

February 11, 2016 – Vera Paoletti (DN 1969) speaking with archivist Kelsey Duinkerken at Thomas Jefferson University in Philadelphia, Pennsylvania

*Guide to abbreviations:*¹

KD: Kelsey Duinkerken

VP: Vera Paoletti

{CG} cough

{LG} laughter

{BR} breath

{NS} noise

- partial words

-- restarts

VP: OK, well hi, I'm Vera Paoletti. And um, a little bit about myself is um, I'm, I've been described as a very happy, joyous person, and I really am. And one thing in life that's been always so nice to me is people always have remarked from when I was a little girl about my smile. And I always say, "Well thank you," and I said, "it comes from the joy of the lord." And uh, I've been very connected spiritually, um, that is very important to me. My license plate is "praise" so that people know that I praise god and I hope that they do as well. And my hope and prayer every day is that we all live together in a peaceful world and all get along and uh work for the common good.

KD: Alright. So could you tell me how you first became interested in nursing?

VP: Yes. How I first became interested in nursing. From when I was a little girl, um, I've always loved music, and I've wanted to um -- I play the violin and piano and sang. Always sing. And sing in church. And I always thought, well, I wanted to be actually a Sister, um, and a teacher. However, life takes you, uh, down the path that you're supposed to be led, and when I was fourteen my uh, mother's brother, younger brother, got married. And he married Rosemary, who I really uh liked a lot. And we were together a lot. And um, my uncle and Rosemary were married for a year and a half and she got sick. And she developed leukemia. She was admitted and treated at Jefferson Hospital, and uh, I would always go see her because we were very close. And what happened was um, I was so touched as a fourteen year old at how wonderful the nurses were to her and the kindness that they showed towards her. She was only twenty-eight years old and uh, she was dying. And she died at Jefferson. And after she died I said I wanted to look into how could I help in some way at Jefferson Hospital. And I was led to become a candy striper. So I became a candy striper, uh, that summer of my uh, it was between my freshman and sophomore year in high school. My mother worked at P N C bank at the time at Broad and Chestnut so she brought me every day to the hospital at nine o'clock and picked me up at five. So I was there all day Monday to Friday on Tenth Annex with Miss Bobbin, she was the head nurse. And uh, I met Dr. Marvin

¹ Transcription rules are based on the University of Pennsylvania's February 2011 Transcription Guidelines: http://www.ling.upenn.edu/~wlabov/L560/Transcription_guidelines_FAAV.pdf

Hyett who was a resident at the time, and he's an O B G Y N. He is now seventy-two, I think, or three. Um, and he, he's semi-retired and he practices in Linwood. And from when I graduated, because I knew him when I was a candy striper, he has been my gynecologist all of my life. And I go see him in Linwood yearly. And every time I see him he always tells the people in his office, "I met Vera when she was a candy striper."

KD: {LG}

VP: "At Jefferson!" So that's how my career began in nursing, as a candy striper. And uh, I have to say as a candy striper, everybody was wonderful to me at the hospital. When I was a, a senior in high school, I of course had to apply to where I wanted to go. Well of course, my only, the only place I wanted to go for nursing -- I decided I wanted to be a nurse because of my experience as a candy striper, um, I of course applied to Jefferson. And it was the only place I applied to. I wanted to go there desperately, and um, thank god I did very well in school. I was eighth in my class at Saint Maria Goretti High School out of a class of eight hundred girls. And I was awarded a scholarship uh, when I was graduating, which was very nice uh, and I got a scholarship to Jefferson. At the time the tuition, it was very low. I, I don't remember what it was off-hand, but it was very, very low. Uh, so I entered uh, Jefferson Hospital School of Nursing, and I was thrilled, in September of uh, nineteen sixty-six. And lived at the James Martin Residence, I believe, um, and I was on the seventh floor, and loved it. Loved our time there in the um, in the residence. Um, we were put with roommates before-hand. And my roommate was Hope Russo, Schooley, now, and uh, we became like sisters. We're still very close, I was in her wedding. And um, we live, she lives in South Jersey as well, and we still keep in touch and uh, our bound is there, as I have bounds with a lot of the other students and nurses that I grew up with there at Jefferson. Um, I don't know if anybody else has gotten into this, but uh, life at the residence was very interesting. Um, I said, in a way, you know as I was a child, I said I thought I wanted to be a Sister, and uh, when we were in the uh residence in nineteen sixty six, it was like being in a convent {LG}.

KD: {LG}

VP: Because we couldn't wear, I remember, we couldn't wear pants, we couldn't wear rollers in our hair on the first floor. You were not allowed to go on the first floor with, you know, anything like that. Um, we had study hall every night, and there were no phone calls from eight to ten, I believe it was. Um, we had a curfew. Of course you couldn't go out at night. Then on Fridays I believe we could go out to maybe ten or something. And we used to take the bus to Pagano's and get pizza. And at Penn. Pagano's was at Penn. I don't even know if Pagano's is still open. But we used to go there for pizzas. Um, and uh, and of course in those days we took the bus and got back and walked around. And no problem, you know, we were very naïve, uh, and uh got around, as I said, we walked everywhere or took the buses and all that. Um, and then we used to be teased because um, the uh first floor of the residence, when you walk in it's this big, it's all glass, so we used to call it the fishbowl. And uh, boys -- by the way, boys were not allowed, by the way, upstairs.

KD: Sure.

