Transcript

BAUMGARTNER: Today is April 15, 2016, my name is Karl Baumgartner, and I am interviewing Dr. Stanley Thompson at 3415 FM762, Richmond, Texas. Dr. Thompson has been a Richmond resident for almost 65 years, had a medical business, a tremendous family practice, and has been a civic leader for all these years.

Dr. Thompson, you have had such a distinguished career. We know that you were born in 1918 in Canada. Your parents were Americans who had lived in Illinois. They moved with you to Washington State, you started college, and you got drafted and were in the Army in 1941, and served in the Army in administrative positions.

How old were you when your family moved from Canada?

THOMPSON: I was seven years old.

BAUMGARTNER: You had seven siblings.

THOMPSON: Yes. At that time, I only had five siblings. Two were born in this country. My parents were American citizens, and my daddy was a wheat farmer in Alberta.

BAUMGARTNER: What were your mom and dad’s names?

THOMPSON: My father’s name was Cal Thompson. My mother’s name was Hazel Thompson.

BAUMGARTNER: So the family moved to Port Townsend, Washington. How large and what kind of town was it?

THOMPSON: About 4,000 population. It was mostly fishing and logging. I went to a one-room schoolhouse for my first eight grades. I thought that when I went to high school that I would be so ill prepared because of having my first eight grades in a one-room schoolhouse, but I found that I was more prepared than the rest of them. I had not realized that when you are in a one-room schoolhouse, that you hear all the other classes, what we called recite, so I listened to all of those and learned from them too.

BAUMGARTNER: Did you have just one teacher for the eight grades?

THOMPSON: Yes sir. Over the course of the eight grades, I probably had four teachers. I had one teacher that I am very thankful for. She had a library of books and she told me that for every ten books I read, she would give me one. So I read all of them and had a pretty good little library to start off on my own.
BAUMGARTNER: Was your high school a larger school?

THOMPSON: Well, no, it was a small school, too. There were 29 in my graduating class.

BAUMGARTNER: In those days, what did students do for extracurricular activities?

THOMPSON: We had a football team and a track team. I ran track. You won’t believe it, but I ran a mile in four and half minutes.

BAUMGARTNER: Really! My goodness that is a tremendous accomplishment in high school!

THOMPSON: Yes, sir. I ran five miles every morning.

BAUMGARTNER: I remember when Ryan broke the four–minute mile world record barrier at Kansas, many years later than that. Did you have state tournaments?

THOMPSON: No. Just local.

BAUMGARTNER: Did you plan on running track in college?

THOMPSON: No. I worked in college and I couldn’t have done anything except go to class and work.

BAUMGARTNER: These were Depression years. What was the Depression like growing up?

THOMPSON: Very tough. Very tough. Food was a problem. If you’re cold, hungry, broke, and a long way from home, you never forget it.

BAUMGARTNER: I guess the experience lingers all your life.

THOMPSON: One example is that in later years you overcompensate. I remember one Christmas when our kids were 3–4–5 years old. We had boxes and boxes of presents under the Christmas tree, and when it was over one of the kids asked something like, "Is that all?"

Later during the day I was called out on a house call to a black family’s home. The little boy’s daddy had taken a cigar box, nailed spools on the four corners for tires and attached a thread to pull it. I assure you that little boy had as much fun as our kids.
BAUMGARTNER: With the economic conditions of the Depression it must have been an accomplishment to go to college. Where did you go?

THOMPSON: I was the only one of eight siblings to attend college, and my mom and dad had not. I went two years to Walla Walla College, in College Place, Washington before being drafted.

BAUMGARTNER: How did you select Walla Walla College, and when did you attend?

THOMPSON: I don't know, I just did; it was 1939–1941. I was drafted in September of 1941.

BAUMGARTNER: Oh, three months before Pearl Harbor. So they pulled you out of college?

THOMPSON: Yes, sir. It was quite ironic because I was working in the business office for the college and they asked those in the business office if we would work as registrar for the draft. At that time, everybody’s name was put in a huge fish bowl and then they would draw them out to determine who would be drafted. They pulled my name out first!

BAUMGARTNER: I'll be darned. And what was your reaction to that?

THOMPSON: Nothing you could do. Nothing you could say.

BAUMGARTNER: So you got drafted. In what branch of service?

