

Transcription of interview with Ruth Kaler, Wednesday November 10th, 2010

ND: So, what year were you born?

RK: 1938

ND: Where were you born?

RK: Here in Morganton actually.

ND: Do you have any brothers or sisters?

RK: I have a sister who passed away a few years ago in 2005 and one brother.

ND: Where do you come in the family? Are you the oldest? Middle?

RK: I'm the oldest.

ND: What work did your father do when you were a child?

RK: He worked in the furniture factory here.

ND: Did your mother work outside the home?

RK: She did when she was younger, she worked in a mill. But she really wasn't that type of person so she sold Raleigh products. Which is something like Watkins products that she sold from a car. We lived on a farm so we sold milk, eggs, that type of thing.

ND: That's neat. Did your brothers or sisters work outside the home before they finished school?

RK: My sister did. Both of us worked in the dime stores here. They were called dime stores, I'm not sure you know what those are, because everything cost a dime. And so she worked there till she finished high school, then she went to Wake Forest for a year and a half before she dropped out. My brother didn't finish high school. He went into the air force. Back then you could go into the air force pretty young. I worked in the dime store until I finished high school. Then I went to work in the office in Morganton Furniture Company. I didn't go to nursing school till I was in my forties.

ND: Did you have any close relatives who were nurses?

RK: No. My mom, she worked as a nurse's aid at Grace Hospital. And she would always try to talk me into going into nursing and I was not in the least bit interested. I wanted to be in the office so I could dress up and go to work. So that's what I did. So I got into nursing through the back door. You know, I was gone from here for years and when I came back I worked with Henry down at the office, but then I had my son, I had my daughter when I moved back up here, and I needed something so I could take care of them in the daytime and still work. So I went into the medical field. So I took the nurses aid course and got a job at Broughton Hospital and worked over there. And then I went to nursing school. I worked every weekend for three years. In the forties. I worked nights and then slept part time. I did.

ND: You said that was your aunt who tried to persuade you to go into nursing?

RK: My mom did.

ND: Do you think that, in the end that kind of affected your choice? Did you remember that?

RK: No, I really didn't. I don't think. I probably could not have gone into nursing as a young person. I think I had to wait until... We had little dogs when I first got married so I was able to take care of them. And then also, when I first got married I didn't work much. I was in Houston and I had gotten involved with health foods at this time. And I was sent home with books to read. Big thick books about the body and things and I thought, "This is really interesting." I was really interesting in the human body cause that's what we are. You know. And so I knew about the body and I read everything I could about the natural aspect of health. And when my daughter, I needed desperately to work nights, so I went to work in this plant. Only night time work was in the health care field. So I went to work in this plant and I thought, "Well I sure as heck can't do this." And I couldn't. But then I got a job in a nursing home. And then I went from the nursing

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home, while I was taking the nurses aid course, they hired me into Broughton. They hired me away from the bank, because I worked at the bank. So then I got into Broughton. Nice place, you know.

You could have followed up on the lead...

ND: Do you have any memories of nurses from your childhood?

RK: Not actually, no.

ND: Really?

RK: We were not; I was not ever around sick people. You know, going to work at Broughton and going to work in the nursing home was a real real shock to me. I guess I was probably at least forty years old by that time. And to see people in that kind of state was just a real real shock and when I went to work at Broughton that was a real shock. I didn't know that people that sick even existed in this world. And I, but my daddy, let's see, I went school in the early eighties, and so but he died; he died of cancer, around 1980. So I remember the nurses that took care of him. And just how nice they were.

*Again, a follow-up question or two would have
been good.*

ND: Did they influence any of your career choices? Or was it basically just what you needed?

RK: I remember having passing thoughts about how nice they were and how competent. You know, it was just a passing thought.

ND: When did you graduate from high school?

RK: In 1956

ND: Did you go to college? Or what did you do after that?

