. Jewett. I may be wrong, this is strictly a personal observation and that I did not work with him quite as much, maybe I would change my mind if I did, but I tended to have a feeling that Dr. Jewett simply did what he was told to do. He didn't seem to be able to make a move without somebody first blessing, but maybe that was the nature of where he was at and who he had to report to, but I didn't have that many dealings with him because the position he was in really didn't impact directly on me. Those times when I went to him it was always, I never really seem to get an answer, I'd get more work to do and that wasn’t what I went for, I went for an answer. I like Bob personally. Again a very very personable individual, a very positive individual. My impression was limited that may have been simply by virtue of where he was at the scheme of things and to whom he had to report what does requirements of him were.

[break in tape ]

Dr. Robert Kegerreis
I must admit that Dr. Kegerreis surprised me greatly. I did not view Dr. Kegerreis as quite the force that he is. Initially he kind of struck me as a good Joe but really that's about it. A little old out-of-the-way university laid-back type situation. Dr. Kegerreis surprised me greatly. He is an extremely intelligent man. He knows everything that he is doing and every time he is in full control. And it is obvious from where this University is, both nationally as well as community wise etc. that he has really really really been superb. And I say that in total sincerity, I know the man's leaving, so it's not like I'm trying to grease anyone's palms. But that man surprised me tremendously. He is so laid back and seems to be almost out of it and yet he has got his finger on every pulse, he is directing things very nicely very calmly in such a way that other people think it's them that's doing it and really he's the one that's driving the whole thing. And he moves this whole university. And it's just phenomenal to me. And I say he's just so positive. I know he's not done everything right, but it's really hard to find someplace he's-he's into things he's very quietly behind the scenes he is moving things constantly for this University. I envy him. I wish I were as good as he is. I'm not anywhere near as good as he is. I can't do my small thing as well as he does his whole thing.

Extraordinary man.

Dr. Samuel Kolmen.

Sam. Oh yeah Sam. Well, Sam was a hard head. Sam was a beautiful man. But Sam had reached a point where he was, and may have always been that way, he knew what he wanted and it was [indecipherable] forced him to have. Again, in his area, and I don't know anything other than his area, a very very intelligent man, a capable physiologist, in all areas. Just knew [snap snap] it wasn't stopping and thinking about it, and you could go back and check them on and he was always right. Extremely capable. He simply didn't know when to back off a bit and regroup and perhaps go at a problem in a different manner and try to solve it. This was perhaps acceptable and perhaps even keeping in Dr. Beljan, because as I said Dr. Beljan was a mover and go-ahead you can be abrupt and rather candid even quote abrasive at times, and Dr. Beljan accepted that perhaps because at times he was the same way. It got things done and that was what he was interested in doing. When the new administration came in and we were changing our image to some extent and trying to smooth over some of the problems that had developed because of this rapid advancement that occurred. I have a feeling that Dr. Coleman simply didn't feel he fit in anymore. He was not getting what he'd been promised he would get and he didn't feel it was worth his energies to do that. To go somewhere where he would I say be better appreciated and do things his way if you will whatever. I like Sam. Sam did create some problems, he created some problems with my staff, with his demands, and his abrasiveness, and occasional temper tantrums. And I don't mean that really in a negative sense, but that's just a description, and some of my support staff felt that he was unfair to them. He wanted things that we couldn't do, and wouldn't accept that we would not do them. So he came down on them a time or two and he always came back and apologized. But he did have that part about him that created some problems. I hope he's doing well where he's at because Sam deserves it, Sam is a very hard worker. Put a lot of effort into developing his program in his department, he did not get quite what he thought he'd been promised though I don't
know what those promises were, those were private conversation. And so he said well he'll go somewhere else because there have been too many disappointments here I suppose. I think it was a loss to the school. But the school still needs to move. That's one of the reasons, maybe I need to move and I've been thinking about the same thing. I get set in my ways to, and we need change in order to improve. We don't always improve with change, but we still need change. I was sorry to see Sam go. I think he did what was best for Sam.

