



ORAL HISTORY PROJECT

L. Joseph Butterfield, MD

**Interviewed by
Russell A. Nelson, MD**

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Denver, Colorado

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PREFACE

Oral history has its roots in the sharing of stories which has occurred throughout the centuries. It is a primary source of historical data, gathering information from living individuals via recorded interviews. Outstanding pediatricians and other leaders in child health care are being interviewed as part of the Oral History Project at the Pediatric History Center of the American Academy of Pediatrics. Under the direction of the Historical Archives Advisory Committee, its purpose is to record and preserve the recollections of those who have made important contributions to the advancement of the health care of children through the collection of spoken memories and personal narrations.

This volume is the written record of one oral history interview. The reader is reminded that this is a verbatim transcript of spoken rather than written prose. It is intended to supplement other available sources of information about the individuals, organizations, institutions, and events that are discussed. The use of face-to-face interviews provides a unique opportunity to capture a firsthand, eyewitness account of events in an interactive session. Its importance lies less in the recitation of facts, names, and dates than in the interpretation of these by the speaker.

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ABOUT THE INTERVIEWER

Russell A. (Jiggs) Nelson

Dr. Russell “Jiggs” Nelson was born in Wichita, Kansas on November 17, 1918 and spent nearly all of his life in Wichita. He attended the Wichita public schools and graduated from Wichita East High School in 1936. His undergraduate education was at The University of Wichita, from which he received his bachelors degree in 1941 with a major in history. Three years later he graduated from the University of Kansas School of Medicine. His pediatric internship was at St. Raphael Hospital in New Haven, CT and he took one year of pediatric residency each at Mercy Hospital in Kansas City, MO and at Children’s Hospital, Denver, CO. From 1953 to 1955, he served in the medical corps of the U.S. Air Force at the rank of Captain at Castle Air Force Base in Merced, CA.

His professional life began with general pediatric practice in Wichita starting in 1947, with interruptions for additional pediatric residency and military service. In 1968, recognizing the importance of the emerging specialty of Neonatology, he opened a three-bed premature nursery at Wesley Medical Center and in 1972 he opened the first Neonatal Intensive Care Unit in the state of Kansas at Wesley Medical Center. He gradually moved his clinical practice from general pediatrics to neonatology and in 1981 he became full time Director of the Neonatal Unit, a position he held until 1988. He continued his clinical work and teaching in neonatology until shortly before his death.

Jiggs Nelson developed a neonatal transport service in Wichita in 1975, a service that has grown into a broader pediatric and maternal air transport service known as LifeWATCH. He was also instrumental in bringing the Head Start program to Wichita in the 1960’s.

He was an avid reader and maintained his interest in history from his undergraduate days, focusing on medical history, and specifically on the history of newborn care and on early incubators. He was one of the earliest members of the American Academy of Pediatrics to receive training in oral history methodology and he conducted the oral history interviews of Drs. Joseph Butterfield and Lula Lubchenco in Denver.

Jiggs Nelson was the recipient of many awards, including being the first recipient of the Wesley Medical Research Institute’s Quality of Life Award. He was named Citizen of the Year by the National Association of Social Workers in 1982, in recognition of his devotion to the provision of services for infants and mothers. He designated a portion of his estate for the establishment of the Russell “Jiggs” Nelson Endowed Scholarship for the Liberal Arts and Sciences at Wichita State University.

Jiggs is fondly remembered by his colleagues and students as a warm and caring teacher who dedicated himself to the promotion of excellence in newborn care and to the best in pediatric education. Many of his colleagues recall his distinctive appearance often in the hospital and at social occasions dressed in safari jacket, bow tie, Khaki Bermuda shorts, argyle socks and loafers. He was often described as being eccentric, but always interesting. He was noted for his vast knowledge of subjects outside of medicine. He also maintained a dedication to bird hunting until very near the end of his life.

Dr. Nelson died of prostate cancer on September 12, 2002 at the age of 83.

Interview of L. Joseph Butterfield, MD

DR. NELSON: Here we sit on your back porch again on the 24th of June, 1997, and I want to talk to you a little bit about your affairs in pediatrics. I see that your own family traveled a little bit, coming from Pennsylvania and your ending up here. Was your family primarily in farming?

DR. BUTTERFIELD: Yes. My family came from back east. The Butterfield family traces its heritage back to Thomas Butterfield, who was in Chester County, Pennsylvania, by 1685. His son John Butterfield married Mary Brown, who was the daughter of James and Honour Clayton Brown, in 1731 at the Quaker Meeting House in East Nottingham. The Brick Meeting House, as it was called, is located in the present day village of Calvert, Maryland. John Butterfield, the son of John and Mary Brown Butterfield married Hannah Johnson, the daughter of James and Mary Cooper Johnson, in 1756 at the same Brick Meeting House. In 1790, John and Hannah sold their land and moved to Berkeley County, Virginia. This was in the Shenandoah Valley near Winchester, Virginia, where many Quaker families from Nottingham settled in the 1700s. Their son, James Butterfield, and his wife, Rachel, moved to Fayette County, Pennsylvania, where their son, John Butterfield, was born in 1797. John Butterfield went to Harrison County, Ohio, by 1817, where he married Emma Sheppard. Emma's father, John Sheppard, was from Jones County, North Carolina. John and Emma Butterfield were the parents of my great-great-grandfather, John Sheppard Butterfield.

John Sheppard and Maria Tope Butterfield came to Buckeye Prairie in Christian County, Illinois, in a boxcar in the spring of 1873. They are Illinois prairie pioneers, for whom we have received certification from the state organization [Illinois State Genealogical Society]. John Sheppard Butterfield was born May 18, 1838 at Lamartine, Carroll County, Ohio. He was the youngest son of John and Emma Sheppard Butterfield. His mother died in 1840, when he was only two years old. The following year, his father, John Butterfield, a farmer, married Jemima Pillers. John S. Butterfield served briefly in the Civil War. On November 4, 1861, he enlisted as a private in company A, 80th regiment of the Ohio Volunteers Infantry. He was 21 years old, and listed his occupation as "farmer." In the spring of 1862, while on active duty near Corinth, Mississippi, he became ill and received a disability discharge in December of 1862. On January 10, 1867 John S. and Maria Tope were married at the home of Maria's parents, Steven and Jemima [Kale] Tope. Maria was born January 1, 1841 in Carroll County, Ohio. She was the granddaughter of George Tope, who built the first mills in this area of Ohio. He built a sawmill in 1815, and a gristmill in 1818. The gristmill is still standing in the village of Petersburg, Carroll County, Ohio. The mill

complex is listed on the national registry of historic sites, and is the location of the annual Algonquin Mill Fall Festival.

In 1873, John Sheppard Butterfield and Maria moved to Christian County, Illinois. They traveled by train, from Bowerstown, Ohio, with their three young children, Eva Etta, Harvey Steven, who's my grandfather, and Albert Clinton. The family and all their belongings were loaded into a boxcar for the journey to their new home, which was the typical way of traveling at that time. They probably chose Christian County because of the Joseph and Phoebe Birchfield family, who had settled in Buckeye Prairie in 1867. John Sheppard and Maria, with their children, lived with the Birchfields until they could buy land and build a house of their own. John S. Butterfield was a successful farmer and stock raiser. His farm was in Rosamond Township, a mile south and half mile west of Buckeye Methodist Church, which the Butterfield family attended. Maria Butterfield died in 1913, and John S. Butterfield died in 1916. They are buried in Prairie View Cemetery. Their three children all married and lived on farms adjoining that of their parents. Eva Etta, born December 1, 1867, married Benjamin Ebert in August of 1893. Ben and Eva lived with his parents, Philip and Pauline Ebert, on the Ebert farm. Harvey Steven, my grandfather, was born January 19, 1870, married Frances Rebecca Emory, from Carroll County, Ohio, February 15, 1894. Albert Clinton, known as Clint, was born September 10, 1872. He and Vinnie [Reen] Breeden, from Rosamond, were married April 19, 1899.

So the Butterfield family traces its heritage back to Thomas Butterfield, the earliest ancestor in the Butterfield line of whom we have any knowledge. That goes back to 1685, Chester County, Ohio. And I give credit to my sister Maureen Wichelns, in Albuquerque, New Mexico, for this material. She is the family historian.

DR. NELSON: Well it's very interesting that you had no professional people in your family. You were farm family.

DR. BUTTERFIELD: Yes. My father [Ernest Bernard Butterfield] was the first one to leave the farm. I think by count there were 13 generations of farmers. And he became a watchmaker, a jeweler. He was raised in southern Illinois, near Pana, Illinois, in Rosamond Township. And he was a musician; he played trumpet in a dance band that traveled in the area. And he got involved in working in the jewelry store and learned to be a watchmaker, and eventually became a jewelry store operator. The family moved to Terre Haute, Indiana, where I was born in 1926.

DR. NELSON: What did your father do there?

DR. BUTTERFIELD: There he was working in a jewelry store. That was Vigo County, Indiana. I don't have any recollection of that. They moved up to Fort Wayne, Indiana, working in another jewelry store. And then he moved to Decatur, Illinois, where I think he still was working for others, and finally purchased a store in Pana, Illinois [Butterfield Jewelers], where we moved in, I don't know, in 1928.

DR. NELSON: That was a tough time to be moving. [Editorial note: Since the store opened in 1928, the move to Pana was done during boom times. The depression came just after the store opened.]

DR. BUTTERFIELD: Very difficult times, very difficult, during the depression. So that was family, a lot of family around at that time. I have early memories of going to grade school at the Sacred Heart Catholic grade school. That was my first memory ever, of walking past the church with my mother, going to school. I must have been five or six and I can vividly remember walking down that street by that big church.

DR. NELSON: It seems strange that somebody with a Quaker background was going to a Catholic school.

DR. BUTTERFIELD: Well, they weren't Quakers, to my knowledge. They lived in that community, but, my mother was Catholic and my father was a Methodist. My mother had come from Corbeil [Ontario]. Her family came from Canada. Her name was Demers, which is a very common name in Canada. Unfortunately I don't have as much history about her, but that family came from Montreal way, way back, and owned the hotel very close to the cathedral there in Montreal. And my mother came from Corbeil, Ontario, where the Dionne quintuplets were born.

DR. NELSON: Oh yes.

DR. BUTTERFIELD: So that was their claim to fame, I remember that from an early age. My mother was a schoolteacher. She was a wonderful person, very prudent. It was tough times, the depression, and I just remember growing up that we always had to be careful with pennies and life was not too elegant. We lived next door to a doctor, who was an early influence, Dr. Louie Miller. Dr. Louie was probably the most profound influence on my life.

DR. NELSON: I see. And how long did he continue to be an influence?

DR. BUTTERFIELD: Well, during high school. I took piano lessons in grade school, never realized how important that should have been because

my father was a musician, and so we did piano. Never caught on to that. Then I played flute in the grade school band and a little bit in the high school band, and I'll come back to that later, because I played flute in the San Francisco Doctors' Symphony when I interned in San Francisco. But I got very interested in football, and as a sophomore I decided that football was where it's at. So I quit the band, and at 115, 120 pounds, became a guard in the football team in Pana Township High School. And my coach was Virgil Fletcher, who later went to Collinsville, Illinois. He certainly was very big, made a big impression on me.

DR. NELSON: In what way?

DR. BUTTERFIELD: Well, he recognized my tenacity. The previous coach, I remember, told me I was too small; I couldn't play. And I seemed to be determined to show him I could play if I wanted to play. And, for whatever reason, I wasn't fast enough to be in the backfield so they put me at guard. And I became, as they call it, a pulling guard and a blocking guard. And the first-string guy went down in my sophomore year, so I was called upon to substitute and play a very important football game. And that gave me a lot of confidence and an attitude that I could do anything if I really put my mind to it. So I think that's where the coach, Virgil Fletcher, gave me the support that was very important.

DR. NELSON: Then you had some early pretty good models...

DR. BUTTERFIELD: Yeah. And my father, he was very active in the St. Patrick's Church in Pana; he was a choir leader. I did sing in the choir at times. And he was always very much active in the Knights of Columbus and community affairs. I imagine some of my interest in doing things outside the house and outside of my own interests was because of his modeling.

DR. NELSON: What brought you to your choice in college, and your career choices when you decided to actually go to college?

DR. BUTTERFIELD: Well, I graduated from Pana Township High School, 1944, and was very proud of the fact that I was chosen on the all-state football team. On the squad, I must hasten to say the squad, because there were 250 members on the all-state squad in Illinois, which is a very big football community. By that time I was up to about 140 [pounds]. And, so, I was very happy to be chosen as a guard on the all state squad, honorable mention. That I think had a very profound influence on my entire life. I have a few lumps and bumps still to prove it, but it just showed me that little guys could succeed. I played next to a 300-pound tackle named Matt Witham, and the two of us were written up in the Chicago news one time as the "David and Goliath" of southern Illinois football, because we had

developed a technique of back blocking which is illegal now. But he would just stand up and I would go out and come back and just, really...

DR. NELSON: Cream somebody.

DR. BUTTERFIELD: Oh, awful. When I think back of how many people we probably injured. But that got a lot of notice in the paper. And I was the captain of the football team, at 140.

So then I went to the University of Illinois, at Champaign-Urbana. And I was lucky, I had passed the chemistry test with flying colors, so I didn't have to take freshman chemistry. I skipped freshman chemistry and I think that was the beginning of my downfall in college, because I had trouble getting through the more advanced chemistry. And it was a small boy up in the big city and, you know, a lot of going out. That was 1944, and the war was on, and so I decided to join the [US] Navy. I decided that if I volunteered for the Navy, they would probably give me a better chance at choosing. So that began my early political activity.

I learned to volunteer because you can negotiate. Because I negotiated to be a corpsman, a hospital corpsman, going back to my influence by Dr. Louie Miller, the general practitioner who lived next door. So I decided to join the Navy after the summer at the University of Illinois, and went to [Naval Station] Great Lakes, where I did my boot camp and started smoking. My father was aghast when he came to see me, and here I was standing there with a cigarette in my mouth. So, that was an interesting time.

We had sixteen weeks of boot camp, maybe, and then went to Farragut, Idaho, to Athol, Idaho, where we got off the train and where I took the hospital corpsman training. And I was very interested in that. I made good grades and worked hard, and I think that kindled my interest in medicine. In fact, that's why I joined the Navy was to try out being a hospital corpsman, and being around doctors and around health professionals.

DR. NELSON: What was your first impression at that time about doctors, as you met them?

DR. BUTTERFIELD: Well I noticed that they got a lot of respect, they ate well. [Laughs]

DR. NELSON: Slept on clean sheets.

DR. BUTTERFIELD: In the Navy you slept on clean sheets. I was very impressed with the lifestyle. So we finished the corps school; it was uneventful with some wild weekends in Spokane, Washington, as I recall.

And got on a three-bunk troop train. It took us, I think, three days to get from Idaho back to Chicago, back to Great Lakes.

I was assigned to the wards at Great Lakes. I remember the first day the nurse said, "Go out and collect the ducks." Well I didn't know what a duck was. I thought, what in the hell did they have ducks in the hospital for. One of the marines called me over and he said, "That's a duck," and pointed to the urinal under his bed. So that was my introduction to the language of the health care profession.

We were taking care of the Iwo Jima group that came in; the injured came in by train from San Diego, if you can imagine. And I was on a ward where there were a lot of casts, and they just reeked. I still, to this day, remember the odors of the ward, and the stories these guys told.