RK: I went to work in the office in Morganton Furniture Company and then I went to Charlotte and took a business course and I didn't finish because I had to work, you know, and then I went to work for Travelers Insurance and worked in the office there for about four and a half years. And then I had always had a dream from the time I was little. I wanted to fly. I wanted to leave

this place. I thought, "There's got to be a world out there somewhere and I've got to go out and see it." So I felt like I needed to go to college too. I was in my early twenties and I was buried behind all these stacks of paper in the office and I thought, "I thought to get out of this!" So in order to go to college you had to have a foreign language and I had never taken that so Charlotte College had just started, which is now UNC Charlotte. And it was just one or two buildings in this big, open field. So I went out there to take French. And while I was out there they were talking about, you know, Eastern Airlines was hiring stewardesses. So I went out and applied and I had to take this psychology test which I know I failed. It was horrible. And so then I went to visit my pastor in Charlotte at the time, and he said, "Well, have you ever thought about being a stewardess?" and I said, "Well, yes I have always wanted to be one." And he said, "Well go out to Delta Airlines and apply." And it must have been the right time, because I did and it was like clockwork. And he said, "First of all, you need to get a book on etiquette and take a class on it. So I signed up for one of those and didn't finish it. Didn't get that finished. And in July of 1962 I was on my way to Atlanta to stewardess training. And that was the beginning of my educational life. I mean, I loved it. You know, I learned about different people, different places, it was wonderful. And I did that for about four years. So I moved to Houston and that's where I met my husband.

ND: What year did you get married?

RK: We got married in 1966.

ND: Did you know each other long before you got married?

RK: Probably about a year and a half.

ND: How many children did you have?

RK: We have two. My daughter is adopted, the oldest one. And I have a son who's thirty-eight.

ND: And so it was after that, that you decided to go to nursing school?

RK: Mmhmm.

ND: Where did you do your training?

RK: Here at Western Piedmont.

ND: What made you choose that school? Because it was near?

RK: It was here. It just happened to be here and it was close and, you know, it wasn't expensive at the time. Tuition was on the quarter system. And tuition was like thirty-seven dollars and quarter.

ND: Wow.

RK: Right! So the biggest expense of my whole program was my books. And I got a scholarship through Grace Hospital for the books. And then Broughton gave me leave time. When I actually got into clinicals they gave me time off with pay. So I mean it was, they were good. The Lord just worked wonders in my life. It was wonderful.

ND: How was the curriculum set up at your nursing school?

RK: How was what?

ND: The curriculum. What was taught in the classes? How were they organized? That kind of thing.

RK: Well I guess anatomy and physiology, that was the most interesting thing. To really know how the body works is interesting.

ND: What were the classes that you had? What were they like?

RK: Well know, let me think. I'm trying to remember.

ND: It's ok if you don't remember. ✓

RK: Well, we didn't have any labs to speak of. We did in Chemistry. But, the nursing program itself was very very tough. Attitude was very very important in those classes and also you could not miss a class.

ND: So it was very strict.

RK: It was very strict. I knew a girl who got pregnant she arranged to have her baby on a Friday so she could be back in class on Monday.

ND: Wow.

RK: And there was another girl who, I think her house burned down and I don't think she missed but like a day if that much. And you just didn't, you know. And I remember my mother, I still had one year left to go, she was really sick, she was in the hospital, and Janice Makupson, she was my instructor also worked in Grace Hospital in ICU and she said, "Ruth to get through this program you cannot take full responsibility for your mothers care." So nothing short of life and death as far as my children go could get you out of classes. So I devoted everything, you know, I carried books with me everywhere, but my kids didn't miss a beat. As far as, you know, they were involved in sports and everything. So I carried those big books with me and my mother that last year she was critically ill. As a matter of fact she only lived a year after I graduated. She was critically ill and required a lot of care. I had two kids, let's see, Jonathan was probably in kindergarten and I think I picked the most ideal time; well there is no ideal time to go with children. Jenny was like nine years old. And like I said I worked every weekend for three years. I took all the courses the first years and then the last two years I just had nursing classes. But I enjoyed the psychology classes up to a point. Because I learned a lot in there, but I think you can dwell too much on that type of thing and you know.

ND: So even though the classes were really tough and it was a hard time, did you still enjoy it?

RK: Mmhmm, I did.

ND: The learning.

RK: Yes, I love being in school. It was good.

ND: Did you expect your nursing career to be lifelong? Or was it only going to be temporary?

RK: A lifelong thing.

ND: Do you remember your first job after you graduated?

RK: Mhmm.

ND: Where was it?

RK: It was at Catawba Memorial Hospital because at that time Grace was not hiring. It was really good, I was there almost a year and that was, I think that that was one of the best places to work. I loved the hospital. And it is a magnate hospital today. They care for their patients, they care for their staff. And it was a wonderful place to work and I was in the float pool. So I got to experience all aspects of nursing. I got to rotate through all that in training that I was sent to. I was sent to critical care areas and that's where I really developed a desire, I really liked critical care. Because you don't have to have so many patients and you can get into the science, I like the science of the body.

✓ ND: I don't know a lot about nursing, can you explain what critical care is?