THOMPSON: Well, when you are drafted, you are just drafted. I had only been in a short time when Pearl Harbor happened, and I was sent to the Army Air Corps in Tucson, Arizona, Davis–Monthan Field. I was there until June 1945. My CO kept telling them they needed me there, until June, 1945, when I was shipped to Grand Island, Nebraska. I was assigned to a B-29 Bomb Group and received a Presidential Citation with two Oak Leaf Clusters.

BAUMGARTNER: And that was getting close to the end of the war?

THOMPSON: Yes, sir. I was then assigned to go overseas. As a Sergeant Major in the medical department, I had the choice of going by air or by boat and, of course, I chose by air. Who wants to go overseas by boat? Nobody. About two or three weeks before departure the war ended and I was discharged, so I never saw combat.
BAUMGARTNER: Did your military service have an influence on your career, your selection of the medical profession?

Thompson: Yes, sir, it did. I served in Administration and was involved in medical recordkeeping in the base hospital. This led to assignment in the hospital known as CQ, Charge of Quarters, and as such I would sometimes have to serve as CQ in the emergency room at the hospital.

BAUMGARTNER: That meant that you were in charge of...?

THOMPSON: Sick people.

BAUMGARTNER: Wow! So you were a doctor already!

THOMPSON: Well, that’s what I said. [both laughing] Soldiers would come in and would need an x-ray, or whatever, so you would call the Officer-of-the-Day, who was over at the officers’ quarters relaxing. He would ask me, 'Well, what do you think is wrong with them?”, and I would tell him, and he would say, "Well, ok, do you think it (an arm or leg) is broken?”, and I would tell him I do or I don’t, and then he would say, "You do this or that...". I got to thinking, “Here I am practicing medicine, I might as well be a doctor!” [both laughing]. So I decided to go to medical school.

BAUMGARTNER: Did you have any inclination about being a doctor or medicine or anything while growing up?

THOMPSON: Not before then.

BAUMGARTNER: So your experience in the service profoundly changed your life. During WWII did you attend an Army school in Huntsville?

THOMPSON: Yes, Army Administration School. We got a TWX; I don’t know what you call it now.

BAUMGARTNER: So you went to Huntsville and you met your wife.

THOMPSON: Yes. Lila Grace. She was a senior at Huntsville. She died in 2013.

BAUMGARTNER: I was aware of that. I’m sorry. You were together almost 70 years. You got married, and after you got out of the service you moved to Brookshire. What was Brookshire like back in 1945?
THOMPSON: It was a small town, probably about 1,000 population, not a lot smaller than it is now. It was a rural farming community, cotton, peanuts, rice. My father-in-law, Edwin Rapsilver, was a builder and he built the grain driers there in Brookshire.

BAUMGARTNER: You continued your education.

THOMPSON: When I got discharged from the service, I hitchhiked to Brookshire where my wife was teaching school in Katy. I got there one afternoon and the next night I started night school at the University of Houston. I didn’t have a car and always hitchhiked to school.

BAUMGARTNER: Wow, you hitchhiked. I think that’s pretty interesting. Did the same people pick you up frequently?

THOMPSON: No. Usually it was different people. My wife was teaching high school at Katy. I worked in the daytime for her father as a laborer. This sounds strange, but I worked from 7 until 3, pushing a wheelbarrow, construction work. We were living with her parents. I would come home, take a bath, clean up and hitchhike into Houston and attend the University of Houston at night. I would go to class from 7 to 11, and I would hitchhike home, and then I would get up and go to work at 7 the next morning. That is how I got my college degree.

BAUMGARTNER: Not a whole lot of sleep. A lot of dedication to a goal.

THOMPSON: I had two years of college before then. That is how I got the rest. It was kind of tough, and that is how I earned my way through college.

BAUMGARTNER: What was the University of Houston like in those days?

THOMPSON: I worked in the Registrar Office. The enrollment was about 13,500 at that time. It was a pretty good institution.

BAUMGARTNER: It was a big institution even then. Were you taking pre-med then?

THOMPSON: Yes, sir, I was. In pre-med if you don’t get a good grade point average, you don’t get into medical school. It was tough then because we had so many students who were returning from the war, and they weren’t kids, they were grownups and they were in dead earnest. We had a lot of applicants to medical school and it was tough to get in. In our organic chemistry class, which was a pretty tough class, there were 100 premed students and only four of us got into medical school.
BAUMGARTNER: The returning military guys; they had a level of maturity that you usually don’t start with as a college freshman.

