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**Drs. Truman and Virginia Blocker:
Tales of a Texas Power Couple
Presidential Address, East Texas Historical Association**

BY HEATHER GREEN WOOTEN

Some individuals were born before their time. Others were born for their time. Drs. Truman and Virginia Blocker were both. They were the ultimate powerhouse couple that shared a mid-twentieth century vision of bringing worldwide acclaim and generous research endowments to a small medical school, located on a Texas barrier island. Both possessed the characteristics required for such a daunting aspiration. They were ambitious, energetic, idealistic, brilliant and courageous. More importantly, both possessed a strong level of compassion, brought to bear through life experience. Each became intimately acquainted with pain and human suffering and thereby sought to alleviate it through their life work. However, one partner in this union achieved a far stronger legacy than the other. The first to hold the title of president of the University of Texas Medical Branch at Galveston (UTMB), Dr. Truman Graves Blocker, Jr. acquired local and world renown as an outstanding surgeon, researcher, teacher and administrator. Disadvantaged by social mores and institutional regulations, Dr. Virginia Irvine Blocker never achieved the status or recognition commensurate with her talents and abilities. Regardless, the accomplishments emanating from the Blocker partnership are nothing short of impressive. Their efforts left an indelible mark on the practice of medicine in war and peacetime. What else could have been is a question readers of the Blocker story can answer for themselves.

The seeds of medical ambition were planted early in the lives of Truman and Virginia. Born in 1909 in West Point, Mississippi, Truman spent the first twenty years of his life in the quiet college town of Sherman, Texas.

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Although his world would eventually reach global proportions, he considered the time spent within the intimate, small-town atmosphere, as the most cherished of his life. Truman's mother, the former Maryanne Johnson, was a highly talented painter of still life. His father, Truman Graves Blocker, Sr. was a traveling businessman, whose early circumstances thwarted his dream of becoming a surgeon. Despite his frequent absences, Truman Senior found the time to take his son on hunting and fishing expeditions and to Sunday school. Fatherly advice to his son included three basic tenets: Refrain from bad language; always show respect for your elders; and become a surgeon.¹

Dr. Howard Thomas Irvine harbored similar aspirations for his eldest daughter, Virginia. Born in May 1913, Virginia spent her early childhood in Canada where her father practiced medicine in the rural wilds of western Manitoba. Her mother, Annie Sowell Irvine of Denison, was a University of Texas graduate, who taught school and served as an assistant in her husband's medical practice, including emergency operations on rural dining room tables. Both parents possessed remarkable intelligence, spirit and tenacity that became Virginia's birthright. A notable example related to her father while on routine calls in a horse and buggy. The hunting gun Dr. Irvine carried accidentally discharged, blowing off the top of his left shoulder. Bleeding profusely, the young doctor made a tourniquet of the reins, and clasped the ends in his teeth, until he could make it to the nearest farmhouse.²

Seeking greater opportunities for himself and his household, Howard Irvine moved his young family to Austin, Texas in 1921, where he opened a new medical practice and Anne began pursuing a master's degree in English from the University of Texas. However, the promise inherent in these transitions took a tragic turn. In 1923, at the age of 35, Howard Irvine succumbed to Bright's disease. Two years later, Virginia's younger sister, nine-year-old Alice Irvine died as a result of a brain tumor. These devastating losses marked Virginia for the rest of her life. She found expression for her grief through the writing of poetry, and devoted her energies to excelling in school. As a result, Virginia entered UT-Austin at the age of 15 and graduates four years later, having earned both a bachelors and master's degree in languages. Despite this academic concentration, Virginia's continued

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to develop her passion for medicine, engaging in the field whenever possible. When a boyfriend sustained an emergency appendectomy, the operating physician invited Virginia to watch the procedure and then bestowed the appendix as a gift.³

