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For: TCOM Library, Oral History Section

CHARLES D. OGILVIE, D.O.

DR. OGILVIE IS A CLINICAL PROFESSOR IN THE DEPARTMENT OF MEDICAL HUMANITIES AND FORMER CHAIRMAN OF THAT DEPARTMENT. HE IS NOW IN PRACTICE IN PRIMARY CARE IN BEN WHEELER, TEXAS.

Dr. Ogilvie, I would like to "pick" your brain a little bit Mr. Stokes: here today, if I can, can get some of your memoirs here on You have had quite a distinguished career as an osteotape. pathic physician and you have been tied in with TCOM now almost since its inception, but let me start off by saying, as a history buff yourself, particularly in osteopathic radiology, please discuss, if you will, some of your reasons for joining TCOM faculty back in 1976, I believe it was.

Dr. Ogilvie: Yes, Ray, actually I joined the faculty in 1977. At the time I became interested in a position on the faculty; I was doing a study and a practice in Canton, Texas.

Mr. Stokes: In East Texas.

Right. Canton is the county seat of Van Zandt County. In Dr. Ogilvie: the late 60's and early 70's, I became interested in a comprehensive approach to practice, which was advanced by Lawrence Weed at the University of Vermont and, as I fell more under the spell of Dr. Weed, I was then Chairman of the Department of Radiology at Stevens Park Osteopathic Hospital, where I had been since 1952.

Mr. Stokes: That is in Dallas.

Dr. Ogilvie: Yes, it is in Dallas. As I became more and more interested

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in Lawrence Weed's work, I decided to make a career change and put some of these principles into practice because I felt that they were critical to osteopathic medicine. So, in 1972, I resigned my position at the hospital, much to the chagrin of my colleagues, I might add, and moved to East Texas and built a facility there that was designed specifically to do this particular type of patient care, which is called problemoriented medical care. After I had done this for a number of years, some interest in this was generated at the College and the College was really coming into its own; it was under State auspices. I had several visitations from individuals from the College who were interested in what we were doing because they could see the relevance of comprehensive health care to the principles of osteopathic medicine's philosophic principles. So, I well recall one visit by Dr. Newell . . .

Mr. Stokes: Dr. Ed Newell?

Dr. Ogilvie: Yes. He was Dean then, if I recall. Or perhaps he was . . .

Mr. Stokes: He was the Dean. I am not certain if he was the Dean or academic dean, or . . .

Dr. Ogilvie: Well, anyway, he was a stated official of the College. He spent a day with us . . . as a matter of fact, he was with us on two occasions, but on one occasion he spent the whole day with us and watched what we were doing and I felt was fairly impressed with the application of what we were attempting to do to some of the things that they wanted to do at the college. So, for the next year or so, I gave some thought to the idea

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> of joining the faculty of the College, although I hadn't received any specific invitation or anything of that nature. And since I am a certified radiologist and I am a Fellow in the College and past president of the college of radiology and, of course, most of my professional life I practiced radiology as a specialist. It seemed to me perhaps a proper point of entrance were I to get into academic medicine would be through radiology. So, on an occasion I had a conversation with Dr. John Kemplin, who was chairman of the department and he was very enthusiastic about the possibility of affiliating with the department. So, around the first of the year in 1977 - this was probably last 1976 - early in 1977, I was invited to visit the College and Dr. Kemplin and Dr. Charles Kline. We visited in Dr. Kline's office and Dr. Kline ventured that, on the basis of my CV and my credentials, that I would be appropriate for a full professorship, so I agreed to come to the College and on a five-year tenure. I was then 60 years old. At that time, as a matter of fact, there was a state restriction against older than sixty five and, really, five years was what I thought I could be gone from home. My home being in East Texas, Van Zandt County, having moved my family and settled there. So, . . .

member

Mr. Stokes: So you actually became a / of the faculty then around the first part of 1977.

Dr. Ogilvie: Yes. I believe it was in March when I actually came on the payroll, so to speak.

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Mr. Stokes: Dr. Ogilvie, I believe you may have already mentioned some of this next question in the discussion of the first question, but, just to be certain that we don't miss anything, were there other factors involved that prompted you to become identified with the academic side of medicine?

Dr. Ogilvie: Well, I have always had a yen, you might say, for academics.

Prior to my coming full-time on the faculty, I had taught some at the College . . .

Mr. Stokes: Here at TCOM?

Dr. Ogilvie: Yes. Radiology. Different topics. From time to time I would be invited and was always pleased to do that. And I was always very much involved in the continuing medical education program at Stevens Park Hospital and also with the intern and resident program and I trained residents myself in my own department. So, I had always been sort of on the fringes of medical education.

