

INTERVIEWER: This interview is between Peggy Cooper and myself, Laura Madden. Today is Tuesday, June 14th, 2016, and we're meeting at Peggy's home and we're discussing her memories of her time as a student at Georgia Baptist Hospital School of Nursing in Atlanta Georgia.

INTERVIEWER: You graduated in?

PEGGY COOPER: 1972

INTERVIEWER: My first question is, describe the thought process that went into your decision and why you wanted to become a nurse.

PEGGY COOPER: My mom told me that at age 6 I told her that I was going to be a nurse. That's what I always wanted to do. My backup plan in case I couldn't be a nurse was to be a teacher, but then I went on to nursing school and became a nurse, therefore I was able to teach as a mentor. My passion is nursing and mentoring. I've just had a wonderful career.

INTERVIEWER: Why did you choose to go to Georgia Baptist?

PEGGY COOPER: I was raised in Southwest Georgia. I was the only student in my graduating class that wanted to be a nurse. Most of the nurses down there went closer to home. I'd been accepted to Georgia Southwest, into their program, but we had a career night at the school and Roger Bolton who was the representative/outreach person for the career night things came down to the school and spent a good bit of time with me, since there were not an abundance of people wanting to be a nurse. He told me about the program and the advantages he thought that it would provide and he had to assure my parents that I'd be safe in the big city. He told us all about the security at the school and how they really took care of the students, and so I filled out an application and sent it in, then I received an invitation to come to a weekend that they were having for potential students. My parents took me up and we spent the night in the school, guided by students already there, taking us around and I really liked it. We had the interview process with the faculty, and thought that they were all kind and interested in me and what I could do. Then I decided that's what I wanted to do, and I put on my big girl panties and came to school and decided not to be afraid in the big city.

INTERVIEWER: So where were you from, originally?

PEGGY COOPER: Blakely, Georgia. It's in Early County, down in southwest Georgia, on the Chattahoochee River, and we were one county from Florida. Its way South Georgia, closer to the panhandle beaches than it is to anything up here.

INTERVIEWER: So you said you had been accepted at Georgia Southwestern. Was that a baccalaureate program at the time?

PEGGY COOPER: No, it was actually a two-year program at the time.

INTERVIEWER: So other than that, did you consider a baccalaureate program, at all?

PEGGY COOPER: Not at that time. There weren't that many, at the time.

INTERVIEWER: Especially in Georgia, there weren't very many.

PEGGY COOPER: At that time, my parents – I was one of four children. I was the oldest, and had to be concerned about funding. My parents sent me to school. So I came to Georgia Baptist and I've never regretted that at all.

INTERVIEWER: Talk about the classes you had at Georgia Baptist. How were those structured and what memories do you have about the classes?

PEGGY COOPER: Well I remember the Tift classes, of course, that we had first. We had the Tift professors on site at the hospital so we didn't have to go out to Georgia State or to the other places, and I do remember the professors from Tift. They were fun.

INTERVIEWER: Any stick out in your mind?

PEGGY COOPER: Well, Miss Tribble. Everybody remembers Miss Tribble and the Parkers, Mr. and Mrs. Parker. They both taught at the school. It was a fun time. I remember some of the classes thinking how does this ever apply to me being a nurse?

INTERVIEWER: Did you see the value in it later?

PEGGY COOPER: Some of them, yes, and some of them I thought well, yeah. I understand you had to do that. At the time I didn't appreciate the value of some of the classes that we had.

INTERVIEWER: You wanted to get to the nursing.

PEGGY COOPER: I wanted to get to the nursing. When we got to the nursing, I loved fundamentals. That was just so much fun, learning to be a nurse and all those things. Loved my instructors. They were just all fun people. Even the ones that were noted to be kind of stern, you know they all had a good heart and had our best interests. Made great friends there. Loved the clinical. Got lots of stories about the clinical that we talk about when we get together.

INTERVIEWER: Why don't you tell some of the stories?

PEGGY COOPER: Just things like going over for the PM care. That was one of the things you did, you went over and got people ready for their evening meal, washed their hands and face, helping them with their meal, then got them ready for bed, their mouth care, things people really don't consider as nursing too much these days, but we'd do that. I remember the first time one of my great friends, Cathy Bryant then, now Harbin, we went over to do our clinical on 3 East and we were to take the evening vital signs. It was our first time. We had practiced in the fundamentals labs. Hadn't done it on a real patient yet. We went in so professionally, pumped up the blood pressure cuff and listened and I did it first. I said, "Hmm, let me check this again." I pumped it up again, listened. Then I said, "Okay, Cathy." Cathy did the same thing. She pumped it up the first time. She said, "I'm going to check it again too." So we finished all our little p.m. care and walked out in the hall. I said, "Cathy, I didn't get anything on the blood pressure reading. What did you get?" She said, "I didn't get anything either. I thought you had it." So our first experience taking blood pressures on a real person . . .

INTERVIEWER: It's hard. That's a hard skill.

PEGGY COOPER: We learned it real quickly and I was thinking about it the other day. We used an old-fashioned sphygmomanometer, a thermometer . . . those type things. Now, you plug them into a machine and then you have all your readings. Things have changed a lot, progressed a lot.

INTERVIEWER: They have changed, but those old fundamental things you know and what if the machines break? The students have a harder time with that now. They're so reliant on the machines.

PEGGY COOPER: We had a teacher that – she was a very nice person. This was later on in our nursing career. We were working eleven to seven, at that time.

INTERVIEWER: So, you had to work all the shifts?

PEGGY COOPER: You did, but I didn't have it bad, like the class before me. They all said, "Y'all are the spoiled ones," because they were the ones that had to work and then go to class the next day and I guess the NLN (National League for Nurses) had made the restrictions and then there were time limits and stuff. I was the first class that came in and they called us the spoiled ones because we didn't have to go to class sleepy.

INTERVIEWER: That would be hard.

PEGGY COOPER: The professor – well she wasn't a professor then she was a nurse teaching us, but she was our nursing instructor. She was a really nice lady but she never looked anybody in the eye. She always talked to you and looked at your chest. Me being a people person, it's like, look at her look at me and I would kind of adjust my head to get her to look at me. My friend Cathy was in this clinical with me, too, and we were thinking what is wrong with us that she won't look us in the face? We were almost standing on our heads, bending over to try and get in her eyesight. We were truly unsuccessful at ever getting her to look us in the eye.

INTERVIEWER: I wonder why she did that, do you know?

PEGGY COOPER: I don't know. It was one of her little quirks but she was a very nice lady. Another thing that we got tickled about was one of our older instructors – she was a lovely lady too, she'd been nursing for years and years. We had had our classes with her and then got our evaluations. So in her evaluations it was Miss Cooper-

INTERVIEWER: She didn't called you by your first name -

PEGGY COOPER: Absolutely. Miss Cooper: you've been a joy to teach. You interact so well with – this was the ENT (ear, nose and throat) thing then and most of what we did was tonsils and stuff – you just respond so well and interact so well with the children. 'You've done great in clinical, but I do have a suggestion for you' - I said, "Oh, yes ma'am" – and she says, "Well, I just wanted to tell you that every night when you get your uniform and shoes ready for a clinical the next day, you know when you polish your shoes every night, you should take out your shoestrings, wash them, and then dry them." And she says, "And have several pairs because they might not dry, and she says before you iron these shoestrings, I've found if you'll put spray starch on them they won't get quite as soiled." I thought, "Oh well, thank you so much" . . . I was telling Cathy, you know I never really considered washing my shoestrings, I just put a new pair in.

INTERVIEWER: I don't think I ever put a new pair of shoestrings in the three years I was there.

PEGGY COOPER: We were in clinics. The shoestrings came in a little packet, you know, with the shoestrings, a little white packet with blue writing on it. When I thought my shoes needed to be cleaned up, we had the shoes polish we did use, but then I just put a new pair of shoestrings in and chucked the other ones. I never spray starched a pair.

INTERVIEWER: I hear you. That's hilarious. That is so funny.