VP: Just on the first floor. And there were housemothers at the desk that monitored everything, when you had to sign in and out whenever you went into the residence and wherever you were going you had to let them know. Um, and uh, so because the boyfriends were only allowed on the first floor, so when the date nights were over and people wanted just to kiss goodnight and whatnot, so over in the fishbowl we could watch them, you know, kissing goodnight, uh, and all that. So we'd tease each other. Um, and because I loved to sing we had a chorus, um, when I was a student nurse, that we could join in, and I was in the chorus. And then every year, and I guess they don't have it anymore because our school closed in nineteen eighty two, but uh, they had the Miss Jefferson contest. And uh, because I always like to be an entertainer, um, you could sign up if you wanted to be a contestant in the Miss Jefferson contest. So, and you have your own accompaniment, so my roommate Hope played the piano. So she played For Once in My Life for me, and I sang it, and, and then at the end we had to do a talent and then you got asked a question. Just like the Miss America pageant, but we didn't have to wear bathing suits {LG}.

KD: {LG}

VP: And uh, so I answered the question and I sang For Once in My Life.

KD: Do you remember what the question was?

VP: I don't remember what the question was. This was nineteen sixty six, yeah.

KD: Sure.

VP: It was a long time ago. Uh, but I remember I sang For Once in My Life. And um, what happened was, I think her name was Marcia Kurtz, if I'm not mistaken. She was a senior who was awarded the title, she won the contest, Miss Jefferson that year. And I was first runner up, as a freshman.

KD: Oh wow!

VP: So I was pretty hot stuff, you know. And I was excited, and it was really neat. And then we uh had to do some appearances. We were in the newspaper and all that if you were in the Miss Jefferson contest and you were a winner. Uh, and then we used to have, um, a yearly fair at the HeadHouse Tavern at Second and Pine. I don't know if they still, you know, that goes on.

KD: I don't think so. That was through the Women's Board, right?

VP: Uh, I believe so.

KD: Yeah.

VP: And I remember, there was a picture of me in the newspaper, because from the Miss Jefferson contest we had to go, we went to the fair to help out and whatnot. And uh, I was with a little child in the str-, pushing a child in a stroller, saying hi to the kid or something, and uh, there was a picture in the paper. So it was kind of exciting. Um, so my memories, we, we get together, there's seven of us, that uh live in the, close to one another, more or less. Within an hour of one another. And we get together every

quarter, and usually I'm the one that organizes it. And we do a dinner, and just to keep in touch, so we have that bond. And we always say, when we get together, and we're all sixty-seven and sixty-eight now, uh, that we can't fathom, we could not have fathomed the education that we were afforded at Jefferson. We always say, "You always know a Jeff nurse in the hospital," because we had the most wonderful instructors in the School of Nursing. Miss Zarella gave us the foundation for fundamentals of nursing in freshman year. Miss Heckenberger, she's still very active with the Board, and we see her at the luncheons all the time. And uh, she was always, uh, very funny and always gave us laughter and had a great smile. And she was always kind to the students. It was just a wonderful experience, and it was very hard. We were on shiftwork. I mean we were on days, evenings, nights. And went to school in the Curtis Clinic on the tenth floor I believe it was. And so had to do our studies. And uh, even if you worked the night before or whatever, too bad, you went to school anyway, you went to your classes all day. Whatever. Um, and we were on the floors, there was always two of us, at least, together. And we did night duty and evenings and all that. And, you know, we got this wonderful, wonderful clinical experience, as I said, to -- we can't even imagine any other school. Of course we're very prejudiced, biased, with the education that we got. And we're very grateful, all of us feel the same way. And um, all of us have had, taken different paths in nursing, different careers. Who was a school nurse, who worked for pharma, who worked in the hospital, whatever. And when we get together we share our experiences through the years. Now, and several of us, most of us are all retired, um, and it's, we always say that people have always been amazed in our professional lives, um, at what good nurses we really are, and you know, what uh, the foundation that we had at Jefferson. So there is a special pride, I think, with being a Jeff nurse. Um, and, and we also say the same thing too, we miss in the hospitals today, we were always very proud of our cap, and we always wore a cap, you know, with pride. But now nurses don't wear caps anymore. Or white uniforms or whatever. So we're, you know, sometimes you long for the olden days of, you know, seeing a nurse the way they used to look with, you know, like. But um, nurses today, you have to give them credit, they have a lot of responsibility, there's a lot of machinery to take care of, and technology and all that. And uh, you know, responsibilities are very great when you're a nurse.

KD: Yeah. So you mentioned really enjoying your clinical experiences while you were a student.

VP: Mm hm.

KD: Do you have any specific memories still of working at the hospital, or perhaps any rotations you did outside of Jefferson?

VP: Yes. Well, a couple of very -- I have a lot of specific, I have a lot of memories, but I guess I'll share two. One was very special, uh, a little girl's name, I believe she was like five years old, Amy Black, and uh, she had, I believe it was called tetralogy of fallot if my memory serves me right, but she had a birth, heart defect. And uh, the doctors were able to help her. And I always remembered how remarkable that was and prayed for her, and she was a precious little girl and, she came through it very well. And uh, the other, another memory, I won't bore you with a lot of them, but another memory I have is um -- and again, when we get together, my, the old cronies, you know, and us, we all get together and say, you know, we can't believe, uh, you know, that the older you get the more you realize your mortality is

