BOB: What did you think of this area when you first saw it?

MILDRED: Well, if we'd o' had the money we wouldn't o' stayed, but
we were young graduates and hadn't much. In those days we didn't have
a lot like they do nowadays.

BOB: When you first saw the tuberculosis institution, here, was that kind of a disappointment, too?

MILDRED: Yes, it was. They told us they'd take us up to our rooms and we went up to our room and it was a small room, but it had a beautiful big porch and there were beds on the porch. And I thought, "M-m-m, my, I wonder," and they told us that that's where we would sleep, all screened in. It was a beautiful porch. We had a little dressing room. You see, you didn't need much for a dressing room. You had lots of space to sleep and fresh air. I learned to like it; but it was entirely different, I'll tell you, than anything we were used to.

BOB: What were your duties up here then when you started?

MILDRED: Well, there hadn't been a nurse up there for nearly two weeks. She got steamed about something and walked out and left them and she had destroyed all the records so there wasn't any record. I really feel that I started with Dr. Lamont that institution to run in an organized way. I'm not bragging. I hope you won't think I am.

BOB: No. Lamont was the doctor there huh?

MILDRED: Yeah. Dr. John D. Lamont.

BOB: How long had it been going?

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MILDRED: Well, I think, it was in November of 1913 that it was opened.

It was practically new and there were only about 26 or 27 patients.

There weren't very many patients. That must have been quite a shock to come into this place and the records were destroyed and....

MILDRED: Well, we had never seen a hemorrhage from a tuberculosis patient. And you know, you see a frank hemorrhage and it's enough t's scare you to death because very often the patient drowns in it.

There was no system of how you gave medication so we took a grape basket and lined that with towels and fixed up emergency things in that for night and day. We had to go out to cottages because you patients were out in cottages, too. In the wintertime we waded through snow. The first winter there were no sidewalks and we just walked through the snow and made the best of it.

BOB: What did you do for tuberculosis patients at that time?

MILDRED: Well, fresh air and they gave injections of tuberculin.

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Tuberculosis is caused by a germ and it's a funny little thing you

have it on a slide and it's colored—it's red. Some of the patients

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BOB: So fresh air and the tuberculin shots was all you had then?
MILDRED: That's all we had when I came here.

BOB: Did the patients have their own rooms?

MILDRED: Oh, no. They lived on porches where they slept and in the mornings for care they were pulled into a room.

BOB: Do you mind if I ask you what your salary was when you started? MILDRED: No, you can ask me. Sixty-five dollars a month and my room and board.

BOB: Was that considered pretty good for a registered nurse?

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thirty five dellars a month, and the nurses were glad t' get it. Oh,
yes. We had no trouble getting nurses during the depression.

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BOB: You mean you and Dr. Lamont?

MILDRED: No. The other nurse and I when there were two of us and then when I was alone I had to take night calls, too. At night I made regular rounds at the cottages and then about four months after I came we got a regular nurse, a night nurse.

BOB: You didn't have practical nurses or any helpers or anything there for a little while?

MILDRED: No. Oh, we didn't have anything like that. It was prett'i'near a year before we had any nurses and then, of course, we had more patients and we had to have more help. As the institution grew, we had to increase our help and in the later years we took Indian girls from the reservation and trained them to do things. BOB: I see. Were there any cases of entire families staying there? MILDRED: Oh, yes. In the later years we had a preventorium for children from the patients they brought in. Preventorium they called it. It was to help them; it was to build them up. They played and they had a good time over here. It was a beautiful building. The children had been exposed and they were brought there. It was to prevent them from developing tuberculosis and we built them up with good food and cod liver oil and good care. TLC.

BOB: If a mother and father, for example, had tuberculosis or let's just say a mother would the children then often come along just because they had no place to go back in these early years?

MILDRED: No, because they were always taken care of by some other families. There was very few, but if they were undernourished then they would send 'em out and we'd take care of 'em. 'Course, the counties paid most of the expenses. There were very few patients able to pay.

BOB: How would you get patients referred to you?

MILDRED: Well, the doctor in the town would get the county judge to sign the papers and then they'd write up here for application for them and unless we didn't have a vacancy we took them.

BOB: Oh, you sometimes had more people than you could handle?

MILDRED: Oh, yes. There were only so many we could take care of.

At one time we had That must o' been in the late 30 s, early 40 s, probably. And then you know, they got new chemotherapy and patients

would come in and they wouldn't stay very long. They'd become negative and they'd send 'em home and it finally dwindled down to almost nothing.

BOB: Well, you said when you started you only had about 26 patients. When did the big increase come in?

