

Interviewee: Vallbona, Carlos

Interview: July 21, 2006

**UNIVERSITY OF HOUSTON
ORAL HISTORY OF HOUSTON PROJECT**

Interview with: Dr. Carlos Vallabona

Interviewed by: Ernesto Valdes

Date: July 21, 2006

Transcribed by: Suzanne Mascola

EV: This is Ernesto Valdes. I am with Dr. Carlos Vallabona at 3701 Kirby, his offices in Houston, Texas. Dr. Vallabona, would you please give us your full name?

CV: Carlos Vallabona.

EV: And can you tell us where you were born, please?

CV: I was born in Barcelona, Spain.

EV: Can you give us the date?

CV: Yes. July 29, 1927.

EV: Wonderful. And did you serve in the military at any point in your career?

CV: Yes, in the Spanish Army.

EV: How long was that?

CV: I was an officer in the Spanish Army, served for a total of 12 months when I was a medical student, so three months in the summer two consecutive summers and then upon finishing medical school, I served as a lieutenant in the Spanish Army for 6 months.

EV: Could you tell us what those dates were that you were in the military?

CV: The first summer was in 1946, the second summer, 1947, and the 6 months was from September 1, 1960 through April 1, 1961.

EV: That was obviously the medical connection?

CV: Well, no, this was infantry.

Interviewee: Vallbona, Carlos

Interview: July 21, 2006

EV: Your first infantry?

CV: Infantry.

EV: What was the highest rank you were able to . . .

CV: Lieutenant.

EV: You went out as lieutenant?

CV: At the end of the first summer of very intensive training camp, I became sergeant and the second summer, I became lieutenant.

EV: When did you come to the United States?

CV: 1953.

EV: What was your education?

CV: I had finished already medical school in Spain. I had taken one year of training in pediatrics in Spain. Then, I spent one year training in pediatrics at the University of Paris in France. And then, in 1953, I came to the University of Louisville School of Medicine to train in pediatrics. I was there for 2 years and then I came for my third year residency in pediatrics to Baylor College of Medicine on August 1, 1955.

EV: What were the names of the schools you went to in Spain?

CV: University of Barcelona School of Medicine.

EV: Did you ever experience any combat when you were in the Army?

CV: No.

EV: So, you were living here when Tropical Storm Allison hit Houston, I take it? Did you participate during Allison, the tropical storm?

CV: No, as a matter of fact, at that time, I was abroad. I was lecturing first in France and then in Spain. So, I found out about Allison because I was visiting two of my

Interviewee: Vallbona, Carlos**Interview: July 21, 2006**

daughters in the Costa Brava and we learned about Allison, which was a totally unexpected storm.

EV: Can you tell me how you first were contacted about working with the evacuees on Hurricane Katrina?

CV: We were contacted through Dr. Ken Mattox who was a member of a special team established by Mayor White and Judge Eckels and other people in the community, when I think they responded very rapidly to a plea from Governor Rick Perry to see what the City of Houston could do to help the evacuees from Katrina. It had become clear that we were having a lot of people from New Orleans moving to Houston ahead of Katrina before it became very clear that Katrina was going to be much more than a reason for several people to seek refuge in Houston. So, when things got very bad in Louisiana, I understand that Governor Perry got a call from Governor Blanco from Louisiana to see if something could be done to help a large number of people who were in the Superdome and who were going to come to Houston. And that is when Judge Eckels and Mayor White got together, they got together with County Health Director, Dr. Herminia Palacio and with Dr. Mattox and other people. Dr. Mattox usually called these departments to see if we could help in providing care to the evacuees because it was clear that they would need care, some of them rather urgently. The question comes up why did they call us and did not call, let's say, the Department of Dermatology? The reason why they called us is because this department was running and is still running the neighborhood clinics, which form part of what is referred to as the Community Health Program of the Harris County Hospital District. That is a program that consists of 11 community health centers and 9 school-based clinics, and therefore, we have a lot of experience which we