Dr. Manny Cowder

My involvement with Manny was early on because obviously he was the chairman for only a rather short time. I think he became disappointed very quickly. I don't know again what promises were made. I had heard repeatedly that apparently Dr. Beljan frequently made promises and then didn't follow through on them, shot from the hip in promising somebody what they wanted and because of whatever reason can follow through he expected them to change. Instead of him changing. He disappointed a lot of people. Especially in the clinical areas and the surrounding community areas where people wanted to be involved, but it was new for them too. Everybody kind of put all of their wishes up and they said they would be granted, well you don't get all your wishes. So Manny wasn't really around that long. I think he did a lot to get that area and that program established, but I don't think he really fit into the academic area and so he moved.

Dr. Robert Lindower

I don't know a Dr. Robert Lindower, is that John Lindower. His real name may be Robert as with later on you have John Groves I know him as Jack. I know Dr. Lindower as John Lindower he maybe John Robert it may be Robert John. I really don't know, I'm not trying to give you a hard time. But Dr. Lindower is of course one of the early people, he's been with the school, I'm not sure if he came before me or slightly after me or exactly the same time as I did, but he's one of the old-timers too and one of the few. Obviously he's an adapter because most of the people who left have left because they couldn't adapt. He is extremely good in the area of curricular affairs. I don't know how good he is as a pharmacologist, but he must be pretty darn good in that field too. But I think he is into the administrative area more now than he still teaches but not nearly as much as he used to. And he's a very pleasant person, one who adapts well. I think perhaps recognizes where what he thinks is best and what the administration says they want to do his best and doesn't simply say what he feels is best. I think there are some areas that he could've fought a little more, but perhaps he got further by not fighting. I really can't say that because again I'd have to have been in everybody's shoes constantly and I can't do that, but I worked with John and John has worked with me he's been very a very conscientious person who tries to be very sure that each thing involves all those who need to be involved. Much more so than a lot of people do. In his position obviously he has a lot of power, he could wield that power, he has not. He simply does what he knows needs to be done and does try to improve the curricular situation. To abide by all that we need to abide to turn out quality products.
There's a time or two when I thought maybe he should've fought for something a little harder, but then again it's a matter of discretion is better and you can get other things done by knowing when not to fight something and shifting your emphasis elsewhere in getting something more accomplished. I have a problem with trying to decide that on my own you see. And I'm sure if you asked anyone about me, you might hear that you hear good things, I'd be interested in hearing what other people have to say about me, I don't think I'd be too surprised though.

Dr. Raymond Palmer

Ray Palmer one of the backroom boys. Again an early on individual. Instrumental in developing the health sciences library to the point that it did develop. Another individual that Dr. Beljan attracted or was attracted to Dr. Beljan whatever. That was given an opportunity to accomplish something, was given a lot of support in getting it done, and worked very hard at doing so. I'm not really sure why he left. I thought that he was quite pleased with where he was at and what he was doing and what he accomplished. He set up a superb support service of course he got a lot of support in doing so, recognizing how important that type of support services is to education, especially to medical education. An individual who knew his job well knows his job well. Understood what was expected of him and did it very well.

Dr. Alan Roden

Dr. Alan Roden - well I know Dr. Roden when he was the pathology chairman. I know Dr. Roden as in his role of continuing education, I know Dr. Roden as a lecturer, pathologist. I think in some areas Dr. Roden is too swayed by what he - the interpretation of certain data is from certain teaching methodologies and things of that nature.

A bit of a conformist you might say?

Yes, I guess that might be a good term. I hear him bringing forth data, I don't hear him bringing forth ideas. I like Dr. Roden, in fact there are very few people I don't like quite honestly. But I can't work as well with Dr. Roden as I can work did work with Dr. Lindower, Ray Palmer, Dr. Beljan etc. because there's too much data there, and too little fact. Although he had his place he's done a lot in the continuing medical education area, he's very active in the affairs of the school and what's going on and he's in his way very supportive, very supportive and a positive force. Because I know a lot of people who he's in contact with with these courses that he supports and teaches and the information he provides his meaningful information to them. I just don't think that you run a department or that you are involved in the daily operations the same as you are in a classroom.

Dr. Edward Spanier

Well, I'm biased because I work very closely with Ed. And not as a distraction from Dr.
Beljan by any means, but he is really what made Dr. Beljan's work go. Because again Dr. Beljan went ahead with things, and that means a lot of times he had to go back and pick up the pieces and put things in order in order to make sure that you had all of the paperwork, you had all of the right minds going in the right direction. And Dr. Spaniard did that extremely well. The man did three jobs. And he did them all well or we would not be where we are right now. There's no one individual of course that made this work, everybody has had to pull together. If you put Dr. Beljan as the leading driving force, let's say as the driving force then Ed was the pulling force. If Dr. Beljan was pulling Ed was pushing, keeping everybody together, keeping it all heading in the right direction.