becoming more and more imminent, the closer you get to that end of the spectrum in life with the life cycle as it is. But one thing that has always helped us realize how precious life is, is when you see someone actually die in front of you. And uh, I was in my junior year. When we went to school it was a three year program, so you're a freshman, junior, senior. So our junior year, and I was on, we were on night duty, and it was Joyce Norman and I. And that's the other thing, we always did everything according to the alphabet in school. So you were always with the same people {LG}, according to, in the alphabet. So I was Paoletti, and it was Joyce Norman. And Amy Oertell was another one. Uh, we always used to be -- and Carol Pierson. We always used to be together on rotations. And um, and I remember, uh, Joyce and I were on night duty, and uh we were holding the patient's hand, she was a young girl, I forget her name, and I forget what happened, what was wrong with her, but she died in front of us. And uh, but that always stayed with me to see how, um, it doesn't matter how old you are or how young you are, that we never know when death will happen. And uh, it prepares you to realize, when you see someone actually close their eyes and leave us, that that's really going to happen. Um, and it makes you as a young, we were nineteen, and it makes you aware that, you know, mortality is imminent at any time. And we should always be prepared. Um, so that's, that's something that always stayed with me. For a good reason, I mean, it was, and not to be maudlin, but um, it was meaningful, and it, it affected me, and uh, it was, it was a good thing. Um, the other thing was, I guess, and Carol Pierson and I were the two to, years ago, again when we were in school, the fourth floor was wards, it was all wards in the hospital. Men's surg-, it was called men's surgical ward, women's surgical ward, and neurology. And uh, for some reason, Carol and I were always, our rotations were always on the wards. So we used to be the ones. And uh, the wards were these, this big long room with uh, just curtains, I guess you know from the history.

KD: Yeah, I've seen pictures of it.

VP: Uh huh. So we worked on those wards, and.

KD: Which was beds up and down, right?

VP: Yup. And patients were just, you know, lined up, and you just moved the curtains, and you went from down, you know, one bed to the other. And I loved it. I loved the wards. And of course when we worked in sixty-six and sixty-seven there was no air conditioning in the hospitals. Uh, we used to open the windows. Uh, and it was so hot one summer, I remember we were given, I believe salt pills or something.

KD: Oh wow.

VP: Because, you know, we were sweating and all that, you know. Yeah, and you think back and you think, "How did we?" You know, "How did you do what you did?" You know, "How did we do what we did?" Um, so anyways, so that's another memory that I had of, you know, working as a student nurse. And then of course graduation was always very special at the Sheraton Hotel, I believe. And we had the uh, the lane.

KD: Oh, the rose arch?

VP: The rose arch that we all walked through, uh, that was symbolic, you know, of our graduation. And of course we all wore the same uniform with the long sleeves and the buttons down, and very, you know, very professional, with our nurse, you know, our caps and everything. Um, and graduation was extremely special. Um, and then because of it, and I love Jefferson so much, when I was graduating, of course I applied to work here, and I worked on, I started at Ninth Pavilion. Miss Barrett was the head nurse there. That was the surgical floor. Uh, and then I went to uh, Eleventh Pavilion, which was oncology. And uh, then I went to uh, I worked in the emergency room as well at Jeff. I graduated sixty-nine, and I was here until seventy-five. Um, and in nineteen seventy two, I believe it was, or possibly the end of seventy-one, I was called to the office of the director of nursing who was, of the hospital, A. Marcella Brown, if you've ever heard of Miss Brown. She was the uh head of nursing at the time. And was a very tall, big woman, and she was an ex-Army nurse. And she was very, very strict. And she called me to her office and I thought, "Oh my god, what did I do?" And then of course, in those days we were always "Miss Paoletti," it wasn't never Vera, you know. Miss Paoletti. So I'm sitting in Miss Brown's office and it's, "Oh my god." You know, you never get called to Miss Brown's office. Um, and in those days, you got promoted according to the Peter principle. I don't know if you're aware of the Peter principle? But it's the better that you did, when you did your job really well, you got moved up, you know {LG}.

KD: OK.

VP: That's the Peter principle. So I guess I was doing my job really well as a nurse, a staff nurse at Jefferson, uh, because she needed a head nurse on Star Annex at the time. And it was, I believe it was the end of seventy-one. So I was out of school like two years. Um, and I said, "Oh, OK." So there was no interviewing process, or posting of the job and all that. It was like, "You're it. You're going to be the head nurse on Star Annex." And at the time, Star Annex was a nineteen bed V I P unit of the hospital. Uh, were you aware of that, that there was a V I P?

KD: I was not aware of that.

VP: Yes. Well it was nineteen beds, and it was carpeted, um, all private rooms. Very frou-frou if you will. We had all of, you had to be a person, at the time, of stature, if you will. We had movie star-, like stars there. I remember Robert Goulet was a patient there. Uh, Don Rose, who was a big deejay in the, in the Philadelphia area. Marcia Shestack I think it was. She was a big channel three newscaster years, this goes back, you know, nineteen seventy one. Um, anyway, we had a lot of judges, and whatevers, you know, lawyers and doctors and all that. And uh all, most of the patients had private duty nurses, because they were, you know, if you will, the upper echelon of people at the time. And uh, their food was served on china. And it was cooked, there were special meals cooked. It was very, you know, it was this private duty, private floor. And um, the head nurse that was there, uh, was let go because she was having problems, and that's why Miss Brown needed a head nurse right away. And she told me, she said, uh, that there's all head, there's all private duty nurses on the floor, and you have to get them in line. Because they kind of ran the show. So I was a young whippersnapper, and I got up there, and I said, "OK. Well, I'm going to do the best that I can do." So that was my start as a head nurse, in management in nursing. Uh, Star Annex. Uh, and I was there as a head nurse, and I loved it, for about two years. And