After completing high school, Truman remained in Sherman to attend Austin College. Measuring a formidable six-foot-four inches and possessing a husky football player frame, the eighteen-year-old earned the college nickname of “Jumbo”, an appellation that stuck for life. The first evidence of surgical talent on Truman’s part occurred in the midst of Dr. P. P. Reed’s freshman biology class. The irrepressible young man brought to class a pregnant cat that appeared ready to deliver. Dr. Blocker later recalled the scenario: We gave her ether—without (knowing about anesthesia). I tied up her uterus and gave her a Cesarean section. We delivered six kittens, I think. The cat and all the kittens lived.”⁴ Upon graduation from Austin College, Truman headed to the University of Texas Medical Branch at Galveston, enrolling in the fall of 1929. Upon receipt of his M.D. degree in 1933, Dr. Blocker fulfilled a two-year internship at the University of Pennsylvania Graduate Hospital before returning to Galveston to complete a residency in general surgery at John Sealy Hospital. In 1937, Truman joined the academic ranks as assistant professor of surgery and accepted a position as surgical pathologist at John Sealy Hospital.⁵

Central to Truman’s professional maturation was the role of his mentor: Dr. A. O. Singleton, one of the leading surgeons in the United States during the early twentieth century, and a pioneer in the field of plastic surgery. A bold and swift surgeon, with extremely long sensitive fingers, Singleton emphasized gentleness . . . in the handling of tissues and furthered an understanding of professional anesthesia in surgical teamwork. Singleton’s skill was matchless, Blocker later recalled, and, under his professor’s leadership, the young protégé eagerly cut his teeth on the surgical profession.⁶

As the youngest on the UTMB surgical staff, Truman found himself assigned to tasks his senior colleagues wished to avoid. One regular assignment involved the cleaning and dressing of serious wounds—especially those belonging to burn patients. Despite his low rank, Truman’s strong, towering personage proved to be an asset on the hospital ward. In later commenting on his work, Truman conveyed

his characteristic humor and compassion. "I was so big," he recalled, "that I could pick up the children and carry them down the hall from the ward to the tub room...and they were mean...they resented anyone who looked like a doctor (doctors meant pain)..." Truman sought comfort for his young charges on both the personal and therapeutic levels. "I entertained the children a good deal—made cards disappear, flip coins up my sleeve—that sort of thing, promising to do another trick if they let me put them in the [treatment] tub" In time, the young patients looked forward to Truman's visits "whenever I went to the bedside," he remembered, "they put their arms around me."⁷

Ironically, by assuming the cast-off work of other surgeons, Truman acquired entrée into the nascent—but highly lucrative—field of plastic surgery. Many great strides in medicine have been made in response to urgent need. Plastic surgery is no different. Trench warfare in World War I resulted in devastating injuries in large numbers. Trenches protected a soldier's body, but left the face and head exposed to flying shrapnel. During the war, marked progress was made in maxillofacial surgeries: the treatment of fractured jaws, the repair of destructive facial wounds, bone grafting and cartilage transplants. Artificial replacements were created for chins, noses, ears and eyes began to be devised as well. As a result, A. O. Singleton began to envision a higher calling for his young protégé. He assigned Truman all the cleft lip and cleft palate cases—procedures that Singleton himself had tired of doing but were valuable exercises in medical craftsmanship. The experience strengthened Truman's interest in the specialty. Over time, Blocker earned a reputation for his natural creativity, dexterity and speed—essential in days before air-conditioned operating rooms.⁸

It was also in 1937 that Truman encountered an exceptional student on campus. Having set her sights on medical school, Virginia Irvine enrolled at UTMB the year before, embracing everything UTMB had to offer. Obstetrical deliveries and emergency room operations fascinated her. Virginia excelled in Pathology and Anatomy, that quickly earned her a student position in the Autopsy Room and the nickname, "Gertie the Gut Girl". In her sophomore year, Virginia acquired a student assistantship funded by the National Youth Administration. She was assigned to a young, professor-surgeon by the name Truman Blocker, who was known for enjoying a steady stream of girl-

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friends and companions. However, in the summer of 1937, Truman found himself experiencing a temporary shortage and consequently, his attention turned to his attractive assistant.⁹