Interviewee: Vallbona, Carlos**Interview: July 21, 2006**

have gained throughout the years . . . the program was established back in 1969, and Dr. Mattox felt that we needed to have the wherewithal to improvise, so to speak, and establish a new, let's call it community health center. The person who was charged with this activity is Dr. Thomas Gavagan from the department. Dr. Gavagan is the assistant chief for all the community health centers of Baylor College of Medicine - there are 6 of those centers. The other 5 are staffed by faculty from the University of Texas School of Medicine, Department of Family and Community Medicine. So, Dr. Gavagan was asked to establish this because the plan was, from the very beginning to provide a clinical facility near the Astrodome because the Astrodome was the place where a lot of these activities would be housed. It was logical that Dr. Gavagan as the Assistant Chief of Staff for the community health center of Baylor would organize the program for those evacuees.

Dr. Gavagan is my assistant chief. I am the Chief of all the community health centers of the Harris County Hospital District, Medical Chief, Medical Director. I have two assistant directors: one for the UT centers and one for Baylor. And Dr. Gavagan, being the Assistant Chief for the Baylor Centers, was asked to put together the facilities for a clinic at the Reliant Center, which we affectionately started calling it The Katrina Clinic and that name has endured. So, he was the person in charge of organizing. Now, he was not alone on that because he was organizing the medical component but Mr. George Massi who is the Chief Operating Officer of the Harris County Hospital District, organized the administrative component together with Mrs. Alicia Reyes who is the administrator for the Community Health Program of the Harris County Hospital District.

Interviewee: Vallbona, Carlos**Interview: July 21, 2006**

That required, first of all, establishing a layout for the clinic. They have - don't hold me to it but I believe about 45,000 square feet of space in the Reliant Arena. That is the name of the facility - the Reliant Arena. They were given 40,000 square feet. As far as I know, that is the name of the facility, which is very close to the Astrodome. It is used as an exhibit hall and was completely empty. So Dr. Gavagan, Mr. Massi and the person in charge of the architectural planning for the Hospital District improvised the clinic with curtains, rods and established a temporary facility, which was equipped very well from the very beginning. The Hospital District had some examining tables available and some beds available that were brought there and the equipment that physicians would need. A laboratory was established there to provide analysis of blood, urine, all the things that the physicians might need.

Abbott Laboratories learned about our intent and they provided also a truck with a facility that could provide for us automated analysis of blood. Then, we had an x-ray machine for chest x-ray and bones, etc. Well, Siemens learned of our activities and the chairman of the Department of Radiology of Baylor College of Medicine was sufficiently, I would say, compulsive to ask Siemens if they could donate for us the state-of-the-art x-ray equipment and they did, provide equipment which you could see the chest x-ray on a three-dimensional basis, ultrasound, etc., a really sophisticated piece of equipment. So, what was done was to call upon the heads of the chiefs of service of Ben Taub - Medicine, Surgery, Pediatrics, Radiology, Otolaryngology, etc., to allocate some of their personnel to work at the Katrina Clinic, with the understanding that the Katrina Clinic would be open 24 hours a day, 7 days a week. It was 24/7. A dental unit was established there too and the dental unit was staffed by a group of volunteers, a dental

Interviewee: Vallbona, Carlos**Interview: July 21, 2006**

group of volunteers, and also a unit for measuring the refraction of the eyes, etc., because a lot of these people had lost glasses, etc., so we needed that in our facility. The optometrist got together and they also got the van which was stationed inside of that Reliant Arena. So, we had a lot of things going on. Initially, the pharmacy of Ben Taub established a _____ pharmacy but in less than 24 hours or in 24 hours, we had CVS establishing a pharmacy there so that we could dispense medication on the spot to the patient.

Dr. Gavagan asked for volunteers to staff the clinic by primary care physicians and, of course, the Department of Medicine did the same thing. The idea was that there would be a medical director full time there. The overall medical director was Dr. Gavagan but Dr. Gavagan needed to relief and after the first 24 hours, I became the Medical Director and I served for a little over 24 hours nonstop being the Medical Director.

EV: Did you stay there?

CV: Oh, yes.