Mr. Stokes: Thank you, Dr. Ogilvie. You know, as the first chairman of the Department of Medical Humanities, will you share some of the highlights that led you to accept the position, which certremendous tainly carried a // responsibility?

Dr. Ogilvie: Yes. I can't give you the exact date, but I have it and I will look it up, but President Willard - then Dean Willard - approached me on an occasion and discussed with me the possibility of establishing a Department of Medical Humanities.

There was an existing, but inactive, department. It wasn't called Medical Humanities. I can't recall exactly what it was called, but medical jurisprudence was taught under that

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> and it was an entity in the structure of the college. So, to establish a department really, in fact, just required a name change for an existing department and President (Dean) Willard --I'm not sure exactly what prompted him to decide to activate such a department, but he did, on an occasion, ask me if I would be interested in chairing such a department. I recall the conversation quite well. Dr. Kline was there as well. We were discussing other issues with the College and then he sprung this on me, asking me to accept this responsibility and I was very pleased to accept that. I felt that - had felt for a long time before coming to the college - this is an aspect of medicine and medical education that needs to be emphasized more and by establishing such a department at TCOM, this was really quite a farsighted and pioneering step. As I recall, there were probably, in all of American medicine, only perhaps a dozen medical school, either allopathic or osteopathic, that had such a self-standing department. So, it was an opportunity and very flattering to be asked to do that.

Mr. Stokes: In that same vein, Dr. Ogilvie, in the language of laymen, just what does medical humanities actually imply?

Dr. Ogilvie: Well, medical humanities, at least the way we have interpreted embraces it at TCOM / several disciplines: medical ethics; the history of medicine - which is the particular interest of mine that you have already alluded to; medical jurisprudence; it includes art and languages as they impact on medicine - for instance, the teaching of medical Spanish has been carried

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on through our department. Religion, as it impacts on medicine, is an aspect of medical humanities. Literature and so forth.

Mr. Stokes: Thank you. During your association, Dr. Ogilvie, with TCOM as a faculty member, will you relate the series of events that prompted the Curriculum Committee, of which you were the chairman, to foster the innovative philosophy of preventive medicine from the osteopathic point of view?

Dr. Ogilvie: Well, are you referring to the goals statement?

Mr. Stokes: Yes, I am.

Dr. Ogilvie: Okay. Dean Willard asked me to become chairman of the Curriculum Committee in 1977, at the time the chairs change, which I believe is the end of the academic year - probably in August. For a number of years, Dr. John Harakal had been chairman of the Curriculum Committee and his tenure was over and, so the Dean asked me if I would take Dr. Harakal's place. So, I agreed to do that. I attended a couple of meetings of the Curriculum Committee, probably in June and July, and then, in August, as I recall, was the first time I actually conducted a meeting, which was over in the old bowling alley. In the Fall of 1977, after several meetings of the Curriculum Committee and sort of getting my feet on the ground, I guess I sort of thrased around at first. There was so much to be done - as there always is. So, I had a conference with several members of the Department of Medical Education and, foremost among them was a young man whose name I can't think of now - he's no longer

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with the College, but he was a Ph.D. in that department.

Mr. Stokes: I know who you are talking about. He went from here to Ohio.

Dr. Ogilvie: That's right.

Mr. Stokes: His name eludes me . . .

Dr. Ogilvie: Well, we can pick it up. Anyhow, in discussing some of the problems with the Curriculum Committee, he expressed his opinion we that what/needed most of all was a specific goal - something definite, something in black and white - that the curriculum could be designed around and something that the whole faculty, the student body, the entire college could embrace and move toward. So, it was really the idea establishing a working document for the college in which some specific goals were expressed came from that meeting and from a memo that he later sent me and, by the way, I have all these documents. I have complete files. I kept all my files and they are available.

Mr. Stokes: Maybe they would become available for the TCOM archives. We're going to get a little more involved in that in the future.

Dr. Ogilvie: Well, they are certainly available and I saved them for that purpose.

Mr. Stokes: Good. I appreciate that.

Dr. Ogilvie: So, anyhow, after giving it some more thought and discussing it with the administration, it seemed advisable that a really elite, blue ribbon task force should be established in an effort to specify a working document of some goals for the College.

Mr. Stokes: Can you add anything further about the work of the task force?

I believe Dr. Korr is still with us here in Medical Education and he was very much involved with you in that task . . .

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Dr. Ogilvie: Dr. Korr was appointed chairman of the task force and membership.

all the names of the members and the charge - the specific charge is in the document - in the task force document. Actually the
task force document does pretty well record the history of what
went on from the time of the establishment of the task force up
until its report was submitted and the task force was disbanded.