PEGGY COOPER: Just fun things like that we talk about and remember.

INTERVIEWER: How times have changed, since then.

PEGGY COOPER: They have. The uniforms of course were provided by the school. We had the first uniforms that didn't have the tucks in the back with the belt that you had to flip, but they were still laundered, and you'd take –

INTERVIEWER: Across the street?

PEGGY COOPER: Across the street. Yeah and pick up your stuff and they'd be stiff as a board and you'd bring them back. We looked nice but nobody volunteered to iron or spray starch my shoestrings.

INTERVIEWER: That's so funny. When you were there, they were still going to Milledgeville?

PEGGY COOPER: I was the last class at Milledgeville.

INTERVIEWER: Tell me about that.

PEGGY COOPER: You want to hear about Milledgeville?

INTERVIEWER: Yes, I do.

PEGGY COOPER: We went to – and again Cathy Bryant, Harbin now, we went to Milledgeville together. You went to Milledgeville for six weeks and then you came back and did, I think, a surgical rotation for six weeks, and you had to have your own transportation down there and we all had – people who had cars, they were not new cars and stuff. We went to Milledgeville, get to Milledgeville and it's the springtime of the year. It's the prettiest place in the world, with the azaleas and dogwoods and everything blooming and you drive on this campus that looks like a college campus and it's just gorgeous, and just so pretty and the perfect time of the year. So we go to our dorm which – our dorm is – our rooms are on the second floor, above the first floor where the quote rehabilitated patients were able to work on staff. Well of course some of them still needed a little bit of psychotropic drugs. We were kind of afraid of some of them. We lived in this dorm. We had a big dorm room so it must have been twelve feet. They had a big window in the room. Cathy and I could both stand side by side in the window and – they must be six foot windows. We couldn't touch the ceiling. They were huge windows. The rooms were just gorgeous. We had metal beds, and one wall was in dogwood print wallpaper and the other wall was in magnolia wallpaper, so they didn't exactly match, but they had a full theme –

INTERVIEWER: Now when you say just gorgeous, is that sarcastic?

PEGGY COOPER: A little bit sarcastic – with the metal beds and the metal furniture, and...

INTERVIEWER: So you were there six weeks. Did you go home on the weekends?

PEGGY COOPER: We did. We could come back to the campus in Atlanta, or your parents could pick you up and take you home. We did some of each. We weren't supposed to go to Lake Sinclair, we were supposed to pretty much stick to the campus. There were some rules. You weren't supposed to go places, but we managed to visit most of them.

INTERVIEWER: I'm sure you did. It's hard being that young and stuck there at the mental hospital for six weeks.

PEGGY COOPER: One night we had all gone to bed getting ready for clinical. We were asleep. I had a dream. I'm terribly afraid of snakes. Had a dream that I had fallen in a pit and snakes were crawling all over me. So I woke up screaming. I mean terrified, screaming. It was the kind where you didn't wake up instantly. You were still screaming, dreaming but you're up walking around. Cathy's bed was facing the window and mine was along the side. We'd done angled so we could get a breeze in. She said, "I woke up and heard you screaming." She said, "My heart was going ba-boom, ba-boom. I could not move. All I was thinking was they got Peggy. They're going to get me next." Then I woke up and realized what was going on. Our lights came on. It was a big u shaped building. We were in the middle of the U. Walked over to the window and looked out. All the lights came on, but not a soul came to our door.

INTERVIEWER: They heard you screaming.

PEGGY COOPER: They thought one of the rehab patients on the bottom floor had gotten one of us. Course it hadn't but . . .

INTERVIEWER: So did you feel safe while you were there?

PEGGY COOPER: Actually we felt very safe there. I just woke up dreaming of the snake. The next morning at the bus stop – there was a big bus that came because all of the buildings down there were like – there was a Macon, Central Georgia Mental Health Building, Southwest Georgia, Rome –everybody had their own buildings. We would get on a school bus type thing and they would take us to our buildings. I'm really claustrophobic. Always have been. You walked in and they locked the door behind you. I told my instructor, I said, "Sorry this is not going to work. I can't be keep it locked down here and know I can't get out." She says, "Well that's our policy." I said, "Well we're going to have to change the policy, because I

can't be in a room I can't get out of." So she talked to me a while and she said, "I've never done this before, but you're going to be the only student that's ever had her own key just in case you're uncomfortable." As long as I knew the key was in my hand and I could get out, I was fine, but I didn't want to feel trapped. That was the only time that I ever felt kind of uncomfortable. When we went to like the Binion Building which was for the mentally [criminally] insane who had been sentenced to Milledgeville, you had guards there that were with you and they protected you. Down there it was like a little community, so Cathy and I knew everybody on the police force, the fire department, we knew the mortician.

INTERVIEWER: They probably enjoyed having the young nursing students come.

PEGGY COOPER: We had a good time down there. We'd [the instructor would] start to say we're going to so-and-so rehab building today and Cathy'd say well we've already been, do we have to go? Where did you go? So and so took us.

INTERVIEWER: So the instructors, did they live down there?

PEGGY COOPER: They were not people that we knew.

INTERVIEWER: They were specifically for the Psych rotation.

PEGGY COOPER: They were nice to us. We'd go to the Geriatric Building and we'd get in there early in the morning when the patients would be eating their breakfast. They would see the students come in and they would all get up from the table chewing grits and eggs, you know, you could see them chewing, "I love student nurses! I love student nurses!" They would want to come and hug everybody. We would kind of form a circle to see who could get in the middle and get the most protected from them. It was an experience, too. There were some very sad things there because they had the building for the children with birth defects, a huge hydrocephalus before they knew to shunt them –

INTERVIEWER: I didn't realize they had that there.

PEGGY COOPER: Umm hmm. They had some of those. It was pitiful to see them. They were just like caged and some of the babies' heads were just so huge that it's just unbelievable.

INTERVIEWER: Back then they considered that a mental illness?

PEGGY COOPER: Well it was kind of archaic. They didn't have anywhere else to house them. They didn't have the centers for the developmentally challenged kids and

the parents of course couldn't take care of them. Another thing . . . we had the buildings where people would have their electroshock therapy.

INTERVIEWER: So did you have to participate in – did you have to help with that?

PEGGY COOPER: Well, this is archaic too, but the ones that were going to have their ECTs (Electro Convulsive Therapy) in the morning, they would line them up, and then the students would go in with the doctor and the nurse and of course they would strap them down. It's nothing like they do it now. They're not under sedation or recovery room or one of those things with an anesthesiologist. They would strap them down and then they would say we're fixing to do them. They would shock them. We were supposed to hold them. I said, "I don't know that I want to hold somebody you're going to shoot juice through. Oh it's not going to go to you." Anyway, they would have the massive seizures, and they would be post ictal and have to be recovered and usually their roommate sat with them while they recovered.

INTERVIEWER: Oh my goodness. Times have changed, for the better.

PEGGY COOPER: They're changed so much, yes, definitely for the best.

INTERVIEWER: That's amazing. Where else did you have clinical? Most of them were at Georgia Baptist.

PEGGY COOPER: All my clinical were at Georgia Baptist except for Psych. Then we went to Grady for . . . we had a pediatric department at the hospital but it was nothing big, so . . . we went to Grady for some of our pediatric for the more complicated cases and that was just shocking to me. I was a very naïve young girl from South Georgia, just turned 18 when I went to school. Probably I was 20 when I went to Grady to the pediatric thing. The first patient I had at Grady was a 12 year old with syphilis. She was in for treatment. I had two patients that week I was there – the 12 year old with syphilis was one, which was shocking to me, that a 12 year old could have that . . . The other was a beautiful, beautiful blonde-headed baby. She was almost two years old, and she was as pale as she could be. Big blue eyes, blonde hair, and the nurse said, "We're going to have a challenge for you today, we want you to teach this baby to eat." I said, "Teach her to eat?" "She's the milk baby." I said, "What is a milk baby?" Well it's a baby that the mother's never fed anything but a bottle. They lie in bed, prop it up . . . give them a bottle. When they cry they give them another bottle. And her H&H (hemoglobin and hematocrit) was something like three and twelve.