EV: 24 hours?

CV: All the time. And seeing that the night that I was on duty was probably the worst night in terms of the number of people seen because Dr. Gavagan took over . . . I don't remember exactly the date now - I think it was the 31st of August or so, and some people already were coming in but the bulk of the people who came in were when I was on duty. I started at 7 p.m. one day and I left at around 8:30 p.m. of the following day - 24 hours nonstop. Dr. Gavagan noticed on the first day that a lot of people as they were coming down from the bus requested to be seen by physicians but Dr. Gavagan saw that some of

Interviewee: Vallbona, Carlos

Interview: July 21, 2006

those people did not need to see a physician on an emergency basis. So, what he did, and I thought it was very, very wise, was to appoint two physicians to greet the evacuees at the bus and talk to the people on the bus before they would leave the bus and tell them, "Look, we have a facility for this and this. Keep in mind that we would like to see the really ill patients, the others, we will see you at another place, at the Astrodome."

So, they established an outpost, so to speak, at the Astrodome but the real clinic was at the Reliant Arena and with that, the flow to the Reliant Arena Clinic was not quite as disorganized as on the first day. But at one point in time at around 1 o'clock or 2 o'clock in the morning, I had, if not 2,000 people, close to 2,000 in a waiting room that we had established for the evacuees coming down from the bus waiting there to be seen by a physician. At that time, the process of checking the individuals, getting the essentials, the registration name, address, etc., because it was very important to get that information, was tedious. We had computers there. The computers were placed . . . I think we had something like 30 workstations at the Katrina Clinic that were placed there and operational within less than 24 hours. The IT Department of the Hospital District did a heck of a good job. The head of the department and all of his assistants were there full-time supervising what was going on. The process was still slow and I felt that we needed to bypass that process. So, at 2 o'clock in the morning, I called the CEO of the Hospital District, Mr. David Lopez, and I told him my plight. I said, "Look, I have about 2,000 people waiting to be seen but it is slow. The physicians are almost idle because we have to register these people." And I asked him, I said, "Look, may I go ahead and see the patients and once they are through with the physician, get registration?" He said, "Do

Interviewee: Vallbona, Carlos**Interview: July 21, 2006**

whatever you have to do." He authorized me to do that and with that, we were able to move much faster than we were moving at that time.

We soon found out that a lot of the people were coming with severe mental problems - not only the problem of anxiety, they had depression. There were some people with mental illness. That is to be expected. If you have a population of about 20,000 people coming in, there will be some who have mental illness. And in order to cope with that, we had a psychiatry clinic which was well-staffed by physicians from Baylor College of Medicine and additional personnel - nurses, psychiatric nurses, psychiatric social workers, and also we established a unit which we called the Spiritual Unit for people to meet with a pastor or somebody who could provide some counseling along those lines. So, I think we were very well organized but we had a lot of people.

My personal problem at that time was with the people who had been drug addicts and came and expected medication, and I did not feel any threat whatsoever but I certainly had to deal with some of them who were quite rough and demanding because one of the things that was being done in New Orleans was to provide methadone for the people who were addicts. Well, we don't have methadone facilities here and our philosophy is a little bit different. But to cope with these people was a little bit difficult.

EV: They were providing methadone at the . . .

CV: In New Orleans, they were. Apparently so. Here, no. But what we did was to organize a program where, after the first 24 to 36 hours, people who were on methadone were sent to methadone centers in Houston. But no, we did not provide methadone at the clinic.

EV: What happened to your practice while you were at the Astrodome?

Interviewee: Vallbona, Carlos**Interview: July 21, 2006**

CV: Well, I am at Baylor College of Medicine and my practice is in the hospitals affiliated with Baylor. I see some patients at the VA and, of course, I continued to see them but I don't see them on a 24-hour basis or even on an 8-hour basis. So, I could provide . . . make arrangements.

EV: What about those doctors who had a full practice?

CV: Well, that is an interesting question. The physicians who work in the Community Health Centers, there were physicians working the Community Health Centers and came to work with us, of course, with the understanding that they would do that on a voluntary basis and would have to ask one of their colleagues to cover for them. So, we did not neglect our responsibilities in the Community Health Centers.