in those two years, I met lovely, lovely patients, and there was, I have several that I got close with. And there's one very in particular patient. His name was Jay D. Mitchell. And his wife was Olga Mitchell. And she was a nineteen thirty-nine graduate of Jefferson. And uh, we met because her husband was my patient, and we just clicked for whatever reason, and because she was a Jeff nurse. She told me, she was about twenty years younger than Mr. Mitchell. And he was a lovely man. Um, and Olga told me that when she first met him, of course now she was thirty years older than me, so when she first met him, she said, and he asked her out, she would never go out with him alone. So a friend of hers always went on the dates with them. And they were very, you know, strict with that. And anyway, then they finally got married. And they had Susie, one daughter. And uh, Olga always went, as I did, to the luncheons every year, the first Saturday of May. We still do it, the Alumni Association still has the luncheons every year in May. And Olga and I always kept in touch after her husband was discharged and whatnot. Uh, we were just meant to be, I guess, and I was like a daughter to her. I loved her. And our birthdays were in October so we always celebrated together. She was the ninth, I'm the sixteenth. And as I said, she was exactly thirty years older than me. Um, so Olga and I kept in touch. We always saw each other every year in May, we would get together at the luncheon, we would always look for one another and all that. And uh, she had a, they had a home in the Roxborough area, and also in Atlantic City on the bay. And Mr. Mitchell probably died probably about twenty years ago or so. And after he died Olga sold the home in Roxborough and just stayed in the house in Atlantic City. Well, and she had the one daughter, Susie, who, when she got married, moved to Alabama, because that's where her husband's family was from. So Olga's child was in Alabama. And for years I said to Olga, I would see her in Atlantic City, and I said -- and she was very friendly, she had a lot of friends in Atlantic City, but her daughter was away. And her daughter got married and had a child, and then Olga had a granddaughter, and then she got married and had a child, so she had a great-granddaughter. I said, "You should go down, you know, and live with Susie." Um, but she said, "Well no, you know, she has her own life and all that." And whatever. But she used to go visit her. Well, two years ago when, or three years ago when Hurricane Sandy happened, Olga's house was affected and got flooded, so she had to move out of her house in Atlantic City so she moved into an apartment there. And she said, "I guess it's time." Because now she was, we're talking ninety five.

KD: Wow.

VP: And always clear as a bell. Looked beautiful. Would never know she was ninety five, and talked to me like I'm talking to you right now. Never had any problems remembering anything. She was amazing. She was inspirational to me. A strong Jeff nurse. And um, so when this happened, I said to her, "You know, things happen for a reason." She said, "Yeah, I'm going to move to Dothan Alabama." That's where she moved to, where Susie is. Uh, and I missed her terribly, but we always talked on the phone, every month or so she would call me or I would call her. And wrote and sent pictures and all that. Um, and uh, I said, when we spoke, you and I Kelsey, that uh, I thought it would be great if you were interviewed Olga.

KD: Yeah.

VP: And I talked to her about it, and she said, "Yeah, they can call me, you know." However, sadly on New Year's Day this year Susie called me to let me know at ninety-eight, Olga went to the Lord. So Olga missed giving her account of her Jefferson years.

KD: That's still an incredibly long and amazing life though.

VP: Wonderful lady. Beautiful, always positive, happy, beautiful smile, kind, just wonderful, wonderful inspiration to me. I used to tell her, you know, "You really, you just keep me going." She was awesome. So Star Annex afforded me the opportunity of meeting this wonderful, wonderful lady. So when I was head nurse at Star Annex, as I said I was there on the V I P floor for two years, um, a head nurse position was opened up on Sixth Main. And at the time, then, in nineteen seventy three, Sixth Main was a fifty bed unit, of wards, it was not, they were semi-private rooms, but it was considered a ward. Because people went there that had no insurance. And now this was before Medicare or Medicaid. So if people didn't have insurance they went to Sixth Main. So we had a lot of people on that floor that were maybe homeless or, you know, were struggling and all that. There were five, thirty-five people on staff because it was a fifty bed unit. Um, so I went to Miss Brown and I said, I said, you know, "I really want a bigger challenge." Because by this time I had mastered the management of this nineteen bed unit on Star Annex. So the people, she was like, "Well you're going from the V I P floor to the wards." You know I went from like one end of the spectrum to the other.

KD: Sure.

VP: So I went and I became the head nurse on Sixth Main, at the end of seventy-three. And loved it. And again, it was uh, not air conditioned. We were hot a lot of the times, you know. Or cold in the winters because it wasn't heated.

KD: Oh, it wasn't heated?

VP: I don't think so. Or maybe the heat was very low. Whatever. I remember being cold and hot. Um, and also we got exposed to T B, so then we had to get immunized for that. Uh, oh and when we were in nursing school, by the way it reminds me, when we learned about T B, uh, we went to Landis Hospital I believe it was called for a rotation, which was a hospital where people had tuberculosis. We had to be, get experience there. And the other thing we did as a student, to back up a minute, we had to go to Byberry, it was called, for psychiatric training, for three months. And we went in the summertime, my group, and I was in the men's locked ward, scared to death {LG} at nineteen, in a locked ward with all these men, you know, that were psychiatrically affected. But we made it through the three months there, but none of us liked Byberry unfortunately, which I believe is no longer a psychiatric hospital.

KD: Yeah, they closed it down.

VP: Um, but anyway, getting back to Sixth Main. I loved it. I had a very good experience there. And I was head nurse there for two years. And then I left Jeff in nineteen seventy five because I wanted to go get into public health.

KD: OK.

VP: So I became a public health nurse in South Philadelphia, which is where I grew up, and loved it. And I worked two years for that.

KD: What made you decide to go into public health?