When I got back from corps school, I went over to the Chief of Staff, and I told him I wanted to go to the fleet marines, because I had joined the Navy to fight in the war and I didn't see any reason to be here stateside. So I volunteered to go to the fleet marines, and the chief looked at me like I was crazy and said, "Come back tomorrow." And my two buddies, closest friends, went over and volunteered to go to cook school. [Laughs]

DR. NELSON: [Laughs]

DR. BUTTERFIELD: Well, he sent them to the fleet marines and sent me to a VD [venereal disease] station in Chicago. So it taught me that volunteering is not always bad if you have the right thing in mind. I never heard from those guys again, they could still be out in the Iwo Jima area for all I know. That was tough duty for corpsmen, and I later appreciated that I was lucky that I didn't get my request granted. The Chief said to me, "You'll like Chicago better than the fleet marines." Even though it was south Chicago, 87th and Anthony. 87th and Anthony was a vocational training school for Navy personnel, and I was assigned in the first aid or the pharmacy. Treating URI's [upper respiratory infections] and VD and we gave out a lot of penicillin and somehow survived.

DR. NELSON: When everybody else couldn't get it, you were giving it out.

DR. BUTTERFIELD: Oh, yeah, we were just shooting it up like crazy. That was 1945.

Well, very shortly after I got there, it must have been from July to almost September, the secretary to the commanding officer, who probably was a lieutenant, called me in and said, "Butterfield, I don't think you fit here, how

would you like to go to college?" I said, "Well, what does that mean?" She said, "Well, I can get you into the V5 program, which is two years college, before you go to the Navy to flight school." So I said, "Fine, sign me up." So she said, "I've already made out your application." So I signed it, and two weeks later the papers came; they sent me to Union College, Schenectady, New York, in 1945. So I spent 1945, 1946, at Union College, which was an incredible contrast with south Chicago. And thanks to that unknown secretary, if I could ever find her grave I would put a bouquet on it. Because she no doubt saved my life from a lot of really bad behavior. That place was like a MASH [mobile army surgical hospital] unit. I just don't want to get it on tape, but the behavior of the sailors and the nurse attendants, it was just unbelievable. And I don't want to say any more than that.

DR. NELSON: So then you were at Union College until what, 1946?

DR. BUTTERFIELD: I was at Union College from September 1945, to 1946. I was there a year. And that was a very important time because one of my friends was from Phillips Exeter [Academy], I think he still teaches at Phillips Exeter. David Black was his name, from Orange, New Jersey. And it was David Black and some of his friends who took me all over the East Coast. We would visit Green Mountain Junior College in Vermont somewhere. And they knew girls in every college you could imagine. We'd go to Smith College; we went to Vassar. We would hitchhike. And we would go down to Orange; but everywhere we went it was party, party, party. Unbelievable. Because he knew all these young women, and these guys all came from prep schools, Andover and Phillips Exeter, so they knew how to live right even though they were broke. And they knew how to get themselves into clubs and Christmas parties, and, so that was a very pleasant time. I didn't learn a whole lot in college, but enjoyed Schenectady and life at Union College, and good food.

I got out in 1946, and went back to Great Lakes. That was another wonderful experience, because we were back in the hospital. A friend of mine, Tom Rossiter, lived on a farm outside of Waukegan, Illinois, and he knew all the young ladies in Lake Forest. So every other night we were off, I think we were off two nights out of three. His mother would show up and pick us up at the gate, and we'd go over to his house and change into seersucker coats and gray flannel pants and white buck shoes and head to Lake Forest and all of the incredible summer parties. And that went on until, actually, that was just before we got out.

I had a side trip in there; I went to University of Chicago. That was it, I got to Great Lakes then went down to University of Chicago where I was assigned to support a group, and I was on the campus of the University of

Chicago. I stayed at Sunny Gymnasium, which is right across the street from where the atomic bomb was invented. And I always wondered if that had any influence on my genetic makeup. But, I was on the campus when the war ended. So that was what, 1946?

DR. NELSON: Mm-hm.

DR. BUTTERFIELD: And when the war ended I decided I didn't want to continue with the V5, to be a Navy pilot, so then I went to Great Lakes while I was waiting to get out. So that was right, I was first sent to the University of Chicago, and then back up to Great Lakes.

Anyway, I was in the Chicago area, had a lot of experience hearing the music down there, the jazz bands, Les Brown, Hey-Hey Humphrey, and others. So I was introduced to jazz in Chicago in those days, which was really a great experience. Then I got out in 1946. That was it. After two years in the Navy, I got out. And since I had enlisted in Springfield, Illinois, they paid me back to Springfield, Illinois. Never mind that my parents had moved to Albuquerque, New Mexico. So I didn't have enough money to get home. So I hitchhiked from Chicago, with my uniform on and my seabag. Went out on the highway and literally hitchhiked to New Mexico, where my folks had moved in the middle of my Navy tour. So that was sort of my pre-college experience.

DR. NELSON: What did you have, essentially two years of college work at that time?

DR. BUTTERFIELD: Probably a year and the summer, probably about a year. They gave me credit. I guess that was about a year. So then I enrolled at the University of New Mexico in 1946.

My folks lived next door to the editor of the *Albuquerque Tribune*, a man named [E. H.] Schaffer, who was a very close friend of the war correspondent, Ernie Pyle. And so I had the pleasure of meeting that gentleman. And also meeting the son of the Schaffers, the guy next door. He was a local and quite a rounder; so he introduced me quickly into the Albuquerque community. And another friend, a guy named Baum was a musician who played trumpet. He would take me to the gigs that he played at, which were down in the bowels of Albuquerque. And I didn't partake in the thing, but that's where I learned that marijuana was a strange drug. Because these guys were all smoking marijuana like crazy at that time. And somehow I escaped that temptation, and just went to school and did my thing.

I graduated in 1949. I did join the Sigma Chi fraternity. And became the president, or what they call the Consul. And I was in the student government; I was in the student council at that time. And had a lot of fun on campus and was involved in the biology club.

One of my professors in biology, a man named [Martin] Fleck, was a big influence. He was a great raconteur, a wonderful spokesman, and he was very early interested in the atomic stuff. He was a consultant at Los Alamos. As a graduate student he asked me to join him on a trip to Taos, where he was speaking on the atomic stuff, which was really exciting. And that was at the artists' colony in Taos, so I had a chance to meet that whole colony of artists that were living in Taos at the time. And it was interesting that here they were learning first hand what was going on at Los Alamos. So that was very interesting. Then I went to graduate school in 1949. I entered graduate school and lived in the Sigma Chi house to get some freedom.

DR. NELSON: That's in New Mexico?

DR. BUTTERFIELD: In New Mexico. And had a lot of fun working on a master's [degree]. I was accepted to the University of Colorado Medical School, for the class of 1954, but I declined because I was too busy working on my master's. Everybody said, "How can you turn down medical school?" All the veterans were trying to get in. But I was determined to finish the master's, which I did, on the evolution of the ambystoma tigrinum mavortuim, which is the barred tiger salamander.

DR. NELSON: But you demurred at that time.

DR. BUTTERFIELD: Yeah, I demurred, and fortunately they let me in the next year. So I took the train from Albuquerque to Denver in 1951, and enrolled at the University of Colorado.

DR. NELSON: 1951.

DR. BUTTERFIELD: Take a break, ok?

DR. NELSON: All right.

PAUSE IN TAPE

DR. NELSON: Well, getting back now after a little bit of a break here. How would you characterize your education at University of Colorado?

DR. BUTTERFIELD: Ok. It was a lot of fun. I moved into the Phi Rho Sigma House when I got here, a medical fraternity. I think that was

very important because it gave us a lot of support. Older guys would help you with books and all kinds of problems. And I roomed with two guys from Albuquerque, and that was helpful because we drove back and forth on holidays. P.G. [Percy] Cornish III was one guy, and Jack Roberts was the other guy. P.G. recently died. So we were members of the same class, and I just think it was hard work being a freshman. All I remember is the anatomy labs; did we take anatomy as freshmen?

DR. NELSON: Yes.

DR. BUTTERFIELD: I guess so.

DR. NELSON: And nomenclature. [laughs]

DR. BUTTERFIELD: Nomenclature. And, my memory is spotty about that, but I enjoyed a lot of that. We had a lot of social tie-ins, and I guess I remember going into the junior year. Pre-clinical years were hard work.

DR. NELSON: I'm curious about pre-clinical work, at that time as far as looking at physiology and anatomy of babies was what, nil?

DR. BUTTERFIELD: What's that?

DR. NELSON: As far as significance for physiology and anatomy of babies, was virtually nil. It was all adult medicine.

DR. BUTTERFIELD: That's right, it was. I can remember very little that had to do with pediatrics. I had a lot of troubles with neuroanatomy, and so I stayed on one Thanksgiving. I remember I decided not to go home; I just stayed and studied neuroanatomy until it came out my ears. And I got through it with flying colors, which was again another challenge that I took on just as I had in football and other places. So I don't have a lot of recollection about that time. You know I had great lectures and great experiments in physiology and just a fascination with all the things that happened leading up to the clinical years.

DR. NELSON: Did you go to school during the summers?

DR. BUTTERFIELD: No, we had summer off. We had quarters. In fact, I immediately went to St. Joseph Hospital in Denver, and signed up as an operating room orderly, because I had been trained as a technician in the Navy. So I worked all through medical college, in hospitals. I enjoyed that because I had a chance to clean up the OR [operating room] and put up [surgical] packs. Then late at night when the docs [doctors] would come in they'd ask me if I wanted to scrub. So I got to be first assistant a lot of the

time, or else I'd pass the instruments, since I knew how to do that as a nurse. So I just had a lot of wonderful one-on-one experience with local doctors in private practice.

DR. NELSON: I'm curious, then you turned to pediatrics. Why did you pick pediatrics?

DR. BUTTERFIELD: That came later, I didn't think about that at the time.

DR. NELSON: What were you thinking?

DR. BUTTERFIELD: At that time, in fact, I came to the University of Colorado School of Medicine on a Boettcher Scholarship. The Boettcher family established these scholarships for students from what they call WICHE, Western Interstate Commission for Higher Education. This was an interaction between western states that did not have medical schools, so that they combined and the state supported a limited number of students to the University of Colorado from say Montana, Wyoming, New Mexico, so I was on a WICHE Scholarship. In addition, I had written an essay for the Boettcher Scholarship, and I won that. And my essay, interesting enough, had to do with a model practice. It's chilling to think about it, but I focused on Farmington, New Mexico, or Durango, Colorado. I envisioned being a family practitioner in a remote rural community that related to the Lovelace Clinic in Albuquerque, for difficult cases and for education and support, and for exchange of training people. So I really described regionalization in an essay, in 1951, in the competition to get the Boettcher Scholarship. And I've never been able to recover that essay, but I think it's fascinating that describing an outreach practice relating to a center, with transportation; it was just the format that later became Newborn Country USA.

I don't know what the Boettcher paid for in addition to the WICHE. But I do know that I did not encumber my parents; I didn't go into a lot of debt. I was unlike a lot of guys that were up to their ears in debt. I had my medical school paid for, I had some support paid for apparently, and then I worked. I don't know what they paid me at St. Joe's, probably not very much.

DR. NELSON: Yours had food and board, as some of them did?

DR. BUTTERFIELD: No, I actually lived at Rose Medical Center, [then General Rose Memorial Hospital], in my junior and senior year.

DR. NELSON: Oh I see.

DR. BUTTERFIELD: So I was an extern those two years. But the first two years I lived at the Phi Rho House, rode my yellow bicycle back and forth.

Well, I lived at Rose, up on the sixth floor. I did histories and physicals, you know, those 15-minute history and physicals, and I pronounced people dead, and I started IVs [intravenous]. I did those three things, and I got room and board, excellent food, and four guys lived in this one room. And we got our laundry, so our whites were always starchy and so were our shirts. And all of the guys that worked at Rose were Catholic, so we called it St. Rose. And all of our classmates that worked at Mercy [Hospital], a Catholic hospital, were Jewish, so we called that Beth Mercy.

DR. NELSON: [Laughs]

DR. BUTTERFIELD: We had a lot of fun, just a lot of camaraderie. The Jewish doctors were excellent teachers, and I was very impressed with the devotion of the Jewish community to teaching. And that may have gotten my interest up in terms of being a teacher. So, no one particularly, but there were various ones who would take you aside and teach you about their cases. So they respected what you did with them and for them, and so I enjoyed those years at Rose Medical Center in my junior and senior year. And then, in my senior year...

DR. NELSON: Now wait, was this in contrast to the attitude of the teaching staff at the University of Colorado?

DR. BUTTERFIELD: In general, I would say in contrast to other physicians in general, who weren't that committed to teaching. I didn't sense that.

We all had our favorite teachers, and I remember various ones that were very committed. I remember [Mattie Block]. God bless him; he's gone. Somebody asked, "How do you counsel a patient when you make the diagnosis of sarcoma of this or that?" And he said, "Well I just tell them not to buy any long-playing records." Those were the kinds of things you remembered.

[Hope Lowry] that later became a dean was a wonderful teacher, and [Phil Clark] was a great teacher, and Joe [Murray]. I just remembered that there seemed to be more of a commitment at the Rose Medical Center in the private community to teaching. I'm not being critical of the University of Colorado either, but there was just a different, more refreshing approach to teaching.

Well, meeting Dr. James [J.] Waring was wonderful, because he was one of the great teachers and he was active in the TB [tuberculosis] issue. He made that wonderful statement talking about the physical examination and the importance of the rectal exam, saying that, "If you don't put your finger in it you're going to put your foot in it."

Well, my senior year was different because everybody in the class had a quarter off in the senior year. And so the class came together and they drew lots or something, and everybody wanted to have the spring quarter off so they could start their internship. As a bachelor, I decided I could care less. I decided to take the winter quarter off, and I was working at the Florence Crittenton Home for Unwed Mothers. And in December of 1954 I got a job as the bell captain at the Hotel Jerome in Aspen, Colorado. And that changed my life forever. The other thought I had was going to Mexico and learning Spanish, and working in the Children's Hospital, at the Hospital Infantil, or something like that, in Mexico City. But I just couldn't get that connection.

END OF TAPE

DR. BUTTERFIELD: Well my senior year we were on the quarter system, and so I chose to take the winter off, got a job as the bell captain at the Hotel Jerome.

DR. NELSON: Say, to be a bell captain you had to have a little pull. How did you get that?

DR. BUTTERFIELD: No pull at all. I interviewed with the manager of the hotel, and I told him that I had worked my way in college, from 1946 to 1949 as a bellhop and a bartender, and a desk clerk, anything you can be, at the Franciscan [Hotel] in Albuquerque. And then, in 1949, I spent the summer as the desk clerk at the Hotel Colorado in Glenwood Springs. And then, in 1954, I interviewed the manager and I told him about that experience. I said I had a BS from the UNM [University of New Mexico] and an MS from UNM in '51, and I was just a few months away from an MD at the University of Colorado, and that I had four years experience of hotel work; was that enough. So he said, "You're the bell captain."

DR. NELSON: [Laughs]

DR. BUTTERFIELD: So I reported December 19, of 1954. I drove my 1941 Plymouth convertible to Aspen, and had a room across the street from the Hotel Jerome, that was called the Mill Building.

DR. NELSON: That was December of 1954.

DR. BUTTERFIELD: December of 1954. And nobody else showed up, so I was the bell captain, but I was the only person there so I worked from 6:00 am until midnight every day for the entire month, for a man named Elijah, who owned the hotel. It was leased by a man named Walter Paepcke, president of Container Corporation of America in Chicago. He was the big entrepreneur who had revised Aspen in 1946. So when Mr. Paepcke came down the stairway, the first day that I saw him, here I was sweeping the floor at 6:00 am. And here was this captain of industry with his hunting coat and leather appointments and his cigar with the holder and ascot, looking extremely elegant but nobody to talk to except the bellhop sweeping the floor. And when he found out that I was close to an MD and doing this as an experience, he thought I was a wizard.

That was the beginning of a whole series of conversations with Mr. Paepcke, who was starting the Aspen Institute for Humanistic Studies, which was aimed at recruiting captains of industry into an experience where they would talk about design and communication and everything but their industry. And people like McNamara, who was one of his friends, and [Paul] Nitze who became involved in the Navy, and a lot of his friends from industry were the ones who put the money into supporting the Aspen Institute for Humanistic Studies. They all kicked in an apartment because that was their donation, more or less, to the Aspen medical complex.