What about the Chief of Staff?

Edmund Sellmen, yes. I was very very sorry to see Ed go from school because I think it was really a loss, as much a loss as when Dr. Beljan left. I always had good working and personal relations with Ed because Ed again he was an individual that did not say well we can't do that. He said what is it we need, and how do we go about doing it, is it good? Tell me, show me, justify to me, prove to me, all right? Let’s do it. And he said that three jobs, because there are three people doing now what he did then and it's not because we have grown so much bigger because he was doing it when we were big. Maybe he was a super achiever or is a workaholic or whatever, but he thrived on it and did it well. And as far as dedication to this University to this first of the school at this time at a university that it was a part of it was nobody anymore dedicated, including Dr. Beljan to the school and to make it go into developing it and to quote developing it right, to getting all kinds of things done simultaneously and getting them all done quote well. A real moving force, as I said I was very very sorry to see him go. He was a staunch ally and a staunch friend and still is but now another area in our dealings are much much more limited. I can go to him with any problem any problem no matter what instruction problems personnel problems fiscal problems etc. and he had answers he had suggestions he knew what was going on in every nook and cranny in this University. He knew about budget he knew about P.E., he knew about arts, knew about graphics, he knew about this prima donna, and that no doer- deadwood, I mean he knew every cotton picking thing. And he knew the pulse of things, he knew were Dr. Beljan was going and what was going to happen and the man his insight least in this area was phenomenal. And his expertise in a very broad broad broad area, I don't think there is any area he couldn't have gone in and sat down and in two weeks to six weeks you'd have thought he'd spent his whole life doing that one thing because he did it so well. And he was willing to do everything.

Dr. J. Robert Suriano

Bob and I came on at exactly almost the same time. In fact when I came up for my interview and my quote night on the town the evening meals, and the further discussions that type of thing he and I at that time with Dr. Beljan's secretary spent the evening together and discussed the whole thing. Again Bob was attracted here, he was given a task to do, a multitude of tasks, was told what the end results should be, and was told to get the job done and did it. He developed his means, put his expertise to
work, gathered the people around him that he needed and I think by virtue of the
product that we are turning out, meeting certain criteria, I'm not saying right or wrong
as to we have to turn out this many, or that many, but that is what we are set to do and
what our requirements are as by the Board of Regents or whatever. He strives very hard
to make sure we get the best we can going in so we've got the best chance of
succeeding going out and he's obviously been very good at it, because the numbers, and
what has occurred the hesitancy of accepting our students out of a new school and I
mean who's ever heard Wright State? And now the product that's been turned out, it has
to do a lot with what goes in obviously. You've got to have the raw material there. That
means you better recognize which ones are good raw materials and which ones are not.
And Bob's to be certainly to be given full credit for that. Because again he has helped
the school develop, the school of medicine to develop and he has helped to prove itself.
In no small way. And again he's a very pleasant individual, very cooperative individual,
and is willing to listen. This don't work, well I'd like it this way, it's nicer for me, but
okay let's try this and let's get the job done. But he knows what the job is too.

Break in tape

[indecipherable]

<table>
<thead>
<tr>
<th>JSP</th>
<th>Dr. Tony Zappala</th>
</tr>
</thead>
</table>

RS  The mad Brazilian! Tony was a lovely man and maybe that's why I came here in the
first place too. Here again he is one of the first people in and it was a push of go, get
done, very dynamic. Unfortunately he must buck the system because the system is not
designed to go, it's designed to kind of flow around, and just barely move forward like
an iceberg. And we were not moving like an iceberg we were moving like a forest fire
and unfortunately we did destroy some things. From that comes new life and new
growth etc. and whatever. Tony fit in very well in that respect he was again a hard
head. As for Sam Coleman as was myself I think, I think I see a pattern developing
here. Anyway he did his job well, he knew what was needed, he was a very good
anatomist. An organizer, a developer. There were perhaps some concepts that I recall
the first class did create some problems, but then again there was no way of knowing
this was going to occur until it did and he moved in to make the necessary changes. My
understanding is that he went back for his own reasons to Brazil I mean he left not
because things weren't going the way he wanted or because he was not accomplishing
the things he wanted but for other reasons and left fairly early on. But he was definitely
a moving force, at that time we need movers.

