

**MUSC's First Organ Transplant**  
**Oral History Project**

Interview with Mary Brown  
March 6, 2009

Interviewer: Brooke Fox, MUSC University Archives

Location: Basic Sciences Building, Room 107

Brooke Fox: ...Ms. Brown, thank you for coming here to be interviewed about your experiences with the first transplant at MUSC. But before we start talking about your experiences with the transplant, I'd like to just get some background information about you. Where were you born? Where you went to school? Kind of your experience before you started working at MUSC.

Mary Brown: Well, I was born in Charleston. I was born and raised in Charleston. I graduated from Burke High School. I went to surgical technician school at this [MUSC] hospital.

Fox: OK.

Mary Brown: Then I started working here.

Fox: Uh-huh. What year did you start working at MUSC?

Mary Brown: 1966.

Fox: 1966. OK. And, so when you came here, what department did you mainly work in?

Mary Brown: The operating room.

Fox: The operating room? OK. And you spent how many years...?

Mary Brown: I was a surgical tech for 17 years.

Fox: OK. OK. And, so when did you first find out about the transplant? Did they let you know a few weeks in advance that you were going to be involved in it? Or was it just a general operation, you kind of just...?

Mary Brown: I was trying to remember, you know, how I was told about it, because initially, when they first did it on the dog, you know, they did it before they did it on the patient, my sister scrubbed on it and I circulated in the dog lab. And they told me that I'd be, you know, scrubbing on the transplant when they did it. That was it.

Fox: Uh-huh. So do your - - what do you remember about the operation itself? Was it uneventful? What was it, what was the atmosphere like in the operating room?

Mary Brown: Tense.

Fox: Tense?

Mary Brown: Yes. Because the first was scheduled for that Monday, but they had to cancel it and they did it Tuesday. And it took eight hours, the first one, and now it takes like an hour or so to do transplants, now, you know. And we only had one mishap, bleeding, but that was not much.

Fox: Were you in the operating room with the donor or with the recipient?

Mary Brown: I was in the room with the recipient.

Fox: OK. Because I know that they took the kidney out of the donor and then they had to do flushing of the kidney and everything, so, you were sitting in the other operating room, kind of everybody was just sitting there waiting for...

Mary Brown: Well, we were kind of, well, what they were doing was like, getting the area prepared, you know, like, making a spot like, to put the kidneys, and

then dissecting up the veins and arteries, and, you know, around the bladder because that's where they had to connect, you know, connect it up with, and until we got it and then we put it in.

Fox: And who were the surgeons there that you were working with?

Mary Brown: It was Doctor Fitts, Doctor Rajagopalan and it was mainly two. We had a couple of students, you know, but I don't know their names.

Fox: Did you happen to...OK....After the surgery, were you involved with any of the patient care after that, or...?

Mary Brown: No.

Fox: No? You were specifically OR?

Mary Brown: OR. Yeah. Just basically OR.

Fox: OK.

Mary Brown: Excuse me.

Fox: We interviewed Lloyd Martin, who helped, he worked with Tom Hargest in developing the SCIRT pump and everything and doing all the testing on that for the transplant and he had mentioned in his interview that once the operation was over, everybody just kind of broke out into cheers and celebrated. Is that kind of your remembrance of - - what when the kidney functioned?

Mary Brown: Oh, yeah, it was like, wow, you know, when this, as soon as he connected it up, it pinked up and it started making urine and everybody was like,

yeah, it's working. You know? And then they finished connecting it up and then we closed. We were scrubbed in the whole room for eight hours. So when it was finally over, everybody was glad it went well.

Fox: So you were in the room for eight hours? There were no breaks or anything?

Mary Brown: No, no breaks.

Fox: Because I've never, you know, I don't work in a hospital room so I don't what's, I don't know what it's like.

Mary Brown: Yeah, since that was the first one, you know, didn't want any breaks so you didn't lose, you know, the rhythm of it. And besides, they were worried about... to not get any breaks and no infection and everything. So, everybody was just there to start it and end it. You know, so we got on this...

Fox: So with the other OR nurses that were there with you, could you, kind of describe them? What were their...did you all generally have the same role in there, or you were...?

Mary Brown: Well, since that was the first one, there wasn't that much traffic, and people weren't going in and out of the room. So it was just, I was the scrub person, and Ms. Johnson was the circulating nurse. She gave me everything I needed. She was considered the dirty person, I'm clean.

Fox: OK.

Mary Brown: It was because she gave me everything that I needed, and they didn't want like the traffic in the room. So, it was basically just the surgeons, myself and the circulating nurse.