MILDRED: Oh, that came in about 1918, 1919. that began. Then they added onto the institution on to the sanitorium and we had more room and we could take more.

BOB: Why did that much of an increase occur? Was it just spreading around that rapidly?

MILDRED: Well, they were finding more. There hadn't been anything done. You know In the early days tuberculosis was a hush-hush thing. People didn't want other people to know that they had anything to do with it. They kind o' hid it. It was sort of a disgrace, that tuberculosis, just the same as it used to be for mental patients; You they always kept that under cover. That's why the sanitorium was put way off up there. It was because everybody was afraid of tuberculosis.

BOB: --Could-you-tell-me-more-or-less-what-your-daily-schodule-was-in 1914?

MILDRED:--Well,-we-were-up-at-six-e'eleck-and-at-six-thirty-we-went

BOB: Did any of the people around San Haven shun away from the institution and wish that it wasn't there and things like that?

MILDRED: Well, they knew that it was there and there wasn't anything they could do, but they resented it. I'm sure they did, a lot of them.

BOB: But you never had any open hostility or anything?

MILDRED: No, but there was a feeling.

BOB: Is tuberculosis what they used to call "consumption?"

MILDRED: Yes.

BOB: Could you tell me more or less what your daily schedule was in 1914?

them streptomycin, patients that had been there for maybe six of seven years were helped and then they got out. Streptomycin was the first big step in the cure.

BOB: About when was that? then? In the 50 s?

MILDRED: Yes, if I remember right, I think, that was in the early 50 s.

BOB: What would the patients do best in the early days to keep from getting bored or depressed?

MILDRED: Oh, they used to play croquet. They'd have picnics out on the lawn. V17th of May we used to have a real big celebration—Norwegian Interest things like that and they would get out and talk and visit and play, the ones that were able to do that. For the ones that were confined in the later years we'd have occupational therapy and they learned to do some work.

BOB: Would you give jobs to patients, too, if they were able?

MILDRED: If they were able. If they became negative and had to stay a certain length of time. I had one girl in my office that used to do a lot of my book work. That's one thing about tuberculosis patients. They were always very cheerful and had a good outlook on life.

BOB: But they knew that they would probably be there the rest of their lives?

MILDRED: They knew they were sick and there wasn't much hope for them, but they never gave up the little bit of hope they did have. It was really a pleasure. You know. In the tuberculosis work you got to know your patients and the mothers would consult you about buying the children's clothes and maybe you would have to write letters for them They were too sick to write letters. It was more a friendly relation than it was a nursing relation.

BOB: It must o' been pretty hard on mothers that had small children?

MILDRED: Oh, yes. It was. We had several mothers that gave birth

to children, their babies, the sanitorium and then, of course, they had

to be taken right away.

BOB: What we you think of this wan you first saw it up here?

MILDRED: Well, if we'd o' had the money we wouldn't o' stayed,

BOB: Oh?

MILDRED: Sut, you see, we were young graduates and hadn't much, you know, In those days we didn't have a lot like they do nowadays.

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They told us they'd take us up to our rooms and we went up to our room and it was a small room but a beautiful big porch and I thought, well, porch and there was beds on the porch. And I thought, m-m-m, my, I wonder, and they told us that that's where we would sleep, all screeened in. It was a beautiful porch. And a little dressing room. You see, you didn't need much for a dressing room. You had lots of place to sleep and fresh air, but, you know, I learned to like it, but it was entirely different, I'll tell you, than anything we were used to.

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BOB: Oh. What did you do for tuberculosis patients at that time?

MILDRED: Well, fresh air and they gave injections of tuberculin.

BOB: Oh. I don't know much about tuberculosis. Is that caused by

MILDRED: Well, it caused by a germ and it's a funny little thing when you have it on a slide and it's colored. It's red. and it looks like tiny little.... Like that. And Some of the patients would be so positive you could hardly count the germs.

BOB: 0h?

MILDRED: Oh, that was a place.

BOB: So fresh air and the tuherculin

MILDRED: The tuberculin.

BOB:> Shots was all you had then?

MILDRED: That's all we had when To came here.

BOB: And 20 some patients?

MILDRED: And I think 28. I'm not positive about that, but I don't remember exactly.

BOB: Did the patients have their own rooms, and all of that busipess too?

MILDRED: Oh, no. It was all just.... They lived on porches where they slept

MILDRED: And in the mornings for care they were pulled into a room.

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BOB: You mean you and Dr. Lamont?

MILDRED: No. The other nurse and I when there were two of us and then when I was alone I had to take night calls too you know.