That was an incredible opportunity to see people at the top of the line in industry working together. And I was in the service role of course, but I did meet Walter Paepcke and his wife, who was called Pussy Paepcke. Elizabeth was her real name, but she preferred Pussy. They had come out to Colorado a few years before, and had a ranch in Larkspur, Colorado. And they went over to Aspen skiing one time. She got Mr. Paepcke interested in Aspen, and he saw the potential for a conference, an institute for ideas and whatnot, and so that's when Aspen was rescued in about '45, '46, by Mr. Paepcke. And I had the pleasure of being around those people back at that time.

In fact, going back a little bit, in 1949 I was the desk clerk at the Hotel Colorado in Glenwood Springs, 40 miles down the road. That was the year that Albert Schweitzer came to the Goethe Bicentennial [Festival], which was held in Aspen. The Minneapolis Symphony came there en masse, and I remember Piatigorsky, Igor Piatigorsky, a cellist, stayed at our hotel and practiced in the ballroom right behind the desk. So I never saw Mr. Schweitzer, but that's the year he was there. We did have customers like Gary Cooper and Patricia O'Neal and people like that. So my hookup with Aspen in 1949 and then 1954 are two dots that connected into a whole lot of other things later on.

DR. NELSON: We move now to you're almost getting out of med school.

DR. BUTTERFIELD: I was on the honor committee. We would meet and decide if people had been cheating and whatnot. I don't remember much about that; but we had a lot of fun in the senior class play, and we graduated in 1955. And I had applied for rotating internships, at LA County [Hospital] and at King County [Hospital] in Seattle and at the San Francisco Hospital of the University of California, San Francisco service. My second choice was San Francisco, and that's what I got. So I drove my 1941 Plymouth convertible out to San Francisco. So that was my beginning as my internship.

DR. NELSON: Weren't you good friends with Phil [Philip] Sunshine?

DR. BUTTERFIELD: Oh, he was a classmate. Yeah, Phil was a classmate, and he went off back east somewhere. But, I had no idea that he was interested in pediatrics, nor him knowing that I was. At that time we didn't talk about it. We did pediatrics and Dr. Bob [Robert H.] Alway was our professor. He was very flamboyant.

DR. NELSON: He came out of the University of Minnesota, didn't he?

DR. BUTTERFIELD: Alway came from Washington, I believe.

DR. NELSON: I thought early he was actually under Irvine McQuarrie up there. Went somewhere else and then came back there.

DR. BUTTERFIELD: Could have been. At that time you didn't know where anybody came from.

So I got out there, and in this rotating internship, and everybody hated surgery for some reason. So when we went through, and we had our usual rotations: OB [obstetrics], general surgery, internal medicine, and pediatrics. In pediatrics Saul [Joel] Robinson was the high rank there, and he was very tough. Every time he'd come to me he would remind me that the only time he heard from Colorado was when they wanted money. Saul was tough on me because I was from the University of the Colorado, and he wasn't too happy with the way they had treated him; they just wanted money. They didn't care about him as a person, so I had to put up with that.

During that time, people would trade off services they didn't want. So I wound up with plastic surgery, orthopedic surgery, and eye surgery. I

wound up with at least six of my rotations on surgery because I liked surgery. And I also kind of enjoyed OB somewhat. Didn't have any interest whatsoever in the newborns. And so I was invited by Dr. Leon Goldman, who was the Chief of Surgery, up to the University of California, San Francisco, for an interview because the Chief Resident had recommended me to be a surgical resident, which was highly sought after. And by that time I was convinced, as I said to Dr. Goldman--or whatever his name was--he was [Dianne] Feinstein's father, the senator from California. Dr. Goldman was her father. So I said, "Well Dr. Goldman, I love surgery but I can't stand surgeons."

He thought that was funny, and that was the end of our interview. So that's when I had to make a decision. I decided to apply to Children's Hospital in Denver.

DR. NELSON: My goodness, now, this just came out of the blue like that?

DR. BUTTERFIELD: Came out of the blue, because I decided that I would rather work with young people and families and mothers. I did have a rotation on peds [pediatrics], and I just had a better feeling about working with moms and babies. Fathers weren't around much. So I decided I liked pediatrics.

It was an exclusion. I didn't like internal medicine, they were too old, couldn't stand the bedsores. And I didn't like surgery because of the anal attitudes of the surgeons. And I couldn't stand the orthopedic surgery; it was less like that but it was too much like carpentry. So pediatrics was it by exclusion. They just seemed like nicer people. And I had been to a pediatric meeting in Powder Springs as a junior medical student, and I remember Bob [G. Robert] Fisher and I remember some people that all wore bow ties; I thought that was pretty swift. They just seemed like nice people. [W.] Wiley Jones was around; he was very dignified.

DR. NELSON: Wiley Jones never wore bow ties.

DR. BUTTERFIELD: Oh, no, no, no, he had a gold chain

DR. NELSON: He wore a cravat and always had a nice flower in the buttonhole and everything.

DR. BUTTERFIELD: But I just remember certain pediatricians who were very friendly, Doc Johnson and [Dirk Lu?]; they made you feel wanted. So I must have had flashbacks to that, but for whatever reason I drove my 1941 Plymouth back over the mountain, over the desert at night, and arrived

in Denver, I think by July 1 of 1956. And that was the beginning of my pediatric career.

My other sidebar is that in San Francisco during my internship, I did play flute in the San Francisco Doctors Symphony, which was a lot of fun. And I did hook up with some laymen, who I'd met in Aspen that took me motorboating on the San Francisco Bay, so I had a very nice introduction to San Francisco in terms of Telegraph Hill type people, and the upper crest. And I went to, I sat in the Bekins' what do you call it, apartment.

So there I was, interning, at the same time hobnobbing with Marin County people and a divorcee that I had met in Aspen, and just really enjoying myself. That, and the nurses treated us well.

So I earned 50 or 75 bucks a month, I think, and was living very well. I also sewed up a guy one night who had been in a fight, who was the bartender at the Hamm's Brewery. He had told me, "Any time you want to come up, let me know; just call up." So I would call up there and he would say, "Tonight it's the postal service." So that would be the code word, "postal service." And I would take my dates, and we'd go up there and have a spread and all the beer you could drink and dancing. On weekends it was the best thing in the world. My social life was supported by Hamm's Brewery. And then in my obstetric rotation I learned that that last beer on top of the building took ten seconds exactly to fill up. So I could count contractions in the dark.

DR. NELSON: [Laughs]

DR. BUTTERFIELD: So those are my claims to fame.

DR. NELSON: Well, we've got you actually in the practice of pediatrics. You pretty much described how you came into pediatrics now, but what did pediatrics look like then compared to now?

DR. BUTTERFIELD: In 1956, Children's Hospital was a private hospital, dominated by the private pediatricians. We had, I think, 150 beds, and it was full. We would be on call at night and literally have the entire house, maybe two of us covering the entire house. So you had to make decisions quick about admissions and emergencies and crises and it was excellent. Chief residents were, Bill [William H.] Bartlett was chief resident, and the senior. The PL2s as we call them now, the second year residents, were very good at teaching, and so we just had a lot of support. Pediatricians were extremely hands-off. We wrote all of the orders, and we did all of the procedures. They didn't even do the exchange transfusions. So we got to do really hands-on, lot of fun, work hard, never got home much. Well, I was a bachelor still in 1956.

DR. NELSON: When I was at Children's, I was tremendously impressed by two people there, and one was Wayne Danielson.

DR. BUTTERFIELD: Wayne Danielson and Harold [D.] Palmer.

DR. NELSON: And Harold Palmer, who really taught me about pathology. One taught me about clinical pathology, and the other one taught me about good anatomic pathology.

DR. BUTTERFIELD: I had the same impression. I went there because of Harold Palmer, but he left before I got there. He got in a fight with the board, and so John [R.] Connell came in and took his place, and he was a very kind, wonderful teacher. He had been with Patton in the war. And Wayne Danielson was just a genius in the laboratory. And so the combination of the residents, and a few people like Seymour Wheelock that were great teachers, and David Akers, a surgeon, made it a good learning experience, very practical. We saw very little of the university people, and there was just not much interaction between the University of Colorado and Children's Hospital.

PAUSE IN TAPE

DR. NELSON: Wayne Danielson was one of the people who was willing to begin to really break into microchemistry..

DR. BUTTERFIELD: Yeah. John Connell was there, Palmer was gone, and [C. Henry] Kempe would come over and give lectures. He arrived I think in 1957. I think [Henry K.] Silver came before Kempe in '56. I remember Arthur Robinson was a great teacher.

DR. NELSON: Oh yes, Arthur had come from Mt. Sinai in New York.

DR. BUTTERFIELD: Incredible teacher.

DR. NELSON: He was quiet spoken, slow spoken, but he was so highly organized, he never wasted a word.

DR. BUTTERFIELD: No. And [R.] Parker Allen was a fantastic teacher in radiology. It was just a very wonderful supportive group.

DR. NELSON: Well, Parker Allen taught us that the radiologist was not there to do chest films; he was to help us examine the chest radiologically.

DR. BUTTERFIELD: That's right. So, anyway, those were the years at Children's. And then I met Perry; Perry was a widow. She had lost her husband in a crash in 1954, I believe, the same crash that killed the wife of my close friend Roger Watkins. They were on the way to Cripple Creek to the opera on the wet pavement and a lady slid into them. Perry had a son, Bruce, and I met them at a Fourth of July picnic. We began dating, and married in 1957 in Greeley, and certainly her influence on my life continues to be profound.

She had been working with the migrant families in, Ft. Lupton Colo. teaching the migrant children and finding family resources. She went to The Bishops' School in LaJolla CA., and then to Smith College, so she knew a lot of people from a lot of levels of society. And her family were very much Colorado pioneers. In fact one set of her great grandparents were here in the late 1850s, just at the beginning. And all of her grandparents on both sides were out here before 1872. I just love the history side of it; maybe that's why I got interested in history. One grandfather came to Aspen as the accountant for the man that owned the Hotel Jerome. Her grandfather married Mary Maroney (born in Black Hawk, CO.) in 1891 at the St. Mary's Catholic Church in Aspen. They moved on to Cripple Creek in 1893, when the silver thing happened, and then they moved eventually to Greeley. So Perry was from Greeley, Colorado.

DR. NELSON: Tell me a little bit about the staff and their organization at Children's Hospital when you arrived, versus the organization of staff of the 1990s.

DR. BUTTERFIELD: Well the staff at that time was very few full-time. There was Wayne Danielson in the lab, and he was not an MD. There was a medical director, John Connell. There was Charlie [C. Richard] Hawes, the pediatric cardiologist, and there was Jean McMahan, who was in development. And that was it. Those were the people that were full-time, paid by the hospital in some way. And Parker Allen in radiology.

The staff was dominated by the private docs, and they ran the hospital. They had a fund that paid for indigent care, which was from the newspaper people, the Tammens, the Tammen Trust Fund. It paid the hospitalization and it also paid some doctor fees; I don't know how much. The Tammen Fund was our approach to the medically indigent. And they just wrote off a lot of the care.

DR. NELSON: Now today, what's it look like?

DR. BUTTERFIELD: Well today it's about 35% Medicaid, and everybody is dominated by corporate medicine.

DR. NELSON: What about the staff itself?

DR. BUTTERFIELD: Oh, today the staff is dominated by the faculty at the University of Colorado, and I'll get into that bridge. The chief, the medical director is Dr. Doug [M. Douglas] Jones [Jr.], and he is also the professor and chairman of the Department of Pediatrics. So that position was combined, and I'll come back to that later because I had something to do with that. And all of the heads of divisions, 16 or some, are all full-time people, full-time faculty, and it's totally dominated by the faculty.

DR. NELSON: But when a patient comes in the hospital now, how is he approached in this era of time versus that period that you were training?

DR. BUTTERFIELD: Well there's a lot of similarity. Let's say the patient goes to the pediatrician's office and they feel a mass in the belly, and they send the patient to the hospital. They may send the patient by way of radiology or by way of the lab for some tests on the way in. But the patient winds up on the ward, in a bed, and the first person to see them in the hospital is the PL1. This year, 17 of the 20 PL1s are female, with three males; so that a young smart female doctor will see the patient. And she does the history, does the physical, checks it over with the resident on the ward, and they come to an agreement of the diagnosis. Then they call the pediatrician back in his office to discuss it and to get orders, and he, by and large, goes along with whatever they want to do.

DR. NELSON: Well in my day at Children's, there was one woman resident and one woman really active. So that's quite a change.

DR. BUTTERFIELD: Yeah. Today it's totally dominated by females. And that's shifted, even recently.

DR. NELSON: Why didn't that occur earlier, Joe; do you have any idea?

DR. BUTTERFIELD: Well, because there weren't that many females in medical schools. There's more women in medicine now and there's more women in pediatrics and OB as well. So it's part of the evolution of things.

DR. NELSON: All right. Let's jump back on who helped you most in your career. Did your marriage to Perry have a change in your career attitude?

DR. BUTTERFIELD: Well, I was an eager beaver; I worked very hard. People like Jules Amer, and Arthur Robinson and Bill Davis, all the people who I worked under as private pediatricians, appreciated my work. And all

of them were very complimentary. So in the year 1956, before I got married, I had established myself as a hard working guy that never went to bed. And loved to do things, lot of curiosity, and read a lot. And so, I guess, I was competitive as a resident, as a PL1 or first year resident as we said.

And then I met Dr. Kempe in 1957. Frank [J.] Cozzetto was called over to see a preemie. Now this is very important. We had a baby that had sclerema [neonatorum], which is due to the saponification of the fat. And the baby was cold, it was just a baby that was totally under-everything, under-perfused, etc. And I remember Dr. Kempe being called over with Frank Cozzetto to see this baby, and they just sort of threw up their hands and said, "There's nothing we can do, this baby is going to die." And the baby did die. So that was a challenge, seeing that baby.

I remember another very fascinating case, where a baby came over from St. Luke's [Hospital] and it was a doctor who I won't mention, who had told the mother that the patient died at birth. And so the baby came to Children's, and the baby was far from dead, and so the pediatrician and the father had this incredible tiptoe conversation, "Now what shall we do?" They had told the mother the baby had died, and here was the baby living, and it went on for some time. I don't know whatever happened, but that was one of the things that just stuck in my craw. How can you tell the mother the baby died when the baby is alive? And then they got into problems because who's going to pay for this? I don't know whatever happened to that story.

So I remember cases like that. I remember kids coming in that had babies who didn't pee, and who wound up having stenosis of the urethra. I just remember we used to get some incredible cases, and you read about those, and then there were spectacular results of the surgeons. I remember pyloric stenosis was all over the place, and they always found it when they operated. It was always there. And it was a very folksy type thing. It was a lot of almost Germanic type of top-down, "If I say it's so, by God it's so." I was kind of a rebel, because I was always asking, "How come? Why are you giving that kid gamma-globulin? Why are you operating on this kid?" And so I got the reputation of being kind of a gadfly. And Dr. Kempe liked that.

So, what happened was, Perry and I were married in '57, and our daughter, Brigid, was born in 1958. We planned to go to Durango, to go into private practice. In fact, we had a contract on a house right across from the hospital so I could be near the hospital. And Perry had incredible polyhydramnios. And I didn't know what that meant, but I knew it was bad. So we decided not to sign the contract until the baby came, which was my first clue that there was something going on. I don't think the obstetricians were even worried about this at the time. So when Brigid was born, she had a tennis

ball shaped sacrococcygeal teratoma. And you know you just say, "Oh God."

She was born at Presbyterian Hospital, which by the way had been founded by Perry's grandfather, C.A. Kendrick, on "Grasshopper Hill", (later known as McCullough's Hill). Perry's mother was Idris Kendrick and, her married name was McArthur; her family was very prominent in Denver. And so she delivered at Presbyterian Hospital, and our baby, Brigid had this problem, and I remember bringing her over in a little metal container, a portable incubator, I forget what the name of it was.