<table>
<thead>
<tr>
<th>JSP</th>
<th>John Groves</th>
</tr>
</thead>
</table>

RS  Well, John, Jack as I know him, is doing part of the work that Ed Spanier did. He came
at a very opportune time because we were having some problems bogs down type
problems, too much falling through one area. We now moved, of course now Dr.
Sawyer is here, we moved because of size because of stage of development we moved
from intimacy to one of detachment. As I say Jack came in at a very opportune time
things were bogged down, he is very capable, he moved into what I'd say is a difficult situation because there were some organizational problems, some movement problems, a lot of disenchantment among the troops. And very quickly fit into the place that he needed to fit and began to get things rolling again, that was one of the things that Dr. Spanier did was get things rolling. When he left things did get bogged down a bit. I don't think all of the people that came in were really cognizant of what they needed to do. And as they became aware of what they needed to do they found out they couldn't do it. It wasn't really what they thought they were here for okay and was totally out of their area of expertise. Jack moved in and filled a void that was very evident at the time and it pulled things back together again. Obviously being from totally outside, not being involved in any of the development whatsoever, he had different ideas about how to get some things done so he went ahead and installed these radical changes, shook up some things, but it allowed things to get shook up, you gotta blows the logs out of the water when you've got a log jam. And that's what Jack does, he blew the logs out of the water and now we're going downstream again, or upstream as the case may be, but we're moving again. And he again is an individual who in my dealings if I am justified in what I want or what I need in the way that I want to go then and I present it to him he is totally supportive. If I am making a mistake or if it is not in keeping with where the school wants to go or it's a political football that we don't want to mess with right now or whatever. He would point it out to me, we discussed, we agreed, we collaborated. I like it very much and I think he is a very good force again and is helping to keep things moving. He fulfills a very important need and he does it very well.

Dr. William Sawyer

That one is really a hard one. Because when Dr. Sawyer came on, the whole scheme of things changed. I had been accustomed to being able to go directly to John, and/or to Ed, and through Ed directly to John for what ever was needed. And to be able to get things straightened out and to get things done. And John knew where I was at Ed knew where I was at and I knew where they were. Dr. Sawyer of course was an entirely different individual, with entirely different set of ideas coming in to really into a new area of the school of medicine. We'd really just plateaued, we were due to change anyway in a lot of areas it was rather an abrupt change in that he came in at exactly the same time. I did not have as I say a direct input into Dr. Sawyer's coming. Only indirect. He comes at you from an entirely different direction.

What do you mean?