RK: Critical care, ICU, is just where people are really really sick. You know, they're on vents, and a lot of drips and things. Yeah, they're really really ill. My favorite is cardiac, I love the cardiac. It's just interesting.

ND: Did you get along with everybody that you worked with?

RK: Mmhmm.

ND: The doctors, your bosses or supervisors?

RK: There was one doctor, doctors can be very abrupt. You just do the best you can and approach them in a very low key way and just try to...I remember this one doctor one night. And I didn't know much about him and this lady who was a patient, I went and took her temp and for some reason I took an axillary temp, I don't know why, and it was 102 and I thought, "she is really ill." So I called the doctor, I think he was a surgeon. And I told him that and he said, "That is not true." I don't remember what all he said so I just come up beside him (^{Goose}unintelligible) and I thought, "Well, what am I going to do?" I don't think she had anything ordered for temp or anything, but I think he needed to know that she was that sick. So then he must have thought about what he did so he called back down there and gave me some orders. To him the only honest temp there was a rectal temp. That was his philosophy. But most of it, there was some that you got along with better than others. *Interesting*

ND: So the doctors were pretty easy to get along with?

RK: For the most part they are.

ND: Do you, going back to your childhood, do you feel that your parents brought up their daughters and their sons differently?

RK: not especially. I don't know. My brother is eight years younger than me and he was just a different person. I think so, yeah because I felt like my mother, she didn't see any wrong in him. You know and I used to point out his faults.

ND: I understand, I have a younger brother myself. During your lifetime, do you think there has been a change in the position and behavior of women?

RK: A change in what?

ND: position and behavior

RK: Do you think you could explain that just a little bit?

ND: When you were a child, do you remember your mother acting differently ~~has~~ wife then you yourself would act?

ND: Just how women were treated in general, was there a difference?

RK: My father was a real aggressive man. He worked really hard all day and then came home and farmed at night. And then he drank on the weekends. So he was, I have come to appreciate his good qualities as I have gotten older. As a young person I didn't. He was just a mean person who worked all the time. You know. And my mother was trying to do the best she could for us. She was a real submissive person. I was not a very nice person until I turned my life over to Jesus Christ, which is that many years ago. And I could be a hell raiser type person, a really hateful person. And my mother was never that type person. So maybe I've become more like her at this point. Because she was a really wonderful lady of faith, you know, so I think that would really be the difference there. So, but I know as far as society goes, you know, there's a difference there. People are not committed anymore. Anything. That's not good.

ND: Do you think that life is easier for men or for women?

RK: Probably now, well, it's always been easier for men, I think. But I think are more accepted now in the nursing field.

ND: Really?

RK: Mmhmm.

ND: Do you know a lot of male nurses? In your career?

RK: Not that many. We had several. The last few years we've had more at Grace Hospital. There was one who still works over there, Wayne. And he's been there for about twenty some years I think. A long time. And I worked with him and he was really really good. He is going to be going into the MP program soon I think. But, I really enjoyed working with him. We became

Is there a word left out?

really close for years and when you work with someone at night you become involved in their lives and they become involved in yours and you go to work and talk about your family and everything so I feel like I've been there with him since he first started working. I was always older than everyone else at work so..

ND: Did you ever see a difference in the way that the male nurses were treated?

RK: Not actually no. Probably some women preferred female nurses.

ND: Mhmm. I can understand that.

RK: But other than that I don't seem to recall. The doctors seemed to relate more to the male nurses.

ND: Really? Was there maybe a little bit of a preference to male nurses for the doctors then? ✓

RK: It seemed like they felt like the male nurses were men so they have more credibility or something you know. And too, it also depends on the person, because we have had some male nurses that were just really really good. Really sharp, really quick you know. Now I don't think male nurses, except for Wayne now Wayne is a real compassionate person. A lot of them don't have the compassion that women do. But then also I don't think there's very few, the pressures on nurses today with the computer system, get everything in that computer, get it done right, you know. You have to be really young, really quick, and I think you don't have to,

Waitress: Still doing ok?

RK: Mhmm.

ND: We are, thank you.

Waitress: Ok

RK: I don't think that, maybe it because the lack of time, because it's more important for them to get the work done because that's what the employer expects, but they also expect you to take

good care of the patients. And show compassion and it is impossible to do all that one at a time.

So I don't feel like the really young people have the compassion that the people used to have.

You know.

ND: I hear people view male nurses as just the strong arm, to help with the actual physical load. ✓

RK: Yeah, mmhmm.