DR. NELSON: Yes.

DR. BUTTERFIELD: It was modeled after a dog thing. There was no question about the diagnosis, and the thing went all the way up to her diaphragm, so David Akers did the surgery. I do remember that we took the baby by to see Perry before we left. She came through the surgery ok, but it affected her bladder. And the sacroplexus was all fouled up.

At that point we decided that we weren't going to Durango. So I called a guy named Joe [Joseph A.] Browning from Ohio, who was sniffing around Durango and wanted a practice there but he didn't want to go there if I was going. So I called Joe Browning from Marion, Ohio, and said, "Joe, my daughter's got a serious problem, I don't want to be 350 miles from the nearest pediatrician, and I don't want to be the pediatrician. There's no urologists; there's no pediatric surgeon; we're not going. I don't know what we're going to do, but we're not going." So that was the day, whatever day that was she was born, when I decided to look for something else. But we were on our way to be general pediatricians in the Four Corners; I would have been the first pediatrician in Durango. And that was sort of in keeping with my earlier dream of establishing a rural practice, relating to a Lovelace Clinic, and setting up air transport for the sick and setting up outreach and interaction. And so, the essay that I'd written was foiled by this birth defect.

That almost was poetic, because I decided not to go there. And the choices were to go to Lawry [Air Force Base] and work as a contract doctor with the Air Force. The second, I had options to go into practice in Denver. The third option was to do a fellowship, and Perry supported me all the way. I chose to go see Dr. Kempe to see what he might have in the way of a fellowship, and he said, "Dr. [Lula O.] Lubchenco has a fellowship that's open." And I just decided that it was a chance to work with a fine lady, and a chance to further my education at a time that we could afford it. And I don't know what the pay was, but it seemed like a lot of money at that time, \$15,000 I think.

So from 1958 to 1960 I was a fellow in premature infant care at the University of Colorado Medical Center, where the late C. Henry Kempe was the chairman of the Department of Pediatrics. And Lula Olga Lubchenco was the director of the Premature Infant Center.

Just to go on for a little bit, since 1960, I've published 47 papers, nine chapters and books, 48 abstracts, commentaries, editorials, and of course that's changed. Jumping to 1961, I go to starting the perinatal society, the first such in the world.

But I think we ought to spend a little more time in 1958, as a fellow. In 1958 to 1960, as a fellow, life was pretty simple. We didn't do a lot for preemies [premature infants] in those days. The fathers would bring them to the hospital in those little containers. They would go to the hospital and pick up the baby and bring them over. The nurses were very much in charge of the feeding and everything. Dr. Lubchenco made rounds, Henry Silver made rounds, Donough O'Brien made rounds. Dr. Donough O'Brien was from Great Ormond Street [Hospital for Sick Children] in London, and he was brought here by Henry Kempe to set up the microchemistry lab at Children's. So Children's suddenly went into the modern chemistry era. And I don't know how much interaction there was between Wayne Danielson and Donough O'Brien, but my guess is none. Because there was a pretty big gap between the university and Children's.

The reason Dr. Kempe took me on as a fellow was because I had been such a maverick and asked questions, and didn't accept anything as face value. And he liked that. So it was my very revolutionary style that led him to say, "Why don't you come and be a fellow with Dr. Lubchenco?"

And then the stories are enormous, you know, 1958 to 1960. All of the things that we saw, the Gray syndrome with chloramphenicol. Harry Gordon was a visitor. Patient care was pretty much face and fanny care and feeding, and very conservative. We taught medical students; we taught nurses; we taught residents; and we had classes for doctors and nurses in the community every year. There was a lot of emphasis on teaching, because Dr. Lubchenco had a grant from the Children's Bureau. I don't exactly know how that was.

DR. NELSON: Well, didn't Dr. Washburn have a grant that he extended following a cohort at Colorado Children's?

DR. BUTTERFIELD: Well, Alfred [H.] Washburn had the Child Research Council [University of Colorado School of Medicine] or something, and he had a very active practice in terms of following children for many, many years.

DR. NELSON: That cohort later became the pattern they look at when we had a national survey of random things. Let me ask you, what was the attitude toward that kind of work; it wasn't really considered research, was it?

DR. BUTTERFIELD: No, that was considered sort of strange. He had a doctor, Robert [S.] McCurdy, I think, who was his associate. And there was a lady doctor who I can't remember, a little lady [Edith Boyd], who was the one that finally got them to stop irradiating the thymus. Do you remember in those days the thymus was big, and so since it was big the radiologists would irradiate it and it would go away? And so this little lady quietly did the studies and said, "You know, the thymus evolves anyway, so you don't need to irradiate it." And there's no way of knowing how many of those people wound up with thyroid CA [cancer], because of that practice, which was common.

DR. NELSON: No, but the thing that I was trying to relate was that clinical research about growth processes was not considered as really fundamental research.

DR. BUTTERFIELD: Oh, no, that's true. Washburn, right. And the follow-up studies that Dr. Lubchenco started later on were just sort of busy work; I mean that was the view of some of the hard scientists, without naming anybody. I'll not mention a lot of names because they're living, they will be living long after I am, and I just see no reason to.

DR. NELSON: When you look at involvement of Children's Hospital, with the developmental handicapped children across the street, people didn't consider that as part of pediatrics.

DR. BUTTERFIELD: Yes. I think they appreciated it, they were glad that somebody else was doing that kind of work. As you know Children's had the Boettcher School right across the street. See, the reason that school was there was because of a lady named Charline Humphreys. Charline Humphreys was born to Albert Humphreys and his wife, and had a difficult birth. She had CP [cerebral palsy], terrible CP. Humphreys is a big gold mine person, extremely wealthy, lived in a mansion over by Governors Park. And so the Boettcher School was developed as a tribute to Charline Humphreys, who I happened to know socially through friends. And it was across the street from Children's. There was interaction at some level; but we didn't go there.

DR. NELSON: But the fact that they had an interaction was very important. We didn't have those in many of the other institutions of higher

learning. For instance, the lack of appreciation, even at Yale, of the work of the people there.

DR. BUTTERFIELD: [Arnold L.] Gesell?

DR. NELSON: Gesell.

DR. BUTTERFIELD: [Edith B.] Jackson.

END OF TAPE TWO

DR. NELSON: We were talking when we stopped about your beginning involvements within the medical societies, and within organized medicine, and why you felt that this should be part of a doctor's life.

DR. BUTTERFIELD: Ok. I think that 1958 to 1960 was the fellowship. I stayed on the faculty in 1960 as a senior instructor, which is like a glorified resident. And I joined the Denver Medical Society and the Colorado Medical Society because I felt that was very important to relate to all the physicians in the community. And at the same time I joined the Colorado Chapter of the American Academy of Pediatrics.

I got involved in the AMA [American Medical Association] side of things because it seemed like the potential was there to do more, if you will. I also joined the Colorado Medical Society, and I guess what I'm trying to say is at that level I sat on a committee called "Old Doc Experience", and we met once a month and wrote articles that were sent out to the newspapers all over the state. There was a guy from the *Rocky Mountain News*, named Bob Perkins, who was a lovely guy who is since gone. But anyway, he would write these up as stories, and we would send them around the state. Things like how to keep the salmonella out of the turkey at Thanksgiving, and breastfeeding, and just a wide range of topics that we would just talk about and he would write them down. So that was one involvement early.

I got involved in the Maternal Child Health Committee, and on the Maternal Child Health Committee we actually came out opposing the mandatory testing of newborns for PKU [phenylketonuria]. That was 1963 and that was a time when we didn't know enough about PKU, so I was in the unique position of opposing that test. And that led to my interest in the legislature, which we'll get back to later.

But anyway, I got elected to the House of Delegates in the State of Colorado to represent the Denver Medical Society, and in that capacity I had a chance to shepherd the Child Health Associate bill through the state medical society. This was Dr. Henry Silver's bill, his attempt to legalize the designation of the

Child Health Associate. And so we got that bill through, and that was no small task because at one time the pediatricians voted literally 35 to 28 to support that bill, and that was pretty close. There was seven votes difference.

So it was working with the political side of health care, if you will, that whetted my interest. And I actually got involved in the AMA Committee on Maternal and Child Care in an interesting way. For many years the Children's Hospital had a conference at the time of the University of Nebraska – University of Colorado football game. And what we did was when the game was at Boulder, we invited our colleagues from Nebraska, and when the game was in Lincoln, they invited us. So we had a home and home thing going on, which was very interesting. And a guy named Harold Morgan, Harold "Hap" Morgan, was involved. He was an obstetrician from Lincoln, and he was a member of the AMA Committee on Maternal and Child Care. So, he was very impressed with the Newborn Center when he came to visit Colorado in about 1967, let's say. He was impressed with the idea that we were doing the regional approach. We had a transport service; we had an outreach education program. We were very interested in that model being taken regionally and nationally, and so that was the beginning of the concept of regionalization. This idea kind of comes up now for the third time; first the essay, and then the attempt to practice in Durango, and now through Harold Morgan and the AMA Committee on Maternal and Child Care. I was invited to join that prestigious committee and that was just what I needed.

The Committee on Maternal and Child Care had an obstetrician named Bill Jack [?] from Kalamazoo, or Grand Rapids, and he was the obstetric input. It had Crawford Bost from California, who was a pediatrician. And it had Jim [James M.] Baty from back east, in Boston, pediatrician I believe, and a couple of other people who I can't remember. We had Bob [Robert O.] Quello on it, he was a family practitioner. Maybe, no, he was not on that, not yet.

When I got on the committee I told them that I had an NIH agenda, just so they'd be honest. They all kind of looked at me. I said, "That stands for: What are the No-nos; what are the Innovative possibilities; and where are the Hang-ups?" And so I told them that's my philosophy in terms of programs for maternal and child care. So they were relieved that I wasn't talking about a federal NIH approach.

Very early I suggested that the AMA consider the adoption of a policy statement that would call for the regional approach to the care of mothers and newborns. So that was suggested, it was accepted as an idea, and we talked about it. We met two or three times a year at O'Hare [Airport] in

Chicago at the Marriott, and for several meetings that was the regular agenda item. I haven't thrown away all the paper that will eventually get its way to the landfill, but I do have those meetings, the minutes of those meetings and what we talked about and all that stuff, over at a room at Children's.

The Committee on Maternal and Child Care of the AMA sat around and talked about that, and October of, let's say 1969 roughly, we had a special meeting. It included Jerry [Jerold F.] Lucey from the Academy of Pediatrics, Sprague Gardiner from the ACOG, American College of Obstetricians and Gynecologists, he was representing some lady that couldn't come, [H.] Belton [P.] Meyer from Arizona, and myself, representing the AMA. We got together and we met at the Brown Palace [Hotel, Denver], spent all day, and we wrote a one-page policy statement on regional perinatal care. I think that was October of '69.

DR. NELSON: What does the new version look like, compared to the original policy statement?

DR. BUTTERFIELD: Ok, if you're talking about *Toward Improving the Outcome of Pregnancy 2, TIOP-2*, all we did originally was develop a policy statement. It was not as detailed as what you're talking about. So all we did was agree that when we could identify the high-risk mother, where appropriate, she should be moved to a regional center. And if that didn't happen, where appropriate (we kept putting in those, you know, what do you call them, where appropriate) the newborn should be moved. So all we talked about was recognizing the high-risk mom, and if you missed that, transporting the newborn to a regional center. And that is just as true today as it was then; it hasn't changed a bit. That was one page and we also put in there a line that had to do with evaluation and research in this area. And that is all included in the 66th *Ross Conference on Pediatric Research: Regionalization of Perinatal Care*; that statement should be in there. So that was what we came up with.

We met for the last time in Arizona at Litchfield Park, at the Wigwam [Resort], where we did this final smoothing out of it. I remember Al [Alfred W.] Brann [Jr.] was there at that time. And once we approved of it, final words, then it went to the Board of Directors of the AMA. The AMA Board saw that thing, and they approved of it. I think that they approved it in early 1970; because the AMA House of Delegates approved of it in August of 1971. So it took us literally two years to get this one page statement on the policy into shape that we could get it through the House of Delegates.

There was a gentleman, a surgeon on the House of Delegates from Arizona, that Dr. Meyer knew very well. His name escapes me. And we lobbied the

House of Delegates through neonatologists in every state. For instance, Billy [F.] Andrews knew his people in Kentucky; I knew the people in Colorado; and we literally lobbied the House of Delegates of the entire AMA to support this seemingly innocuous policy. So the key date then is August 1971; it was adopted, and everybody was happy. We thought, "Well, we've done our job," and went home.

Well, that was August. The next year I went to an AMA meeting put on by Effie [O.] Ellis at the Palmer House in Chicago, and I sat next to Arthur [J.] Salisbury from March of Dimes. They were very interested in this. And a guy named William Raspberry, that *Washington Post* columnist, was talking. I remember sitting in the Red Lacquer Room. And Effie Ellis put this meeting together, which had to do with the "declaration of interdependence," as it was called. And we all signed this "declaration of interdependence," about how we all needed each other.

Arthur and I were talking, and he said, "Boy I'm worried." He said, "It seems to me like everybody has declared themselves to be a regional perinatal center. We don't have any guidelines." So here we were with a policy adopted by the AMA, which was exciting, but there were no guidelines. And so he said, "I think we should work towards that goal." The Spring Session of the Academy was in San Diego in '72, and at that meeting, Virginia Apgar, from the March of Dimes; also a guy named Gabe [Gabriel] Stickel, from the March of Dimes; Jerry [Gerald E.] Hughes from the AAP; Stanley [L.] Harrison, who had worked on that policy a long time; and myself, representing AMA, all met and decided that there should be a national policy that represented all the providers. And so that meeting was set up in Chicago.

DR. NELSON: How did you become involved with American Academy of Pediatrics?

DR. BUTTERFIELD: You see, these things were running fast; how do you say it when you don't do it one by one but you just go at full bore? What happened in 1971 was that the Colorado Chapter of the Academy of Pediatrics met at the Broadmoor. Don [Donald W.] Schiff was the chapter chairman, and I knew that the AMA statement was moving along. See, I was in both camps. I knew that the AMA was close to adopting a policy, and so it was like in April or May when the Colorado Chapter of the Academy met, and I wrote a resolution. And the resolution was that we petition the AAP Board of Directors, as they call themselves now, to adopt an initiative, a policy statement, endorsing the formation of a perinatal section.

They kicked that over to the Committee on the Fetus and Newborn [COFN], which Stanley Harrison chaired, you see. Here we start to get this overlay,

and I think [L.] Stanley James (New York) was the chairman of that committee at the time. And Jim [James L.] Sutherland (Cincinnati) was a member, I think Bill [William N.] Tooley (San Francisco) was on that. We can go down and find out who was on that committee at that time. We asked for a section on perinatal medicine. They met several times, at their regular COFN meetings, and they changed it to a Section on Perinatal Pediatrics; not perinatal medicine, a section on perinatal peds. And they not only recommended that, but they recommended that the Academy approach the [American] Board of Pediatrics to consider the formation of a subspecialty of perinatal medicine. Of neonatal-perinatal medicine, not neonatal-perinatal pediatrics, so that was a two-for. We not only got the Board approval for the section on perinatal peds, but also the Board approaching a neonatal-perinatal medicine board.

So I figured that that little initiative in Colorado led to two big blockbusters. And I think that was approved in 1973, at Vail, when the executive board met prior to the APS/SPR in Denver at that time. I remember we went to the University Club and it snowed. We had the newborn dinner; the newborn club met, and it snowed. They had met that very time, up in Vail, and approved of this. So Colorado played an incredibly interesting role in both the statement on the AMA, which was 1971, and the adoption of the idea of a Section on Perinatal Pediatrics in 1973, as well as the initiative towards a neonatal-perinatal medicine board. So that was all within two years, and that all came about because of the Colorado stuff.

