Tony Goodrich – Retro Riley – National Black History Month Retro Riley Post

Tony Leon Goodrich, A.R.I.T. (registered inhalation therapist), 1936-2001, was the first Chief of Pediatric Respiratory Therapy for Riley Hospital for Children. He rose through the ranks of the department, beginning as a respiratory therapy technician in the late 1960s-early 1970s. Tony led the way, not only as an African American in a key leadership role at Riley Hospital but as a leader who inspired his colleagues to "see no color" in their interactions with each other, coworkers, friends, families, and with patients. He inspired an uncompromising compassion and kindness and willingness to always go beyond expectations for excellence in patient care.

Tony's daughter, Tonya Goodrich Pinner, described her father in this way: "*The man that would not give up.*" She recalls that following graduation from Arsenal Tech High School, Tony explored different careers to support his family, always in search of opportunity that would offer long-term, fulfilling, and rewarding professional and personal success. And then, he found what he was looking for. Tony was one of the early students to enroll in a new program in the late 1960s at the I.U. Medical Center, most likely the Indiana University School of Medicine's Division of Allied Health Sciences' first ever 2-year Associate degree program in Inhalation Therapy (today known as Respiratory Therapy). Around the time this program began, most inhalation (respiratory) therapists trained on the job and that was what Tony certainly did when he came to Riley Hospital.

Early on in his career, Tony was one of the team of over 100 Riley Hospital medical professionals who cared for Laura Kay Knuckles, who lived much of her 4 years of life at Riley Hospital, 1968-1972. Laura Kay Knuckles was spotlighted in a recent Retro Riley post. For Tony, like so many others who cared for Laura Kay over 50 years ago, Laura Kay "was personal." Tony cared for Laura Kay for several years. Tony's daughter, Tonya Goodrich Pinner recalled that Laura Kay's father, Frank Knuckles, long ago said he knew how much Tony loved her and wanted to do everything possible to allow Laura Kay to have a better quality of life. He could see it in Tony's eyes.

Tony's dedication to the field of Respiratory Therapy was recognized in 1972 when he became the first Chief Respiratory Therapist at James Whitcomb Riley Hospital for Children In his new role, he joined with William L Hilderbrand, M.D., Janet Hillard, D.O., and Richard Schreiner, M.D., to write an article, "Use and Abuse of Oxygen in the Newborn" that was published in the *American Family Physician* in September of 1978. Tony also contributed along with Richard Schreiner, M D. and Jeffrey A. Kisling to a chapter titled "Delivering Oxygen in the Newborn" that was published in a book called *Care of the Newborn*.

As Chief of Pediatric Respiratory Therapy, Tony *listened* to the Riley Hospital Therapy team. One colleague, Jeff Kisling, remembers:

Tony recognized the value in having teams of respiratory therapists specialize in NICU and PICU. He gave me one month to design a curriculum for NICU specialists. This included lectures and clinical practice. I think the program was one month long, and we used it for several years. When I was director of the respiratory therapy technician program at Columbus/Bloomington Indiana Vocational Technical College, Tony suggested my students do a research project on which manual resuscitator delivered the highest concentration of oxygen. The results clearly showed the Laerdal manual resuscitators delivered the highest oxygen concentration. We published the results in the Journal of *Ventilation*, a Midwest RT

journal. Riley was using the Hope manual resuscitators at the time. I was shocked when Tony told me the department was replacing all the Hope bags with Laerdal resuscitators. He enjoyed my shocked expression and asked if I didn't believe our research results. Tony's confidence and embracing of our research results gave me a greater appreciation of the possible consequences of research projects.

Another colleague, Jan Mills Pike, recalls her time as a respiratory therapy student at Riley Hospital in 1974:

Tony was the first African American person that I got to know. I grew up in rural Indiana and had limited exposure to people of color. Tony welcomed students in the department and taught us about modifying equipment for pediatric use. He encouraged his staff to think outside the box, which let us adapt ventilatory support for kids and let them be mobile. Tony was a great team leader and made it fun to come to work and work together. . . Tony was such a positive influence and helped all of us to treat each other kindly no matter what our skin color. That was just Tony's way of treating everyone. *Kindness.*

Tony's daughter, Tonya Goodrich Pinner, echoed Jan Mills Pike's words: "Tony didn't look at people skin color, he was rather colorblind in that nature, he wanted people to look at him the same way. He raised his children to be the same way."