INTERVIEWER: Oh my goodness.

PEGGY COOPER: She was so severely anemic but she wasn't so symptomatic because her body had adjusted to the low H & H. She's never been introduced to food.

INTERVIEWER: How old was she?

PEGGY COOPER: She was almost two. She was walking. She was very immature for her age. Of course, nobody paid much attention to her. So they said, "We want you to start working with her and try to get her to eat food." Of course, everything you'd put in her mouth was . . . she didn't want anything in her mouth except a nipple. So I was trying to feed her. They had brought grits for breakfast. They were yellow grits. Even being a Georgian, I had never been exposed to yellow grits. I knew white grits and we ate those all the time but I'd never seen yellow grits. They had the children's table where I'd sit and my knees come up to my chin because of the little baby chairs and stuff. I was trying to get the little girl to eat, and she would shake her head no. I said, "C'mon these are good. They've got so much butter in them, see how nice and yellow they are." There was a little boy sitting at the table. He was probably about seven. I don't recall what was wrong with him, but he looked up at me and he said, "You crazy white woman. Them ain't regular grits. Them's yellow grits." I said, "Oh." He said, "And you don't eat yellow grits at Grady." I said, "Why not?" He said, "Don't you know if you eat yellow grits you always be coming back here crazy?" I said, "No." Those were the things I was exposed to. I loved "you crazy white woman."

INTERVIEWER: So funny. Did you do any other rotations at Grady?

PEGGY COOPER: We had maybe two days in the ICU (intensive care unit) taking care of patients. They were the first unit I guess that had a renal unit. So we went there for some dialysis, and it seems that I took care of - I'm not sure if the patient had a . . . if they needed a transplant. I'm not sure. They were working them up. That's what I went to Grady for.

INTERVIEWER: Did you do labor and delivery there?

PEGGY COOPER: No, we did that at the hospital. When I was in nursing school they didn't have the tower. They started building the tower while I was there. When I graduated they had the rough structure up. Then I went to work at the hospital working nights and I think we moved into . . . I graduated in '72 and I think we moved into the tower end of '73 or beginning of '74. Then I moved from 2 North where the orthopedics was to 5 Tower. When I was in school, labor and delivery was on the fifth floor on the west wing, and they really made some great advances in labor and delivery. Back then they brought the patients in and they prepped them. You had to shave them, give them the enema, then they would start giving them the Demerol when they would have the bad pains then rather than lying there . . . They really

didn't know what they were doing with so much Demerol onboard and it was pretty bad. The husbands didn't want to be in the labor and delivery room then because they really told their husbands off when they were in pain. The doctors would let the students participate, and they would like, let you hold onto them and deliver the baby, but with the doctor's help. Then you would clamp and cut. They were good to us. We had some fun experiences there too. We had a breach delivery when we were in there and . . . the little baby started coming out and he said, "Oh, here's the right foot," and somebody says, "How can you tell its right foot?!" and we said "Well, look where the toe is." So everybody got a big laugh out of that. Then the labor and delivery room, after we moved to the hospital, those rooms became the traction room for orthopedics. Where we had the big Stryker [Risser] frame we put on Risser casts, you know the body casts and stuff like that.

INTERVIEWER: I remember the Stryker beds, they were still using those when I was there.

PEGGY COOPER: Well this was a big frame that you put them in to put like Risser casts on – Risser tape is what it was.

INTERVIEWER: What was the table that –

PEGGY COOPER: And that was a Stryker frame too that you would move the cord patients. I guess Stryker made a bunch of stuff back then.

INTERVIEWER: They probably did.

PEGGY COOPER: We had the Circo-electric bed and –

INTERVIEWER: All those orthopedic contraptions.

PEGGY COOPER: Orthopedics, yeah. You know they started doing total joints when I was – I guess they must have started while I was still in school. I don't remember taking care of a patient then but after I got out of school on night shift I remember turning circle bed many, many times. I did not like the Stryker frame, you know for the cord patients. The [Crutchfield] tong traction. Those total joints then, they would come out on a Stryker [Circo-electric] frame and be flat on their back for a week before we got them out of bed and we would, you know, position the bed, tummy to back, to break the bed a little bit for the meals and stuff.

INTERVIEWER: Isn't that amazing how we thought that was the right thing to do.

PEGGY COOPER: Usually the total joints were in the hospital for probably ten to fourteen days.

INTERVIEWER: It's amazing.

PEGGY COOPER: It is amazing. So much progress. I remember when cholecystectomies had a huge incision on the front with a drain. Renal patients had a huge flank incision with the drains in, so nasty. Drainage stuff, not the patients were nasty but the drainage and stuff. I love all the laparoscopic procedures that they do. Total joints now go home in one day. I'm hearing now that for some of the anterior approaches they have the surgery in the morning and go home that evening. I think that's pushing it a little bit. I'm not sure what every insurance pays for, but . . .

INTERVIEWER: Not always a good thing to go home so early.

PEGGY COOPER: They've made lots of improvements, that's for sure.

INTERVIEWER: So did you go to Scottish Rite at all? Were there any clinical there?

PEGGY COOPER: We did go to Scottish Rite, but Scottish Rite was in Decatur.

INTERVIEWER: It wasn't where it is now.

PEGGY COOPER: Right over here at Oakhurst. And it's the Oakhurst community center now.

INTERVIEWER: Is that right? Okay.

PEGGY COOPER: I think Sharon Huron was the instructor that took us out there. We went in small groups. Sharon would always take us out and we'd work in the clinics with the doctors, mainly, changing casts, putting on new casts. After clinical, Sharon would always bring us back across the tracks downtown to one of the ice cream shops and we'd get an ice cream, and she'd take us back to school. Scottish Rite then, it was children's hospital but it had just one huge ward with bed, bed, bed. It was fun to go out there for clinics. The residents would go from the hospital.

INTERVIEWER: It was orthopedic surgery too, wasn't it?

PEGGY COOPER: It was, yeah. I don't remember if they did other stuff but we went for the orthopedic part. Then later on Scottish Rite moved out to pill hill. The city of

Atlanta is so fortunate to have three children's hospitals that all do such great work, and all have their specialties. Rehab Scottish Rite is great. The orthopedic program out at Scottish Rite at pill hill. Then all the stuff they do over here at Emory and the stuff with sickle cell that they do down at Grady. It's just amazing. We're just so fortunate to have those opportunities for our children in Atlanta.

INTERVIEWER: Oh I know. When you were there did you ride the Grady ambulance? I know they did when I was a student.

PEGGY COOPER: We did not.

INTERVIEWER: They hadn't started that yet. That would've been fun, wouldn't it?

PEGGY COOPER: Probably. We didn't do that. We did go out. We did public health.

INTERVIEWER: Oh did you do some public health? Okay.

PEGGY COOPER: We went out to one of the public health centers. I think we did two days. The center where I did public health, I remember the first day it was all women, gyn (gynecology) type stuff that they did. That was okay and then we did visiting nurse.

INTERVIEWER: Oh, okay that was very interesting.

PEGGY COOPER: Yeah. The area that we went with the visiting nurse had a really great visiting nurse. I think she was a Grady graduate. She was a black nurse. Had been a visiting nurse a while. Very nice lady. Very professional. She came to the hospital to pick me up. She didn't want me taking a cab out there where she was. She wanted to pick me up because she wanted me to be safe, which I appreciated.

INTERVIEWER: That was nice.

PEGGY COOPER: Some of the houses we went to . . . Oh that was during the time of – do you remember free commodities that was before food stamps. People went and they got boxes of, you know, cheese and rice and . . . uh . . .

INTERVIEWER: Staples.

PEGGY COOPER: Yes. We went into one house and you would've thought it was a warehouse for the free commodities because they had so many boxes in there. Why do they have so many? I'm not sure why, but it's not supposed to be this way.

INTERVIEWER: They were stockpiling.