From there, Virginia's life as a medical student became anything but typical. While dating was common among medical students and single professors, academic and physical rigor of medical school soundly discouraged ideas of matrimony. Nevertheless, Virginia and Truman became engaged by Christmas of 1937, and married the following February. The wedding was an all-school event with A. O. Singleton giving the bride away. Virginia became pregnant almost immediately—an act even more discouraged than marriage. Continuous nausea plagued her as she pushed through a brutal junior year of heavy coursework, exams, and clinics. In December 1938, Virginia gave birth to her first child, a son, Truman Graves Blocker III, nicknamed Bo, missing only “a week or two of school” in the process. Her academic survival during this period depended upon what colleague Grace Jameson (Class of 1949) called the three H's: good health, a good husband, and plenty of paid domestic help. Virginia graduated with highest honors from UTMB in May 1939.¹⁰

It did not take long for Virginia to discover that the energetic union forged with Truman Blocker would perpetually inhibit her career aspirations. Bound by young motherhood and other familial obligations, her options for a career in medicine were limited to Galveston Island. The University of Texas nepotism guidelines denied Virginia an internship and a residency at John Sealy Hospital. However, as John Sealy was city owned, the hospital superintendent hired Virginia as assistant director. By then, she was expecting once again—this time with daughter, Anne. Pregnancy was traditionally a disqualifier from employment in those days. However, Virginia was allowed to maintain her administrative position as long as she could camouflage her expanding waistline underneath a voluminous white clinical coat.¹¹

World War II brought further alteration to the Blocker household. Having recently been certified in plastic surgery, Blocker enlisted in 1942, first as a surgeon in the U. S. Army Air Corps and later in the U.S. Army. His decision did not come without some hesitation. Singleton needed him. As more surgeons headed to the front, Truman's talents became increasingly indispensable in both the classroom and

operating room. In 1980, provided a humorous reason for enlisting: “At that time, I was working under Dr. Singleton, who was head of [Galveston] civil defense. He used me as a go between with Mrs. I. H. Kempner, head of the American Red Cross, and Mrs. Dan Kempner, head of the American Women’s Volunteer Service... Well, I was caught in the middle, and those two ladies were really powerful women of Galveston. So, I left and joined the Army.” After several assignments, Blocker became chief of plastic surgery and later chief of surgery at Wakeman General Hospital in Camp Atterbury, Indiana, one of nine centers built by the U. S. Army designated specifically for plastic surgery work in the United States. With an occupancy that increased from 2,000 to 6,000 beds by the end of the war, it was one of the best-equipped military specialty hospitals, and the largest in the Fifth Service Command.¹²

Wakeman served as a proving ground for Captain Blocker’s surgical skill and organizational talents. Shortly after Truman assumed his post in late summer of 1944, the first D-Day casualties began to arrive. His unit oversaw five wards that commonly held as many as 350 plastic surgery patients at any given time, many of whom underwent an average of four operations. To effectively address the daunting caseload, Colonel Blocker recruited a highly qualified staff and developed a team approach. He devised a massive bulletin board bearing all the patients’ names, color-coded for type of injury, surgery scheduled or completed, condition and drugs prescribed. This level of efficiency and expertise enabled unit surgeons to perform 15,000 plastic surgery operations over the next two years, earning the team national renown for outstanding feats in trauma surgery.¹³

Plastic surgery served as a great morale builder among the wounded. An editorial in the *Indianapolis Star* of November 7, 1945, heralded the monumental work of surgeons under Blocker’s direction: “One of the most heartening accomplishments of medical science,” wrote the author, “has been successful bone and skin grafting. Men barely surviving terrible injuries are being restored to [full and useful lives] with little evidence of their experience.” In an interview published in the Camp Atterbury newspaper, the *Camp Crier*, Colonel Blocker expressed in his customary, unassuming manner the basic premise of his practice. He likened the work of a plastic surgeon to that of a

sculptor who takes a shapeless mass of clay and molds it into shape—except that the surgeon and the sculptor approach their work from opposite directions. The sculptor first builds the framework and then molds his clay around the framework, explained the colonel. “The plastic surgeon puts the flesh in place first and then when it is needed molds it into shape by grafting bone or cartilage under it.”¹⁴ In time, the Wakeman plastic surgery department earned a national reputation for achievements in the field. While still at Camp Atterbury, the U.S. Army awarded Blocker the Legion of Merit, an unusual honor for a plastic surgeon. Discharged as a colonel, he continued in the Army Reserve, was a consultant to the Surgeon General of the U.S. Army and earned the rank of brigadier general, also unique for a plastic surgeon.¹⁵