THOMPSON: They were all older, dedicated and knew what they wanted to do in life.

BAUMGARTNER: So you got your degree and then you went to medical school.

THOMPSON: I was admitted to three medical schools; Southwestern in Dallas, Baylor, and Loma Linda, and I decided to go to Loma Linda in California. The students spent two years at LA County Hospital, which is the largest hospital in the world. 3,200 beds. It is so big they have a jeep pulling the food carts in the halls. I felt like I would gain a lot of experience being in such a large hospital and I did. I saw many diseases, like leprosy and things like that, which you will never see anywhere else. If you see a disease you are going to remember it. I never regretted that at all. It is a fine school now; there are eight medical schools in California, and it has been rated the best one.

BAUMGARTNER: That was a good choice. It seems like you gained such a remarkable diversity from your experience out there.

THOMPSON: It helped me a whole lot. Just to give you an example, when I interned at Breckenridge in Austin, a patient came into dermatology clinic with a severe rash. The dermatologist called it some long name and I, just an intern, said are you sure that is not lupus erythematosus? A rare disease in this country, but we saw quite a bit of it at LA County, which was very high in the Oriental population. He said, "I don’t know. I have never seen one." He checked it out and, of course, that is what it was. That is an example of having seen a disease and recognizing it.

BAUMGARTNER: You did your internship in Austin, and then you came to the booming metropolis of Richmond, Texas.

THOMPSON: Yes, sir. 2,500 population. Incidentally, Sugar Land also had a population of 2,500, and it was unincorporated.

BAUMGARTNER: It was a company town.

THOMPSON: A company town, that’s what it was. Run by Imperial Sugar.

BAUMGARTNER: What is it like for a new young doctor to move into town and start a practice?
THOMPSON: I always loved medicine. I was surprised how rapidly my practice grew. I came in with Dr. C. V. Nichols, as an employee, incidentally starting at $500 a month. How do you like that? He was well established here. In fact, they built the hospital for him. It was the Hill-Burton Hospital. Do you remember it? A lot of people thought Mrs. Mamie George built it, but she didn’t.

BAUMGARTNER: You are talking about Polly Ryon Hospital?

THOMPSON: She didn’t build it. There was a Hill-Burton Act, which is a congressional act back in the late 1940’s, under which appropriations were granted to build rural hospitals and this is one of those 30- bed hospitals.

BAUMGARTNER: You said they built that for Dr. Nichols?

THOMPSON: Yes, he was so well liked and they needed a hospital here, so I guess you can say they built it for him.

BAUMGARTNER: When did it open?

THOMPSON: It started in 1950, if I remember correctly.

BAUMGARTNER: So it was a pretty new hospital when you arrived. And you got a job with Dr. Nichols?

THOMPSON: As an employee, for $500 dollars a month. But it is interesting that in six months, I was seeing more patients then he was.

BAUMGARTNER: Why was that?

THOMPSON: I guess they just liked me.

BAUMGARTNER: In 1952, our society was so different; it was before integration, for the most part.

THOMPSON: Yes, segregation was still in place.

BAUMGARTNER: Did your patients include minorities?

THOMPSON: My patients included minorities but there was segregation then. In fact, in our office we had a black waiting room and a white waiting room. If you walked down the sidewalk and you met a black person, they would step out into the street to let you walk by. We had a black toilet and a white toilet.
An interesting thing I remember, the George’s were good patients of mine, Mamie and Albert George, and when they came into the office as patients, they would wait their turn. I would serve black people ahead of them, and they waited their turn.

BAUMGARTNER: Wow, that speaks well for them doesn’t it?

THOMPSON: Yes sir, they didn’t mind a bit. But that’s the way life was back then.

BAUMGARTNER: So the black community came to you, and they found out about you pretty quickly. Eventually Dr. Nichols passed away?

THOMPSON: Yes, he died in 1960.

BAUMGARTNER: And then you went out on your own?

THOMPSON: Yes sir. I had a partner who came in from Galveston, UTMB, and he lasted about a year, and then we separated. Unfortunately he was an alcoholic. He was coming from Galveston one Saturday night, had a flat tire, got mad and was out beating his car with a two by four, and the police came along and arrested him. It was all in the news and everything and so that didn’t last long. He decided he would set up practice himself in Rosenberg, which he did, and that didn’t last long either.