BOB: Yes.

MILDRED: At night I made regular rounds at the cottages and then about four months after I came we got a regular nurse, a night nurse.

BOB: Oh. Who was that?

MILDRED: Oh. Let's see. What was her name? She came from Minnesota. I think her name was Thompson and now I.... You know, that's a long time ago for an old lady to remember. (laughs)

BOB: Yeah (laughs) You mean you didn't have practical nurses or any helpers or anything there for a little while?

MILDRED: No. Oh, we didn't have anything like that. It was prett'i'near a year before we had any nurses and then, of course, we had more patients and we had to have more help. As the institution grew, we had to increase our help and, oh, for a long time the later years we just had to take Indian girls from the reservation and train them to

do things, teach them.

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1808: Oh, children would come whose parents had it, huh?

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BOB: Yeah. (laughs) If a mother and father, for example, had tuber-culosis or let's just say a mother of ould the children then often come along just because they had no place to go back in those early years?

MILDRED: No. No, because they were always taken care of by some other families. There was very few.

BOB: Oh. I see.

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MILDRED: But if they were under contact then they would send 'em out and we'd take care of 'em. Course, the counties paid most of the expenses.

BOB: The county did at that time?

MILDRED: Yes, they did in those days. There were very few patients able to pay.

BOB: How would you get people referred to you?

MILDRED: Well, the doctor Oh, you mean for nursing?

BOB: No. The patients.

MILDRED: Well, the doctor in the town would get the county judge to sign the papers and then they'd write up here for application for them and unless we didn't have a vacancy we took them.

BOB: Oh, You mean, you sometimes had more people than you could handle?

there were only we had more So many Oh, yes. than we could take care of. At one Easter &

time we had 388.

BOB: Really?

MILDRED: Yeah.

BOB: Good heavens! When was that?

MILDRED: Well, that was in.... That must o' been in the early 30's

BOB: Oh.

V

That MILDRED: Oh, it was longer No, it was later than that: ## must o' been well, in the late 30's, early 40's probably. And then, you know, they got new chemotherapy and patients would come in and they become negative Thev'd wouldn't stay very long. Λ and they'd send 'em home and finally dwindle down to almost nothing.

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to do with it. They kind o' hid it. It was sort of a disgrace, that used to be tuberculosis, just the same as it Λ for mental patients. You know, they always kept that under cover.

-BOB: Oh. I see. That tuberculosis was considered....

MILDRED: A disgrace kind Do you have that..

Yes. That's on. Let's see Yeah. I had something in my mind here that I wanted to ask you. Now what was it?

Well, there were a lot of things if I could just remember I could tell you, but so much of it is gone. You can understand that.

When you get as old as I am, it's funny I remember as much as I do.

(laughs)No. I think, your memory is better than mine. I can't remember what I had in mind here a minute ago. Would other people in the community here consider that sort of a....

Well, that's why it was put way off up there. It was because everybody was afraid of tuberculosis.

BOB: Did any of the people around San Haven shun away from the institution and wish that it wasn't there and things like that you know?

MILDRED: Well, they knew that it was there and there wasn't anything they could do, but they resented it. I'm sure they did, a lot of them.

BOB: But you never had any open hostility or anything?

MILDRED: No, but there was a feeling.

BOB: Is tuberculosis what they used to call consumption?

MILDRED: Yes.

BOB:\ Same\thing?

MILDRED: Yes.

BOB: That's what I thought.

MILDRED: Ontario. He was from up there and he had all his training from there. He was a wonderful man. He was a Scotchman. Yes, he was Scotch, think. Well, he saw to everything. He was there about... He married after he came there and he had three children. Oh, he must o' been there... Let's see. I think, it was in '27 or '28 he went to Minnesota to Sanitorium out from Duluth. He went there as superintendent. Oh, he was a wonderful man and he was so kind and considerate.

BOB: Was he the first doctor?

MILDRED: No, the first doctor was Dr. Widmeyer, but he was up here just a very short time. I think, he was up here not quite a year and he had a family and they were all afraid of it. When Dr. Lamont came there he was single and he and Dr. Widmeyer were friends and Dr. Widmeyer got Dr. Lamont to go here.

BOB: Oh. I see. Could you tell me more or less what your daily schedule was in 1914? F mean from the time you got up in the morning til the time....

MILDRED: Well, we were up at six o'clock and at six thirty we went down in the kitchen and set up the trays and then we went back upstairs and gave the patients that needed it morning care, wash water, and helped them comb their hair and gave them the bedpan and things like that, and then we went back downstairs about a quarter past seven twenty minutes past seven and at seven thirty the trays went up and we went up and carried the trays around. We helped with this and then we went back and picked up the trays and sent them back to the kitchen.