VP: Because I was um, I was always interested in seeing how people, what happened to people when they left the hospital. And at the time, uh, discharge planning wasn't in vogue either then, you know, and people just kind of went out and, you know, whatever happened to them happened to them when they left the hospital. Of course people left the hospital I think in a healthier state then. They're going home a lot sicker now, and there is homecare available now. But in those days -- and so it always intrigued me. I've always been a very inquisitive person. Um, you know, how do they, what do they do when they get home? So I looked into that, and that's why I got into public health for about, well I was there, I started in South Philadelphia as a nurse there and then I was doing that as a staff nurse, if you will, for about a year, and then became a supervisor again. It seems like, from when I was a little girl, I've had an innate passion, I guess, or whatever, of working with people and leading. I've always been a leader. And in nursing, um, I found that I really, really enjoyed head nursing, and uh, supervising, because it gave me the opportunity to help others and to teach, because I always wanted to be a teacher. So when you're in management, with nursing anyway, there was an opportunity to teach as well, uh, and just work side-by-side with someone and help encourage them to grow and to develop. And I've always enjoyed doing that with people. So the second year, again, I was promoted to be a supervisor in public health. Oh, and in tangent with all this going on, when I was a nurse at Jefferson, I became, I was talking to a doctor, Cal Weisberger I believe his name was, and he was a, in the Air National Guard, a doctor in the Air National Guard in Pomona, New Jersey. That's where he went, it was an infirmary there, and a base. And he said, "Vera, they take nurses, you know. We need a nurse there." So then I became a nurse, uh, in the Air National Guard, first lieutenant. And I went one weekend a month to Pomona and worked with Cal at the infirmary there. Uh, and I was in uh, the Air National Guard for two years, and then I left with an honorable discharge because I found, I loved it, loved doing it. I was working full-time, it was one weekend a month and all that, so I had a lot on my plate at the time. So I decided, well that was enough fun {LG}. I had a lot of fun with it, I loved it, but that was that. So I guess what I'm trying to say is, um, with my foundation at Jefferson, you know, I was in the hospital, I was able to be doing management, I was able to get into public health, I got into the Air National Guard. I mean, it opened a lot of doors for me and different pathways and opportunities. And if you wanted, if you're a person that likes, that's not afraid of change, which I'm not, and take on new responsibilities and try new adventures, if you're a risk taker, it was really a good thing. So, when I was in public health, I met, and then supervising, I interviewed and hired Kate Lawless, who was a nurse, who she went to and trained at um, uh, what do you call it. Misericordia Hospital. And she was wonderful. Well she had just come back from Nome Alaska. She was a Jesuit volunteer there as a nurse. Went up there to be a volunteer and work as a nurse in Nome. And what they did was they had a house there where the volunteers lived. And the volunteers worked and gave their monies to the, the church. It was the church that supported this. Because they had a radio station. The church had a radio station that they promoted Christianity to Nome and the, there were seventeen outlying villages that Nome took care of. So the K N O M, was the station's name, and they broadcasted to this area. So to support

the broadcast they had these volunteers that gave their monies, you know. So Kate, it really impressed me when I interviewed her -- and then she was a volunteer there for a year -- and then came home. And she was from Germantown. And she impressed me because she did this, and something that, you know, I had never heard of. So she loved Alaska, Kate. And she said she always wanted to go back there, and all that. Well, but her family missed her. She was one of six children, and she was very close with her family. Uh, well fate took its course with her, and she was working in, she was a nurse in South Philly at the time, working with me. And uh, she came out of the house, out of a house one day, it was around Eighteenth and Bainbridge, I believe, and there were shots. There was somebody shooting in the streets. And it freaked her out. And she came in the office and she said, "I can't, I can't do this job anymore." She quit because she was scared to death that she was going to be shot. She never, you know, you never, she never got exposed to anything like that. Neither, neither have I, thank god. So what happened was, because that happened, she talked to her family, and she said she really missed Alaska, so she went back up to Alaska to be a volunteer again in Nome. When she went back the second time she met Bob Beam, who was a teacher from Maine, and he had moved to Nome and had a life there. And they met because he went to the hospital. There was a twenty bed hospital in Nome, where she worked. And he did something, he broke his hand or something, and they met when he was a patient at the hospital. And they were getting married, they decided to get married. So when she was getting married she invited all of the nurses that worked with her, you know. And at the time, this was in nine-, June of seventy-nine, I had just bought a house on my own in Ridley Park, in Pennsylvania, in February of seventy-nine. Now this was June of seventy-nine, Kate and Bob were getting married. And um, she said, "We would really like, you know, anybody that wants to come to the wedding, and you can stay at our place," and you know, blah, blah, blah. I said to the gals working, "Oh, let's go!" Well nobody wanted to go. Nome Alaska! Are you crazy? Oh and she said, "And Vera, I'd love for you to sing at," -- 'cause I sing, and I sing at weddings, by the way. Oh, and when I was a student nurse, uh, I keep going back and forth, Joyce Norman who I was with all the time, she knew I loved to sing. Well she was the first person. She said, she was getting married, when she was getting married when we graduated, "Vera, I would love you to sing at my wedding." And I said, "Oh, I've never done that. OK." You know. Well I sang at Joyce's wedding and that opened doors for me. Every, every, I sang at more weddings. I think I sang at two hundred weddings, uh, in my lifetime. But I never took money. It was always for people that I knew, uh, as like a gift, you know, to sing. So when Kate was getting married, she said, you know, "I would love you to sing at my wedding." So there I went. I got a loan out, because I had just bought this house, so I got a loan to fly. I remember it was like a thousand dollars or something.

KD: Wow.

VP: And I went up there. And uh, sang at the wedding. And fell in love with Alaska. And, at the time, at the wedding, I met Dan, who was very handsome, and he was from Ventura California, and he was in the Air National Guard with Bob -- Bob was in the Air National Guard -- up there in Alaska. Uh, and uh, he was at the wedding. Dan was at the wedding. And we met. And I went back to work in Philly, left when I went, when the wedding was done and I left Alaska, having spent two weeks there and loved it. It was beautiful. In Nome. Um, I, Dan was calling me every day. Wooed me, long distance, uh, to the point where he convinced me to move back up there. So I went back up to Alaska. Believe it or not,

about two months later after I met him, put my house up for sale in Ridley Park, left my family who thought I was crazy, uh, and uh, 'cause I was from South Philly, they had a going away party for me. It was more like a wake. I'm Italian from South Philly, and they're like, "My god! She's going." You might think I was dying and leaving them, you know.