BAUMGARTNER: So you ended up on your own. My concept of a family doctor as I was growing up in Stillwater, Oklahoma, they were pillars of the community, leaders. Has that changed over the years?

THOMPSON: Yes it has. Many doctors nowadays treat diseases, and not patients.

BAUMGARTNER: For some, motivation for becoming doctors is because it generates income.

THOMPSON: I became a doctor because I loved the people. In fact, when I came here, an office call was two dollars, and it went up to three rights after I came. I delivered babies for thirty-five dollars and for an appendectomy, we charged fifty dollars.

BAUMGARTNER: And then you did a lot of house calls too?

THOMPSON: Yes sir. We had a terrible flu epidemic in 1957. A lot of people died, and I remember one day, I made 17 house calls. Do you remember that epidemic?

BAUMGARTNER: No, I do not remember a flu epidemic. I remember polio.
THOMPSON: Many people in this country died, it was a terrible epidemic. We had polio right after I came in ’52. A number of patients were severely handicapped and some died. Of course, if they could not breathe, they were given an iron lung. That’s what they called them.

BAUMGARTNER: So house calls were a big part of your practice. Were they a necessary evil?

THOMPSON: Yes, though I saw a lot of patients in the office, too. It was just a thing you did and sometimes patients would take advantage of you. I remember a woman that I went to see on a house call and I said, “Why didn’t you come to the office?” She said “Oh, I would have to call a taxi and I didn’t have money to call a taxi.” [laughing]

BAUMGARTNER: When did house calls kind of fade out of the scene in America?

THOMPSON: I would probably say the late 197’s or early 1980’s. The reason a lot of us quit making house calls is that we realized that if they were that sick, they ought to go to the emergency room. Because a lot of house calls were just taking advantage of the doctor. When I first came here and for several years afterwards, some doctors would, deliver babies at home. I never would. I just refused.

BAUMGARTNER: They had to come into Polly Ryon?

THOMPSON: Yes. I just wouldn’t delivery a baby at home. So many things can go wrong with the delivery and the home is not a place to deliver a baby.

BAUMGARTNER: In those days, you would deliver a lot of babies as part of your practice?

THOMPSON: Yes, I delivered 4,500 babies.

BAUMGARTNER: 4,500! Wow. Twice the population of Richmond. Over sixty years.

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THOMPSON: I delivered the biggest baby ever born here. It weighed 13 pounds and 10 ounces. I delivered the smallest one that survived, which weighed a pound and 12 ounces. I delivered the only triplets that were ever born here and I delivered four sets of twins. To top it off, I delivered seventeen babies for the same woman.

BAUMGARTNER: My goodness. That is remarkable, both for you and for this woman.

THOMPSON: What is interesting, they all had this birth defect. What we called polydactyly, an extra finger on each hand.

BAUMGARTNER: Really. All of the seventeen babies?

THOMPSON: Yes sir. It is inherited. So when the baby was born, I would look for it. It was just a little nub, you just snipped it off, and that was it.

BAUMGARTNER: What I find remarkable, didn’t you conduct a lot of operations that a general practitioner couldn’t do now or wouldn’t have the experience to attempt?

THOMPSON: We had to. For instance, I remember a little baby child that came in with a depressed head fracture. The skulls of real small children and babies are like a ping pong ball. With no neurosurgeon available, I needed to trephine it, which is to cut a hole in the skull about this big, next to it, pop it up, put the thing back on, and it was all right.

One time was very scary, and it happened to be the child of a nurse. This child was four or five years old and I was doing a tonsillectomy. In those days you gave ether for an anesthetic, which is kind of tough. Another doctor was giving the anesthesia. When I pulled on the tonsil to take it out, the child went into cardiac arrest on the operating table. Well, you have about three minutes to do something or the patient will end up brain damaged. The anesthesiologist said, "What are you going to do?" So I took the scalpel and cut the chest open, reached in and took the heart, massaged it, and in about 30 seconds it kicked off. Started beating again. Sewed up the sac of the heart and the chest, and the child graduated from college.

BAUMGARTNER: Wow. How would you have the knowledge to do that? Certainly they never taught you how to do that!

THOMPSON: No sir. Let me tell you, it takes ten years off of your life.

BAUMGARTNER: Of course now, you would have to worry about malpractice.

THOMPSON: Yes. The mother was a nurse at the hospital.
BAUMGARTNER: Was she aware of what was going on?