ND: Do you think there is a preference because of that? Or is it that male doctors like to work with other males.

RK: Well I think it's good to... The female nurses like to have male nurses around because they are strong and you need help. But I don't know that, maybe the male doctors relate to them better because their ^{they're} males. You know, that's just what I'm thinking.

ND: Did you ever see or feel discriminated against because you were a female nurse?

RK: No, but I did because of my age.

✓ND: Can you tell me about that?

RK: Well, there was a couple, we've had a lot of really young managers and I knew that they felt like I was really, I was older and I wasn't as fast and as quick as some of then younger ones, which is true. But you know, whenever I first started applying for jobs, the CEO of Delta said we don't need one person; we need four different personalities on a plane because we have different personalities in the passengers. So we have different type patients and I think you need different personality nurses and different type people because you have different patients. So I just, I was determined I was going to stay until I got ready to retire. And if they fired me, fine. And I did the best I could everyday I went in there. And I loved nursing. I loved the patients, I loved taking care of them, and I enjoyed the people that I worked with. And those managers all left and went

elsewhere. And I stayed until I was seventy and at that point I thought, "It's time to go, I don't have time to talk to anybody anymore, I don't really have time to enjoy this." And so...

ND: So you didn't feel like you were pushed out of your job?

RK: The only thing that pushed me out of that job was computers probably. You know, but that's the time, that's the change. You know, life is so different now. I just sit back and listen to what's going on and try to take a low profile and think, "Whatever!" You know. When you make a phone call to someone and ask them where they are and they say they're in India, or the Philippines, or Japan, I mean it's wild, it's just wild. And I just didn't know.

ND: Did you ever notice any of the other nurses if they felt discriminated against because of their age?

RK: No, like I said, I was the oldest person there. So I don't really remember that. There were several of us there that were older though and we took care of our patients and we had to stay after hours to do charts. And since I had left I heard that they've gotten rid of two of those nurses in the last year. It all boils down to money; it all boils down to money.

*missed opportunity for
follow-up: "What do you
mean?..."*

ND: Before those managers that kind of pressured you to quit left, did you ever feel the need to take legal action against them?

RK: No, they really didn't pressure me to quit, you just know. You can sense things. So you just go in and you treat everybody nice and you just ignore it and do your job and don't worry about it.

ND: Well it sounds like you've had a really interesting career.

RK: I've enjoyed it.

ND: Are there any outstanding stories that you could tell me?

RK: I don't know right now... Well I guess one that stands out is one night I went into work and this girl, she was, they had her all tied down and she was just simply wild, berserk. And the other two girls that I worked with were just really, it was this girl, Wayne, and this other girl. And they were just super people, you know. And they said, "Ruth, if you just take care of this one patient, we'll take care of everyone else in here." And I said, "Well, ok." And I went into the room and this girl she was wild and I thought, "There's no way I can take care of her." I mean she was just wild. And I thought, "Well what am I going to do, maybe she's possessed." So I went beside her bed and I didn't close my eyes, maybe I did close my eyes, I don't remember. And I was praying, "Lord, just please remove this evil spirit out of her." You know, and after a while she opened her eyes and she said, "You're going to die." And I said, "No, I'm not. I'm fine." And then in a little while she was awake and it seemed to me that she was fine. And I remembered this scripture that said if the house is swept clean, if you don't replace it with something good the spirits are going to come back seven times worse. And I thought, "Well gosh, what am I going to do?" I had been reading the Bible some, but not that much. So I got a Bible out and read Psalm 34, I think that's what I read to her. And asked her if she went to church and she said, "Yeah." She did and she was just really calm and a different person and I couldn't believe it. So it turned out to be very reasonable. And I think that one of the other times that was really horrible. It was the same two people, I think it was. And the girl that we worked with, you know, her husband had been really really sick for a long long time. And he came in that night and I remember looking at his EKG and I asked his wife, "Has he always had this wide complex?" and she said, "No." And the doctor was there and he was with him at all times and the doctor went in there and what he had done, he gone in there and he was really really sick. He had had an upset stomach and he had taken all these potassium pills hoping it would make him feel better. You know, you

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hear about it and you read about it, but it is deadly. It is. And so, they had done a potassium level and I remember the doctor saying, "You know, your potassium level is..." whatever maybe he said it was six or something. But I said, "No, it's something like eight." But I didn't say anything but I was standing right there. So Doctor Smith said, "I'm going down stairs and just page me if anything happens." And all of a sudden he said, "I know that I'm going, this is it." And he coded and the ER doctors came in and had seen him in the ER and then they said they could give him insulin and dextrose, which drives it back into the cells. And then they came up and tried to do all of this stuff, but nothing worked, and he died. That was a horrible, horrible experience. That was just awful.