Mr. Stokes: I see. Okay, well thank you. Moving along, now. Now that you have returned from education's ivy-covered tower, so to speak, to that of the family doctor's realistic involvement in the community's health conditions and its problems, will you evaluate the merits contained in the published statement on the goals of TCOM?

Dr. Ogilvie: Well, let me say first, that my entire five years - almost five year experience at TCOM - was a tremendous help to me. I learned a great deal while I was here and it was, from the personal standpoint and the professional, an invaluable experience for me. In the practice I am doing now, we try to utilize a lot of the philosophies that are embraced in the goals statement; however, I will say that we did that, too, as much as we could at a particular time prior to my coming to TCOM. In comprehensive health many of the wholistic principles that are embraced by osteopathic medicine are reflected in the goals statement. I wouldn't say that our practice in Ben Wheeler is specifically oriented in that direction, because we are in a very medically underserved area. And, there is no hospital closer than 35 miles . . .

Mr. Stokes: Is that Tyler?

Dr. Ogilvie: Yes, Tyler. There are only 7 doctors in our county of 37,000 people. So, a great deal of energies go into acute and emergency

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care. However, overall, our emphasis is on comprehensive health care and as much as is possible in such a very rural setting, why we do try to do more than just pay lip service to those principles that are set out in the goals statement.

Mr. Stokes: Thank you Dr. Charles. Will you summarize your paramount memories of your association with the Texas College of Osteopathic Medicine - it administration, faculty, as well as students?

Dr. Ogilvie: Well, I was very busy when I was here.

Mr. Stokes: I am sure you were!

Dr. Ogilvie: I had my fingers in a lot of pies and, as I look back, too many pies.

Mr. Stokes: Pardon my interjecting this statement - back in the very beginning, when you decided to become the Chairman of Medical Humanities, I did a little bit of leg work along with you in some of the preparation. I know you were very busy.

Dr. Ogilvie: That's right. And you opened some doors. And I appreciate that.

Mr. Stokes: Well, I walked through the doors with you.

Dr. Ogilvie: I guess some of the highlights as far as the Department of Medical Humanities is concerned, I was very fortunate in developing a very close personal and professional relationship with Dr. Jonathan Irwin at Southwestern Medical School, who was my counterpart over there and is a recognized authority in the field of medicine. Dr. Irwin was very helpful to us. As a matter of fact, he served on our advisory committee and, I think one of the most effective things we did was to set up a rather elaborate series of evening lectures in which we brought recognized

authorities in the field of the history of medicine to the TCOM campus and we did that for a couple of years. We alternated with Southwestern. They had a similiar program and one year they would do it and the next year we would do it here. This series really created many friends for the department and for the College. Many very prestigious people in the field spent a day on the campus and, of course, it was a great thing for me, too, because it gave me some contacts in the field. Another person who was very helpful to the department was Dr. Chester Burns, who is chairman of the humanities - that probably isn't his correct title, but that is what he does - at the University of Texas Medical Branch in Galveston. Dr. Burns was up here a number of times. He was very interested in the department. I am sure he is still interested. He lectured on the campus here on three different occasions and other times, if he maybe would just be passing through the city, he would come by my office and see how things were going and acted as sort of a guiding spirit. Dr. Burns, I would say, is one of the top five in this country in this field. So, this was very helpful to us. Another person who was helpful to us was a contact I can thank you for at TCU. That would be Dr. William Longsworth. Dr. Longsworth is a Ph.D. in the field of medical ethics, trained at Yale. We innovated a very interesting program in which medical students, divinty students, and nursing students were team taught in medical ethics. This was on a case presentation format and it was-we did this for two or three years and it received a lot of notice within the dicipline and, I suspect, outside of the discipline.

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> certainly It/opened some doors for us and enlightened some people on the TCU campus and we had a very amicable and fruitful relationship with TCU during the time that this--that I was involved with this and, I understand from Dr. Gallehugh, who is my successor, that they are just about ready now to start their program for this year in which the nursing and medical students will be team Those are some highlights. I think certainly the goals statement and the empact it has had, not only on the campus here, but in very distant places, I felt like was a very great step forward for the College. Personally, I value very much my relationships on the Denton campus. I served on the committee search committee - for the President there on two occasions, both when Dr. Vandiver was selected and later, when Dr. Hurley was selected and I developed some very fast friendships. I might say that I come from an academic family and I feel comfortable around academics.

Mr. Stokes: Where did you grow up?