THOMPSON: She knew.

BAUMGARTNER: So you performed different operations.

THOMPSON: Yes, sir. I did lots of gall bladder operations, hysterectomies, appendectomies, and cesareans.

BAUMGARTNER: You got enough background either from Loma Linda or your internship?

THOMPSON: Yes. When I was interning at Breckenridge in Austin, one of the interns quit so I did two services of surgery and this surgeon liked me. He started to let me do any surgery I felt like I was capable to do and he helped me. I learned a lot of surgery there.

BAUMGARTNER: Were there any specific times or eras with breakthroughs in the profession,? For instance, vaccinations or medicines?

THOMPSON: I think the biggest thing is that smallpox was eliminated. We haven’t had a case of smallpox in the world for about 20 years. And of course we stopped the polio epidemic. You know in some countries, polio was an epidemic but people got polio and it really didn’t bother them very much. I knew a doctor who was a class behind me who decided he would be a medical missionary to India. He went over there and he hadn’t been there six months, caught polio and it paralyzed him. But the natives were immune to it.

BAUMGARTNER: And you traveled to different parts of the world to look at hospitals?

THOMPSON: Yes sir. I was a delegate to the American Medical Association (AMA) from Texas for 27 years. I also was on the Continuing Education board. I was on a committee where I would go around the world and look at the different hospitals, and as a result of that I inspected many hospitals in different countries of the world.

BAUMGARTNER: This was over a period of a number of years?

THOMPSON: Yes sir. Over a period of ten years.

BAUMGARTNER: Why and how were you selected to be on this committee and be a delegate?
THOMPSON: I think I was appointed to it by the Board of Directors of the AMA. It was interesting to see how terrible medical practice is in most of the world. For instance, I inspected a hospital in St. Petersburg, Russia, 400 beds, 4 stories high with no elevators! Their x-ray machine was an old beat up thing, similar to the one that we threw away in my office 30 years before.

BAUMGARTNER: Would you attribute that to their political system?

THOMPSON: Yes, sir. Quite a bit. For instance, I talked to some of the doctors and they said, “We just wish we had medications that we need. We can’t get them, such simple things as digitalis, heart medication, penicillin.” They just couldn’t get the medicine they needed.

You won’t believe this, but the best medical school in the world, except for ours, is Finland. They are really high class, and they taught everything in English. I said, “Why do you do that?” And they said, “What are you going to read in a Finnish medical journal? Nothing.” [both laughing] That was interesting.

Hong Kong has a good medical school, while China was just terrible. They do all this acupuncture. I went to a clinic there and watched them. They stick the needles in there, pull them out and use them on the next patient and never sterilize anything. Horrible. How do you like that?

BAUMGARTNER: Your travels and the experiences must have given you a tremendous world view.

THOMPSON: Yes, it did.

BAUMGARTNER: How does the United States compare in your view to these countries and our whole way of living?

THOMPSON: It is way, way above the rest of the world. Let me give you another example. I went to Vienna to this fancy clinic. You know Vienna used to be the medical capital of the world way, way back. At the clinic this guy was putting a cast on a fellow. He had a bucket of Plaster of Paris and he had a bandage roll. He would roll the bandage around the leg and then dip a brush in the Plaster of Paris, paint the bandage with the paintbrush and then he would let it dry. Then he would put another layer on.
That method went out about 50 years ago. The way we do it now, the outer bandage is already impregnated with material, you just dip it in water and put it on. It takes about five minutes [laughing].

BAUMGARTNER: Why do you think Finland in particular is exceptional? Why not the other Scandinavian countries?

THOMPSON: The Finnish people are pretty smart, and they are really up to date. I was really surprised. Another thing is, everything is taught in English. So they have access to all the English literature and research and everything.

BAUMGARTNER: How is the US medical profession compared Finland?

THOMPSON: Well, it is just that much better. For instance, I visited the medical school in Kyoto, Japan. They told me that if a Japanese medical school graduate comes over to the US and does his residency, whatever specialty that it is in, when he goes back to Japan, he automatically charges 20 per cent more.

BAUMGARTNER: That is like out of deference to the United States standards?

THOMPSON: That’s right. He gets better training. Isn’t that interesting? Japan is no slouch and their medical school is pretty good.

BAUMGARTNER: You read in the newspaper that the United States medical practice costs our citizens more than countries in Europe and it is not as good.