PEGGY COOPER: I said, “Well, I didn’t know better I’d think the wallpaper in this house was water bug wallpaper because there were so many water bugs crawling on the walls, and in these boxes and stuff.” I said, “It’s a shame that all this is contaminated. It’s really wasted. Nobody would want to eat this stuff.” A lot of stuff was eye opening. I’d just never been exposed to a lot of stuff like that. Then I went with her to one of the senior high rises in southwest Atlanta, and I saw some of the patients there. Their neighbors would help them, but for a fee. They didn’t want to run to the grocery store for you unless you gave them a dollar or two to go, and stuff like that.

INTERVIEWER: Interesting.

PEGGY COOPER: One place we went was like a corner store, like they had little curb store on the bottom, and then the proprietor and his family lived above. There was a dark stairwell that went up to the patient we were seeing, the mother of the proprietor. When we got there she said, “Don’t be afraid, there are going to be several gentlemen who are going to meet us when we get here.” I said, “Okay.” So when we got to the store and we parallel parked on the street, these four guys walked up to the car. She said, “These are my friends. They’re here to protect me, you, and my car while I’m here taking care of the patient.” She said that it was such a bad neighborhood that if she left her car there might not be wheels on it when she came back out. So these guys were friends of the proprietor’s mother we were seeing, and they came to watch the car, and guard it. There were places back then that the nurses would have to call for a police escort. I think there are now, too, to go in, it was eye-opening, the things . . . and then I came back to Georgia Baptist where it was like a cocoon . . .

INTERVIEWER: Kind of a safe place there, wasn’t it?

PEGGY COOPER: It was.

INTERVIEWER: You had some great experiences.

PEGGY COOPER: Oh yeah. Lots of great experiences. Heard a lot from the doctors about things that had happened in the emergency room and –

INTERVIEWER: Yes, especially where the hospital was located, being downtown. They saw a lot of interesting things.

PEGGY COOPER: I had a lot of varied experiences. Had great experiences in the hospital. Had so many nurse mentors when I was a student. The nurses would just gravitate to you and take you under their wing. You remember them so fondly, and then there were a

couple of nurses who did not like student nurses and they did everything they could to make them miserable, and I remember them really well too, but not fondly.

INTERVIEWER: Of course not. You see that still today, and it's sad.

PEGGY COOPER: Well they say nurses eat their young, and I've seen it. I've seen it where they really mentor their young, too. I was very fortunate. I had many, many more mentors than I did the ones that want to gobble you up.

INTERVIEWER: That's good. So talk about the hierarchy among the students at Georgia Baptist, like the three classes, the freshmen, junior, senior. Talk about how you got your blue stripes and black bands and capping, all those kind of things.

PEGGY COOPER: Well you come to school, and until you've had your fundamentals course you're not allowed to work extra in the hospital. You know, you can work extra in the hospital but not in nursing. So my first job was working in the admissions department for money. Ms. Martha Norman was the Director of Admissions and she had somebody accompany each patient that was being admitted from Admissions, which doesn't happen much now as it did back then, because everybody came in because insurance wouldn't allow most of those folks in the hospital now. But, I would put them in a wheelchair, take them to their room, tell them about how to call light, the bathroom, all that kind of stuff, kind of welcome to the hospital, take them in introduce them to whoever is taking care of them on the floor, so I'm going to put them down in 388 or wherever they were going. That was my first job. I think I made – I think minimum wage was \$1.25 then, and I think I made like a dollar thirty-something, an hour. So I would do that a couple of times a week, after we would get out of our classes. Then a few hours and back over to the school. But back to fundamentals. When you pass your fundamentals, we had our cap, and there was a ceremony where you were presented with your cap, and stuff, capes and caps. Then in your junior year, when you had completed all your freshmen requirements, for your junior year, to denote you from the freshmen students, from the plain cap, you got a blue stripe on the corners of each side of the cap. Then you were really proud. We wore our caps proudly. Then when you completed your junior year, when you became a senior, you had a ceremony where they removed your blue stripes, and then a black band went on your cap. There was a ceremony for the blue stripe too, but then a big ceremony.

INTERVIEWER: What kind of ceremony did y'all have for the blue stripe?

PEGGY COOPER: It was just kind of a party-type thing, you know, you got your blue stripe, but then it was more like a banquet-type thing when you got your black band and wore a pretty dress and went to one of the restaurants downtown and had a nice meal, that type stuff. Then of course when you graduated you got pinned and your black band was

removed and – now people don't wear caps any more. I'm fine with that because working at orthopedics with a frame on the bed, it was always pulling, because you had to pin them to the back of your head. I was fine with that. As a matter of fact, I tried to make it so we didn't have to wear caps on our floor because of that. They told me no, to not bring it up again.

INTERVIEWER: When was that?

PEGGY COOPER: I'm not sure exactly. I was a head nurse then. I don't remember, but I was a head nurse for sixteen years on orthopedics, so sometime in that timeframe.

INTERVIEWER: We wore them when I first graduated in '81, for about a year or two, and then it kind of started losing favor, because they – but I worked in ICU too, so we had lots of poles and stuff there, but –

PEGGY COOPER: But I told them I said, "Okay, they say we have to wear our caps, so to prove a point I'm going to wear a cap all day long tomorrow, and see if anybody notices. So the next morning I went in and took a Mr. Coffee, coffee filter and put it on top of my head and pinned it in place and wore it all day long. The nurses on the floor noticed it and not another soul said anything about it.

INTERVIEWER: That is so funny! That's hilarious.

PEGGY COOPER: I just proved my point.

INTERVIEWER: Now the infection would keep nurses from wearing those caps.

PEGGY COOPER: Exactly. Miss Vivian Keith was one of my mentors. She was a supervisor for a long time and then went into infection control. She was a stickler for people doing what they were supposed to, to prevent infections. Her big thing was people sitting on the desktops. She would come in and say, "Get your ___ off that desk!" and they'd look at her like and she would say, "Do you want to sit there and write where somebody's sat?!" and she would just make them stop. Infection control. Yeah where the hats I – there's lots of things now. Then also with the male nurses coming in . . .

INTERVIEWER: They didn't have the caps. We used to do a lot of things. I remember – I never did but some of my co-workers would smoke during report. The doctors would take the charts in the back and smoke while they wrote their progress reports.

PEGGY COOPER: I grew up with a no smoking policy. I've never smoked. Didn't like it. We'd have patients that, you know, said, "Well I'm leaving this place if I can't smoke!" That's the policy sir.

INTERVIEWER: We used to allow smoking then.

PEGGY COOPER: Oh they smoked for years in the rooms. Then they smoked for years after the No Smoking policy came out. They were going to the bathroom and lock the door and then smoke, and then swear, no, you don't smell smoke in this room.

INTERVIEWER: It's amazing with all the oxygen and everything that they –

PEGGY COOPER: We had a patient – this was long after it was No Smoking – I came in one morning and I was pretty sure I was a Case Manager then. We came in and we had yellow tape – the police tape – from room I think 45 down to maybe 50. There were three rooms totally blocked off and I said, "Goodness, what happened?" "We had an explosion last night." I said, "What?!" "And a fire." I said, "An explosion and a fire?! What happened?" "Well this guy was smoking in 47 and his oxygen blew up," and I said, "Is he hurt?" and they said, "He's in Grady in the Burn Unit now." I said, "Really? Was it that bad?" They said, "Well, he's got some burns and he'll be taken care of, but it blew out all the circuitry from his room to adjoining rooms." They were saying, "We had to call his brother and tell him that his brother had been transferred." This was a homeless patient, too. I left off that part. He was homeless, and so they said they'd told the brother he'd been transferred to Grady to the Burn Unit, that he could go and visit him there, and his brother said, "Well I ain't surprised. You know that's why he's homeless now. He blew up his house smoking, and burned his house down. That's why he's homeless."

INTERVIEWER: Oh my goodness. Amazing.

PEGGY COOPER: Things that you do remember. What was the question you had asked me before that, that led into this?

INTERVIEWER: I can't even remember.

PEGGY COOPER: Okay. I do tend to go off when I think of something.