ND: I bet losing patients is always hard.

RK: Yeah, yeah it is. Especially, you know, someone that you work with's daughter or something that was young. But that's the way things happen. And you lose a lot, because in critical care a lot of them are sick and a lot of them are older. It's easier if they're really really old and have had a good life. But I know we had a man one night, well he was there more than one night, but he was a younger man and really nice and really nice family and he had had a cancer and they'd been treating him for pneumonia and I'm not sure if they found out he had cancer while he was there for pneumonia. But he could not sustain life off of the vent so he could not talk but he knew he was dying but he couldn't say anything to them because he didn't have enough time to come off of the vent and that was the most pitiful thing because he had two little boys and a beautiful wife and he was a young man about 35 or 40. So that was horrible.

ND: Do you think working in urgent care made it more difficult as the older you got? Or would it have been easier to stay as an older nurse in a less stressful environment?

RK: It's physically more taxing and it's not as rewarding as it is out on the floor. Because you have several patients down there. And it is really hard. It's hard to know who they really are and I like critical care because I got to get to know the patients and the family and really got to work with them you know. And I got to spend time with them, quality time.

ND: In the end did that make it harder when you did loose a patient?

RK: Right. But you can also relate to the families, you know, it's just, you know.

ND: Since you like the anatomy and physiology so much did you ever want to become a doctor instead of a nurse?

RK: Well, I would have liked to, but if I was younger, probably. What I would like to do now is go to nutrition school. Because the more I learn about nutrition...you know, Hippocrates said, "Let your medicine be your food, and your food be your medicine." And he is the father of medicine. And I think our bodies own immune system...because if a person's white blood cell count is got so low, there's nothing you could do. There's no antibiotics you can give them to save them. So you've got to have some immune system there. And you can boost a person's immune system, you don't need medicine. And I know the side effects of medication and I've seen what medication can do. So I don't go to a doctor, I take no medicine, period, unless I've gone and broken something. Because I really think the side effects are, because if you have a pain, you have one problem. If you take medicine for it you have multiple problems, you have side effects and all that. And I would prefer to deal with the one problem. Somehow, with exercise or supplements.

*Interesting!
Med school
bring up this*

ND: Instead of trading one side effect for another and another and another.

RK: Right. Because I have seen people that are on like ten or fifteen medicines. And think how expensive that is. And then you have to go down and sit in the doctor's office and you know, it's expensive. It's expensive.

ND: What does your daughter do? Did she become as nurse like you?

RK: No, she teaches special ed. She doesn't think about her body at all. I've got all these books; I keep trying to tell her about it. Now my son, he's going to graduate from pharmacy school in May, we believe, we have faith. And so he's probably more open minded to the natural aspects than she is.

ND: Do you think he chose that career path because of you?

RK: Well, he didn't, well when he finished high school his only dream was to go to the air force, because he loved it. That was his thing. And I encouraged him to take pre-med because I wanted him to be a cardiologist because I think that it is so wonderful. And I think he had enough of a scientific mind that he could appreciate it. When he got to school he kept talking to people and they would say, "No, you don't want to go to medical school because dental school is just four years." So he kept applying for dental school and never got in anywhere. So then, after he finally gave up on that he started pharmacy school. So it's taken him, he spent a lot of time; he worked in the research lab at Chapel Hill for a long time and did all kinds of things. And so finally he got into pharmacy school and is about to graduate soon. I think he'll do well with that. You know, I have to believe that we all have plans for our lives. And what he'll do with that, I try to encourage him to go to work in a pharmacy in a hospital first. I think he'll learn a lot from that. Because when you first get out there you loose all that you learned if you just go into retail. And that way you can always go back to hospital pharmacy. You can always go into retail later,

because you're going to lose a lot that you learned and you won't be able to get in. So I don't know what he's going to do.

ND: What does your husband do?

RK: Well, he started out was in med school in Texas. He flunked out the first year. Then he stayed with his aunts. He had never been on his own and didn't get a chance to sow his wild oats. So then he went to dental school and after three years of dental school, he didn't get something finished, I don't know, somehow got an attitude problem so they wouldn't let him back in to finish. So he gave up and went to a hospital lab out there and so then we moved up here worked for (unintelligible) as a biologist, which he liked. And the last fifteen years he worked as an environmentalist where you took out restaurants and things.