THOMPSON: Ours is way, way better. One thing that a lot of people wonder about is infant mortality. In the United States it is lower than any other country and you say why. Well the reason is because a lot of the poorer people, their babies are delivered by midwives and they don’t have the care that they should get at birth or neonatal care and that is the reason for it. You can understand that.

BAUMGARTNER: The hospitals over there, I imagine, they didn’t compare to modern hospitals?

THOMPSON: Oh, no. I guess one of the best examples would be their x-ray machines. I went to a big modern clinic in New Delhi, India; boy, it was the hottest thing out. In this big modern facility, the x-ray machine was so old that I would have thrown it away years ago. By and large most, Indian doctors are smart, and most of the doctors over here come from one small province in India.
Speaking of New Delhi, I will never forget this. Going into New Delhi on one of the freeways there is a great big sign of a skeleton with a cigarette in its mouth! I have never seen anything like it. That’s all it was, a great big skeleton with a cigarette in its mouth. It was pretty dramatic. No words. Just a big sign.

BAUMGARTNER: Dr. Thompson, the medical industry has changed a lot in 60 years; what are some main effects? I am talking about some things that have changed bureaucratically, such as insurance, and Medicaid.

THOMPSON: Yes. Medicaid is what we have, which we didn’t have. The people that use Medicaid abuse it very much. They don’t want to go wait in a doctor’s office so they go to the emergency room where they have to get seen in the emergency room and that is not right, but it happens every day.

BAUMGARTNER: Were you involved in organized medicine?

THOMPSON: Yes, I was. I was a delegate from Texas to the AMA for 27 years. The way it works, for every thousand doctors you have one representative for the AMA. I was one from Texas. We had in our delegation probably about 15 doctors.

BAUMGARTNER: How are they selected?

THOMPSON: By vote at the Texas Medical Association. The delegates vote them in or out.

BAUMGARTNER: So what are the objectives of the AMA?

THOMPSON: Well, the main objective is to promote medicine, to see that we had good medical practice in all of the states; and another is keep open communication with Congress, and to help promote doctors’ principles and ideals.

BAUMGARTNER: Was that effective?

THOMPSON: Very effective. At the time, the AMA membership was about 80% of the physicians here in the United States. Since then because of socialized medicine, Obamacare and all that, it has now declined to about 35%.

BAUMGARTNER: So the AMA was important?

THOMPSON: Very important.

BAUMGARTNER: Its decline could be construed as a negative?
THOMPSON: We were the liaison between Congress and administration and doctors. The doctors, I hate to say it, but so many of them in the AMA have not stood up for their principles, the physician’s responsibilities.

BAUMGARTNER: Doctors as a whole or those in the AMA?

THOMPSON: Those that belong to the AMA. A lot of the doctors have felt that the AMA was not representing them, so they dropped their membership.

BAUMGARTNER: Do you think Obamacare is going to work?

THOMPSON: I think it is with us to stay. I hate to say it but I think it is.

BAUMGARTNER: Everything seems so bureaucratic.

THOMPSON: That’s right.

BAUMGARTNER: When I grew up, if you got a fever or if you broke your arm or you needed a tonsillectomy you went to the doctor, and the doctor knew you. People still get fevers and break their arms. So what is the difference?

THOMPSON: Back then we took care of each other and if you couldn’t pay for it, you did it anyway. Nowadays it is entirely different.

BAUMGARTNER: Is it good or bad compared to the old days?

THOMPSON: Well in the old days, if they had insurance or could pay, you treated them and if they didn’t, you treated them for nothing, and it seemed to work out pretty good.

BAUMGARTNER: Was that just the individual doctor’s decision or the hospital?

THOMPSON: The doctor and the hospital. They treated a lot of them for nothing also.

BAUMGARTNER: If you had a patient that you knew, or if you didn’t know him, and they were clearly sick and they needed something or were injured?

THOMPSON: You took care of them. That is what you are a doctor for. Whether they could pay for it or not. But it is different now. I think it is worse because some people do not get treated at all. They said back then, which is long past, that sick people got treated; and it seemed like when they couldn’t afford it, we treated them for nothing; and somehow we absorbed that, and it all worked out.

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BAUMGARTNER: How big was our little hospital, Polly Ryon, now it’s Oak Bend?

THOMPSON: 30 beds when I came there.