Well again with Dr. Beljan it was really straightforward blunt, lay your cards on the table, this is where we’re at, this is what we want, and hey I can't buy that or okay fine or whatever. No you are wrong you do this you do that. Dr. Sawyer is not that way. He saw the mission of the school not to continue to grow and snowball as he I think has stated a snowball, just rolling down in gathering and becoming awkward and nondirectional, chaos to an extent. And he has his ideas as to where they should be and what areas need to be developed what needs to be stopped. Dr. Beljan really wanted to know everything that was going on, Dr. Sawyer doesn't want to know everything that's
going on, he simply wants the established things to work. If there are problems you go here to handle them or you go there you don't come to him. Dr. Beljan wanted all of those problems and was very operational oriented. I think Dr. Sawyer is very much less so. The operations are left to those who are responsible for day-to-day operations. He is planning and development and future he’s out instead of pulling this along. This needs to come along on its own now, it's got its own momentum, its own force, and its own fuel power, it goes on its own. He's out there laying new directions and not in a rather snowball fashion, which was I think the way he felt this was going at the time and I don't think he's alone I think. There were a lot of concerns about that. In that I am no longer as directly involved, although again I can go see Dr. Sawyer anytime I want to, he set up different chains of command under different directions and channels. I'm not as privileged to where we are going and what the intent is. Only as the faculty, as it's presented to the faculty. I was rather reserved at first, in fact I would say it was probably a bit negative at first when Dr. Sawyer came on because I did not like the changes that were occurring in was concerned about where I was going to be and whether or not I was really going to have the support that I had and had had and had been promised I would have. But I think I laid back a little bit, to give it time to develop and see what was going on. Dr. Sawyer has always been very straightforward with me and very honest with me. He's been very very willing to listen to me which I which again was maybe a concern of mine, because as a quote service organization frequently you’re not listened to, your dictated to, that I was not quite have I would've left if that had developed. But I need to see because I didn't know and I was glad I was wrong or that my concerns were ungrounded. Dr. Sawyer is again in his own way in his area of expertise extremely capable and he has taken the school and more or less calmed it down and he has improved our community relations in the lay public, I don't think there was as much professional concern although there was people were not very, professionals who are not happy with the way Dr. Beljan was doing it. Most of them agreed he was getting it done much more quickly than what they would've thought, almost to the point where they were scared because they wanted to see what would happen. Each time they did something and John just went right on. This, the community not being aware quite as much, the lay community I think were beginning to pull back a little. They thought a monster was developing over here. It was rather rough for them at the time. Dr. Sawyer has taken and smoothed out the curves and given it some shape in some form and allied the fears that were beginning to develop and bolstered our community support tremendously. I think, I don't agree with everything he's done, but then again I haven't been privy to all of the reasons as to why. I think he's done a very good job. I don't know if someone else coming in to the situation he came into, and I'm not unaware of what that situation was and what the pressures were. I don't know that there were others that may have been considered for the position had they taken it would have done as well as Dr. Sawyer has done. He had a lot of problems to overcome. And he had a lot of pressures he was going to have to bear up under and he did, and he has, and I think he's done a very good job. He's been a very positive force again for the school. He has recognized - who didn't really fit in and who would not change. He, and I don't mean this in a negative sense, they are gone and they are no longer in the way, which they might've been had they stayed. I don’t think he's been an axman by any means. He is simply approached those individuals in which
a potential problem existed and he has dealt with them and essentially given them the choice. They either stay and do it his way or not. And he's strong enough, that without being dictatorial by any means, that although I think there is perhaps a few people who may have quote tried to fight him or thought they would, they decided they weren't going to win. And there have been some people who needed to go that were not being gotten rid of quite otherwise. I think he's done a very good job. It was just a big shift at that time and it took some time to see how was the fallout and more or less being moved from a quote in-position at least a feeling of the degree of in to out maybe that was a perception on my part as opposed to reality because again in looking back now there's been no time that I haven't really been able to go have access maybe not instantaneous access because the man's busy but I never really had it with anyone else as far as that's concerned. Nobody has it with me all the time just by nature of our jobs. Dr. Sawyer had to take the time to see where everything was and some things were kind of jumbled and the cry of the importance had to be academics of course always. But worked very very closely with the community support because of our reliance on affiliate hospitals and he had a lot of work cut out for him that was priority one. Fortunately in the areas that I'm concerned we worked fairly smooth the already had good relationships with virtually everybody. We weren't a problem area I hope. And so I didn't need the attention that some of the other areas needed, and maybe I saw that is being pushed aside when in reality it was credit given to us for being well entrenched and performing well and smoothly and not creating problems. Those who got the attention were the problem creators. Dr. Sawyer I think has done a remarkable job and I don't know some of the other people who'd been interviewed at least had the potential whether or not we would've gone the way we went.

| JSP | Dr. Robert Reece |
| RS | Bob has developed a very good program obviously. There are components of it that are nationally renown. Here again is another kind of laid-back individual who knows what needs to be done. Either by virtue of having been told or by being involved in whatever, knows where that segment of the curriculum needs to go and has built a very sound program from word one I don't think there's ever been any problem with that program at all. No bad vibes back no hard feelings, and yet he's done a tremendous community service as well as academic service. Very capable man from my contacts with him and a very nice person to work with very willing to listen to present his views to be steadfast in his views but not to be abrasive. He got to say well I disagree with you, but hey I understand what you're saying he's a nice guy, is really nice to talk to is really nice to work with, at least he comes across that way. And yet he does get done what needs to get done. |