KD: {LG}

VP: Going to Alaska, you know, thousands of miles away. But I did. And um, loved it. So I went to Alaska.

KD: And what year was this?

VP: Nineteen. It was June of uh, well August now, nineteen seventy-nine.

KD: OK.

VP: And um, he, Dan lived in Anchorage, but he went to Nome for the wedding, that's where we met. So then I was in Anchorage, and again, with my Jefferson nursing background, got a job right away in the hospital. Loved it. I found they were extremely progressive there. Um, very ahead of the game. I was very impressed with the culture of the hospital, and excellent doctors and all that. It was very good.

KD: How did that differ from places you had been working at beforehand?

VP: Um, it was interesting. I actually worked in the native hospital. It was a public health service hospital. And the doctors were very, very dedicated. How it was different was, it was interesting, because it was a public health hospital, um, there was no competition because the doctors were salaried and they all helped one another. They were very collegial. Uh, they covered for each other. There was no, like I said, no competition. Um, and the patients got excellent care. What was interesting is, nothing was charged. You just took things from the shelves and, you know, it was free. Because natives, in fact to this day, get free medical care. It's provided by the government. So it was very interesting. But Dan and I got married, and um, for what-, another reason, could not have children. Um, so I said I really wanted to adopt. So we uh, looked into adopting a child in Alaska. And at the time, they came out when we were there in nineteen seventy nine, the Alaskan Native Tribal Act, where it was the children, they wanted children to remain in the state and then grow up in their culture. And that children could not be adopted out unless the mother's uh, desire would overrule that. If the mother gave, you know, or relinquished her responsibilities that would override the, the law. So, when I was working at the hospital I said, "Well, you know, we won't be able to adopt because um, of this law." But I was very close with, again, I've always been close with Sisters in my life. And uh, Sister Rose Canton was um, from um, Canada. So she was French. French-Canadian. And she had been in Alaska since like nineteen forty-five, um, as a Sister working there, helping the children and whatnot, and she was wonderful. And we met because she was the, she gave pastoral care in the native hospital. So Sister Rose and I were, became friends when I was a nurse in the native hospital. And I shared with her that I really wanted to adopt a child. So lo and behold, one day she called me and she said, "Vera, there's a, a mom here, and she's sixteen, and she told me that she wants to give her baby up for adoption." So because she didn't talk to the social worker, the mom, because then the baby would have gone to the state, she told the Sister. So Sister

called me right away. She told Donna, that's the mom's name, not to talk to anybody. And she called me right away, I went to see her. And Donna, I talked to Donna, met her. And so it was considered a private adoption. And Donna, of course her agreeing oversaw, you know, overruled the law. So consequently, um, again, um, because I was able to be a nurse in the native hospital, I was given the blessing of adopting my daughter, who is Cory, her name is, and she is a beautiful, a beautiful Athabascan Indian young woman. And she's thirty-one now, because I got her in um, well she was born November twenty-six nineteen eighty four. Um, and she's a beautiful, beautiful woman. And it was again, a blessing, being a Jeff nurse working in the native hospital. So I got my daughter because of that. Um, so let's see. As life goes on, I moved back to the Philadelphia area. I left Alaska in nineteen eighty five, uh, when Cory was little, because my husband and I grew apart and we decided that the best thing would be that we would get divorced. So I did, unfortunately, have to get divorced, or get divorced. And uh, then raised Cory on my own in uh, the Philadelphia and South Jersey area. So she grew up in, outside of her state. But, I always told her from when she was a little girl, that, you know, she was adopted and I knew where her birth family was. I met her birth mother. Uh, she was from Holy Cross Alaska. So when she was seventeen -- and I said to her, "Whenever you want to meet them, you know, we'll do that." So when she was seventeen, um, we, I contacted -- she said she wanted to meet her birth family -- and I contacted Donna and we went up and we spent, she spent, we spent two weeks there. In Holy Cross. And she met her birth family. She has six half siblings. And she keeps in touch with all of them on Facebook. So that was a very nice experience for her. And again, I was able to do that and raise her on my own because of my nursing career, and I was always afforded the blessing of having a good salary so that I could do all that I did for her. And she's had a very good life growing up. Um, when I came back to the Philadelphia area, um, I went back to Jefferson, and uh, got a job in endoscopy, because I wanted, because I was raising Cory, I wanted a job that was Monday to Friday, if possible. Days, weekends off. And lo and behold there was an ad in the paper, and I saw it, and I went and interviewed right away and got the job in endoscopy. Uh, and did it and loved it. Didn't know the first thing about it, but learned, and really enjoyed it, and again, with my career, Dr. Donald Castell was the uh, head of G I when I worked there, and he was an esophageal specialist, and a very, a big researcher. He was the president of the A G A for several years. Very well-known in the G I world. And uh, for whatever reason there were like ten nurses in endoscopy, it was a very big unit and all that. Um, and Dr. Castell and I had a very good relationship and he appreciated my nursing expertise. So uh, in nineteen ninety one Dr. Castell was given the opportunity to become the head of medicine at Graduate Hospital. And he uh was also, his desire was to start a G I site there for clinical research, 'cause there wasn't one there at Graduate Hospital. And he asked me to go with him to be the drug study coordinator and start the site. And I said at the time I had no idea what that was even because in nursing I was always in the hospital setting and all that, and never thought about, really, research and how drugs were made and all that. The pharmaceutical world, if you will. So Dr. Castell told me, he said, "Well, you know, if you get started in this field, you'll, you'll always be able to get a job in pharma." I said, "OK." So again, with my, you know, risk taking, I left Jefferson to go with him, and went to Graduate Hospital and became a nurse in the department of medicine, and developed a G I site there. And it was there for years, and we did very well, it was amazing. And again, I loved being the coordinator of all this, and again, and with my endoscopy experience, we were, we did studies which started in nineteen ninety two, or ninety, no, ninety nine we went there. Uh, we were just getting Omeprazole, which is now Prilosec, which is now

over-the-counter. Well Omeprazole was just being tested at the time, so it hadn't been approved yet. And we were doing endoscopies on patients. You know, we were involved with the studies for Omeprazole, and I was at all of the endoscopies to see how the patients were doing. I was always there with them. And I recruited patients for all the studies and all that. And I loved it, loved doing what I did working with him. And I was with him at Graduate until two thousand and one, because he was semi-retiring, and he was going to be moving to South Carolina, which is where he still is. Um, and I got a job, again, with my nursing career, in a C R O at the time. It was my first position in pharma.