And then after that we did morning care. One of us made rounds at the cottages and the other one started in the infirmary. We gave morning care, baths and back rubs. In those days women all had long hair and we used to braid it. It didn't hang all over their head like it does all now. They all braided their hair and sometimes I braided their hair and washed them and fixed them up and baths, the ones that had baths. We tried to give them baths a few times a week. We had quite a few.

BOB: What would these parients do back in the early days plet someto keep from getting bored or depressed or whatever?

MILDRED: For entertainment?

get out and talk and visit and play,

BOB: Yeah.

MILDRED: Oh, they used to play croquet. They'd have picnics out on the lawn. 17th of May we used to have a real big celebration.

MILDRED: Norwegian?

MILDRED: Norwegian. Yes. There were things like that and they would

BOB: Yeahr.

MILDRED: The ones that were able to do that, and then the ones that were confined in the later years we'd have occupational therapy and they learned to do some work.

BOB: Would you give jobs to patients, too, if they were able?

MILDRED: If they were able. If they became negative and had to stay a certain length of time. I had one girl in my office that used to do a lot of my book work.

MILDRED: That's one thing about tuberculosis They were always very cheerful and had a good outlook on life.

BOB: But they knew that they would probably be there the rest of their lives?

big province?

BOB: Oh, yeah. Ontario?

BOB: Children could visit, but they couldn't actually live there with the parents?

MILDRED: No. We never allowed children in the infirmary.

BOB: Oh. You didn't?

MILDRED: No. No, they could stand outside and talk to their mothers or their daddies whichever was there from outside but not inside the building.

BOB: Were there some people that stayed there then for as much as 20 years or more?

MILDRED: Oh, I don't think there was anybody there that long. Probably eight or ten. Maybe twelve at the most. That was in the early days where they had so much chemotherapy, so many things to keep them there.

BOB: \ Was tuberculosis eventually then terminal?

MILDREN: In the early days.

BOB: It was eventually, huh? It might take a long time, but....

MILDRED: It might take a long time; but you know, after we had chemotherapy and then we could put air into the chest wall to contract the lung and after we did things like that the patients

didn't stay there very long, maybe five years and some of them not that long, with medication. We called it surgery.

BOB: Oh. I see.

MILDRED: And then, of course, some patients when they started were sent to Rochester for productions. Well, in the later years, about the last five years that I worked, they were doing the section, taking out part of the ribs and collapsing them.

BOB: Oh. And that then gets rid of the tuberculosis germ?

MILDRED: Well, it contracted the germ and, I don't know, it healed it some way. Oh, yes, they became negative. They'd have to become negative.

BOB: Oh, you couldn't require some bely to come?

MILNRED: Oh, no, we couldn't make them come.

BOB: \Oh, I didn't know that.

MILDRED No, we couldn't do that. The county would have to do that.

The people that were sending them would have to do that.

BOB: Oh, but, I 'spose, the county would usually do that?

MILDRED: They were responsible for them, see. And if they didn't come it was up to the county to see that they did or take care of them at home.

BOB: If they wanted to stay at home, would they have to be quarantined then?

MILDRED: They would in those days because the And it didn't have to be fresh . You could expect to see it on the ground and it would dry and someone would come along and scuff there and that germ would be in the air.

BOB: Oh.

MILDRED: And you could inhale it.

BOB: And catch it that way?

MILDRED: And catch it that way. Now, you know, we've had a lot of young people come in and we've traced their exposure to teachers.

BOB: Oh. Yeah.

MILDRED: That had tuberculosis. We had one teacher and two or three of her pupils. There's a lot of things that I remember, but there are a lot of things that I've forgotten.

BOB: What would you do with someone that kept trying to run away?

Did you have a security....

MILDRED: No. If they run away.... No, we didn't have anything like that.

BOB: You didn't have a cottage where you'd lock tem up or anything? (laughs)

MILDRED: No. No. No, we didn't have anything like that. No, there was nothing like that here.

And then the upstairs that's where we ate, the kitchen and the dining room, and then in the basement was the laundry and the store room for canned goods and the food, you know, for keeping. And.... What was I going to say?

BOB: What was the refectory? That's what I want to know.

MILDRED: That was the dinking hall.

BOB: Oh.

MILDRED: And they called it the refectory building and upstairs was the chapel. We had a big chapel up there for church and amusement. In later years they had movies once a week.

BOB: The old silent movies?

MILDRED: \Yes.