Fox: OK and then in the other room...?

Mary Brown: They had the same thing.

Fox: OK. So, at that time, working at MUSC, could you describe what it was like, working at MUSC at that time?

Mary Brown: Oh, it was wonderful. I worked in the OR. It was like, nobody called in sick, because you just enjoyed coming to work. You know, if you called in sick, you were really sick. You just couldn't make it. You know, it was a nice atmosphere. And everybody was, you know, we got along fine, like one big happy family. It was just nice.

Fox: So after the first transplant, did you, you mainly, did you work with other transplants? Or...

Mary Brown: Yeah, I did a couple more.

Fox: A couple more?

Mary Brown: Then we branched with other people, you know, scrubbing on the set.

Fox: And your experience with the later transplants, you said that they were much quicker or faster?

Mary Brown: Yeah.

Fox: So, what was the difference, just because the first one was ‘the first one?’

Mary Brown: The first one, yeah. You know, they had to connect, they had to make sure to connect the arteries and the veins at the right rate. Because, the easiest part was setting the bladder to the, you know, the ureter to the bladder. But the other part of the tissue, you know, it was kind of like, we had to make sure the veins and arteries don’t leak, because that will happen when you let go, it started bleeding, you know, then you had to clamp it back, and find the bleeding and, you know, sew it up. And other than that...it’s a whole lot faster and quicker and better now. Yeah.

Fox: OK. Let me...I’m going to review my questions again. So, you, OK, so you said you stayed in the one room, because they didn’t want traffic...

Mary Brown: Uh-huh.

Fox: So you really didn’t have any interactions with the donor and the recipient when they were awake or anything?

Mary Brown: No. You know...

Fox: So you have no...

Mary Brown: No, just when he came in the room, you know, before they put him to sleep. You know, that’s about it. No interaction with the patient afterwards.

Fox: OK. So when they brought him into the room, he was awake?

Mary Brown: Uh-huh.

Fox: Did he say anything or was he...?

Mary Brown: Oh, like maybe talking to the anesthesiologist and stuff, you know, like back and forth, and getting ready, but I basically was setting up my table and stuff, so...

Fox: So it's, the operation itself is kind of a standard...?

Mary Brown: Now, it is. Yeah.

Fox: Now it is. But with just the instruments used, and everything...

Mary Brown: Yeah, well they made a kidney, now we have a set called a kidney transplant, you know, basically the set instruments that's used for that type of surgery.

Fox: But at that time you didn't have that stuff.

Mary Brown: No, we just used the basic things, you know, and some other things that we needed.

Fox: Uh-huh. But they seemed - - they obviously worked.

Mary Brown: Yeah.

Fox: So you didn't have, I'm probably asking you the same question a different way, but there was no special training involved with this?

Mary Brown: Well, I would, Doctor Fitts would know that, I think it would [unintelligible] because they had to do a couple of experiments. Like I said, in the dog lab they would try it a different way before they really did



it on the patient. To perfect it. To make sure it ran smooth. That's about it.

Fox: OK. Do you, would you happen to know if there was any special reason that you were chosen to be in the operating room, or was it that was your day to be in the operating room?

Mary Brown: No, I was trying to think of how they asked me. They just told me that they were doing a transplant and would I like to scrub on it. I told them, yeah.

Fox: So, did you at that time, did you realize kind of how important this was an historic and everything?

Mary Brown: Yeah. Yeah it was. I guess a lot of people, they might have asked other people but they might have been like, afraid they might make a mistake and they might tense up or something.

Fox: Uh-huh. Yeah. Because going back and doing research for this it seemed that the MUSC, that it was kind quiet that this was going on, but then right around the time of the operation there was all this media and everything, do you, do you recall that day of the operation, were there reporters in the hospital? Or do you...?

Mary Brown: Well, there might have been other, you know, like, maybe downstairs or something - - not in the OR.

Fox: Oh, yes, yes. Not in the OR. So you didn't have reporters coming in and asking you?

Mary Brown: Nuh-huh.

Fox: So, you say, you just did your job, and kind of, you know...you know, that's good. Because we interviewed, we interviewed the family of the recipient, and the original donor because they were brother and sister. And their recollections of their experience at MUSC, they were very, yeah, they were very happy and appreciative of all the work everybody did. You played a big part in that, so we appreciate that. Let me think. Do you have any other thing that you remember about the transplant or leading up to it or after it? After the transplant was over, did you...?