INTERVIEWER: That's okay. It may come back to you and you can tell it then. So then tell me about – how did the instructors at Georgia Baptist facilitate your acquisition of nursing knowledge and skills. Anything specific about how they taught you, and things that you remember about the instructors?

PEGGY COOPER: I just have really fond memories of some instructors. Susan Gunby was like my first instructors when I was in my fundamentals. It was just always fun because you involved the patient. She involved the patient in their care. You didn't go in and just do a procedure and walk out. It's like, "Hi, I'm so-and-so, this is so-and-so we're going to do this" – explained the procedure, and by the time you were halfway done with the procedure the patient was comfortable, laughing and talking with you. You learned a lot from people by how they treated folks. I remember Mrs. Gunby was just a great instructor. She was just a couple of years older than I, probably two. She was a great instructor and made you feel comfortable in your knowledge, never had a question . . . if you had a question that was a valid question, some people would say, "You should know that!" Well if I knew it, I wouldn't have asked you the rationale for so-and-so. She was always willing to have a teaching opportunity. If there was another student with me we would ask questions and there were just teaching opportunities. So you felt so comfortable with her, learning stuff. Um, there were also nurses that would, you know, took you under their wings and would show you stuff.

We had good clinical instructors. They would come over the night before we had our clinical and they would – I know when they did it with me, they would sit down with me and say, "We're going to pick out patients for tomorrow."

INTERVIEWER: - would sit there with you and make assignments –

PEGGY COOPER: Well when I was a head nurse. They would come over and say – since I made rounds with every patient, I made rounds with every doctor. I would come to know the patients and what was going on with them. "This one might be an interesting patient, for this reason. Don't assign them to this person, because this person's really rude and curses, and I don't want a student exposed to that." We'd go through and pick out patients.

INTERVIEWER: It was nice of you to do that.

PEGGY COOPER: That was fun. When I was a student they would come over and make your assignment, and then they would post while you were in class. They'd post who you would have the next day. Then you would go to the hospital after class and research the patient, found out their diagnosis, who their doctor was, what procedures they had had, what medications they were on, what treatments they had, and then you would go back to your room and you would research their diagnosis, surgery, you'd make medicine cards for what drugs they were taking. The next morning when you were setting up your medicines they would quiz you on, "Well what's this drug for? What's the rationale for this patient?"

INTERVIEWER: Were you allowed to use those drug cards, or did you have to have all that memorized?

PEGGY COOPER: You brought your drugs cards with you. They would ask you about them, and you should know, you know, what the trade name was that you, the generic name, what it's for, what the side effects were from it, how you could tell if there was an allergy or allergic reaction to it and stuff.

INTERVIEWER: Those drug cards were very much a source of stress, weren't they?

PEGGY COOPER: Especially if you went over and you had a patient with a relatively simple diagnosis but they were on 14 medicines because they weren't – they might be in – That's the thing about orthopedics, I love it because you kept up with everything in medicine. They may be in for a fractured ankle but they may have respiratory problems, cardiac problems, endocrine problems –

INTERVIEWER: Diabetes, hypertension, all of those –

PEGGY COOPER: - and so as a student you were hoping you didn't get a patient that had all those because you had to look up every medicine you had a card on. Sometimes you'd spend hours on these sick folks, but that was a part of the learning process.

INTERVIEWER: Were there any events that you remember occurring while you were in school at Georgia Baptist that helped make you a better nurse?

PEGGY COOPER: I'm sure there were many, but . . . [long pause], I just remember how much you would learn by talking to your patients, not just doing a treatment on them, or giving them a medication and walking out of the room, but developing a rapport with them – how much you could learn just from having a rapport with them, and how they were going to function once they left the hospital. I felt like that that was important to you too, and . . . I'm sure there were a lot of specific things that happened that – I should have thought about that a little bit beforehand, but –

INTERVIEWER: No, no worries, we can come back to it, too.

PEGGY COOPER: I remember I had a patient – back when I was in school or ICUs (intensive care units) were very small. Surgical ICU –

INTERVIEWER: They were new. That was a new concept then.

PEGGY COOPER: We had like six ICUs, surgical beds, four medical beds. Didn't have neonatal stuff. Didn't have neuro-surgical stuff. You could learn from those things. I remember we had the medical ICU. Had a coronary patient, a lady, she was 90 years old and

she'd had an MI (myocardial infarction). Back then when you'd had an MI you couldn't watch TV, couldn't read the newspaper. Couldn't drink cold ice water. You know – you don't want to stress the patient. But she was so stressed and I was talking to her and I said, "What are you so upset about?" and she said, "Well, they tell me I'm not going to be able to drive for four to six weeks." She said. "I'm the one that takes the old folks to church. So who's going to do it?" I thought oh how wonderful. She's 90 years old and she takes the old folks to church. But then, by building on that knowledge, you could kind of work with her nieces and nephews, about how to get them to church and stuff like that. It's not always what's just going on at the moment in the hospital. You need to see the whole picture.

INTERVIEWER: That helped you to see –

PEGGY COOPER: Or mothers that have three kids at home, that have no one really to watch them, how were they going to get to school, those type things.

INTERVIEWER: I bet that was important in your career in orthopedics because you had to look at that, when the patient was going to be discharged, like what kind of life functioning were they going back to.

PEGGY COOPER: Then after I stopped being the head nurse, that was one of the sentinel moments in my life, too, when I decided not to be the head nurse, again. I felt like the administrator and some of the people were not being supportive of the nurses and the nursing staff. I had developed the matrix for how many patients you can have in a day and I said, "You know this is not fair to me, it's not fair to my staff, and it's certainly not fair to my patients. They give people more than they can physically do and not get the results you want." He said, "Well, it's going to get worse before it gets better," and I said, "Really?" He said, "Yeah, if you don't like it now, you might just better leave." I thought oh my goodness, he didn't say that. But he did and so . . . Brenda Nave was –

INTERVIEWER: I remember who she was.

PEGGY COOPER: She – at that time Case Management had not become Case Management. It was still, Discharge Planning and Utilization Review. They were doing the new concept – they were blending - they were fixing to start the new model, and Brenda had said to me, "Please come to work in my department. I've been trying to get you to come to work there." Johnnie Forgay, do you remember Miss Forgay?

INTERVIEWER: I knew who she is.

PEGGY COOPER: Okay. She died this year. Miss her a lot, but she was just such a proponent of discharge planning and she had – even when I was in nursing school – she was

doing this when intrastromal therapy was in its earliest part and she was trying to get people to focus on discharge planning. So she would always want me to go and work with her in discharge planning and Brenda had been wanting me to do it. Brenda was saying, “We’re starting a new model. I wish you would just come work with us.” When he said, “It’s gonna get worse before it gets better. If you don’t like it you need to leave.” I said, “Hmm, okay. So he left and I promptly walked to the phone and called Brenda. I said, “Are you busy now?” She said, “Well, what do you need? I can stop.” I said, “Do you still have an opening in your department?” She said, “Yes I do.” I said, “Well when can I come and interview?” She said, “Can you meet me in the Parkway lobby in five minutes?” I said, “I can.” So I went down there

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INTERVIEWER: That was a quick decision.

PEGGY COOPER: I had been kind of thinking about it. Somebody would say if you don’t like it, leave . . . I didn’t feel valued at all, with that. So we went down and I said, “Okay when can I start?” You had to wait to the beginning of the next pay period. So in about a week or so I was transitioning to Case Management. I did that the last 22 years of my career. I did Case Management. That’s when it was integrated to that and Discharge Planning.

INTERVIEWER: It’s nice to have that change, to do that. See the patients get better and leave the hospital and know that you’ve helped them to do that.

PEGGY COOPER: It comes full circle.

INTERVIEWER: So tell me about any extracurricular activities you were involved in that contributed to your knowledge development as a nurse, while you were at Georgia Baptist. Were you involved in any extracurricular activities?

PEGGY COOPER: You mean related to –

INTERVIEWER: Well, anything that you were involved in there at the school.