So now we have a third cut. And the third cut is that District 8 met in March of 1973. It met at the Rancho Encantado, in Tesuque, New Mexico. We got Ross Laboratories, Jack Chugden was the regional rep [representative], to support a meeting which included [August] Larry Jung from Utah, plus his secretary Leona Hollingsworth, plus Nolan Barnard, his administrator; plus Ron [Ronald W.] Coen, from University of New Mexico; plus Tom [Thomas R.] Harris from the University of Arizona; plus [Belton Meyer] and Joe [William J. R.] Daily from Phoenix, not university people; plus Joe Butterfield from Children's Hospital; plus Maribeth [P.] Sayre, who was a fellow at the time. And that group met for three days and talked about the problems of neonatology and our difficulty in solving things like financing and staffing, at the Rancho Encantado. Had a great time--we have a picture--and that was the beginning of a trek that's now lasted 25 years, going through every state in the district plus the two provinces. And that's going to be a feature article in the perinatal section news in the August issue; I have a July 5 deadline.

So that was, you see, the trilogy. We had the AMA statement adopted in 1971; we had the AAP approval of the Perinatal Section adopted in 1973; and then we had the first meeting of District 8 to try and get a district level

section that met in 1973. So all of those things came together, and all of them had a Colorado spin.

DR. NELSON: Well, what pushed you so hard on this?

DR. BUTTERFIELD: I was driven. My mother said to me one time, "Leon," (that's my name, Leon Joseph); she said "You don't have a job, you have an obsession. You have an obsession." My mother said that. She observed that I seemed to be obsessed with the organization of perinatal caretakers into some kind of working, talking relationship. And I said mother, "You've got it, that's exactly right. It just seems like that needs to be done."

So there it was, the beginning. Just to go fast forward, the AMA, not too many years later, kind of let the Committee on Maternal and Child Care go; it just sort of wandered off and the AMA presence in this field is now very small. I'm unaware of it. The AAP Perinatal Section organized in 1974 at that hotel in the Bellevue Stratford in Philadelphia, and in 1975 held the first meeting in Washington, D.C. with Bill Tooley as the first chair. That has now risen to 2,000 members; it's a huge force within the Academy of Pediatrics. In fact, of the Academy of 50,000 members, nearly 2,000 belong to the section on perinatal pediatrics. And yet, the section is treated the same as the section on dermatology which may have 100 members. That's a big problem and we are seeking to address that issue. I'm not saying we should become a division, although any organization that has a huge membership with a huge contribution ought to think about how to keep them happy. And there are some huge political undertones, or overtones, that could happen if this isn't handled correctly in the next five years. And I'll leave that there.

As far as the District 8 goes, District 8 labored. After we met in 1973 in Tesuque, we met in Park City in 1974, we met again in Denver the same year. And we met in Denver for the simple reason of trying to get the people from the University to come to the meeting. They did not. Only Dr. Lubchenco showed up. The rest of them could care less. We invited the entire group, and this was an attempt to get university support, and we didn't get it.

DR. NELSON: Well, they looked at it as a special problem, they didn't look at it as an overall problem of child care.

DR. BUTTERFIELD: Hm. I think you're right. So we met again in 1975 at Carefree, Arizona. That was a very important meeting, because this was the fourth planning meeting of District 8 Section on Perinatal Pediatrics, or the perinatal section of District 8. That was about the same time that Dr. Stan [Stanley Norman] Graven had decided to start what was called the National Perinatal Association. And, this is a very, very complex discussion.

But Dr. Graven and Jack [M.] Schneider, an obstetrician, had some success with the Wisconsin Perinatal Association, which led to the Great Plains Association in 1972, and then led to this meeting in Columbus, Ohio, which was supported by Ross Laboratories, around 1974. And, I was invited to that meeting. And I sent a telegram saying that I would not be there, because I opposed the formation of a group that was redundant with what I saw as where it should be, within the Academy. So I sent a telegram to Stanley Graven, to say I would not be part of that. And so I was always kind of on the other side of that issue, and felt that in a free country there should be a choice, and I wanted to support the Academy of Pediatrics as a choice.

The disappointing thing was that over the years, I did not see and did not feel much active encouragement from the Academy itself on this very hot, political issue. Everybody could see that the National Perinatal Association could take over a lot of the responsibilities that should be in the AAP. But nobody, including Don Schiff, the Chairman of District 8, God bless Don, seemed to appreciate that. And to make a long story short, in 1976, when we had our first organized meeting in Scottsdale, I was selected Chairman from 1976 through maybe 1978, maybe for three years. I was the Chair of the new Section on Perinatal Pediatrics. Now it's interesting that we invited Stanley James, and we invited the Committee on Fetus and Newborn to meet at the same time we met in Arizona. We invited them to hold their regular meeting, and be available to us as experts, and to mix with us socially. We even paid one member to cut down on the cost. So this was a way of integrating a technical committee with the grassroots practice people. And now I have to admit, if you will, that that was a very successful meeting.

But by 1976, if we can move over now to the AMA side, the Committee on Perinatal Health, which had been formed in 1972, had met ad nauseum in airports in Dallas, and airports in Chicago. And so the *TIOP, Toward Improving the Outcome of Pregnancy*, was now ready for publication. Now the genius of Sprague Gardiner was that he invited the March of Dimes to be a partner, to be the secretariat. And March of Dimes Birth Defects Foundation then paid for the publication of *TIOP*. And we distributed that at the first meeting of District 8. Now that to me was an incredible achievement.

But you see what was going on. In 1971, the AMA adopted something, 1972 we put together that committee on perinatal health, and in four years the gestation popped out, the *TIOP*. At the same time, District 8 spent four years planning, and had the first official meeting in 1976, at which time we distributed the *TIOP*. You couldn't have staged that.

DR. NELSON:

No. I think that's real, real wonderful.

DR. BUTTERFIELD: And one practical thing to say is that the Committee on Fetus and Newborn was given an hour on the program; the rest of the time they met to themselves. But in that open panel, "Meet the Committee on Fetus and Newborn," somebody in the audience said, "What is the position of the Committee on Fetus and Newborn on home bilirubin therapy?" Home phototherapy. And the Committee said, "What's that?" In other words, the Committee at that time was dealing with highly technical issues, as is their charge. But the Committee basically did not know what home phototherapy was. Something going on in the practice out there, and this was the most telling reason for these two groups to come together once in awhile. So they got together at the picnics; they got together at the dances; they got together for dinner; and talked as people. And Jeff [Michael Jeffrey] Maisels played the piano periodically. But that basic question, about home phototherapy, just was a crunching justification for why the two groups needed each other.

Ever since then one of the technical committees has been invited to the District 8 meetings. And District 8 now has met in every state at least once, and two provinces, and we just held our 25th meeting in Whitefish, Montana, at the Grouse Mountain Lodge. And next year, the 26th meeting, it will actually be the 23rd conference, but next year, the meeting will be in collaboration with District 9 at Incline Village, Nevada. And that will be a unique celebration of having met our responsibility in every state. So every state has had us there.

At the same time, District 9 has formed a section; District 5 and 6 has formed a section; District 3 has formed a section; before them District 4, the southeastern has formed a section. So literally every district in the country now has a perinatal section with the exception of District 7, although Texas does have one, a state thing, and District 2, which is New York. So literally the District 8 concept has embraced the AMA statement into a working kind of group, taken it to grassroots levels, and it's all over the country. It is very important to say that these are of the states, these are not sections of the national group. That's very important, because the Academy politics is based on the local chapters. And so the chapter chairmen have approval of appointments to representation on the state council, on the executive council. Well that's a complex story, but I think it shows you literally the three areas where that's happened.

DR. NELSON: What other organizations have you been involved in? This is quite a list we've already gone through.

DR. BUTTERFIELD: Well, I just want to say that the AMA involvement is down to practically nothing right now. The AAP Perinatal Section, I've enjoyed being the founder of that group. I was on the founding

group in Philadelphia in 1974. And then I was appointed the editor of the *Perinatal Section News* in 1977, by George [A.] Little, who followed Tooley. And I did that from 1977 until I was named Chairman. I was elected to the Executive Committee and named Chairman of the Perinatal Section in 1983, and I served two terms. And then I served the third term, because nobody would take the job. So I served three years, 1983 to 1986. And then Jeff [Jeffrey B.] Gould took over as the editor. I continue as a contributing editor, and as editor emeritus, for the perinatal section. And I do a piece called "District News," which is kind of what's happening, and international news. The *Perinatal Section News* is one of the real strengths.

PAUSE IN TAPE

DR. NELSON: Before we take up a new issue we might want to fill in some gaps here about what we've been speaking.

DR. BUTTERFIELD: In 1961, I invited Dr. Robert Usher from McGill University in Montreal to speak in Denver. And that led to the establishment of the Denver Perinatal Society, which was the first such in the world. The next year, Dr. Clement Smith came to town, and we invited him to give a talk. That was 1962. And what we did was we captured people going through town. Usher was on his way to London and stopped off to work on his paper. And Dr. Smith was here for a meeting of the public health people, and then, in 1963, Dr. Apgar came to town. And she was aghast that we would call anything the neonatal society because it implied that pediatricians didn't know where babies came from. So at that moment we became the Perinatal Society and date back to 1961. And to my knowledge, no other perinatal society has ever pre-existed. And every year or so, informally, we get somebody going through town to speak on topics, and so that has a whole history of its own.

DR. NELSON: Let me ask you now, you brought up Bob Usher's name, you know he was very prominent, doing some regional work. There along with Ken [E.] Scott who was down in Halifax.

DR. BUTTERFIELD: Yep, still is.

DR. NELSON: I'd like you to comment about those people you worked with,

DR. BUTTERFIELD: Yes, Bob Usher has been kind of an interesting guy. At times he's been kind of a lone ranger. Bob was suggesting the organization of some kind of a perinatal group many years ago but it didn't get very far. I forget we're on tape now, so I better be careful. But, Bob wasn't as well received; his work, I think, was at times kind of looked at with

a jaundiced eye. I can remember sitting in on some meetings at Atlantic City where he really wasn't treated very well by his colleagues, his peers. And his claims about glucose and bicarbonate treatment for RDS [respiratory distress syndrome] led to some questions. It was, you know, like any competition. There was a lot of disagreement, if you will.

And so Bob had, I think, kind of a rough time at times. He's continued to be a remarkable observer and continues to this day to present papers at the Pediatric Academic Societies. And so I think he has a very unique position in history, and I hope that he's interviewed one of these occasions.

Ken Scott was from Halifax. I had the pleasure of visiting at Dalhousie University a long time ago, and marveled that they had established a regional association between their perinatal center and the various states or regions, whatever they call them out there. And I've lost track of Ken, but I hear about him now and then. They both made significant contributions.

In the spring of 1963, Dr. Joe [Joseph V.] Brazie was a chief resident at the University of Colorado Medical Center. I was the director of the Premature Infant Center, succeeding Dr. Lubchenco in that capacity.

DR. NELSON: Now, you didn't tell me the date you took over the Newborn Center.

DR. BUTTERFIELD: Let's see. In 1963 Dr. Kempe called me over to his house, and we had a swim. That was the way he talked to people, you go swimming. And then he said, "I'd like for you to be the director of the Premature Infant Center." So I succeeded Dr. Lubchenco for two years until I went to Children's in 1965.

But in 1963 Joe Brazie and I, got a grant from Mead Johnson Nutritionals, at that time Mead Johnson Laboratories. And we organized the Aspen Conference on Perinatal Biology. That was the first time that perinatal biology had been used as a conference name. And that was held in Aspen. We invited all the neonatologists we knew, which turned out to be about 13 – people like Bill Tooley and Tom [Thomas K.] Oliver [Jr.] and Millie [Mildred T.] Stahlman, and Sid [Sydney] Segal, and Jack Boehm who's now deceased, and Helen Reardon, who's now deceased. Helen Reardon was deceased a long time ago. And Jack B. Boehm deceased a couple years ago, and Bill [Tooley], now deceased. So those three are gone. We had these two houses and we just talked about our research, and that conference has continued now.

Conferences like that have been developed, literally nine of them around the country, sponsored by Mead Johnson. That's an example of corporate

support for a research meeting that gives neonatologists a chance to get together. And, I had written that up as a special tribute to Jerry Elliott, the late Jerry Elliott, and that will be published in the *Journal of Perinatology* 1997 [Butterfield LJ. The Mead Johnson Nutritionals Perinatal Research Conferences: a thirty-four-year trek from Aspen to both coasts. *J Perinatol* 1997 Sep-Oct; 17(5):398-401], I know not when. So that will be a publication and Dr. Doug Jones is now continuing that meeting.

DR. NELSON: I'm going to break into your train of thought now, and have you comment on what you were talking about. Now, how have you come to pick some of these ideas to pursue?

DR. BUTTERFIELD: Well, I was convinced that if we were going to do things like organize a regional approach to perinatal care, which was my theme song, that it would be hard to hold a meeting and talk about just that. I learned playing football that sometimes you hit people on a slant instead of straight on. And so, sometimes if you bring people together to talk about research, which is hot, you can then at dinner and over cocktails talk about other things. So, many of the meetings that I organized that had education, research, and how to do it, also had a sidebar issue of how can we work together. So there was always a second agenda.

DR. NELSON: Well let's talk about your interest in perinatal history.

DR. BUTTERFIELD: Well the Ad Hoc Committee on Perinatal History came out of two meetings. In 1991 and 1992, I had some unexpended funds that I used to invite a small group of people to come to Denver. And all of us had a common interest in history, and we were particularly interested in Martin Couney. So we came together to talk about Couney in '91. The people included Larry [Lawrence M.] Gartner and Bill [William A.] Silverman and Russ [Russell A.] "Jiggs" Nelson, Lula Lubchenco, Ward Swarner. I'm leaving out some people, but we'll get them in later. And so we showed our slides and showed the information we had about Couney, and Bill Silverman had written the classical article from 1979 about the incubator shows. It was kind of difficult to challenge that publication with him sitting right at the table and yet the evidence was beginning to grow that, maybe, we weren't sure there was much evidence to support Couney being in Berlin in 1896. But anyway, our focus was getting together. We had a good time and so forth.

In 1992, we came back together, for the simple reason that Paul Toubas from Oklahoma City had acquired the entire archives of Pierre Budin. He paid money to acquire the archives of Pierre Constant Budin, and so we got together in '92 for the second time, informally, and we went through 60

pounds of paper, marvelous pictures, documents. On that occasion Dr. Toubas gave a talk called "Lessons Learned From the Past," a marvelous lecture at the Children's Hospital. And we were able to hook up with Dr. Thomas E. Cone, Jr., from his home, by telephone, and also Jeffery [P.] Baker from his home in Durham, North Carolina, as kind of discussants of that paper. And that kind of led to the beginning of the formalization of the Ad Hoc Committee on Perinatal History.

In 1993, with support from the Perinatal Section, we had the first Thomas E. Cone, Jr. Lecture in Perinatal History with Leonore Ballowitz talking about Dr. [Arvo] Yllpo at the meeting that we had in Washington, D.C. And we followed that up with, I'm not sure of the order, but Joan Beck gave a talk, later, on, "I Remember Virginia Apgar," which was a marvelous talk. Dr. Bill Silverman gave a talk at that lecture, talking about Ethel Dunham. And last year the talk was given by George Ryan on Dr. Sprague Gardiner, the late president of ACOG, who led the way, and also Marie McCormick spoke about regionalization in a changing economic environment. Very, very appropriate. And 1997, the fifth Thomas E. Cone, Jr. Lecture will be given in New Orleans by Peter M. Dunn from Bristol, in the U.K.; his topic will be, "Neonatology in the U.K. from V. Mary Crosse Forward." So that has become a delightful adventure, the Ad Hoc Committee on Perinatal History. And I think we need to drop that now in the interest of time.