The war years were formative for Virginia as well. Truman’s absence enabled her to complete a nine-month internship and brief residency in Internal Medicine at John Sealy Hospital. Virginia reveled in the long, intensive schedule of morning rounds, patient consultations, laboratory work, and house calls conducted with her mentor Dr. Charles Stone, Chairman of the UTMB School of Medicine. She also took on clinic work for the Galveston Public Health Service, taught First Aid and nutrition classes. The depth of experience Virginia gleaned during this period would be of great value to her within a few short years.¹⁶

Navigating a fledgling medical career with two young children on one’s own is rife with challenges. However, for Virginia, the summer of 1943 was particularly difficult. Polio incidence spread rapidly throughout Texas during the war years and in June, an epidemic struck the Island and adjoining mainland. Almost 750 reported cases of paralytic poliomyelitis were reported in Texas that summer. Virginia was one of them, having contracted the disease while overseeing patients at John Sealy Hospital. Alone, with two young children, Virginia remembers being highly distressed and “fatalistic.”¹³ Truman acquired a brief furlough and returned home. Once recovered, Virginia opted to join him in Indiana. While there, polio paid another cruel visit to the Blocker household, leaving five-year-old Bo seriously febrile and unable to walk. “As bad as it feels to have the dreaded disease yourself,” Virginia later remembered, “you just feel terrible when it happens to

your own child.” Although Virginia’s paralysis and that of her young son, was short-lived, Virginia claimed she never completely recovered—physically or emotionally—from the ordeal.¹⁷

Virginia returned with her children to Galveston in early 1945. Truman joined her the following year. He returned to UTMB as a full professor and organized the Division of Plastic and Maxillofacial Surgery, of which he was named chief. He also spearheaded the establishment of a new hospital: the Special Surgical Unit (SSU), designed to address large numbers of military casualties spawned by the war. Virginia closely collaborated in these endeavors, assuming the title of research associate in Plastic Surgery. She also taught and supervised medical students, residents and nursing students and established Diabetic and Nutrition Clinics at UTMB—again, without pay on account of the Nepotism laws.¹⁸

Yet, the war impacted Virginia and Truman in ways beyond the development of technical and academic skill. Both encountered suffering through a variety of lenses. Truman, through the lens of a military trauma surgeon. Virginia, through the lens of a traumatized patient. Both Truman and Virginia through the lens of compassionate caregiver, through the lens of distressed spouse or parent of a seriously ill patient. These collective experiences bolstered the Blocker partnership on both the personal and professional levels. A deeper transformation soon followed.

On April 16, 1947, Truman was performing a routine surgical procedure when a tremendous explosion jolted every instrument on his tray. Looking out the operating room window, Blocker observed a magnificent mushroom-shaped cloud. “Having a lot of information about the atomic bomb,” Blocker said, “I thought this was one and that World War III had started.” In reality, two freighters loaded with ammonium nitrate fertilizer had exploded at the dock in Texas City, initiating a series of blasts that killed almost 600 persons and injured thousands more. Truckloads of casualties headed to John Sealy Hospital. As co-director of medical operations, Truman and fellow World War II veteran and surgeon, Dr. Robert Moore, directed the hospital’s emergency response. Having recently returned from the front, a hospital staff familiar with mass casualties quickly fell into familiar patterns of emergency duty with a military dispatch that onlookers

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found “a little short of fantastic.” Ten operating teams were set up to work in 48-hour shifts, with three or four physicians on each team. Virginia was assigned to overseeing triage. As the casualties quickly crowded hospital corridors Virginia’s team cleared out all hospitalized patients who did not require immediate treatment. She also helped coordinate a makeshift emergency hospital in the Galveston City Hall and commissioned a windowless high school gymnasium to serve as a morgue.¹⁹