KD: What's a C R O?

VP: It's a contract research organization. And what that, they are, are vendors, if you will, that pharma companies hire to do their studies. So I was a clinical research manager for a C R O, which worked with, and one of the companies that we worked with was Wyeth Pharmaceuticals. And uh, and because of my G I experience, with Dr. Castell for ten years, I was given a big G I study, which was with Wyeth, to get their pantoprazole, which is Protonix, which is out there now, it's a P P I, uh, inhibitor, for people with reflux. Um, so I was given the opportunity to be the clinical research manager for pantoprazole for Wyeth Pharmaceuticals. Well what happened was the doctor, uh, Dr., I forget her name now, but anyway, Karlstadt. Robyn Karlstadt, uh, she was the doctor in charge for Wyeth. Well we had a very good relationship. And she appreciated my expertise, again, and she recruited me to Wyeth. So I was with the pharma, with the C R O for a year and a half, and then went to Wyeth in April of two thousand and one, uh, and was a manager there running the pantoprazole study for Wyeth, and other studies as well. Uh, I was with Wyeth for two years, and in March of two thousand three I was recruited to AstraZeneca Pharmaceuticals where I became an Associate Director, which was line management, which I loved management, as you know, working with people. So I was given the opportunity to have twenty-five people to manage. And I, what I -- they were clinical scientists, which were people that were nurses or physic-, or pharmacists, biologists, whatever. And they did, they oversaw the studies that we were doing at AstraZeneca. So I was with AstraZeneca for eleven years, until my last day there was June thirteenth of two thousand fourteen. Because they gave us a year's notice, but they let us go in the company there because they were downsizing, which pharma companies have been doing. So my career, again, I was able to get a very, very good job in AstraZeneca that I loved. Loved working for the company, loved the job I had. And I always thought I would stay there until I was ready to go out to pasture, but they made my decision for me and retired me earlier than I had anticipated. Which was fine. But because of my management foundation from when Miss Brown gave me the opportunity in nineteen seventy one to be head nurse on Star Annex, those principles were still there and afforded me again the opportunity to have this wonderful blessing of a job at AstraZeneca, which I had a very good salary, excellent salary, which afforded me the opportunity of building up my retirement fund, thank god. Um, and had a very, very good experience there. Again, because of my nursing career at Jefferson, from nineteen sixty six when I first entered, uh, the hallowed walls of the hospital. And since then, since June of fourteen -- and they gave us a very good severance package -- I have been home and enjoying my time at home and raising my nine year old granddaughter, who's precious, and staying in touch with my friends. It gives me opportunities to have lunches and whatnot with them. However, just very recently, as of last week actually I had an interview, I took on a -- I got hired, they told me yesterday -- a

part-time position, which is all I wanted, again, with my nursing background, with a company called Robin's Nest which is a company that works with helping children to find, to get housing, counseling, children that are having problems. Also girls that are pregnant that need help and resources available, and people that need housing. So it's a company that I wanted -- when I took on something I wanted to do something to help others -- and I was given this opportunity. So I'll be starting on, next week on Tuesdays.

KD: That's great. Congratulations.

VP: Thank you. From twelve to four, just getting my feet wet. I said that's good enough, four hours a day, Monday to Friday twelve to four, after not working for a year and a half. So that's my, my new thing. And again, they appreciated my nursing background. So that's kind of my, my tale of experiences and my life from when I was eighteen. I'm now sixty-seven, I'll be sixty-eight in October. And I have such, it's been a very interesting life for me, and always very blessed, and I'm very grateful that I've always had, been given the opportunity to get the jobs that I wanted to get because I had my Jefferson nursing background and education. So it was a very sound foundation for me for my entire life.

KD: Yeah. Well thank you for sharing that.

VP: That's it.

KD: I do have a couple more questions for you. Um, so it sounds like you've had a very long and varied career, in a lot of different areas of nursing. How have you seen nursing change over the years, from starting out as a candy striper to your work now?

VP: Oh, OK. Well. Gracious. Um, it's changed a lot. As I said, and we've talked about this, my friends and I when we get together, I have a lot, we all have a lot of respect for the nurses that are coming out of school today, working in the hospitals, because of the technology, and they have to be aware of so many more things than, you know, we were. Life is more complicated, if you will, I think. And the patients are, seem to be, a lot sicker. People are living a lot longer and we need a lot more nurses to take good care of the patients. Having said that, I was a patient myself a couple of times. Had two total hips done, and thank god did very well with them. One in two thousand eleven and one in two thousand thirteen. And the nurses -- and when I'm a nurse in a hospital I'm always hesitant at times to say that I'm a nurse because then they get a little, you know. And I say, "I'm telling you that I'm a nurse, but don't let that bother you, you know, I'm a patient. I'm a nurse but I'm a patient, you know." And I always told them, as -- when I was a patient -- that I really appreciated all that they did. I'm very grateful. But I said that they should take pride in what they're doing. And for the most part, they were always all very good. How nursing has changed think, um, and I'm a very positive person, but, you know, as a student, and even as a new graduate, and even as a head nurse, we did backrubs with patients, we washed them, we gave them a lot of skin care, mouth care, and all that. Basic, very basic stuff. And unfortunately, I have to say, how nursing has changed I think is that because of the, it seems like increased responsibility possibly that the nurses have, the more technology that's there, the more they have to check this and check that, the focus, it seems, is not necessarily on mouth care and back rubs and all that. I mean, we're all, the old-timers are more into that touching the patient, being there, sitting there with them, just giving a lot