The only thing is that they must have called for volunteers and we had many physicians in the Houston community who came to work on a voluntary basis - some of them were retired physicians, many of them were well-known by me and I certainly welcomed them with open arms because I knew that they were superb physicians and to see them there working was quite a heart warming experience. Past presidents of the Harris County Medical Society who were retired came to work. Other people who were in private practice, when they finished their private practice, they came to work at night and on weekends. We had a long line of physicians registered to be seen because we did not allow anybody to take care of the patients in the Katrina Clinic who did not have a badge that was dispensed by people of the Harris County Hospital District Iwho checked their credentials and assured us that they were bona fide physicians or bona fide nurses or bona fide physician assistants or bona fide dentists or bona fide optometrists, etc. So,

Interviewee: Vallbona, Carlos**Interview: July 21, 2006**

everybody working in the Katrina Clinic had a special badge that identified them as a Katrina Clinic professional.

EV: Doctor, had you ever seen anything like this before?

CV: No.

EV: When you stepped into that Astrodome and saw that mass of humanity, what . . .

CV: Well, correction. When I stepped in the Katrina Clinic, there was not a big mass of humanity inside of the clinic.

EV: Well, I meant when you walked into the Astrodome.

CV: Sure. And I went to the Astrodome because I wanted to see what was going on. It was a very moving experience because to see the playing field, thousands and thousands of cots for people to lay down and rest - many of them were exhausted, and the most moving thing in the Astrodome was a place which was, I think it is the place where the football players or the baseball players would enter the field. They had posters with pictures, signs, etc., that the evacuees had put there . . . "I am looking for my son, Johnny. I lost him." "I am looking for my grandmother." "I am looking for this...." And some pictures there. "If you see them, get in touch with me." That was a very moving display.

EV: I am sure it was. There was some information that was given to me in the previous interview that at the end, some people just abandoned their children. Did you see any of that?

CV: I heard of that. I have heard of that. We were blessed because we had a cadre of social workers and they did a good job trying to help - I don't know what the final disposition was. One group of volunteers who were extremely helpful were the American Red Cross volunteers. They were in the Astrodome and they were in the

Interviewee: Vallbona, Carlos**Interview: July 21, 2006**

Reliant Arena because in the Reliant Arena, we had also a facility for people to sleep. So, the American Red Cross at that place was in charge, let's say, of the sleeping quarters or the living quarters, so to speak. They did an excellent job. People were fed and were provided blankets. They were provided an opportunity for their personal hygiene, etc. So, that was a very good, well-organized section.

EV: Were any members of your trusted staff there with you?

CV: Oh, yes. Well, I was not the only one physician. At any one time, I had probably as many as maybe 30 physicians working with me.

EV: I am talking about secondary personnel like your secretaries, nurses or LVNs?

CV: The registration unit had a lot of clerks, interview clerks and secretaries, who did an excellent job. And then, we had a cadre of very trusted nurses, nurse practitioners, who were expediting things. So, I believe we were very well organized.

EV: Well, when you got together as a team, you were comfortable with your cohorts? There wasn't any getting used to each other?

CV: No. Most of the people, I knew already. They knew me and knew my personality and they coped with me and I coped with them, so that was no problem. One thing that Dr. Gavagan did that was very wise was to organize two debriefing sessions every day or maybe three. All the physician leaders from Medicine, Surgery, Pediatrics, Radiology, Nursing, Medical Records, etc., got together and we discussed several things. How are things going on? What are the problems? How can we correct these problems? And the administrators sat there all the time and participated in these discussions. And a lot of things were changed at the last minute, were changes as we were going along. So, it was a good learning experience.

Interviewee: Vallbona, Carlos

Interview: July 21, 2006

EV: Did you keep any notes or write any of this down?

CV: I did not. I think Dr. Gavagan may have done that. I am almost certain that there may be some notes. I think the person you should interview is Mr. George Massi.