The Texas City Disaster, as it came to be known, utilized every skill contained in Truman and Virginia’s combined medical repertoire. But the tragedy also spurred the couple to think out of the box, especially relative to the notion of “military disaster preparedness” in the atomic age. More than 800 casualties were treated at John Sealy Hospital after the explosion. Many of them required months, sometimes years, of ongoing treatment. Believing research essential to better patient care, the Blockers launched an innovative project in relation to mass casualties. They jointly conducted a comprehensive survey that documented over a nine-year period the treatment and recovery of these patients suffering traumatic injuries. The survey began with individuals on the initial 1947 casualty lists. A follow-up survey completed in 1956, also included lessons learned relative to thermal injuries, civilian triage, mobile hospitals, the development of a blood bank, and other issues deemed highly relevant to scientists and citizens at the height of the Cold War.²⁰

The administration of this project reflected a common routine. Truman conceived and created the policy and approaches. Virginia researched, organized and artfully composed the data. In an era before computers, Virginia meticulously recorded all relevant information on three by five index cards. Such a system, while admirable, portended to be risky when administered within range of a growing family. Two additional sons were born to Truman and Virginia within five years after the explosion: Sterling, born in 1948, followed by Gordon in 1952. One day in 1956, as Virginia was laboring to complete the survey, four-year-old Gordon entered the forbidden domain of his mother’s upstairs home office, knocked over and scattered several large stacks of index carded data. Immensely aggravated, Virginia swept Gordon up and began carrying him down the stairs. She stumbled, resulting

in what Gordon later described as a flurried cascading pinwheel of arms, legs and skirts. The long tumble down the stairs gave Virginia a bruised face and black eye. For several years afterward, Virginia often concluded presentations covering her disaster-related research with a slide of her facial injuries, entitled “The last casualty of the Texas City Explosion.” It was well worth it. The published study garnered national and international attention, and soon, funding for additional research flowed to Galveston.²¹

The Texas City tragedy also galvanized Truman Blocker’s life-long interest in the treatment of severe burns. In 1947, individuals with burns on more than half of their body had less than a 50 percent chance of survival. Blocker was determined to reverse that statistic. To do so, Truman instituted two treatment practices that, while common today, were revolutionary at the time: exposing burn wounds to the air and feeding burn patients promptly after the initial burn incident. The basis for Truman’s theory harkened back to his early years at UTMB when faculty superiors delegated the unpleasanties of basic burn care to him. The orthodox treatment at the time involved starving the patient for forty-eight hours after the burn incident to incite the body’s metabolism. Patients were also immediately wrapped in bulky dressings that required frequent changes—at great expense and pain to the patient. During the early part of the twentieth century, Scottish medical pioneer A. B. Wallace began to feed burn patients rather than denying them sustenance during the acute shock phase. Truman experimented with this practice on his pediatric rounds. He later wrote, “By cleansing the wounds and feeding the children as much as they could tolerate, their [belligerent] personalities were just turned around...I learned how to handle adults, too, in much the same way.” His research proved that feeding patients all they could eat—accompanied by a constant-drip high protein diet—created significant gains in appetite, weight and body strength. The open treatment of wounds cut the infection rate, increased patient comfort and decreased overall morbidity.²²

Blocker promoted these concepts through a new multidisciplinary burns program and UTMB soon became the standard bearer for innovation in the care of patients with severe burns. In 1953, Truman was invited to Japan by the Atomic Bomb Casualty Commission. While in

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Hiroshima, he collaborated with Japanese plastic surgeons to repair the damaged eyelid of a young woman who had written a song entitled “The Verse of the A-bomb Maidens,” which brought international attention to the plight of Japanese youths severely burned by bombs the United States dropped on Hiroshima and Nagasaki. Truman’s experiences in Japan and later Korea gave him new insight not only into blast injuries but also into human nature. In his words, “it taught me a great deal about people all over the world—they’re the same as we are—and I became a pacifist.”²³

Both Truman and Virginia also formed personal and scientific relationships with Soviet scientists during the Cold War, and were among the earliest Americans allowed to visit inside the Iron Curtain in the late 1950s. The Blocker’s investigations into burns and mass casualties ultimately resulted in almost 200 publications, many written by Virginia, as well as five shelf feet of Army Grant Reports on Burns and Wound Healing.²⁴