<p>| JSP | Mr. Joe Frank |
| RS | Joe Frankie. Joe Frankie was came in real early on to start with he was one of the first people involved and that might have been essentially quote the first school of medicine employee besides the Dean- |</p>
<table>
<thead>
<tr>
<th>JSP</th>
<th>What was his function?</th>
</tr>
</thead>
<tbody>
<tr>
<td>RS</td>
<td>A doer. He had a lot of responsibility for development organization, coordination of all of the support services all of the facilities the graveyard with anatomy the internment situation the development of the inventory system and the materials and management. The getting of all of the things done that Dr. Beljan said I want this or I want back achieved you don't get done quite that way. He was a mover and shaker he worked under Dr. Spanier. Between the two of them they did what five people are now doing at a time when it was growth and development in just a much greater detail and a much greater task than what it is now because now it's shaken out and it's smooth we've developed the cookbook and the steps are all there but it still takes 4 to 5 people to do what the two of them did. He retired, sold his house, moved, and a couple years later came back and came back to work again because he really wasn't ready to retire and he enjoyed what he was doing and he was good at it. He moved to the system. Again the system is not designed really to move is just kind designed to be there and to eb and to flow into kind of you do not get rapid growth and development with the system. But you cannot directly buck the system you must use the system and move the system. And it takes special people to deal to do that and Joe was one of them. He'd worked for the University a long time ago, he knew the system, if he was involved in the development of a lot of it and he knew all the people so he knew which chains to rattle in which doors to close and which to open and how to go. And not, and not again in the sense where he created hard feelings and therefore set up roadblocks. He recently retired not too long ago. His was a service responsibility and administrative service responsibility, a shake it out and get it done. If you sit back and wait for things to happen, other than natural system of things, then it takes six months to get the people to work on it, six more months to get it identified, and onto the books, and get them into a priority then six more months to get it done. Well in six days it was done or in five days it was done or whatever. Again he was a doer and a mover and it was needed at the time and, still needed in some areas now. We have some problem areas since he's gone, that have not been able to be resolved. He set up and establish the courier system, the inventory system, and I mean we have a huge inventory system. He set up in such a way that all the universities are that way but he was involved in you don't get bogged down checking on where every little piece is you have to hire every department would have to have one person who did nothing but one around and checked everything you'd be paying somebody constantly to be seeing where every chair in every table and everything is. Very time consuming and very wasteful. And part of what he did was get back to a system where you've got two, generally students, for the whole school. To me that's a timesaver and that's a money saver. He knew again what everybody needed, he was involved with working with the professionals and receiving donations, placating people, moving things. Because if we went through the university system, on some of the stuff we'd still be waiting to even do it let alone already be operating for two years.</td>
</tr>
<tr>
<td>JSP</td>
<td>Well it seems like we're almost out of tape here.</td>
</tr>
<tr>
<td>RS</td>
<td>And time and people -</td>
</tr>
<tr>
<td>JSP</td>
<td>I'd like to thank you</td>
</tr>
<tr>
<td>-----</td>
<td>-----------------------</td>
</tr>
<tr>
<td>RS</td>
<td>Just got the biscuits and gravy.</td>
</tr>
<tr>
<td>JSP</td>
<td>Thank you very much an excellent series of interviews. The two interviews I've had with you have been first rate. It makes up for the large amount of time it takes to get a hold of you with a busy schedule that you have.</td>
</tr>
<tr>
<td>RS</td>
<td>Well that-</td>
</tr>
<tr>
<td>JSP</td>
<td>It was well worth the wait.</td>
</tr>
<tr>
<td>RS</td>
<td>That I have no control over, well maybe I do I like to go out and generate it, I'm a doer to. I don't like to sit around, there's too much to be done and with all we know we still need to learn more and that's in all areas and that’s in how we operate everything else.</td>
</tr>
<tr>
<td>JSP</td>
<td>Thank you very much</td>
</tr>
<tr>
<td>RS</td>
<td>I've enjoyed it, it's been informative.</td>
</tr>
<tr>
<td>JSP</td>
<td>It's been extremely informative.</td>
</tr>
<tr>
<td>RS</td>
<td>Obviously it’s strictly my own opinions. It doesn't anyway relay the opinions of the University.</td>
</tr>
<tr>
<td></td>
<td>[laughter]</td>
</tr>
<tr>
<td>RS</td>
<td>What kind of disclaimer do I need to put in here to keep myself out of trouble?</td>
</tr>
<tr>
<td>JSP</td>
<td>That's fine that's excellent.</td>
</tr>
<tr>
<td></td>
<td>[End of recording]</td>
</tr>
</tbody>
</table>