EV: As a matter of fact, yesterday I interviewed Dr. Mattox. Now, Massi?

CV: Massi. George is the first name. He is at the Harris County Hospital District. He is at Ben Taub. His office is next to Dr. Mattox.

EV: You are talking about David Lopez, el licenciado [the attorney]?

CV: No, that is another David Lopez, healthcare administration. Well, one person that you must interview because I think she was excellent - Dr. Herminia Palacio. She is County Health Director, Harris County Health Director and she was assigned by the judge [Eckels] and the mayor [White] to be the overall czar of the operation. So, Dr. Gavagan reported to her and Palacio was there 24 hours a day almost. Not quite all the time in the clinic because she had to go from clinic to shelters and other places trying to foresee what was going to be the final disposition of these people but she came to the clinic, well, daily for sure. I would say twice or three times a day just to see how things were going.

EV: Is she an M.D.?

CV: Oh, yes, she is an M.D. She is County Health Director. Herminia Palacio. Harris County Health Director. Her address is 2223 West Loop South. Her number is (713) 439-6016.

EV: What were the most prevalent illnesses that you encountered from the evacuees?.

CV: The first day, we had a lot of people with colds, things of this type, but the majority of the people had a lot of lesions on the skin as a result of having been in the

Interviewee: Vallbona, Carlos

Interview: July 21, 2006

water and they had major problems of infection. A lot of people were having problems because they had not taken their medication for hypertension or for diabetes. Some of them had congestive heart failure. So, we had a variety of problems that I would put them . . . I would say that most of them were due to the fact that the patient did not have the medication for 3, 4 or 5 days. As a result of that, their blood pressure was sky high, their heart was not pumping the blood fast. They had what we call edema - swelling of the legs because they had been on the bus. Some people had respiratory infections...the usual things that you will see in any clinic on any given day.

EV: Was there anything that was unusual that you didn't expect?

CV: No, I think all the things . . . we did not find anything unexpected. One thing that occurred, we had expected so it did not surprise us was an outbreak of diarrhea which we encountered on the third day or fourth. And there was a little bit of concern now because we thought that could be an outbreak of some nasty disease but they identified it was the flu virus and we confined the people who had the diarrhea to a place, we isolated them and we avoided the spread of that diarrhea as an epidemic to the Astrodome, that was our fear. We had an excellent facility for people to wash their hands and we were very careful - health personnel and the patients were instructed to wash their hands thoroughly, watch what they were eating and things would be fine.

EV: I will ask you to describe an ordinary day for you when you were at the Center.

CV: Well, when I was at the Center and I was Medical Director for 3 or 4 days, not consecutively but for 24-hour times, my responsibility was to take care of the day-to-day things that occur. A lot of people would come to me not with complaints but with problems, like we have this problem in that place and the problems they came to me with

Interviewee: Vallbona, Carlos

Interview: July 21, 2006

were not so much medical problems but logistics problems. The medical problems were handled beautifully by the many physicians we had there - physicians, medical students, etc. So that was not my concern. Occasionally, somebody would say, "I have a patient who would like for you to listen to their heart," or whatever and I always do that very gladly.

But logistics problems were there all the time. The first day, I had a lot of problems with people who were on the lines of pharmacy and I had to expedite the process of pharmacy. As time went on and CVS people took over, things went a little bit faster. People who came to me, patients who came to me because they did not know what their medications were, so I tried to help them, "Give me an idea what was it that you were taking the medication for." Then I would ask them, "Does the name ring any bell?" "Oh, yes." So, a lot of my time was taken by that. But I had to move from one end of the Reliant Arena to the other. At one time, I usually had a pedometer with me to check how many steps I took and that first day, I think I walked 16,000 steps in 24 hours.

EV: What does that translate into?

CV: About 7 miles. No, more than that. About 8 to 9 miles. Just walking.

EV: You said you didn't keep any kind of diary. Were you ever asked to give an overall impression of the facility out there or the work, the organization that was . . . critique?