of emotional support. And I think -- and that's our society today, I think that, you know, there's a bit more rushing around and as we say, like kids, do they know how to have conversations? You know people text a lot, email a lot, and, you know. There's, there's not that human connection as much, and I think that has also translated into, or affected nursing as well. And that's, I'm not saying, again I'm not trying to be negative or critical, by no means. It's an observation. You asked me how I think nursing has changed.

KD: Yes, exactly.

VP: I would like to see, you know, more of a connection of people. But again, I know that they're very busy, and all that, you know. I hope that answers your question.

KD: Yeah. No, it's perfect. It's just your own personal reflections on what you've seen change. Um, so again, thinking about your whole career in nursing, what advice would you give to new students or people interested in going into nursing?

VP: OK. Well first of all, I am very, always very, very, very happy whenever I talk to people and meet them. I talk to people a lot and find out about them, because I'm inquisitive. If I talk to young people when they're working or whatever, I'll say, "What's your goal? What are you doing with it?" Some say they're going to go to college, like if they're a waitress and they say, "Oh, I go to school." "Oh, where do you go? What's your goal?" And whenever I hear someone say they're going into nursing I get excited and I say, "We really need good nurses. We really need people to go into nursing because it's so important." Especially with us baby boomers, there's going to be a whole lot more baby boomers than they're saying already, are there going to be enough nurses to take care of us? It's a concern. So, to me, I always get excited, and I'm happy that, very, very happy that more men are getting involved in nursing. I think that helped the salaries of nurses, and the awareness. And I think the stigma is gone. Years ago, as a young nurse, as I said, unfortunately, if a man was a nurse it was like, "Pfw, what's? A man is a?" You know, it was kind of frowned upon, or people were not sure about men that were in nursing, years ago. Maybe that sounds old fashioned, but, you know, that's how it was. But through the years, you know, again, more and more men are in the hospitals, and there's quite a few graduates, I believe, who are Mr. and Mrs. They met, you know, Mr. and Mrs. Jeff graduates, if you will. They met in school here, you know, which is great. So I think that's a real good thing too. And I encourage if, if people do talk to me, even older women, and they want to go back to school, and we have conversations, I always ask people, I say, you know, "With the way the world is today {CG} and jobs going to robots and whatever, you know, technology, people still need to be taken care of in the hospital by human beings. So a good field to get into is nursing today." So I think that actually a lot of people are going into nursing because of that, because they see, they know they'll be getting, you know, good jobs, that there'll be jobs available because we need people to do that. Human beings. And with good salaries and good benefits. So I think I'm always very, very hot on promoting people to follow their heart, and go into the field, and give nursing a chance. And become good nurses, because we need people who are dedicated and care about the patients.

KD: Alright. So are there any topics that haven't been brought up yet that you'd like to talk about?

VP: I think I talked your ear off quite a bit {LG}.

KD: {LG}

VP: Which, I have no problem talking, so.

KD: Oh no, this is the whole point of an oral history. It's your time to talk. Um, so any other reflections or memories that you'd like to bring up?

VP: Um.

KD: Things you haven't said yet?

VP: Gee, let me think. Um, well there's a lot, well, you know, when we had the snowstorm, I thought, there were many times that I, you know, many of us, were made to sleep over in the hospitals and all that. Like you couldn't leave. If you, and as nurses, again, we were dedicated, so if we, if and when we had snowstorms, which happened quite a few times in my lifetime, with working, in hospital, in the hospital. When we had a snowstorm and, you know, and you couldn't get out, you had to stay. There was no if's, and's, or but's. And you wouldn't think of leaving, you know? Um, so people had to take care of the patients. The patients were sick and there and, you know, so that was important. So that was one thing that's stayed with me that, we had uh, this big snowstorm, a couple months ago or whatever. Whenever it was. And I was thinking about that nurses had to be there, and I thought of the days that I slept in many a cot or stretcher or whatever, you know, to get a few winks. And, and of course too, through the years, um, I worked a lot, which I never minded, really, of New Years Eve and Christmas Eve and Christmas Day and New Year's Day because there's no holidays, you know. Everybody, when you're a patient in the hospital it could be any day is a day that you have to be there, no matter what day it is. Um, and that's another thing that nurses do is, and doctors and nursing assistants and all that, you know, everybody. People in hospitals, that they have to leave their families and work, you know, on those days. Uh, but I always said that, you know, my mom always said that any day could be a holiday, and you make, uh, so if it's December twenty-third and not the twenty-fourth, you could say it's Christmas Eve. What's the difference, you know? And you could celebrate whenever you want to. And always look at the cup half-full and not half-empty. So I think they're the main, you know, two of the main things. I'm thinking that uh, when you are a nurse, and again other professions as well, policeman and it's not just nursing, but because I'm a nurse, it's what I'm relating to, that you do have to, one of the things, because it's twenty-four seven situation, no matter what day it is, that you do have to be there.

KD: Yeah.

VP: Yeah.

KD: Alright. Any other last thoughts or memories? Reflections?

VP: Uh. I, I think that's it, really. I think I shared quite a bit.

KD: OK, great! Well thank you so much for coming out and sharing.

VP: Thank you.

[End of recording]