PEGGY COOPER: As a student? As a student, since I was from Southwest Georgia I didn’t get to go home every weekend. I usually went home every other weekend. My dad would come and get me because he didn’t want me riding the bus. So I worked a lot extra and had several friends that worked extra. We had a great time working extra, and learned so much.

INTERVIEWER: I did the same thing.

PEGGY COOPER: We didn’t have a lot of extracurricular activities because we worked on Friday nights and Saturday nights usually, if we didn’t have something special to do.

We worked extra for money. Learned so much from just being there. Like as a junior and as a nursing skill I gave medicines . . . Cathy and I would work extra together. We had 42 patients. We'd divide the floor and that's way before you had a PCA (patient care associate), so we may give a hundred PRNs (as needed) in a shift.

INTERVIEWER: They let you do that as a student nurse working extra on the weekends?

PEGGY COOPER: As a student nurse. If you were in good standing in school, made good grades, didn't have any disciplinary thing, you could do that. So we would give all the medications and all the PRNs. And that was way before the Pyxis. That's when you still had to do the . . . and everybody worked eight hours then, too. So every shift you had to reconcile your drugs. We always – that was a focus. They had to be right. As a student doing those, and like I say we'd give a hundred PRNs so on an orthopedic unit, 42 patients a shift, and signing out each Demerol...

INTERVIEWER: Did the nurse go behind you – the RN (registered nurse) go behind you and check to make sure . . . ?

PEGGY COOPER: She was busy doing charge and taking off orders and that kind of stuff. They didn't let just anybody go and do. You had to have passed your courses and know that you were trustworthy –

INTERVIEWER: That would never happen today.

PEGGY COOPER: No. There were so many things that happened then. Like my first job . . . Well let me tell you about my job interview. I graduated and was ready to start work. Bobbie Torok was assistant director then and she did all the interviews for the new graduates that wanted to come to work. Well I had worked there so much I knew just about everybody in the hospital, you know, way before I graduated. I knew the people. My interview was at a time and stuff and I went over and they said, "Miss Torok's ready to see you now," so she says, "Well, hey, Peggy how you doing?" I said, "I'm fine Miss Torok. How are you?" She said, "I hear you're about ready to start your career working at Georgia Baptist." I said, "Yes Ma'am." She says, "Okay, you know we don't hire new graduates for the day shift. So do you want to work three to eleven, or eleven to seven?" I said, "Eleven to seven." You know, Cathy was going to work eleven to seven and we were going to be roommates out of college. I said, "eleven to seven." She says, "Okay listen, why don't you take a couple of weeks off between graduation and starting?" We have orientation starting on this day and that will give you two weeks off. I think it would be good for you. I said, "Okay." She said, "Well we'll see you on this day in orientation." That was my interview.

INTERVIEWER: So did you find that a lot of your classmates worked at Georgia Baptist after they graduated?

PEGGY COOPER: In the beginning there were quite a few of us that stayed. But later on, most of them had started families and moved with their husbands somewhere, so in the end there were a lot of nurses there that had gone to Georgia Baptist not particularly out of my class, so we still had a bunch of Baptist nurses there, but not so many from my particular class.

INTERVIEWER: How about any of the activities that they had at the school like student government, or . . . Did they have the choir back then?

PEGGY COOPER: I wasn't in the choir. Cathy played on the basketball team. They had the travelling basketball team. We did, you know, vespers and stuff. We did a bunch of stuff with Georgia Tech. The Baptist Student Union. We did a bunch of stuff with them.

INTERVIEWER: Square dances? Were they having the square dances then?

PEGGY COOPER: I don't remember going to a square dance.

INTERVIEWER: They had those when I was there.

PEGGY COOPER: Okay, I remember doing that. I must – we had a student activities director named Sue DeLong when I was there. She did so much to help the students experience Atlanta. You remember Theater of the Stars? Well she would get free tickets to the first night of Theater of the Stars, like when they first come to town the first night, opening night was on Tuesday or Wednesday. It was in the middle of the week. So most people didn't come until Friday and Saturday nights, so they would have extra tickets and she would get free tickets for us. So in the summertime when Theater of the Stars came, we went to every Broadway play that came to Atlanta.

INTERVIEWER: That's wonderful. At the Fox? Were they at the Fox?

PEGGY COOPER: No it was at the Civic Center, right down the street. So we would go down there. We just had so much fun and it just broadened our horizons, our experiences, and then you would, "Oh yeah, I saw so-and-so." "You did?" I'd say, "Yeah, we had free tickets." "Free tickets? How'd you manage that?" Some of the Braves games at the old Atlanta Fulton County Stadium, she'd get tickets and we'd go to the ballgames. She was real involved with all the capping, the blue stripe, black band, she was our activities person. She was so good. I think she was a nurse. She was a real mentor to people and trying to let people have a great time. We were really spoiled. Cocooned – I'll say that. We were cocooned.

You've probably talked to other folks, but you know you enter nursing school. You knew you were going to have a roommate. You usually corresponded with them, a little bit. You met them on the day you came down. My tuition for the first quarter – we were on the quarter system – was \$150 a quarter. That's my first year. For that, you had a dorm room – and the Sewell dorm was only a few years old – I think it was built in '67 or '68, something like that. I started in '69, so it was only a couple of years old. It was twelve floors. Had an elevator. Had a classroom in the building.

INTERVIEWER: So you didn't even have to go outside, did you?

PEGGY COOPER: We did. We had to go outside because we'd go over to the gym. We had our own gym with a swimming pool, bowling alleys, basketball court, running track, around the court. Major Netherland was our – did you know Major?

INTERVIEWER: She was there when I was there.

PEGGY COOPER: We just had the best time, but all on our little campus. Who else had a swimming pool, bowling alleys, free to the students to use? We had that. Your dorm room was suite style. You had two girls in a room. You had your own single bed, you know, it was built in with a mattress and stuff, you had your study area desk and books above. You had a closet with drawers and shelving. You had all this. You had in between – suite-style – you had a bathroom that had an enclosed shower, enclosed toilet, two sinks, cabinets, big mirror, so we got – and then you had suite-mates on the other side. Okay so that's part of your \$150 there. You had three meals a day, then the cafeteria with all sorts of choices.

INTERVIEWER: It was a good deal.

PEGGY COOPER: Your books were included, the education, if we went to outside clinical they gave you a cab voucher to get you there if your instructor didn't take you. If you were going to have an on-site instructor from the hospital you usually rode with the instructor. But if you were going somewhere – like when I did the visiting nurse, community health, public health type of stuff – gave me a voucher for a cab, took me where I was going. They gave you money for lunch.

INTERVIEWER: Oh my goodness! All for \$150 a quarter. I don't know how they afforded that.

PEGGY COOPER: Your uniforms were included. Now in the suite, they provided your toilet tissue, your soap, your towels, your bath cloths, your linens for your bed, a blanket. Every room was decorated the same. You could redecorate if you wanted to. They had maid

service once a week, the maids came and dusted your room, vacuumed the rooms, and cleaned the bathrooms.

INTERVIEWER: You did live in a little cocoon there.

PEGGY COOPER: All your dirty linen went to the laundry and the maid when she came, the housekeeper, she brought you new towels, bath cloths, made sure you had plenty of tissue for the next week. We had a laundry with a washer/dryer, ironing board, iron, all that stuff, and it happened to be – I lived in 1019 for all my years, so I was right there next to the laundry room. About the only thing that you needed that wasn't provided was your regular street clothes. I did have to buy my own clinics and hose. Clinics were \$15 or \$16 when I – the first pair – and hose, you know. That was the biggest expense. You had to wear support hose. All that was provided to you. When I worked all those extra shifts, if you were working eleven to seven or three to eleven, you went by the cafeteria in the hospital before you went up, and they gave you a bag lunch with a sandwich, a bag of chips, a piece of fruit – either an apple a banana, or something like that – and a soft drink. So you wouldn't be hungry when you got off. All that for \$150.

INTERVIEWER: That's amazing when you think about that. My students today would not want to hear that because one book is \$150.