Mary Brown: I had asked, Dr. Fitts the first time I saw him, a couple of times, how the patient was doing, you know, he told me he was doing fine, you know, stuff like that, but other than that, no more, no more interaction with that.

Fox: OK. OK. And so, Kathleen Johnson, I haven't been able to talk to her yet, but, so she, you said, she was, what was her role again?

Mary Brown: She was a circulating nurse.

Fox: Circulating nurse. So, she was also, like you, that she worked, she was just there involved on the day of the...

Mary Brown: Well, I think why they chose her because that's GU service? When you have the organs?

Fox: Uh-huh.

Mary Brown: And she was the GU head nurse. And so I think that's why they got her to circulate. Because that's her specialty, that's, you know, that's her only field of medicine, so she scrubbed in and knew everything about the doctors and stuff.

Fox: OK. And so she had more interaction with the patient after...?

Mary Brown: Well, she might have, you know, she was an RN. But basically, the OR, we just stayed in the OR. We didn't really follow our patients and stuff like that. You could do it on your own, you know, like, you know, we didn't have any interaction with them after they have surgery.

Fox: OK. So, any other memories of that time that....thoughts...

Mary Brown: ...No. Just that I was glad it worked and I was glad it was over afterwards.

Fox: Did you go home and take a nap or something? So, that's pretty much all I needed to know at that time.

Mary Brown: Pretty laid out...

Fox: Huh?

Mary Brown: I said just pretty laid out [unintelligible] it was, we just did it, got it over with...

Fox: Yeah. Yeah. I forget that, you know, you're an OR nurse and that's what you do and people don't follow throughout, unlike doctors, I guess, which do that.

Mary Brown: Yeah, they do. See them every day.

Fox: Did you work with any of the other doctors that were involved in the transplant? You said Doctor Fitts...

Mary Brown: ...Doctor Raja. But they used to do other surgeries like the fistulas, that the patients get before they, you know, when they have to go on dialysis, they used to do those all the time so I used to scrub on those.

Fox: OK.

Mary Brown: Another scrub on is ulcers. You know, in the OR. But basically that's it.

Fox: OK. So, basically, were you involved with kidney related surgery, or just any type of surgery?

Mary Brown: Any type because you have like they used to do nephrectomy, taking out the kidney?

Fox: Uh-huh.

Mary Brown: And I've scrubbed open hearts, you know, or orthopedics, you know, all types of surgery. Yeah.

Fox: Did you have a favorite organ you liked to operate?

Mary Brown: It's just, it's all interesting, you know, you see pictures, you know, like, and your kidney looks like a bean, it really does. And the heart, and brain. It's really interesting. It was always interesting working in the OR. To see the positive part of it, to really see it working. It was very interesting.

Fox: Did you ever have an experience where you fainted or anything?

Mary Brown: No.

Fox: You have a tough stomach?

Mary Brown: You get used to it. The only thing I was worried about is the burn patients. That's just something you can't get over. We had to use like a something in a mask because the smell, the burnt skin is really, you know, it's not, very unpleasant. But other than that. No. I was just being nosy. I was just interested, you know, in what was going on.

Fox: And so now you're at the new, you're at the ART [Ashley River Tower] building?

Mary Brown: Uh-huh.

Fox: How is that working there? Everything's all new...

Mary Brown: Yeah, it's new, but I'm not in the OR anymore. I used to, like I said, I used to pass the instruments. Now I put the instruments out for the OR.

Fox: OK, kind of...

Mary Brown: Sterile processing.

Fox: How long have you been in that department?

Mary Brown: Since 80 something...oh, it was 11 years? When they first opened the one over here [original hospital]. The old one? We went downstairs because they didn't want techs in the OR anymore. So they invented SPD. You know, sterile processing. And I've been there ever since. I retired and I've come back.

Fox: OK. You must like it. What is...how do you compare working in the old hospital and working in the new?

Mary Brown: It is so much better.

Fox: Yeah.

Mary Brown: We have windows.

Fox: Windows. OK.

Mary Brown: Yes. Because over there they didn't have any windows. Yeah. We have windows all around. And, like I said, it's new, it's clean, and it's just nice.

Fox: Uh-huh. Uh-huh. That's nice.

Mary Brown: Yeah. Very nice.

Fox: OK.

Mary Brown: Yeah.

Fox: Alrighty...Unless you have some other things you'd like to share...

Mary Brown: No, that's about it.

Fox: OK.

Mary Brown: That's all I can remember today.

Fox: Well, I appreciate your coming here and talking with me.

**End of recording.**