As a result of his leadership abilities, Truman Blocker rose rapidly through the administrative ranks at UTMB, achieving the presidency in 1967. It is impossible due to time constraints to list everything the Blockers accomplished over a ten-year period known as the “Blocker Era.” However, several highlights are necessary: Truman and Virginia’s dedication to all phases of burns physiology and treatment helped persuade the Shriners of North America to select UTMB Galveston as the site for its first hospital specializing in the treatment and rehabilitation of burned children. In 1963, the Shriners Burn Institute opened within John Sealy Hospital. Today, the Shriners Hospitals for Children-Galveston, occupies an eight-story tower on the medical school campus. These and similar joint endeavors caused the American Burn Association to grant both Drs. Blocker its prestigious Harvey Allen Award in 1972.²⁵

Under the Blocker administration, the Medical Branch became larger, better known, and more highly respected, both as a medical college and as a research facility. At least a dozen buildings were added to the campus, and the number of faculty and students doubled. William C. Levin, a close colleague who later succeeded Dr. Blocker as UTMB president recalled Blocker’s formidable presence during these years. He recalled: “Just as the imposing figure of Winston Chur-

chill was immediately recognizable, even when photographed from the back, so the looming figure of Truman Blocker, often with lab coat fluttering and half-glasses precariously perched, was a familiar and imposing image through the hospital corridors, labs, classrooms, conference rooms, and offices of UTMB. This picture and the warm down-to-earth humor accompanying great size” continues to elicit fond memories to those who knew him. Blocker was so valued by the University of Texas System that in 1972 the Board of Regents asked him to work his managerial magic and serve as interim president at the UT San Antonio Health Science Center while still president at UTMB. The regents provided an airplane to enable him to do both jobs simultaneously. After he stepped down as president of UTMB in 1974, the UT regents again summoned him—this time to lead the UT-Houston Health Sciences Center as interim CEO. No individual in history has occupied the presidency of three medical centers. Proud of his contributions, Blocker boasted to friends, “I bleed orange.”²⁶

Virginia did not relish the role of UTMB first lady. She felt heavily constrained by social obligations that included endless teas and receptions, recruiting activities, and chauffeuring VIP’s to and from Hobby Airport. These obligations stirred a nagging resentment. Virginia often publicly proclaimed that effects of the Texas nepotism laws were immaterial. Promoting the best for UTMB was more than any monetary award. In truth, the restriction left her rather embittered. “I never made any money of my own,” she later reflected, “I particularly resented how people never considered me a REAL doctor.” In time, Virginia found herself falling far behind the current medical literature. That, she admitted, was a “real sorrow.” As an outlet, Virginia resurrected her youthful love of writing poetry, adopted the pseudonym “Victoria Browne,” and published books of poems that contained titles suggestive of her mood: the satirical “Welcome to the Head Table,” “Poems of Sadness and Madness” and “Paper Zinnias.”²⁷

Despite the confines of her position, Virginia never ceased to make an impact. She engaged in a nutritional study among the Blackfeet and other Indians in Montana and revised the American Red Cross First Aid Manual, popularizing CPR. She researched and wrote the history of the first seventy-five years of UTMB. In 1966, Virginia created and implemented an institutional desegregation plan as a birthday present

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to Truman, that involved integrating the medical school, hospitals and clinics in a mere eight hours. Despite the stormy times, no protests were recorded of any kind. Another shared project involved initiating a restoration of the Ashbel Smith Building, known affectionately as “Old Red.” Dismayed by plans to demolish the magnificent structure that housed the original medical school, the Truman and Virginia helped initiate a fundraising effort to save it. The beautifully restored building reopened in 1986.²⁸

It was the love of books and learning in all its dimensions that produced Truman and Virginia’s greatest gift: the acquisition of a superior rare book collection, the largest treasury of its kind in the American Southwest. Truman believed that the knowledge of medical history is essential for understanding current issues and problems. He would have identified with the sentiments of medical editor and translator, Saul Jarcho, who wrote “there are many things about a human being that you can only understand by reference to his condition in an earlier age.”²⁹ Truman’s favorite subjects were the anatomists and surgeons of the Renaissance, whose work contained the roots of Modern-Day medicine. With Virginia often at his side, Truman toured ancient schools of medicine and visited noted scholars, purchased rare books, prints and other medical memorabilia. Today the Truman G. Blocker, Jr. History of Medicine Collections housed in the Moody Medical Library includes some 18,000 volumes, 10,000 woodcuts, engravings and photographs, and a wide array of medical artifacts and memorabilia. It includes the works of Vesalius, Da Vinci, John and William Hunter and Louis Pasteur. As one of UTMB’s most prized possessions, the collection encourages a celebration of the human condition while paying homage to one of man’s most noble traits—the spirit of scientific enquiry. Above all, it reminds us that in a world of impersonal, technological invention, medicine must be an art marked by caring and compassion. These were the ultimate ideals of Drs. Truman and Virginia Blocker.³⁰