ND: Did he always support your career choices?

RK: He did. Yeah he was very much supportive of me going to nursing school mainly because he thought I would be more productive. But, I guess, yeah.

ND: That's about all of my questions unless you can think of anything else? You said you knew Eric? (Eric is the male nurse I also interviewed)

RK: Yeah I worked with Eric. He's a nice person, you'll enjoy him.

ND: Yes, I haven't met him yet, we've only talked on the phone a couple times. How many male nurses did you know?

RK: Well I worked with Eric for a while. Now he left ICU and he went to the Cath lab.

ND: What's a Cath lab?

RK: Cardiac lab?

ND: I don't know.

RK: That's what he was doing whenever I left. He wasn't in ICU then. Dale Beaucannon. He was either manager or assistant manager. He was one of the one that was trying to get me to retire. Now he's and extremely smart person and an extremely talented person with a lot of common sense. But when he was in school he worked with Doctor Segal and he's really good if you wanted to talk him. But like I said, he was one of the ones that was trying to get me to quit. But I enjoyed talking to him so I just ignored that part of it. Because people would tell me that and I would think, "Whatever, that's what you want me to do." But, things are really changed at the hospital since I left there.

ND: Really? When did you stop working at Grace?

RK: I left when I turned 70 in July, two years ago.

ND: So think have changed in two years?

RK: Well, I know one girl that was there for many years, two girls that were there for many years, one worked the first shift and the other worked the third. They both were let go. Naomi was going through a real stressful time. She was taking care of her father and he passed away and within a week after her father died they let her go. I mean maybe she didn't do so well when she was trying to take care of her father but they let her go. And she was the one who was, she wasn't always on time, but she gave her patients excellent care. Absolutely excellent care and they let her care.

ND: Why do you think they let her go?

RK: Well, because they were trying to cut back on staff I guess. And maybe because she wasn't on time they felt like they were trying to find a reason to and you know, she was one of the ones who, you had to stay and do your charting after work so when the next person came. You can't do a lot of charting and take good care of patients; it's not that easy to do. And this other girl and

It is very interesting, had she define what a good nurse is - which skills, qualities, + behaviors are important, and which are not.

she was there even before I came. She worked in physical therapy and then she went to nursing school and she was also excellent and they sent her to another floor and she had some problems and anyway they let her go. And I had some problems too with all these people coming in and apparently she didn't handle that well so they fired her.

ND: Did you think that was unfair?

RK: Well, I think they got rid of two really excellent nurses. Because Claudine, you know, the one that she knew all that stuff up there, she was really good, she was really caring and I think they were both really excellent nurses. But that's just life and the way it is.

ND: If you could choose nurses to work with, would you choose a male nurse or a female nurse?

RK: I think it would be based on the quality of the nurse on their personality. You want to work with people who work well on a team. It's important to work as a team, you need help, you need advice, somebody you can talk to about things and work together with. You need people to help you, you know, so either one of them.

ND: Did you ever work with any female doctors?

RK: We used to have some. Grace Hospital has turned and gone to hospitalist. And most of the hospitalist has been male. But before that, when we had regular doctors who took care of patients and made the rounds, yeah we had several women.

ND: Were they easy to work with?

RK: Pretty much so.

ND: More than the male doctors?

RK: No.

ND: About equal?

RK: There weren't that many of them. One was real easy to work with and maybe I'm prejudice, you know, but I mean now some female doctors can be really really good. But for the most part, I don't know how to say this. There was one female doctor and she was my supervisor you know she was also one of my instructors in school and she worked and she is one smart person. And I went to a doctor for a physical a few years ago and I had to stay in the hospital and she went because I trust her and we're on the same page. And I knew I could talk to her about my ideas about medicine and I knew she would respect them. I have a hard time relating to a doctor today, *Interesting* you know, they'd think I was nuts. So some of them, it depends on how sharp they are or how smart they are.

ND: Would you prefer to work with male doctors instead?

RK: I think it just depends on the person and personality. I don't know. Because the women can be really, they can be really. Well I guess I've always gotten along better with men. Like as far as bosses go I get along better with men. With women I think can be very judgmental. Men, I think, are not as judgmental. Like you can probably, I like to get into discussions and hold my own but and have a deep discussion with a man. So and you can tease with a man and you can't with women. I guess I like men better, you know.

ND: Well I guess that wraps things up. Thanks so much.

RK: Oh you're welcome.