BOB: Oh?

MILDRED: With a player.

BOB: Yeah. You had someone on the staff that could play the piano that well?

MILDRED: Oh, that was in the movies.

BOB: Yeah, but I mean you had to have someone playing right there, didn't you?

MILDRED: No. It was right along on the picture them days.

BOB: Oh.

MILDRED: It was silent. You see, your education has been neglected.

BOB: (langhs) I always thought they had to have somebody playing the piano right there?

MILDRED: Oh. They did but we didn't. We just got those playing right on the film.

BOB: ph. They'd play that sound then on something separate, a phonograph or something, I 'spose?

MILDRED: No, it was right on the film with the picture. There'd be music but no talking. There'd be a little verse or line or two, but you'd guess at the rest of it. But it was good for that time.

BOB: Did you have quite a few Indian people in the institution being this close?

MILDRED: Yes, there were quite a few.

BOB: Yeah. What could you do for that strain of flu?

MILDRED: Well, there wasn't much we could do, only keep them warm and give them lots of fluid.

BOB: There was no certain medication?

MILDRED: No, there was no certain medication. We used to give them aspirin and keep them warm.

BOB: You and the doctor lived there on the grounds?

MILDRED: Oh, everybody that worked there did. They lived right there in those days.) New they live all ever.

BOB: Oh. They did? The cooks and everything?

MILDRED: The cooks and everybody. Everybody.

BOB: Who were some of the other people on the staff then? There was you and Dr. Lamant.

MILDRED: Well, let's see. There was Dr. Lamant and then there was his Lena Danie/son secretary. She was from Wisconsin. You know the secretary. There were those two in the office and then there was myself and the Thompson, the night nurse. No, Anna Thompson is the one that came with me, and then Thompson, the night nurse. I can't remember really how many there were.

BOB: And then you had one or two cooks?

MILDRED: We had two cooks. Yeah. And then we had a woman in the dining room; but we all ate in the same dining room, but we had different dishes and, of course, the dishes were sterilized.

BOB: You say you had two cooks and a woman in the dining room?

MILDRED: To wait on tables and catch dining room cleaning and she did other housework, house cleaning, and she did some for the doctor until after he was married and then his wife did it.

BOB: Was there a grounds keeper, also, living right there, He was the

Mildred, 1

man I married.

BOB: Oh.

MILDRED: He was an engineer and he had charge of the grounds and greenhouse.

BOB: The greenhouse?

MILDRED: Oh, we had a beautiful greenhouse. Oh. Just beautiful. Enough

 \leq nd γ dragons all winter for the patients. We had a lovely greenhouse.

BOB: Why did you have a greenhouse? Just to provide something for the patients to do mostly?

MILDRED: Well, the patients didn't do much in there. My husband and some of the men that worked for her would work in the greenhouse, and My husband did most of the work. He loved flowers. He was Swede from the old country.

BOB: Oh. It seems to me I've heard that there was a dairy herd out there, too, new that I think of it?

MILDRED: Yes, there was. There was a Jersey dairy herd and we also had goats. There was a Jersey dairy herd and goats. We used to give some of the patients goats' milk.

BOB: Was that supposed to be good for tuberculosis?

MILDRED: Yes: Especially the ones that had TB 3 2 2 3 3 . That's TB bowels.

BOB: I see. Well, that must have taken quite a few more people then to milk the cows and everything.

MILDRED: Oh, wes, but, you see, I didn't have much to do with that so I don't know much about it.

BOB: But did all that staff live right on the grounds, too, then?

MILDRED: Yes. You see, after we got the infirmary then the building that we had used for an infirmary was all renovated and made into a residence for people who worked here. And then in the refectory building.... That was opened in 1916, the refectory building.

to be cured.

BOB: How often would you administer the shots of tuberculin?
MILDRED: Well, some of them got it once a week and some of them got it once every two weeks. It depended on their condition and what the doctor ordered.

BOB: And that wouldn't actually cure it, but it would kind o' arrest it, huh?

MILDRED: It would kind o' arrest it.

BOB: Oh. Did it have any/side effects or was it a tough....

MILDRED: No. No. No, because I remember there were no side effects.

BOB: If a patient would get sick or injured or something, would you usually call a doctor to treat them there or would you often taken them to a hospital?

MILDRED: Well, we used to often have a doctor come in; but if it was anything serious, why, then we took them to a hospital because we didn't have the facilities that they had at the hospitals.

BOB: You dou't perform surgery or anything like that?

MILDRED: Oh, no. Not very much. No abdominal surgery or anything like that.

BOB: No/.