DR. NELSON: Are there any other paramedical organizations that you've been involved with? I want you to comment a little bit on the human side of medicine, when we begin to take activities into areas which aren't pure disease-oriented.

DR. BUTTERFIELD: That's interesting that you raise that up, because in 1967 I had the privilege of hosting the first Aspen Conference on the Newborn at the Aspen Meadows. This was a particular joy, because in 1954 I had been the bell captain for the Hotel Jerome in Aspen, during a quarter off from the CU medical school. And that placed me in the renaissance of the Aspen community. One of the people that influenced me at that time was the late Walter Paepcke, the captain of industry from Chicago; he was the Chairman of Container Corporation of America. He's the one that rediscovered Aspen, and built the Aspen Institute for Humanistic Studies, to put a humanistic spin on industry. So we took that lesson and, in developing the Aspen Conference at the Aspen Institute for Humanistic Studies, we constantly added in a humanistic flavor, either in the way of a lecture or in the way of discussion, to our discussions of the care of the baby.

DR. NELSON: Pediatricians are expected to do a little bit of assessment of development of children and people look to us and tell us some of

the things that didn't work too well for the baby as a newborn. So what do you foresee as the future coming out of things like this?

DR. BUTTERFIELD: Well, my wife, Perry, is very involved in what's called "How to Read Your Baby." One of its major focuses is a teaching method and curriculum developed by Perry and a high school vocational education teacher called Partners in Parenting Education. It is a program aimed at helping the teenage mother see her baby in the developmental shadow, if you will. Seeing how that baby is progressing not only physically but developmentally, in the steps of development. So Perry's been a very positive influence on me, and she has written three texts, three curricula that deal with the subject of early emotional development based on her research work with Bob [Robert N.] Emde. The Committee on Maternal and Child Care--I think that is going to be incredibly important in the future.

Her mentor, Dr. Emde, is a professor of psychiatry at the University of Colorado School of Medicine. Dr. Emde is a past president of the World Association of Infant Mental Health. I use the word infant psychiatry advisedly, because there is a whole body of learning that points to the importance of thinking about the psychiatry of the infant and the emotional development, to the extent that I'm lobbying now for expanding the perinatal period from 28 days to 36 months. I think the combination of the energy of the mental health doctors with the physical health doctors, in some kind of common area, needs to happen. Just as biology and chemistry joined as biochemistry, and physics and astronomy joined as astrophysics; I think when you take two fields like perinatal medicine and perinatal emotional development, and bring those people together, then there is a whole possibility for enhancing that important piece of development. People like Peter [A.] Gorski and people like Charlie [Charles Ronald] Bauer in Florida are doing that.

DR. NELSON: Well the other thing I'd like to ask you about, when you were working, you worked with a lot of people who rose to prominence; was Charlie Bauer with you at some time?

DR. BUTTERFIELD: There were two Charlie Bauers. Charlie [Charles H.] Bauer was with us back in Aspen in 1963; that was the Charlie Bower from New York, who now is seriously ill with MS and is barely getting around. Then there is the Charles Bauer from Jackson, University of Miami, who is very active in neonatology; he was very active on the Committee in the perinatal section at one time. And those are two different Charlie Bauers.

DR. NELSON: I'm bringing up more recent people. What about Jim [James A.] Lemons; was he with you in the past?

DR. BUTTERFIELD: Jim [James A.] Lemons studied in Denver, he took part of his training, and he and Doug Jones came to Children's and joined Bev [Beverly Louise] Koops and myself. Bev moved on to Texas A&M, and now she's head of the Medicaid piece of public health in Texas. Jim Lemons is, of course, at University of Indiana, and Doug Jones is now at the University of Colorado, chairman of the department.

Peter [R.] Honeyfield trained with us; he came from New Zealand. Peter is an excellent clinician. He was very innovative in developing the neonatal nurse clinician program. Peter is now head of the newborn unit at a competing hospital, Presbyterian St. Luke's. In fact, Peter has just been named as the Regional Director of the Mountain Region of the Pediatrix Medical Group. Doug [M. Douglas] Cunningham is in charge of the Pacific Region, and Peter Honeyfield in charge of the Mountain Region, and so it goes; there's about five different regions out there. And Pediatrix, now that they have 225 physicians in their group, saw fit to reorganize, and Joyce [L.] Peabody is still in Florida, as is Brian [D.] Udell, but, that's another subject that I'm not prepared to talk about except at a very superficial level. But we will cover the regionalization of pediatrics, if I may use that word, in the August issue of *Perinatal Section News*.

DR. NELSON: What do you think about people entering pediatrics now. Can they have as exciting a time as you had in pediatrics?

DR. BUTTERFIELD: Well, I've been sort of, I use the word garbage man. I picked up on pieces that nobody else was doing. I one time sat in a boat with Marvin Cornblath, going over to what was then called the Newborn Dinner in Vancouver, I think it was, Puget Sound, somewhere. And I said, "Marvin, how did you ever get interested in glucose metabolism?" and he said, "Well Joe, my boy," (he always calls me 'Joe my boy'); he said, "I just looked around for an area where nobody was working, and I decided that's where I would work."

In the same way, when I got into perinatal medicine, Dr. Kempe had always urged us to have a hobby. "No matter what you do," he said, "Have a hobby." So I took it upon myself, the day that I was elected to the Society for Pediatric Research in 1963, I decided that from then on I was going to devote myself to working in the community. So I stepped up my activity with the Denver Medical Society, that led to the Colorado Medical Society, that led to the AMA Committee on Maternal and Child Care, and then that led to the sideways involvement with the Academy of Pediatrics, and the development of the Perinatal Section. You know, it's out there if you look for it. So it's sort of making things happen.

DR. NELSON: What do you think will happen in the next 50 years?

DR. BUTTERFIELD: [Laughs] Well, I think there's no question that we're going to see increasing federalization of care. We'll have what I call red, white and blue cross. We'll have corporate domination of policy, to the absolute distraction and disgust of anybody with any traditional medicine in them. And we're going to see a different financing of care. And we're going to see a different quality control.

DR. NELSON: Is there a good mechanism to hold corporate people responsible?

DR. BUTTERFIELD: I'm not prepared to know that, but I think that the standards that are set by people like you mentioned, the Jim Lemons and the Charlie Bauers and the Doug Jones and the Bob Ushers and all the people you mentioned, will have an increasing role in writing the book that will be the minimum level of care. Just as airplanes have a minimum standard for operation, we're going to have the equivalent of an FAA [Federal Aviation Administration] in medicine. You might call it the FAC, the Federal Agency for Children. It will say, "We're going to get these shots;" or, "If you're a pregnant mother and you have any of the X, you don't even think about going to your local doctor." You take your red, white and blue cross, you plug it into the telephone if necessary, and you call the center, it's all in there. You don't even have to ring, you just plug it in. And they'll say, "OK, Mrs. Jones, I've got your history on the wire."

It sounds like 1984, but call it 2084 and you'll be closer. It can be dreadful, but people with good intentions will be, I hope, in charge of all of this. And we're going to see the economics versus the corporate decision really shaping the regionalization of perinatal care that we've been calling for in these 30 years. And it's because it's economically sane. And it makes good sense. So I'm not a pessimist, I'm an optimist. I think we're just beginning to see production beyond belief.

DR. NELSON: What do you think about efforts of physicians to tell the corporations, "Don't try to tell us what to do; we're going to tell you what we need to do."

DR. BUTTERFIELD: Well that's got to be a discussion. The corporation has to decide what it's going to pay for, and they have to answer to the stockholders, and that's going to be difficult.

DR. NELSON: Are we going to train physicians to do this now?

DR. BUTTERFIELD: No question. Dr. Jacinto [A.] Hernandez is the president-elect of Children's Hospital medical staff. He trained with Gordon

[Bennett] Avery in Washington D.C., and came out of Lima, Peru, with excellent training. He went back there and couldn't work under the army regimen. He came back to Children's to get some retraining, and has succeeded me as the chair of the Department of Perinatology at Children's, and now has stepped down from that. He is very much involved with quality control. He has a master's in hospital administration. He's the prototype of the future who has ethical concerns, who has a corporate understanding. In fact, he mixes with the people that pay the bills. And so, I think he's a model of people that we'll see in the future, just like Doug Cunningham, who are working with corporations, and who I hope will not forget that they're neonatology physicians first, and corporate employees second.

DR. NELSON: You've been involved with all the perinatal planning at the state level of the Health Department.

DR. BUTTERFIELD: I've been a consultant to the Colorado Department of Health for many, many years, and I do that less and less. But I have had the privilege of working with it at all levels. I've served as a governor's appointee to several organizations, one having to do with establishing a program to cut down on child abuse. And I've had other experiences in the government.

I've been involved as a lobbyist since 1963. For the last 16 years, I've been a registered lobbyist. I teach a course called "How to be a Capitolist," with an "o", C-A-P-I-T-O-L-I-S-T. For that I recruit about ten people; doctors, nurses, school teachers, real estate, you name it; who will make a different mix. I teach them to be comfortable at the capitol. I use the capitol as the classroom, and meet with them individually for the first time, and then periodically, and encourage them to follow three bills: their senators, their representatives, and their own interest bill. And we just get together over the session. It's helped. It's sponsored by March of Dimes in part, and it's a very low cost, fun, legislative-friendly activity.

BRIEF PAUSE IN TAPE

DR. NELSON: You've been involved in another area, working to honor Virginia Apgar with a postage stamp. Where did you get that idea?

DR. BUTTERFIELD: Well, I had the privilege of knowing Dr. Apgar going back to the '60s. In 1962 I wrote a letter to *JAMA* [*Journal of the American Medical Association*], which described what I called erroneously an epigram that I devised to remember the five dimensions of observation in the Apgar score. These were: "a" for appearance, "p" for pulse, "g" for grimace, "a" for activity, "r" for respiratory effort. And she was in Denver just shortly thereafter at a medical society meeting. By 1962 she was with the

March of Dimes, having joined them in 1959. One of the medical students helping her with the exhibit leaned down from the stage and he said, "Dr. Apgar, what does the "g" in your name stand for?" And for one of the only times in her life, she was speechless. She had not read the *JAMA* in March of that year, I believe. And she later wrote me a very nice letter thanking me for what turns out to be an acronym not an epigram.

So that's how we kind of got connected, and I was on many programs with her over the years, both for the March of Dimes and for perinatal issues. But I don't know how I got the idea, I'm not into stamps; I can't even spell philately. But in 1984, when I went to the APS/SPR meeting in Washington D.C., I took a question. I always take questions to meetings to get an idea of what's happening. And I said to the first five people I met, people of substance, like Millie Stahlman, Tim Oliver, Jerry Lucey, etc., "What would you think about a stamp in honor of Dr. Apgar?" And not one of them said a word. They stopped in their tracks, and smiled. And I knew without any one of them saying a word, that we had a project.

In 1985, at the Academy of Pediatrics meeting in San Antonio, Dr. Bob [Robert T.] Hall presented the initiative at my suggestion, that we petition the executive board of the Academy of Pediatrics to nominate Dr. Apgar for a stamp. So that was approved, and we appropriated \$3,000 to support a little activity. Stan James, Arthur [J.] Salisbury, and Joe Butterfield, myself, were appointed as the steering committee. We borrowed lobbyist Anne Harrison Clark from the March of Dimes, and a lobbyist from the Academy of Pediatrics, Susan [Campbell], [Elizabeth] Jackie Noyes' associate, whose name I can't remember right now. And we called a luncheon meeting in Washington. We invited 21 different organizations from the AMA to the AAFP [American Academy of Family Physicians] to send a representative, and about ten did. And so we formed a task force that adopted some guidelines and set out to get the stamp. To make a long story short, on October 21, 1994, at the annual meeting of the AAP in Dallas, Texas, the Apgar stamp was dedicated. It was a twenty cent stamp, meaning that it was a definitive stamp, and it would go on for years.

So the stamp was dedicated in October of 1994, at the annual meeting of the AAP in Dallas, and a very, very significant event. As part of the dedication, the instruments: the violin, the mezzo violin, viola and cello that Dr. Apgar had crafted herself under the tutelage of Carleen Molly Hutchins; were played as the Apgar Memorial String Quartet. And in the year that followed, the Perinatal Section raised \$30,000 through giving little lapel pins of the Apgar stamp to donors of \$25 or more. In May of '96, those instruments were donated to the College of Physicians and Surgeons of Columbia University, as the Apgar Memorial String Quartet. And they are available for playing. Students and faculty from Columbia play the

instruments; the quartet played at the annual meeting of the Academy in Boston in 1996. And we're very excited about that. I was very flattered and honored that the day following the dedication of the Apgar Memorial String Quartet, the College of P & S Alumni Association, elected me as an honorary member, only the second in history, the first being a retiring dean. So, now I have the privilege of adding that to my list of very proud honors, and I must tell you that's one of the highest honors I've ever received.

DR. NELSON: Now, Joe, I do know that the ACOG gave you a particular honor which they do not often do. What did they honor you for?

DR. BUTTERFIELD: Well in 1983, the Academy of Pediatrics and American College of Obstetricians and Gynecologists co-published the *Guidelines for Perinatal Care*, and they dedicated that issue to Dr. Sprauge Gardiner, the former president of ACOG, and to me, which was a great honor. Also the ACOG gave me the e in 1983, which was a tremendous honor, which I'm very pleased with. So those have been two very special recognitions.

DR. NELSON: What do you think of what is happening internationally? I know that regional care in France is mandated. The Scandinavians started their system that way, but it's really mandated through heads of regions, it's not mandated like in France. What do you think about mandating certain things?

DR. BUTTERFIELD: Well, taxation is a form of mandation, definitely, and it's a tough issue. I know that the people in France have been carrying on literally the tradition of Budin who was very active with a legislator named Paul Strauss in doing things like home care, home rest for mothers, and time away from work. And certainly I can't think of his name, the French obstetrician who was so active in the prevention of prematurity [Emile Papiernik]. He's still active. I can't think of his name. He lives in Sceaux, near Paris, and I'm just blanking on his name, but that's going on. And I think there are some values of that.

At the other end of the scale, Dr. Houchang Modanlou from UCI [University of California Irvine] has recently been involved in Iran, with teaching resuscitation. The minister of health is Dr. [Alireza Marandi], I can't pronounce his name. He's a neonatologist, and with the election of the new president or premier who is just a little bit to the left of the Ayatollah, there seems to be a little more interest in doing some things about resuscitation. So there's an example of an extremely fundamentalist government starting to look at resuscitation. And one of our neonatologists looking for help.

Likewise, everywhere you go around the world there are people trying to figure out ways to do things better, and sometimes the only route is through governmental support. Volunteerism is exciting when it works. It's very labor-intensive and it just doesn't have the momentum, if you will, that tax dollars do. I'm not a taxer; don't get me wrong. But I just think that our lobbying, through the Academy of Pediatrics, for improved child health and improved maternal child care outcomes makes a lot of sense. And thanks to Jackie Noyes and her people in Washington, we've done a lot. And our friends all over the world watch us. Dr. Hiroshi Nishida in Japan, was recently here talking about what is happening with of all places in Phnom Penh, in Cambodia, where one of his students is setting up a perinatal center supported by Japan. In Phnom Penh. So it's going on, everywhere you go.

DR. NELSON: Is there any way we should limit our system? Nobody wants to tell the parent candidly, "You know you may take home a damaged baby." That's not a pleasant thing to talk about.

DR. BUTTERFIELD: Well, I'm going to leave that up to Bill Silverman, he's such a good spokesman for ethical considerations. And, I must say, I don't claim to have that intellect. But I really respect what he's written on the subject, and I'll just defer to Dr. Bill Silverman.

DR. NELSON: What about team medicine? Every time you do something, you hear someone say, "Let's form a team and do something about it."

DR. BUTTERFIELD: Well, you know, the plus side is that there's always got to be a team. The patient has got to be part of a team; the provider's got to be part of a team; and the community's got to be part of a team. And the employers and industry, it's like a soccer ball with many sides to it. But then the down side is what some people call the "suitcase clinic teams" that roar out on a weekend to do something in a community and then leave all of the acute problems to the local people. Those get to be cynical scenarios. That's a very broad subject.