BAUMGARTNER: What was it like compared to a hospital today?

THOMPSON: Not much. [Both chuckle] We did have an emergency room and they did surgery and had an obstetrics department and it didn’t stay 30 beds too long. I guess in about 10 years they built on to the hospital.

BAUMGARTNER: How many doctors were there when you came to town?

THOMPSON: Twelve.

BAUMGARTNER: Really. Isn’t that a lot for a town of 2,500?

THOMPSON: The hospital was in Richmond, and the doctors were from Rosenberg and Richmond both and in Richmond there was only one doctor and that was Dr. Nichols, until I came to Richmond. They had eight or ten in Rosenberg.

BAUMGARTNER: In addition to your medical work you were so involved in the community. You worked for the prison farm, and you were team doctor for the schools.

THOMPSON: 50 years. I was given an award after 50 years, and the Lamar ISD school superintendent, Dr. Randall said, “That sure is a lot of football games!” [both laughing].

BAUMGARTNER: It must have been very time-consuming to attend the games.

THOMPSON: Lamar Varsity games and sometimes the Junior Varsity, even when they were out of town, rain or shine, I did it all for nothing and did all the football physicals for nothing and if they got a dislocated hip or shoulder or something, I would set it right there.

BAUMGARTNER: Wow, you have seen several generations of young athletes.

THOMPSON: Yes, I have. They would still come in and say "you took care of me when I played high school football".

BAUMGARTNER: I played high school and college football, but it doesn’t seem like there were so many injuries back then.
THOMPSON: No, probably not. When they changed the cleats on the bottom of their shoes, that cut way down on them because we used to get many football knees because of the long cleats on their shoes; the players couldn’t rotate their knee, so they would get a knee injury.

BAUMGARTNER: I remember we didn’t even have face guards when I started and then they got one band in front of your nose and then they got two bands [both laughing].

THOMPSON: The whole community or a lot of them would come to the football games and it was just a good thing for the community. You remember that.

BAUMGARTNER: Oh, yes. It was a big deal. Looking back, playing football was probably the most formative part of my life as far a sense of identity and developing character traits that benefitted me later.

THOMPSON: Yeah, if they get some smart aleck in football, the rest of the team would take care of him.

BAUMGARTNER: Over the years, were there any coaches in particular that you remember? A good football coach has such an impact on his players.

THOMPSON: There is one I remember and his name was Carter, and they just named a school after him. At Lamar they changed head coaches about every four years or something like that.

BAUMGARTNER: If they didn’t win the state championship that year, they would get a new one. Bum Phillips, the Oilers coach said, “There are only two kinds of coaches, them that have been fired and them that are going to be fired.” [both laughing].

THOMPSON: You know how that goes.

BAUMGARTNER: You were also involved in the prison system?

THOMPSON: When I first came here, Dr. Nichols would go out to the prison. He had gone there for several years, so then I took over. They didn’t have doctors at the prisons and so I made many, many house calls to the prison units in Sugar Land. There were three main prison units, Number One, Number Two and Harlem Unit.

BAUMGARTNER: So what were the prisons like then?
THOMPSON: They are different now, because then it was a prison farm. The prisoners worked every day on the farm, and they had big cotton crops. They grew a lot of cotton, corn, cattle and pigs. They butchered their own pigs and cattle, and it was good for them, it gave them something to do.

BAUMGARTNER: Constructive. That was a big commitment on your part.

THOMPSON: Yes. I was there for a number of years. They had no doctors; all they had was a pharmacist to take care of the prisoners and when they had a rash or someone injured or they had a problem, they would call me and I would go out there.

BAUMGARTNER: So you must have gone through quite a few changes. Who was in charge, the local sheriff or the local law enforcement or was that mostly the state?

THOMPSON: The state. They had some real fine wardens. They were friends of mine. I remember one of them telling me that he had never seen a prisoner in a state prison that had been an Eagle Scout.

BAUMGARTNER: Oh, really?

THOMPSON: He had never seen one. We had Boy Scouts. My son Steve was an Eagle Scout.

BAUMGARTNER: Did they have Boy Scouts when you were in high school?

THOMPSON: No, sir.

BAUMGARTNER: I think Scouting started around your birth, it was just getting started around 1915.

THOMPSON: A good program. I was a doctor for the county jail for 25 years.

BAUMGARTNER: And how did that work?