CV: Oh, the critiques were done at the sessions that Dr. Gavagan had. We manned those sessions. I managed one session for him and they were precisely critique sessions: We need this. We need that. We ought to change this. We ought to change that. And

Interviewee: Vallbona, Carlos**Interview: July 21, 2006**

decisions were made at that time. And the people who could implement the decisions were there. So, they knew what had to be done.

EV: There was obviously a lot of knowledge and experience that was coming out of this endeavor. Was any of that, as far as you know, ever coalesced into any type of plan?

CV: Well, yes and no. Nothing, let's say, in writing but it was not too different of what we do every day in the Community Health Centers.

EV: Well, I had more in mind. There are obviously many dovetail interests and agencies involved in this. You were talking about the social workers and all that. I mean, how do you dovetail that kind of response in that short period of time? I mean, it takes some logistics, knowledge, pushing some buttons, knowledge across . . .

CV: There was one person responsible for the social work personnel. There was one person responsible for the laboratory. There was one person responsible for the overall administration. There was one person responsible for medical records. There was one person responsible for computer technology. That was a major help for us. And it was no small feat to establish in less than 24 hours -- I think I said 30 - it may have been 40 workstations -- and they were typing like fury and cranking out reports. So, yes, the plan was very well coordinated. And the fact that the plan went on 24 hours a day, that, I think, made the process move because if we had left things to do let's say at 5 p.m. and we went to work on only the emergency places until 8 o'clock in the morning, that would have been a disaster. No, we provided service 24 hours a day.

EV: You know, this interview is going to be kind of like your time capsule of your experience there. Do you have a CD that I could transfer to?

CV: Yes.

Interviewee: Vallbona, Carlos**Interview: July 21, 2006**

EV: And do you have any photographs of yourself when you were a lieutenant in the Army, your young biographic-type of . . . and a home scrapbook somewhere - your children . . .

CV: Oh, I believe I can find something.

EV: Because we would like to have a biological . . . Is there anything you think you might want to add?

CV: No. Feel free to get in touch with me. I would suggest that you communicate with Mr. Massi and you talk to Dr. Herminia Palacio.

EV: May I use your name as a reference?

CV: Of course. And I'll tell you, one person that you should talk to because he did a superb job is Mr. D. Tindle. He is the Chief Information Officer for the Hospital District in charge of Information Technology. And he and his personnel did a superb job, a superb job.

EV: What were his obligations?

CV: The computers. The workstations. The work stations were his responsibility and to organize that was no small feat. One group of people who were crucial were the security people. The security people were excellent.

EV: Were they from a private firm?

CV: No, they were from the Hospital District.

EV: From the Hospital District?

CV: From the Hospital District, yes.

EV: See, that is the reason why everything went so smoothly was that the Judge and the Mayor had the wisdom of leaving the full responsibility to the Harris County Hospital

Interviewee: Vallbona, Carlos**Interview: July 21, 2006**

District. They said, "Look, you have two types of experience - experience in the emergency center and experience in the Community Health Centers. Can you put these two experiences, blend the two experiences and organize a program for the people at the Astrodome as if they were people of the community and you were responsible for the health care? So, based on that, it was simply a matter of overnight, in less than 24 hours, opening a new Community Health Center.

EV: Well, it sounds somewhat comparable to a military MASH unit which I had some experience with myself. I mean, only because I have seen them put up a hospital in a matter of hours but this was a heroic event.

CV: Well, the difference was you were not working in tents, you were working in the cage, in a cavernous location, and a lot of things had to be improvised. Pipes, toilets - you name it. We had to set up toilets. And the company that provides the food for the Hospital District established a unit there. So, we had a lot of food available for the staff and the same thing at the Astrodome.

EV: Did they keep those kitchens open just 24 hours? I mean, any time you wanted a snack or sandwich, you could get one?

CV: Oh, yes. We had a snack available for all the health workers at any time. You could go to that place. And then, they were serving meals, hot meals, at two different locations in the clinic, two extremes, because from one extreme to the other, it was probably close to a mile if not more.

EV: Well, thank you very much.

CV: I enjoyed it very much. I hope it is helpful.