One of the activities that's been a particular joy and productive interaction has been with the National Institute of Child Health and Human Development. In 1988, Dr. Duane Alexander, who was the head of the NICHD, invited me to convene the first NICHD Aspen Conference on Maternal, Fetal and Newborn Medicine. And the reason for that was that he had been a participant in the Aspen Conference on the Newborn, which you know goes back 30 years. And he saw the potential for a meeting for young faculty and young practitioners as a place to showcase the research going on in the NICHD. So with the pressure from the Congress to expedite the transmission of information from the laboratory to the bedside, Dr. Alexander and I organized the meeting. He did pretty much the faculty and

I did the local arrangements. He invited the 30 faculty from among the NICHD grantees, from university medical centers throughout the country. And then we invited directors of every maternal fetal medicine and every neonatal perinatal medicine department in the country to send a senior fellow or a junior faculty member to the conference, at their expense.

So this meeting now is coming up on its ninth year, and it's grown to be an extremely popular and respected postgraduate experience for perinatal medicine trainees. Practical issues are mock study sections, showing how a grant is looked at. There are state-of-the-art reviews by the grantees, and a chance to get involved with the people at the same level of training, finding out how they do things -- the academic ladder, improving your status in the system. All of these are topics that are practice-friendly. Just last year the conference included trainees and faculty from the field of reproductive endocrinology. From the beginning this has been a joint program of the Children's Hospital Denver and the University of Colorado. So I've been very privileged to be able to do that conference. From the beginning I agreed to do it only if it was a joint collaborative effort with Dr. [Ronald S.] Gibbs at the University of Colorado Department of Obstetrics and Gynecology, and Dr. Jones at the University of Colorado and Medical Director of Children's. So that's an example of a joint effort that's worked out very well.

I'd also like to pay special tribute to my wife, Perry McArthur Butterfield. She has been a wonderful mother, raising our children. Bruce is a software designer with Hughes Aircraft [Company], and our late daughter Brigid, was an artist, Brian is a management consultant for Andersen Consulting living in Buenos Aires, and Tate is an emergency trauma nurse at Penrose Memorial Hospital in the [Colorado] Springs. And Perry's work as a research associate at the Department of Psychiatry at the University of Colorado School of Medicine has been very productive. She's been active for over 15 years doing research in the emotional development of children, and has written extensively on the educational material involving the adolescent and high-risk parents. And so she has joined with me in a new and exciting commitment to medical education and research, since the Children's Hospital has created the L. Joseph Butterfield Chair of Pediatrics at the Children's Hospital, Denver and the University of Colorado Department of Pediatrics. At this point we are very close to 90% of the goal of reaching that \$1.5 million.

DR. NELSON: What about the adaptation of new technologies?
Do you have any thoughts?

DR. BUTTERFIELD: Well, I've enjoyed touring people through the newborn center for years and pointing out that the miniature monitoring systems, the computerized memory-oriented systems that we're using to

monitor the babies; are all by-products of the space industry. And that is a remarkable payoff to tax dollar investment. In fact, when we were doing the evaluation of the transport incubators, we were fortunate in finding downtime at Martin Marietta [Corporation]. We literally, with a physicist off duty for the summer, were able to take the various transport devices that were in use at the time. We took them literally out to Martin Marietta, borrowed their thermo lab, and took these incubators to altitude and to vibration levels, and tested using a four pound water model. We tested all matter of temperature, erosion and whatnot, in a setting that was very much like the space environment. So that's kind of an allusion, kind of a long distance answer to your question. But I'm not particularly a technologist, so I'll pass that on to my technology friends as well.

DR. NELSON: Do you have any particular heroes other than the ones you've already mentioned?

DR. BUTTERFIELD: Well I've always been absolutely overwhelmed by the wonderful modeling of Dr. Lula Lubchenco, her patience and her quiet strength, as she went about raising a family and contributing to what we know about the outcome of premature infants. I've always felt that her work was never recognized enough, and so she's been one of my heroines. There are so many other people in the fields that I've turned to, that it's hard to know where to start and where to stop. But she was my mentor as a trainee, and Dr. Donough O'Brien was my lab mentor; he taught me some science and some laboratory discipline. And Dr. Kempe gave me the chance to do what I wanted to do. I think having the privilege of going out into the world after you've done your chores, more or less, of being able to work on projects like regionalization which are far from scientific is an example of how a chairman gets the most out of his people, by giving them their head and letting them find their way.

Sprague Gardiner was a hero because he had the guts to advocate for a concept that wasn't all that popular amongst the obstetric people. He also had the vision to include the March of Dimes as a partner in the project, *Toward Improving the Outcome of Pregnancy*. And I see people coming up, like Bill [William L.] Roper, who used to be with HCFA [Health Care Financing Administration] and lately with Prudential [HealthCare], and who's just been appointed dean of the School of Public Health at the University of North Carolina, as a breed of young men coming up who are translating what's good for the most into what can be done in the best way.

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L. Joseph Butterfield, M.D.

(1926-1999)

L. Joseph Butterfield, M.D. retired in 1994 after 34 years of service to The Children's Hospital, Denver (TCH) and the University of Colorado Medical Center (UCMC). Currently, he continues to be active as a registered lobbyist at the Colorado General Assembly, as a manager of conferences for the Department of Pediatrics of the University of Colorado School of Medicine (UCSOM) and TCH and as a member of the Steering Committee and Editor of the Newsletter of the Given Institute of the University of Colorado in Aspen.

At the time of his retirement, he was Chairman Emeritus of the Department of Perinatology of TCH and Professor of Pediatrics at the UCSOM/TCH.

Butterfield received B.S.(1949) and M.S. (1951) degrees from the University of New Mexico where he was a member of the student council, the consul of Sigma Chi fraternity and was elected to Khatali, the men's honorary society.

He attended the University of Colorado School of Medicine as a Boettcher Scholar from 1951 to 1955. He was elected to the Waring Society and served as a member of the Honors Committee. In 1977, the University of Colorado Medical Alumni Association honored him with the Silver and Gold Award.

Dr. Butterfield interned at the San Francisco Hospital on the University of California service. He played flute in the San Francisco Doctor's Symphony.

In 1956 he returned to Denver for a pediatric residency at The Children's Hospital, Denver.

From 1958 to 1960 he was a fellow in premature infant care at the UCMC where the late C. Henry Kempe, M.D. was Chairman of the Department of Pediatrics and Lula O. Lubchenco, M.D. was director of the Premature Infant Center.

Since 1960 he has published 47 papers, 9 chapters in books and 48 abstracts, commentaries and editorials.

In 1961, with the invitation of Dr. Robert Usher from McGill University in Montreal to speak in Denver, Butterfield established The Perinatal Society, the first such in the world; it has continued to function as a forum for international guests in Denver for 36 years.

His interest in legislation that impacted mothers and children began in 1963 when a controversial bill that would require the screening of all newborns for a condition that was not yet fully understood and for which treatment was not available attracted his

attention. He later was involved in the bill that authorized child health associates as well as a law that required insurance companies to include newborn infants in family policies. Until then it was common practice to exclude the newborn from the family policy for as long as 90 days! He became a registered lobbyist in 1985 and currently teaches a class, "*How to be a capitolist*", at the state capitol.

He succeeded Dr. Lubchenco as director of the Premature Infant Center in 1963 and was elected to the Society for Pediatric Research that same year.

In the spring of 1963, Butterfield organized The Aspen Conference on Perinatal Biology to which 16 neonatologists from the United States and Canada were invited. Participants presented their research in the mornings, took some time off for recreation and came together for high tea each afternoon. Dinners were a collective event and evenings were devoted to discussions of the ethics of bio-medical research and career development.

In the words of Dr. Mildred Stahlman, Professor of Pediatrics and Pathology at Vanderbilt University Medical Center, "To me, that was the beginning of neonatology as a specialty in the United States...".

Ten years later, the conference was resumed as the "Aspen Conference on Perinatal Research". It has since been replicated in the form of ten regional perinatal research conferences which encompass all of the Neonatal/Perinatal Medicine Training Programs in the USA. The "Aspen Region" Conference is now directed by Drs Butterfield and M. Douglas Jones, the Chairman of the Department of Pediatrics and Pediatric-in-Chief of The Children's Hospital, Denver.

He was recruited to The Children's Hospital in 1965 by the late Dr Frank Cozzetto to develop the Newborn Center and appointed medical director. His mission for the Newborn Center was to provide intensive care for sick newborns from Denver and regional hospitals, to design support systems for the region such as communication, transportation, outreach education and planning and to promote a national initiative for regional perinatal care.

In 1973 he organized the Department of Perinatology at Children's, and was named chairman, a position he held until 1982. During his tenure as medical director and chairman of the Department of Perinatology, he organized a regional service for sick newborns which included a transport service, a communication system, a perinatal outreach education program and a national model of regional perinatal care that was known as "Newborn Country, USA". He fostered closer relations with the Department of Pediatrics of the University of Colorado School of Medicine which included the joint recruitment of faculty as staff and fellows for training in Neonatal/Perinatal Medicine.

Graduates of the training program at Children's and former staff members are now in leadership positions in the United States, Argentina, Australia, Canada, China, Finland, Germany, Great Britain, Italy, Panama, Peru and Saudi Arabia.

In 1967, Butterfield hosted the first Aspen Conference on the Newborn at the Aspen Meadows. His 1954 experience as the bell captain of the Hotel Jerome in Aspen during a quarter off from the CU medical school had placed him in the renaissance of that community. His career was influenced by a series of lobby conversations with the late Walter Paepke, the captain of industry from Chicago who had re-discovered Aspen and who, at that time, was building the Aspen Institute for Humanistic Studies. The Aspen conference was held at the AIHS. It is the oldest on-going conference on the newborn in the world which celebrated its 31st anniversary in March, 1997.

Several innovative perinatal programs matured and expanded during his term of management of The Newborn Center, including the above mentioned perinatal outreach education program and the neonatal emergency transport service which developed and utilized neonatal nurse clinicians. Staff from the Newborn Center were pace setters in newborn medicine as they created a family care program and a neonatal hospice program.

Soon after he was appointed to the AMA Committee on Maternal and Child Care in 1969, he introduced the concept of regional perinatal care to the committee which was based on the Newborn Country USA model in Denver.

He was elected to the American Pediatric Society in 1975.

In 1977, he created an alliance with the Department of Obstetrics and Gynecology at St. Luke's Hospital wherein Children's Hospital leased and operated the Level I and Levenurseries at St. Luke's, the first such leased space operation in the world. Children's provided staff and equipment and leased nursery space and laboratory services from St. Luke's. It was a unique, effective and futuristic perinatal venture for nearly ten years before it was terminated in 1987.

Butterfield was active in the Denver Medical Society from 1965 to 1984. He served on the Board of Trustees from 1967 to 1969 and on numerous committees. One was a committee, "Old Doc Experience", that included the late Robert Perkins from the Rocky Mountain News. The committee met monthly to write articles on practical medical subjects for publication in Colorado newspapers.

He was elected to the House of Delegates of the Colorado Medical Society where he served for many years and which recognized his contributions with the Certificate of Service in 1975.

He was appointed to the Committee on Maternal and Child Care of the American Medical Association in 1969 and served as chairman in 1972-73. In addition to the policy on regional perinatal care, Butterfield sponsored a statement on family care in the delivery room which was also adopted by the AMA House of Delegates.

In 1975 he was named to the Denver Post Hall of Fame.

He was elected president of the medical staff of TCH in 1978 and served on the Board of Directors during his two-year term. In 1980 he was appointed Director of Regional Program Development where he increased his interest in the state legislature and in the development of regional programs, including specialty clinics in the region, improved physician relations and systems of pediatric and perinatal care.. He served on the Board of Directors of the Association of Volunteers of TCH from 1985 to 1992.

The Board of Directors and the Medical Staff of The Children's Hospital awarded him a special recognition award in 1981. He received the Founders Award of AAP District VIII Perinatal Section in 1985. The TCH Medical Staff presented him with the James Strain Award in 1986 and he received the Visiting Nurse Association Recognition Award in 1986. The Colorado Chapter of the American Academy of Pediatrics gave him the C. Henry Kempe Award in for Service to Children in 1990.

Following the rapprochement of Children's Hospital and the Department of Pediatrics in 1989, Butterfield was given an academic appointment as Professor of Pediatrics.

At the national level he was co-author of the policy statement on Centralized and Regionalized Perinatal Care which was adopted by the AMA House of Delegates in Atlantic City in 1971. He represented the AMA on the National Committee on Perinatal Health which included representatives from the AAP, AAFP, ACOG and AMA and which wrote the landmark "Toward Improving the Outcome of Pregnancy". It was published by the March of Dimes/ Birth Defects Foundation in 1976 and again in 1983.

The 1983 AAP/ACOG Guidelines for Perinatal Care were dedicated to Drs Butterfield and Sprague Gardner, a former president of ACOG.

Dr Butterfield wrote the resolution to the Executive Board of the AAP to establish a Section on Perinatal Medicine which was adopted by the Colorado Chapter of AAP at their annual meeting at the Broadmoor Hotel in 1971, the same year that the AMA House of Delegates adopted the policy statement on regionalized/centralized perinatal care.

He was a member of the AAP organizing committee for the Section on Perinatal Pediatrics in 1974 and a charter member of the Section when it was formed in 1975 in Washington, D.C.

After organizing planning meetings of neonatologists from Arizona, Colorado, New Mexico and Utah in 1973, 1974 and 1975, he was elected the founding chairman of the AAP District VIII Perinatal Section in 1976. That district organization has become the model for similar AAP district perinatal sections in seven of the ten Academy districts.

He served as chairman of the AAP Perinatal Section from 1983 to 1986. He continues to serve the Section as Of Counsel and Co-Editor of Perinatal Section News, an international publication of the Section. From 1988 through 1997, he was chairman of the Perinatal Section Workshop on Perinatal Practice in Scottsdale, AZ, which addresses the challenges of perinatal practice, organization and planning for the future. His service was recognized by the establishment of the "L. Joseph Butterfield Lecture in Perinatal Strategy" at the 1997 workshop.

He has been an invited consultant to AAP Districts IX, IV, V&VI, and III in the formation of District Perinatal Sections.

He organized the Western Perinatal Club from District VIII and IX members of the AAP Perinatal Section in 1984; it meets in Carmel, CA during the annual meeting of the Western Society of Pediatric Research.

He served as a Governor appointee to Child Care a state level committee funded by a tax on the marriage license to support programs that prevent child abuse from 19 to 19 .

In 1988, the Director of The National Institute of Child Health and Human Development, Dr. Duane Alexander, invited Dr. Butterfield to convene the first NICHD Aspen Conference on Maternal, Fetal and Newborn Medicine. The faculty of 30 included many of the NICHD grantees from university medical centers throughout the US. Every director of a maternal/fetal medicine and neonatal/perinatal medicine in the country was invited to send a senior fellow or a junior faculty member to the conference at their expense. For the last nine years, this has grown to one of the most popular and respected postgraduate experiences for perinatal medicine trainees. Since 1996 the conference has included trainees and faculty from Reproductive Endocrinology. From the origin of this conference, Children's and the University have been co-hosts.

In 1991 and 1992, he convened an informal discussion group in Denver to focus on perinatal history. The targets of those two study meetings were Martin Couney, the "incubator doctor" that Dr. William Silverman wrote about in a 1979 Pediatrics article and Pierre Consant Budin, the French obstetrician who established "puericulture" in Paris in the 1850's.