PEGGY COOPER: It's what, thirty-five, forty thousand dollars a year now? What is it to go there now?

INTERVIEWER: Tuition is about ten thousand a semester. Two semesters a year. So twenty thousand, and then books on top of that.

PEGGY COOPER: That doesn't include your housing and stuff.

INTERVIEWER: No it doesn't include any of that. That's a lot. It's just so expensive. So each floor had the big living room area too, and the little kitchenette, and the two phones for 40 girls.

PEGGY COOPER: Had two pay phones. Had the TV there, sofas. Every floor had a student advisor, you know, upper classmen as an advisor, and a house mother that took good care of you. Had an intercom in your room so if you had a guest downstairs they would tell you your guest had arrived. Another thing, the receptionist downstairs, when you would leave the building – with a date, or when your parents came to pick you up for the weekend – you had to sign out, the time you were leaving, who you left with, where you were going, your expected time of return, and that was all for safety stuff too. Some people of course didn't like that.

There were a bunch of rules, and you didn't want to be the one that had to go before student council for infractions.

INTERVIEWER: So that's where – you went in front of the student council.

PEGGY COOPER: If you did something, you know there's class one, class two, whatever, but most people.

INTERVIEWER: And you had the big living room downstairs.

PEGGY COOPER: Oh, yeah. Had the post office boxes down there, then they had the big living area, and then – you know about the dating booths.

INTERVIEWER: We had other names for it.

PEGGY COOPER: The dating booths in the back for a little privacy, with no doors, open, space on the bottom, feet on the floor.

INTERVIEWER: Was that a rule? You had to have your feet on the floor?

PEGGY COOPER: No guys above the first floor, except accompanied by a house mother. It had to be something like maintenance or Open House or something. Although there was a stairwell behind the dating booth. I'm not sure that that door was always locked. Could have been that somebody might have gone upstairs without . . . I don't know about that but I heard stories.

INTERVIEWER: It was a different time then, wasn't it?

PEGGY COOPER: It was. We definitely were cocooned, and well taken care of.

INTERVIEWER: Now did they have commuter students? Not everybody had to live in the dorm then.

PEGGY COOPER: We had a few married students. I think if you were married you could live away, but if you weren't you had to live in the dorm.

INTERVIEWER: Do you think that environment of most everybody living there together contributed to your education?

PEGGY COOPER: Well we studied together. Cramming really. I don't remember if y'all did this or not but the Krispy Kreme? You'd make a Krispy Kreme run about nine or ten o'clock at night? Before curfew, somebody'd go over there and get some Krispy Kremes.

INTERVIEWER: Down there on Ponce de Leon? Yeah, absolutely.

PEGGY COOPER: The community's changed so much since we were down there.

INTERVIEWER: It wasn't a very safe area, then.

PEGGY COOPER: When I was there it was not a very good environment. There was a pink liquor store where the . . . It was the Louie D. Newton building and then it was a nursing home and then . . . it has evolved over the years.

INTERVIEWER: Now I don't even recognize it when I go down there.

PEGGY COOPER: There was a pink liquor store down on the corner there and you were not allowed to cross that street. There was a Milton Bradley down there where we went to get our supplies and stuff. When I first got there, there was an A & P (grocery store) across the street there where the Mercer pharmacy school was. That was there, and then where the 285 building and the 315 building and the parking lot are now, that all belonged to the hospital, too. It used to be nursing dorms before my time, but I think they went away in the . . . Sewell's dorm opened in '66 but they used them as ancillary buildings you know. Now all that's gone, and Highland, you wouldn't recognize, it's all so gentrified now, mid-rise with retail on the bottom, super restaurants, all that. Ponce City Market. Everything. The old Fourth Ward is the in place to be now.

INTERVIEWER: The whole area. We didn't go out, hardly, because it was so dangerous.

PEGGY COOPER: We could walk across to where the 285- not 285, the 340 building – where Chick-Fil-A is? You could catch a bus on the parallel on the street corner there. You'd take the number 16 downtown. It was Macy's – I mean, it was Davison's when I went down there. It turned into Macy's and then it was Rich's, the big store downtown where they used to have all the Christmas and stuff. We learned our way around downtown by taking the bus downtown, switching the bus, going out to Lennox. You learned your way around. When you wanted to know where you were you'd stand there and look and see and oh, there's a building, you could look downtown and see, that you could recognize, so we need to go this way. We had great experiences down there.

INTERVIEWER: How about some struggles you encountered, while you were there?

PEGGY COOPER: In nursing . . . Well I didn't graduate. Did they tell you that?

INTERVIEWER: No. Explain that. You must have graduated at some point.

PEGGY COOPER: I was the oldest of four children. I had a little brother who started first grade when I started nursing school. Well my senior year I had gone home, like before graduation. His first grade class had all come down with the mumps. He was such a little snuggle bunny, so sweet. We had a great relationship, but anyway. I didn't know it at the time but I got the mumps. And so, got back to school and I was sick as a dog. We had student health then that took care of all your needs, got your referrals and anything. Well anyway, I got the mumps. Got them on, I think the left side, and was really sick, had to be treated in the emergency room because I was dehydrated and all that kind of stuff, and vomiting. They thought I had pancreatitis which was one of the side effects from mumps, but anyway. My dad came and got me and took me home. My sister was in school in Albany. And I got home one day. He got a call the next day, you need to come get your daughter . . . she's got the mumps. We had the mumps at the same time. So I missed all the senior week activities and graduation. I got almost over the mumps on the left side and I got them on the right side. So I was out for like two weeks. Everybody graduated and went on, and I graduated but I didn't have a graduation.

INTERVIEWER: So what kind of activities did they do for senior week . . . that you didn't get to go to?

PEGGY COOPER: They had a senior breakfast that was a big thing. They had a senior skit, where the seniors – kind of a roast toast type thing where they roasted the instructors, the doctors, some of the things that happened there. It was just a fun thing. There wasn't much class that last week, did a lot of little activities and stuff. I missed all those. I had just a great experience down there. Everything was good. Then I went to work there and worked there for almost 42 years. Watched the neighborhood change, healthcare changed so much with insurance, managed care, all the development that made healthcare so much easier, new equipment, new procedures.

INTERVIEWER: How long ago did you retire?

PEGGY COOPER: April 26, 2013. I was just a few weeks shy of my 62nd birthday. So I've been retired a little over three years now. I thought I would really, really miss nursing, but I think in the job that I was doing, I was working about 60 hours a week, for 40 hours of pay. You could tell things were never going to be an 8 hour day. I miss the people but I don't miss the stress. I loved being a nurse. Wouldn't change it if I had to choose a career again I would still be a nurse. The only thing that I would probably do differently is once I graduated I would have gone on and gotten my bachelor's degree.

INTERVIEWER: Did you go back to school?

PEGGY COOPER: I didn't. It just became so -

INTERVIEWER: It didn't really affect your career, it doesn't sound like. Do you think you could have done more if you had gone back?

PEGGY COOPER: I could probably have done different more. You know? It wouldn't have been what I wanted to do. One of my mentors used to call – she said there's two types of nurses. There's a nurse that likes to get her hands dirty and take care of patients, and there's a clipboard nurse. I didn't want to be a clipboard nurse. If I'd gone back– and you don't have to do that, you can choose what pathway you want to take with your advanced degrees and stuff. Got some wonderful people that do have advanced degrees that aren't clipboard nurses but back then that's what they called them, clipboard nurses. You would've never had it hanging over your head that, well next year they're probably going to – if you don't have a BSN (Bachelor of Science in Nursing) you may not be able to work in the department. You didn't want that stress hanging over me, but it didn't really, it never really came to fruition.

INTERVIEWER: There are some hospitals, like the ones that want magnet status, they have to have a certain number of, percentage of bachelor's degrees and some nurses that don't have a bachelor's degree now have a hard time finding a job if they go to one of those hospitals and there's more than one candidate and one has a degree and the other doesn't.

PEGGY COOPER: Not hard for them to choose which one they'd take.