Notes

¹ *Handbook of Texas Online*, Chester R. Burns, "Blocker, Truman Graves, Jr.," <https://tshaonline.org/handbook/online/articles/fb141>; Virginia Blocker, M.D., "Truman Graves Blocker, Jr., M.D.: A Narrative History", 1986. (Unpublished) Truman G. Blocker, Jr., Personal and Surgical Papers, Courtesy of Blocker History of Medicine Archives and Manuscripts Collection, Moody Medical Library, Galveston, TX, (Hereafter cited as BHMC); NA, "Interview with Truman Blocker" (undated). Vertical File: Truman Graves Blocker, Jr. Galveston and Texas History Center, Rosenberg Public Library; Joanna Bremer, "Giant: The Saga of the First Man to be called President of UTMB, Truman Graves Blocker, Jr., M.D.," *UTMB Quarterly* 2, no. 3 (Summer/Fall 2000): 6-13.

² Myles Knappe, "Virginia Irvine Blocker, M.D.," Oral History Interview, unpublished, 1991. Vertical File: Virginia Irvine Blocker, M.D., Galveston and Texas History Center, Rosenberg Public Library (Hereafter cited as GTHC); Anne Blocker, "Virginia Howard Irvine Blocker, 1913-2005," *Galveston Daily News*, June 19, 2005.

³ Knappe, "Virginia Irvine Blocker, M.D.," GTHC.

⁴ Mason Guest, "The Man, The Surgeon, The President: Truman G. Blocker, Jr.," *University Medical* 5, no. 6 (1974): 3-32; Bremer, "Giant," 8.

⁵ Guest, "The Man, The Surgeon, The President," 2; William C. Levin, "Truman G. Blocker, Jr.," *The Bookman* 11, no. 4 (July/August 1984): 3-6, pp. 3-4.

⁶ Guest, "The Man, The Surgeon, The President," 5-6; *The University of Texas Medical Branch at Galveston: A Seventy-Five Year History by Faculty and Staff*, First Edition (Austin: University of Texas Press, 1967), 148.

⁷ Truman G. Blocker, Jr., Informal address given to plastic surgery residents, UTMB, October 1, Unpublished, 1981, Unpublished, Blocker Papers, Box 79, BHMC; Denton Cooley, M.D., "Truman G. Blocker, Jr., M.D.: A Twentieth-Century "Renaissance" Physician," *The Pharos of Alpha Omega Alpha-Honor Society. Alpha Omega Alpha* 57, no. 1 (January 1, 1994): 25-29, p. 25-26; Quotes also found in Guest, "The Man, The Surgeon, The President," 6.

⁸ John Staige Davis, M.D., Plastic Surgery in World War I and in World War II," *Presidential Address to the American Association of Plastic Surgeons* (June 3, 1946): 255-264, Blocker Papers, BHMC; Truman G. Blocker, M.D., "The Scope of Plastic Surgery," *Texas State Journal of Medicine*, Vol. 44 (October 1948), 427-429; Knappe, "Virginia Irvine

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Blocker, M.D.”; Truman G. Blocker, Jr., informal address given to plastic surgery residents.

⁹ Knappe, “Virginia Irvine Blocker, M.D.”

¹⁰ “Miss Irvine’s Wedding is Saturday,” *American Statesman*, February 13, 1938; Knappe, “Virginia Irvine Blocker, M.D.”; Megan Seaholm, “Student Life at the University of Texas Medical Branch, 1942-1966,” 18, Centennial History Project, Series 13, BHMC.”