THOMPSON: We had a clinic one or two days a week and they would come down on sick call and I would see them. Usually I would see about 15 or 20 on sick call. You would be surprised at how many of them were drug addicts. I guess maybe almost half of them.

BAUMGARTNER: Did this go back to the 1950’s or was it in the 1970’s?
THOMPSON: I believe it was the 1970's. What I did know, and it is still true and so many people don’t know, is that of all the drugs, heroin is by far the worst. I have seen prisoners in the jail lying on the ground on the floor vomiting and retching, in pain, withdrawing from heroin. I remember one in particular, they sent him off to state prison I think for three years, he came back and I saw him on sick call and back in jail. I asked, “After being off heroin for two years, are you cured or would you ever go back?” He said, “Yeah, if I had the chance I would get it.” Never cured. The only thing that ever cured them was that they died or got religion. It’s horrible and that is far worse than any other drug. You just don’t ever cure it.

BAUMGARTNER: So how did you make so much time to do all this stuff? [both chuckle]. I know you were extremely involved in community affairs, Chief of Staff of Polly Ryon Hospital, you and Lila so active with Richmond State School, different civic organizations, your practice. You mentioned that Mamie and Albert George were among your patients?

THOMPSON: Yes.

BAUMGARTNER: So over the years, you got to know them pretty well?

THOMPSON: Yes, very well. They were lovely people, especially Mrs. George. Just fine people. Good people.

BAUMGARTNER: I always read that she was a loving person.

THOMPSON: She had no children and our children used to go out there and play, out to the George Ranch, and she loved to have them.

BAUMGARTNER: You must have known over the years many of the old established families of the community who were known as the Austin 300, descendants of the original arrivals in Texas.

THOMPSON: Yes. In fact, Jane Long, who is known as the Mother of Texas, her granddaughter was a patient of mine. Most of them were pretty good patients.

BAUMGARTNER: Did you know Milton Robinowitz? I always heard that he was a neat guy, an outstanding citizen.

THOMPSON: Yes, very well. Very nice, nice man.

BAUMGARTNER: What did he do?
THOMPSON: He was a farmer/rancher. Just a fine person. His wife was a lovely person.

BAUMGARTNER: You must have been a tremendously busy person. How much sleep do you get?

THOMPSON: I get my eight hours of sleep, and always took a vacation. In fact we visited 92 different countries.

BAUMGARTNER: 92! That is amazing. You have had a lot of blessings.

THOMPSON: That is a blessing. When you see the world you get a much broader understanding, outlook on life.

BAUMGARTNER: You must have visited all the continents. You took your family and children?

THOMPSON: Yes, sir.

BAUMGARTNER: That is great. What were your children’s names?

THOMPSON: Steve, Judy was our second, and a third child, Terrell, who contracted encephalitis when he was three and has been treated ever since for treatment of the mentally disabled, at Richmond State School.

BAUMGARTNER: Yes, and I knew you and Lila played a major role and were instrumental in establishing the State School and developing its management.

THOMPSON: In our travels, I have never been to Antarctica. I haven’t been down there yet. As far south I got, I guess, was Argentina, Bolinas Verdes.

BAUMGARTNER: That’s a beautiful country. You must have had very busy schedules most of your life.

THOMPSON: Yes, sir, I did, and when I practiced for many years, I would have to turn away eight or ten patients every day. I couldn’t see them. I don’t want it to sound like bragging, but that wasn’t true of all the other doctors. In 1970 the hospital wanted to see which doctors were contributing most to the hospital, so they counted all their admissions. We had 16 doctors on the hospital staff at that time. That year they had 1,700 hospital admissions; 900 of them were mine.
BAUMGARTNER: When you retired my family lost a real ally. I remember you used to come in and tell me stories occasionally, just short references to being overseas. Is there any perspective or comment you might think of to offer young people growing up?

THOMPSON: Just do it. Do your best.

BAUMGARTNER: That is the Boy Scout Oath.

THOMPSON: And don’t do it because you think you will make more money. A survey was conducted one time and this is interesting. They compared the doctors who chose the profession as a business to make money, with doctors who chose it because they like people. The doctors who like people make quite a bit more money yearly than the doctors who were doctors to make money.

BAUMGARTNER: The patients can tell.

THOMPSON: The patients can tell. Real easy, they can tell.

BAUMGARTNER: Thank you Doctor, it’s been a great pleasure.