Dr. Ogilvie: Well, I graduated from high school in Virginia - Woodstock,

Virginia. I was born in New Jersey. I went to Louisiana State

University. Of course, I took my medical work at the Kirksville

College and, as I say, my brother was a college professor and

my father was on the faculty of Wesleyan University. My brother

was at Williams College, Williamstown, Mass., and it was sort

of a world that I knew and felt happy and comfortable in.

Mr. Stokes: There is another facet in your life that I would like to hear a little bit about. You are certainly a proponent of physical fitness. You are somewhat a deception to the rule of "Don't

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do as I do, but do as I say". You do both. And you have done a lot of running in your lifetime and entered a lot of marathons. Tell me a little bit about your marathon experience.

Dr. Ogilvie: Well, just to tie that in, I might just say that sometime in 1977, sometime in the Fall - maybe in the October Curriculum Committee meeting - it was in the bowling alley and I remember very well, Dr. Bob Kaman and I walked out of the meeting after it adjourned about 5:00-5:15 p.m. . . .

Mr. Stokes: What department was he in at the time?

Dr. Ogilvie: Biochemistry. And we stood out in the corridor outside the meeting room and the conversation went something like this
"Bob, do you know what this college really needs?" And, I knew he had an interest in this field and I was sort of feeling him out. I said "The College needs an Institute of Human Fitness".

And, there in that corridor, that day, was where the Institute was born. Bob thought it was a great idea.

Mr. Stokes: Well, I am glad you brought that up because I hadn't had that little . . .

Dr. Ogilvie: That was the spark that generated and then, of course, Bob had connections - runners, members of the faculty - up on the Denton campus, his name slips me, but there were several.

Dr. Peter Raven and Bob Patton, is who I was trying to think of, who was part-time and TCOM had it divided. I think he was in Physiology. He is an exercise physiologist. Dr. Joel Alter, and others, started the Institute. We met in Joel Alter's home on Sunday afternoons for several weeks and that is how the Institute - which to me, now, I think of all the tangible, physical

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things which I might have had some little part in - I suspect I am proudest of the Institute.

Mr. Stokes: The Institute for Human Fitness.

Dr. Ogilvie: I think it is wonderful for this college and, as far as impact on the community, this has done this college tremendous good. Brought it great goodwill. Well, in 1977, about this very same time, I became interested in running, because Dr. Gracy, Dr. Lacko, Dr. Kaman, and several other members of the faculty were runners. Well, they would get out every day and run. And, I had a friend who was then chairman . . . or he was Executive Director of the Cancer Society - and I've always been active in the cancer field, because as radiologist, I was a radiotherapist and treated a lot of cancer and had quite a background in cancer and oncology. So, this friend of mine was a runner with the American Cancer Society and I borrowed some magazines from him and that was what really got me to run. And, so that year, I started running just for my own pleasure and fitness. First, I couldn't run. I just walked around the block. Then, I started running. During Christmas break, I went to the National Running Week, which is a big conclave that is held in California - was at that time - and I got informed about running from experts. Then, the following Fall, in 1978, I entered my first competition, which was right over here in the park and from there, I discovered that I could be a competitive runner at my age - which was 60. And, so from that point on, I thought I would continue to run and have excelled in running.

Mr. Stokes: How many marathons have you participated in?

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Dr. Ogilvie: Oh, I don't know, but it close to 50.

Mr. Stokes: Close to 50?

Dr. Ogilvie: Yes, it's over 40 . . .

Mr. Stokes: Have you finished all of them?

Dr. Ogilvie: Well, no, there have been two, or three, or four occasions, probably three, I doubt that it is more than three.

Mr. Stokes: Well, that's quite a record.

Dr. Ogilvie: There are always circumstances - injuries or other climatic conditions - something will mess you up. But, I am currently ranked second in the nation in my age group at 10,000 meters and also, I am second in the nation in the marathon.

Mr. Stokes: Well, I am glad to hear that, Dr. Charles.

Dr. Ogilvie: I have run internationally. I ran in Europe this past year.

I ran in the one big marathon, in which there were 18,000 contestants and I was second in my division there.

Mr. Stokes: I ought to interview you sometime just on your running experiences.

Dr. Ogilvie: I have enjoyed it and it is a great sport and it is a great activity and has been really good for me.

Mr. Stokes: Well, Dr. Charles Ogilvie, it has been a pleasure to have you here to share some of your memoirs of your association not only in the osteopathic profession, but more closely identified here with the Texas College of Osteopathic Medicine and we consider you one of our great strong friends and hope that our future will continue to prove profitable to both you and the College. Thank you for coming.

Dr. Ogilvie: Thank you for asking me.

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Mr. Stokes: This interview as conducted in the afternoon of Wednesday,

January 18, 1984, in the Oral History Office of the Library

of TCOM.