And, yet another colleague, Sue Kinley, credits Tony for her positive beginning as a respiratory therapist for 14 years at Riley Hospital:

I met Tony on our first day of orientation to Respiratory Therapy education (inhalation therapy as it was called when I started). He made us feel welcome while he gave us an overview of the department. I knew that once I graduated, I wanted to work for him. I always felt that if I had a question or a problem, I could go to him for an answer or help and felt that he really cared about our department and the staff. I could not have had a better first experience of working in RT. Sue started in 1973.

And, yet another colleague, Pat Wylie Cross, who served as a respiratory therapist at Riley Hospital from 1971-1989, remembers:

Probably Tony's most impressive people skill was that he was proud to be an African American man and he had absolutely no prejudices or biases. No matter race, ethnicity, sexual preference, education, or lack thereof it didn't matter to him. He treated all people fairly and equitably. Many of the staff had grown up with limited exposure to African Americans and Tony's personality and attitude was a positive education for them. He managed to create a harmonious balance and work environment within our staff. I almost said "his" staff, but he would not have cared for that statement. We were a team and that was always his approach.

Tony's problem-solving skills were invaluable in the early days of Inhalation Therapy. There was almost no equipment designed or manufactured for children. As the fields of medical care for children advanced and neonatology became a specialty the equipment to meet these needs had not advanced to the same level. In was a standing statement for years that you couldn't be a Respiratory (or Inhalation) therapist without a toolbox. And Tony was a master at figuring out how to create equipment or systems to meet the needs as they came along. This sometimes required using plastic tubing, glass chest tube bottles, clamps, wyes, using IV poles for stands, going to the basement storage and combing old

equipment for parts or dragging out the old iron lungs. But in the end, he figured out how to make it work. Much of this experimentation aided manufacturers in the development of equipment for neonatal and pediatric patients. And it was always a team effort. Tony had no bias as to whose came up with an idea as long as things worked, and patients' needs were met.

Dr. Eric Yancy, a pediatrician in practice in the inner city of Indianapolis and affiliated with Indiana University Health, reflects on when he came to Indianapolis in 1976 as the first black pediatric resident at Riley Hospital for Children:

Tony was supportive of me and was proud that I was there. It was the members of his staff that took a special interest in my learning about ventilators! One of the RT's saw a nurse kind of blow me off when a question came up and she didn't like it. Two of them decided to teach me all they knew about ventilators!! They were a part of Tony's staff. It is indeed a small world.

Tony left his position to pursue other opportunities and went on to serve as vice president of marketing for Amedco of Indiana, retiring in 1995. But his heart always remained with Riley Hospital. He died on August 12, 2001. Jan Pike, the RT who was influenced by Tony's leadership and example in 1974, later helped Tony following his surgery and hospitalization for cancer and visited his home with her son when he was in hospice or at the IU Simon Cancer Center.

Shortly after Tony's passing, his colleagues honored his memory and legacy with a plaque, shown here, that recognized Tony's accomplishments and leadership that was posted at the department's entrance.

References

1967-68 *Indiana University Bulletin*: two year Associate Degree program in Inhalation Therapy, p. 21, (this was the 2nd year offered through Indiana University School of Medicine Division of Allied Health Sciences), see: https://archives.iupui.edu/bitstream/handle/2450/11399/Allied%20Health%20Sciences%20Bulletin%201967-68.pdf?sequence=3&isAllowed=y

Arsenal Technical High School 1954 Cannon Yearbook, p. 50, Digital Indy, Indianapolis Public Library Digital Collections, available at: https://www.digitalindy.org/digital/collection/aths/id/169/rec/6

E-communications Recollections sent to Richard L. Schreiner:

- Jeffrey A. Kisling, November 22, 2022
- Eric Yancy, December 2, 2022
- Sue Kinley, December 14, 2022
- Jan Mills Pike, December 7, 2022
- Tonya Goodrich Pinner, November 28, 2022
- Pat Wylie Cross, January 11, 2023

On TV, Oxygen Equipment, IUPU IUPUI Green Sheet, Vol. 7, No. 47, December 4, 1977), p. 3, available at: file:///C:/Users/K.%20Stroup/Downloads/1977-12-04.pdf

Tony Leon Goodrich (obituary), *Indianapolis Star,* August 14, 2001, p. 3, accessed through Indianapolis Public Library.

Photographs

Title: Respiratory Therapy student (Tony Leon Goodrich)

Item ID: UA24-000859

Link: https://indianamemory.contentdm.oclc.org/digital/collection/IUPUIphotos/id/1051/rec/13

Photo of Tony Goodrich memorial plaque courtesy Richard L. Schreiner, M.D.