The study group became the Ad Hoc Committee on Perinatal History of the AAP Perinatal Section. It sponsors the annual Thomas E. Cone, Jr. M.D. Lecture at the annual meeting of the AAP which is supported by a grant from Ross Products Division of Abbott Laboratories. Butterfield serves as the chairman of the committee which includes Jeffrey P. Baker, Murdina M. Desmond, Lula O. Lubchenco, William A. Silverman, Thomas E. Cone, Jr, Lawrence M. Gartner, Russell A. "Jiggs" Nelson, Paul Toubas and O. Ward Swarner. Dr Leonore Ballowitz, a former member, died in 1994. The research by the group led to a letter to the editor of Pediatrics, "The Martin Couney Story Revisited" in August of 1997.

For ten years he was the chairman of a task force of the AAP Perinatal Section which successfully lobbied the United States Postal Service for a definitive stamp for Dr. Virginia Apgar. It was dedicated at the AAP Annual Meeting in Dallas in 1994.

He then led an international campaign to raise \$30,000 for the AAP Perinatal Section to purchase the instruments that she crafted. They were donated to Columbia University College of P&S as "The Apgar Memorial String Quartet" (AMSQ) in 1996.

The inaugural recital of the AMSQ was in January, 1996 at Babies Hospital in New York. Students from the medical school and the faculty played the instruments which are maintained at Columbia University. With support from the Perinatal Section, he created a poster on the life of Dr Apgar, the process of stamp selection and her instruments which has been presented at numerous AAP conferences and at the Tenafly Public Library and the College of P&S of Columbia University. In June of 1997, the Apgar poster was shown at the Aspen Post Office and at the Pitkin County Public Library.

The Apgar Family Association recognized his work on behalf of Dr Virginia Apgar by electing him an "Honorary Apgar" in 1996.

His contributions to the field of perinatal care have been recognized by The Distinguished Service Award of The American College of Obstetricians and Gynecologists, A Special Award of the National Institute of Child Health and Human Development, The Virginia Apgar Award of the American Academy of Pediatrics, the Significant Sig Award of the Sigma Chi Fraternity, the L. Joseph Butterfield Lifetime Achievement Award of the Colorado Chapter of the March of Dimes/ Birth Defects Foundation and the National Volunteer Award by the March of Dimes Birth Defects Foundation. Columbia University College of Physicians and Surgeons Alumni Association elected him as an honorary alumnus, the second in the history of the College of P&S.

As a feature of the celebration of the 100th anniversary of the University of New Mexico Alumni Association, *Mirage*, UNM's alumni magazine profiled 100 UNM graduates in the fall (1997) commemorative issue. Dr Butterfield was chosen to be one of those profiled. His nephew, Don Butterfield, a public affairs representative for the UNM Health Sciences Center was assigned to create the piece for *Mirage* magazine.

He married Perry McArthur Carson in 1967. They raised four children; Bruce, a satellite soft ware designer with Hughes Aircraft, lives in Monument, CO, Brigid, an artist and musician died of leukemia at 23, Brian, a business management consultant who is an associate partner with Andersen Consultants, lives in Buenos Aires and Tate, an emergency/trauma nurse at Penrose Memorial Hospital in Colorado Springs, lives in Monument, CO. Perry and Joe have four grandchildren.

Perry is a senior research associate in the Department of Psychiatry at the University of Colorado Health Sciences Center. As such she has brought her 15 years of research in

the emotional development of children to bear on the writing of educational material specific to the adolescent and high-risk parents. She joins Dr. Butterfield in a deep commitment to medical education and research and in a campaign to endow The L. Joseph Butterfield Chair of Pediatrics of The Children's Hospital/ The University of Colorado School of Medicine.

He continues to be active in the AAP Perinatal Section as Of Counsel and Editor Emeritus of Perinatal Section New with assignment in District News and International News and as a registered lobbyist at the Colorado General Assembly where he teaches a class, "How to be a capitolist". He manages pediatric and perinatal conferences in Aspen and Colorado. And he is frequently invited to give memorial and keynote addresses, the last two being The Lawrence Breslow Memorial Lecture at Lutheran General Hospital in Park Ridge, IL and the John Perlstein Memorial Lecture at the University of Louisville in Louisville, KY.

He has been invited to join the executive committee of the Catgut Acoustical Society, an international organization of 800 members from 30 countries which has formed an alliance with the St Petersburg Conservatory to organize a 1999 US tour of the Hutchins St-Petersburg Violin Octet.

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 25. Neonatology Prose & Controversy. L. Joseph Butterfield, M.D. Editorial. Perinatal Section News, August 1980.
 26. A Neonatal Concession. L. Joseph Butterfield, Peter Honeyfield, Mary Ellen Lunka, Joan Offutt, Kathleen Volker. Abstract. Clinical Research, Vol. 29, 1981.
 27. Outcome of Inborn vs. Transported High-Risk Infants. Lula O. Lubchenco, L. Joseph Butterfield, Virginia D. Black, Edward Goldson, Catherine S. Manchester and Beverly L. Koops. Pediatric Research 15:4, p.671, April 1981.
 28. On Policy Change and Sausage. L. Joseph Butterfield, M.D. Editorial. Perinatology/Neonatology 5:5, September-October 1981.
 29. Children's Hospital 'caring for kids'. L. Joseph Butterfield, M.D. Editorial. Loveland Daily Reporter Herald, p. 4, January 9-10, 1982.
 30. Foot Length & Gestational Age. J.A. Hernandez, R.A. Lazarte, D.E. Pisanos, & L.J. Butterfield. Abstract. Clinical Research, Vol. 30, No. 1, 1982.
 31. The Impact of Neonatal Loss. R. Siegel, A. Glicken, S. Henneberry, C. Cleveland, L.J. Butterfield, and R. Harmon. Abstract. Pediatric Research 16:4, p. 93, April 1982.
 32. Neonatal Morbidity in Level III Nurseries: Role of the Referring Hospital? L. Joseph Butterfield, Lula O. Lubchenco, Beverly L. Koops, Virginia D. Black, Edward Goldson, Catherine Manchester. Abstract. Pediatric Research 16:4, p.282, April 1982.
 33. Survival of the Very Low Birth Weight Infant: Dependence on Optimal Intrapartum and Neonatal Care. Lula O. Lubchenco. L. Joseph Butterfield, Beverly L. Koops, Virginia D. Black, Edward Goldson, Catherine Manchester. Abstract. Pediatric Research 16:4, p.297, April 1982.
 34. Revenue Shifting in Academia. L. Joseph Butterfield. Letter to the Editor. Pediatric Research 17:3, p.237, March 1983.

35. Darwin Had a Word for It. L. Joseph Butterfield, M.D. Editorial. Perinatology/Neonatology 7:7, July, 1983.
36. Colorado's Improved Pregnancy Outcome: 1960-1979. L. Joseph Butterfield. Abstract. Clinical Research 31:1, 1983.
37. Neonatal Mortality Risk of Sick Premature Infants in an Outborn Population. Delphine Eichorst, M.D., Barbara J. Quissell, M.D., L. Joseph Butterfield, M.D. Abstract. Pediatric Research 18:4, p. 103A, April 1984.
38. Effect of Delivery Room Care on Survival and Outcome of Low Birth Weight Infants. Virginia D. Black, Lula O. Lubchenco, L. Joseph Butterfield and Beverly I. Koops. Abstract. Pediatric Research 18:4, p. 313A, April 1984.
39. A Sad Lag in Care for the Newborn. L. Joseph Butterfield. Editorial. The Denver Post, April 28, 1984.
40. Have a Nice Apgar. Editorial. L. Joseph Butterfield, M.D. Perinatology/Neonatology 8:4, July/August 1984.
41. Training of Neonatologists in the USA. L.J. Butterfield. Presented at the IX European Congress of Perinatal Medicine held in Dublin Ireland, September 3-5, 1984. Perinatal Medicine, MTP Press Limited.
42. Baby No Dough. Editorial. L. Joseph Butterfield, M.D. Journal of Perinatology IV:3, 1984.
43. Women Physicians Would Benefit. Letter to the Editor. L. Joseph Butterfield, M.D. The Denver Post, May 1, 1985.
44. In Support of the Downtrodden. Letter to the Editor. L. Joseph Butterfield, M.D. Dallas Morning News, May 1, 1985.
45. Baby No Dough: Financing the Care of Seriously Ill Newborns. Editorial. L. Joseph Butterfield, M.D. AAP News, March 1986.
46. The Life Cycle of One Neonatologist: Preparation, Practice, Program Development, Policy, and Politics. Editorial. L. Joseph Butterfield, M.D. Journal of Perinatology, 10:4, p. 367,368, 1989.
47. Interview, quoted in "Save Our Babies", Parade Magazine, June 30, 1991.

48. VIRGINIA APGAR and the Apgar Score: Kudos & A CORRECTION JAMA 1997; 277:1819

49. THE NURSERY NETWORK — AN OPTION TO DEREGIONALIZATION, L. JOSEPH BUTTERFIELD
JOURNAL OF PERINATOLOGY VIII # 1, 1, 1987 WD

2/28/99

addendum
CURRICULUM VITAE
L. JOSEPH BUTTERFIELD, M. D.

UNIVERSITY APPOINTMENTS:

- 1993 to date Professor of Pediatrics
University of Colorado School of Medicine
- 1997 to date Editor, Given Institute of the University of Colorado
Newsletter
- 1995 to date Member, Chancellors Health Policy Advisory Committee
- 1993 to date Member, Steering Committee, Given Institute
- 1993 to date Chairman, Department of Pediatrics Annual Pediatric
Program
- 1993 to date Member, Continuing Medical Education Advisory Comm

HOSPITAL APPOINTMENTS:

- The Children's Hospital (Honorary)
- Government Liason
- Conference Manager

AWARDS & HONORS

- 1998 L. Joseph Butterfield Chair in Pediatrics: The Children's
Hospital, Denver
- 1997 One of 100 UNM graduates profiled in Mirage, the
alumni magazine of the UNM Alumni Association in
recognition of the 100th anniversary of the association.
- 1997 L. Joseph Butterfield Lecture in Perinatal Strategies, at
the AAP Section on Perinatal Pediatrics Workshop on
Perinatal Practice IX in Scottsdale, AZ
- 1996 National Volunteer Award,
March of Dimes Birth Defects Foundation
- 1996 Recognition, American Academy of Pediatrics, Perinatal
Section, United States Neonatologists, Directory 1996
- 1996 Honorary Alumnus, Columbia University College of
P&S (second one)
- 1995 L. Joseph Butterfield Lifetime Achievement Award,
Colorado/ March of Dimes Birth Defects Foundation
(first awardee)
- 1992 Viginia Apgar Award, American Academy of Pediatrics

1992	Significant Sig Award, Sigma Chi Fraternity
1991	James E. Strain Award (Colorado Chapter AAP)
1990	C. Henry Kempe Award for Service to Children
1989	NICHD Award
1988	Recognition, Board of Directors, Visiting Nursing Assoc.
1986	James Strain Award in Pediatrics
1984	Distinguished Service Award, American College of Obstetricians and Gynecologists
1983	Founders Award, AAP District VIII Perinatal Section
1983	Dedication, AAP/ACOG Guidelines for Perinatal Care
1981	Recognition, Board of Directors & Medical Staff of The Children's Hospital, Denver
1979	James J. Waring Award, American Lung Assoc of Colo
1978	Congressional Record; Extension of Remarks (Rep Patricia Schroeder D-CO)
1977	Silver and Gold Award, University of Colorado Medical Alumni Association
1977	Colorado Chapter, American Academy of Pediatrics, Recognition
1975	Colorado Medical Society Certificate of Service
1975	Denver Post Hall of Fame
1975	Virginia Apgar Memorial Award (Colorado Chapter)
1973	Recognition: Board of Directors & Medical Staff, Children's Hospital, Denver
1972	American Medical Association, Physician's Recognition Award in Continuing Medical Educationn
1972	Gerald J. Hencmann Memorial Award, March of Dimes
1970	American Medical Association Certificate of Appreciation, Chairman and Member, Committee on Maternal Child Care

CATGUT ACOUSTICAL SOCIETY

1997 to date	Member, Executive Committee for the USA tour of the Hutchins St Petersburg Violin Octet
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AMERICAN ACADEMY OF PEDIATRICS

	National
1977 to 1983	Editor, Perinatal Section News
1983 to date	Editor Emeritus, Perinatal Section News

1985-date	Conference Chairman, Ross Laboratories' Western Leadership Conferences
1982-date	Medical Consultant, KCNC-TV, Denver
1982-date	Member, Advisory Committee, Symposia Medicus
1982-1983	Member, Telethon Committee, National Association of Children's Hospitals and Related Institutions
1974	Member, Maternal & Child Health/Perinatology Working Group, Department of Health, Education and Welfare, U.S. Government
1973-date	Conference Chairman, Mead Johnson Nutritional Group's Aspen Conferences on Perinatal Research
1967-date	Conference Chairman, Aspen Conference on the Newborn, The Children's Hospital
1964-1981	Medical Consultant, LaLeche League
1961-date	Founder, Perinatal Society

APPOINTMENTS TO
JOURNALS & PROFESSIONAL
PUBLICATIONS:

1990-date	Member, Editorial Advisory Board, <u>Neonatal Intensive Care</u>
1989-date	Member, Professional Advisory Board, <u>Baby on the Way</u>
1987-date	Member, Professional Advisory Board, <u>Baby Talk</u>
1987-date	Member, Executive Board, <u>Pediatric Update</u> , The Children's Hospital
1987-1988	Member, Professional Advisory Board, <u>Expecting</u>
1986-date	Member, Editorial Board, <u>Masters in Pediatrics</u>
1985-date	Member, Executive Board, <u>Quarterly Review</u> , The Children's Hospital
1984-date	Member, Editorial Board, <u>Journal of Perinatology</u>
1982-date	Reviewer, <u>The American Journal of Diseases of Children</u>
1982-date	Member, Editorial Board, <u>National Neonatology Information Network</u>
1978-1981	Editor, <u>Perinatal Section News</u> , Newsletter of the AAP Section on Perinatal Pediatrics
1977-date	Member, Editorial Board, <u>Perinatology/Neonatology</u>
1975-date	Member, Advisory Board, <u>Parents Expecting</u>

MEMBERSHIPS IN
PROFESSIONAL SOCIETIES:

American Academy of Pediatrics
California Perinatal Association
Canadian Pediatric Society
Colorado Medical Society
Denver Medical Society
The Hastings Center
Irish/American Pediatric Society
Wyoming Perinatal Association

MEMBERSHIPS BY ELECTION:

American Pediatric Society
Arizona Perinatal Trust
Colorado Gynecological and Obstetrical
Society, Honorary Member
Kansas City Gynecological and
Obstetrical Society, Honorary Member
New Mexico Gynecological and Obstetrical
Society, Honorary Member
Society for Pediatric Research
South Plains Perinatal Society, Honorary
Member
The Waring Society, Charter Member
Western Society for Pediatric Research
The World Medical Association, Associate
Member

1983 to 1986	Chairman, Perinatal Section
1985 to date	Leader, The Apgar Stamp Task Force
1986 to date	Of Counsel, Perinatal Section
1989 to 1997	Chairman, AAP Perinatal Section Spring Workshop in Scottsdale, AZ
1994	Consultant, USPS Planning Group for the Dedication of the Apgar stamp in Dallas, Tex.
1994 to date	Chair, Committee to Acquire the Apgar instruments as a memorial to Dr Virginia Apgar
1994 to date	Consultant, National Neonatologists Directory/1996
1989-1997	Chairman, AAP Perinatal Section Spring Workshop in Scottsdale, AZ
1996 to date	Member, Apgar Memorial String Quartet Oversight Committee of the College of P&S of Columbia University representing the AAP Perinatal Section
1979 to date	Section Council Special Projects Apgar Stamp Project
	District VIII Perinatal Section
1976 to 1979	Founding Chairman
1976 to date	Perinatal Section Council
1989 to date	Western Perinatal Club, Founder and Permanent Secretary
1997 to date	Nominating Committee, Chairman
	Colorado Chapter Emeritus Denver Medical Society Emeritus

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