INTERVIEWER: Back when you graduated there weren't that many baccalaureate programs.

PEGGY COOPER: Of course we needed nurses and we still need nurses. I think we're at a point now where nursing – we're at a critical shortage. Think we are going to see it a lot more in just a short period of time, as my age group's aging out and retiring.

INTERVIEWER: I think that we will, plus everybody's living longer, so more patients. So let's talk about the 70s specifically, things that were going on in the country. The Vietnam War was still going on when you were in school. That ended in '73. We had the political issues with Nixon and all his improprieties there and by the end of the decade Carter was the president – down there from around where you were from.

PEGGY COOPER: I had dinner with him when he was a senator.

INTERVIEWER: Oh did you? But the country was like – the economy was so bad then, like with the gas lines and all those kinds of things. Did any of that affect your decision to go into nursing, or choice of school, or anything like that?

PEGGY COOPER: Not really.

INTERVIEWER: I mean \$150 a semester, but that was a lot of money then.

PEGGY COOPER: It was. It didn't really affect me because I was cocooned in school but I was cocooned as a child too, so I didn't have to worry about what a lot of kids worried about. We always had shelter, plenty of food. I didn't always have everything I wanted, but I always had everything I needed, and I always knew I was loved. So that's a cocoon in itself.

INTERVIEWER: A wonderful cocoon.

PEGGY COOPER: Yeah. I didn't have to worry about things, you know.

INTERVIEWER: Your brother was younger. You didn't have any older brothers?

PEGGY COOPER: Well I'm the oldest. I have a brother that's 14 months younger than I, then I've got a sister that's four years younger, and then my little brother is twelve years younger.

INTERVIEWER: Your brother that's just younger than you, he didn't have to go to Vietnam?

PEGGY COOPER: He didn't.

INTERVIEWER: Your dad didn't go to Vietnam?

PEGGY COOPER: No. My dad . . . Well I was born in '51, so my dad didn't have to serve. He was too young for World War II and too old for – well he was a father during the Korean War, so yeah he didn't have to serve.

INTERVIEWER: You weren't really affected by that.

PEGGY COOPER: Although I knew some people a little older than I that did go to Vietnam, none of my close friends had to serve. I've got some friends that served that my classmates married. They were a little bit older. They did serve. They have some horrendous memories and stuff. It didn't affect me.

INTERVIEWER: That's good.

PEGGY COOPER: It does sound kind of like I was sheltered.

INTERVIEWER: I felt like I was, too. I had come from a pretty sheltered upbringing and then go to the big city. We were sheltered there. The first realization I had that people weren't like me was when we had to ride the Grady ambulance and we went into some of the housing projects in downtown Atlanta. I didn't realize that things like that existed in the United States. So I totally understand where you're coming from, feeling like you lived in a little cocoon. My dad, he did serve. He was in the Army for 30 years. He was in World War II, and Korean, then Vietnam. Then he got out. He was an engineer so he didn't do any fighting but you know I don't remember much about it, at all, just that he was gone and then he came back.

So one last question. Tell how the education you received at Georgia Baptist facilitated your transition into nursing practice. Kind of already talked a little bit about that.

PEGGY COOPER: Well when I graduated I was prepared to be a nurse. I didn't have to learn nursing after I graduated. A lot of that is because I worked extra so much and had so many great mentors that helped me, while I was working extra. They would say, "What are y'all studying next week?" and I'd say, "We're doing badge packing next week" and they'd say, "We've got a patient. Come on. I'll just take you down there. Come on, you are going to learn, have you inserted a Foley?" Well we did on Annie or Nellie or whatever her name was. "You can't learn how to insert a Foley by sticking it in that thing. Come on, let me show you how."

INTERVIEWER: It's different on a real person.

PEGGY COOPER: Yeah. I learned so many things from working extra and having good mentors that wanted to teach and show you how to do things.

INTERVIEWER: You just felt like it was a smooth transition?

PEGGY COOPER: It was a very smooth transition.

INTERVIEWER: You didn't have any trouble getting a job?

PEGGY COOPER: I didn't have any trouble getting a job and out of orientation. We had two weeks of orientation. And one of was like classroom and one you worked on the floor, which I'd already done so much so that was kind of redundant. But when I went to work eleven to seven, the first three nights I was the nurse on the floor – as a graduate nurse, now – I hadn't even taken boards. They pulled a nurse from the day shift to be with me the first three nights. I remember Jan Rogers McLendon, Benton now, she worked with me. Betty Buchanon worked with me. They worked with me three nights. Then after that I'm on my own with two nursing assistants and 42 patients. Now back then, the charting was a whole lot simpler, but I gave all the medications at night, made sure all the lab work was done, made rounds every hour with a

flashlight. It was when the beds – you know you had to crank the beds up. They had the step stools that were metal. It's a wonder I don't have knots up and down my tibia from running into those things at night, to try not to wake the patients. My first – did I tell you how much I made my first job?

INTERVIEWER: No.

PEGGY COOPER: Well, working night shift, you got the big differential, which was twenty cents. Three to eleven was ten cents. Eleven to seven was twenty cents. My base rate was \$4.09 and twenty cent for working the shift diff. I made \$4.29 an hour my first job.

INTERVIEWER: That was probably pretty good money, though?

PEGGY COOPER: Unfortunately it wasn't a whole lot less than the experienced nurses were making then. They didn't get raises back then the way they should have. I had some super great mentors then, I remember so well. They were great.

INTERVIEWER: Do you feel like because you're from outside the metro Atlanta area you didn't go home on the weekends and you worked. Did a lot of your classmates go home on the weekends and didn't work, you said?

PEGGY COOPER: A lot of us didn't work extra. I went home every other weekend. Just had a little extra spending money.

INTERVIEWER: And the extra experience.

PEGGY COOPER: The experience is what was so good about it. You learn so much and develop such great relationships with people. And then when you got out and started working you already had these mentors that were looking out for you and wanted you to excel in your career and be successful in everything you did. Just, it was a different age.

INTERVIEWER: Did you think about going back to your hometown and working or were you determine to stay in Atlanta?

PEGGY COOPER: I wanted to stay in Atlanta. I loved my home. I still go down there. As a matter of fact I'm going tomorrow. The hospital down there was like a 30 bed hospital. The opportunities were limited. And usually the people that usually went back were the ones that married an old boyfriend and then started a family down there, worked there.

INTERVIEWER: So you're glad you stayed in Atlanta?

PEGGY COOPER: I am. I feel like I had a lot more opportunities up here to do stuff and feel like working in an orthopedics was an education in itself because if somebody's got a fractured ankle it doesn't mean they don't have all the health issues associated with it. We were able to keep up with everything that was going on. We didn't deliver too many babies on my floor. It was not only your nursing mentors, you had physician mentors too that wanted you to succeed and would show you knew things and we had the residency program.

INTERVIEWER: Do they still have that?

PEGGY COOPER: Yeah. Then we became a trauma center. You learn so much from trauma. That broadens your horizons too because then you get to interact with Scottish Rite, you know, because they take up to 21 (years old), so we'd have a lot of 16, 18 people, on up, people go there. Shepherd (Spinal Center), I kind of, you know, know when Shepherd started and I have friends that work at Shepherd now. That's a fabulous place, so...

INTERVIEWER: We're fortunate to have Shepherd here in Atlanta. That's for sure. Well you've had a wonderful career and I know they were sad when you retired.

PEGGY COOPER: I've had a wonderful career. Some people may have been. . . . It was a great career and I met many wonderful people and would do it again.

INTERVIEWER: That's all the questions I have. Do you have anything else you want to add? You've told a lot. This has been great.

PEGGY COOPER: Well thank you. I've enjoyed it. Just brings back memories, you know.

INTERVIEWER: Reminiscing is always fun.

PEGGY COOPER: Some of these stories have been told over and over again but for the ones of us that lived through it.

INTERVIEWER: Sometimes you tell stories so many times you think, did that really happen or did I just tell it so many times I think it happened 1

PEGGY COOPER: Yeah, we had many varied experiences.