¹¹ Virginia Blocker, M.D., “Curriculum Vitae,” Blocker Papers, Box 1, BHMC; Knappe, “Virginia Irvine Blocker, M.D.”

¹² Quote from William F. Schmalstieg, “Dedicated Doctor: Truman Graves Blocker, Jr., M.D.,” *Texas Historian* 53, no. 4 (May 1993): 7-10; Levin, “Truman G. Blocker, Jr.,” 4.”

¹³ “Indiana in World War II: The Hoosier Training Ground,” excerpt from “A History of Army and Navy Training Centers, Camps, Forts, and other Military Installations Within the State Boundaries during World War II,” Compiled by Dorothy Riker, Indiana Historical Bureau, Indiana War History Commission, 1952 file:///Users/heatherwooten/Documents/Blocker%20/Wakeman%20Hospital%20History.htm; Truman G. Blocker, “Principles of Planning of Reconstruction in Maxillofacial Surgery in an Army Hospital,” Unpublished, Blocker Papers, Box 78, BHMC; Truman G. Blocker, Jr., MC, “Maxillofacial Injuries in World War II,” Unpublished report, Camp Atterbury, Indiana, 1946; Bremer, “Giant,” 8.

¹⁴ “Editorial,” *Indianapolis Star*, November 7, 1945; “1,000 Plastic Cases Handled at WGH,” *The Camp Crier*, March 3, 1946.

¹⁵ Guest, “The Man, The Surgeon, The President,” 8; Bremer, “Giant, 8-9.

¹⁶ Knappe, “Virginia Irvine Blocker, M.D.”; Blocker, “Curriculum Vitae.”

¹⁷ National Foundation for Infantile Paralysis, Annual Report, 1943, Publications Collection, March of Dimes National Archives, White Plains, New York; Quote from Virginia Blocker, Email interview by author, June 30, 2003; Truman G. Blocker, III, Email interview by author, August 4, 2003; Knappe, “Virginia Irvine Blocker, M.D.

¹⁸ “Department of the Month: Plastic Surgery,” *The MediTexan*, 3, no. 10 (July 1956): 6-9; Blocker, “Virginia Howard Irvine Blocker, 1913-2005,”; Knappe, “Virginia Irvine Blocker,”; Bremer, “Giant,” 8.

¹⁹ Blocker quote from Blocker, “Address given to plastic surgery residents”; Billie Caldwell, quoted in Elizabeth Lee Wheaton, *Texas City*

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²⁰ *The University of Texas Medical Branch: A Seventy-Five Year History*, 180-181; Virginia Blocker and Truman G. Blocker, Jr., "The Texas City Disaster," *American Journal of Surgery*, 73, no. 5 (November, 1949): 762; J. H. Hendrix, Truman G. Blocker, Jr., and Virginia Blocker, "Plastic Surgery Problems in the Texas City Disaster," *Plastic and Reconstructive Surgery* 4 (1949): 92-97; Truman G. Blocker, Jr. and Virginia Blocker, "The Texas City Disaster: A Survey of 3,000 Casualties," *American Journal of Surgery* 78 (1949): 756-771; Truman G. Blocker, Jr., "Civilian Medical Facilities in Disaster," unpublished report, 1948, Blocker Papers, BHMC; "Grandcamp Explosion Killed 560 Persons, Survey Reveals," *Galveston News*, April 9, 1949.

²¹ Knappe, "Virginia Irvine Blocker,."; Conversation with Gordon Blocker, April 2017.

²² Blocker quote from informal address given to plastic surgery residents; Bremer, "Giant," 11.

²³ Quote from Blocker, informal address given to plastic surgery residents; Truman G. Blocker, Jr., "Report from the Far East," *Plastic and Reconstructive Surgery* 13, no. 1 (January 1954); Blocker Papers, BHMC; Cooley, "A Twentieth-century "Renaissance" Physician," 26.

²⁴ "Virginia Howard Irvine Blocker, 1913-2005,."; Knappe, "Virginia Irvine Blocker, M.D."

²⁵ Guest, "The Man, The Surgeon, The President," 18-19; *Handbook of Texas Online*, Chester R. Burns, "Truman Graves Blocker, Jr.>"; Bremer, "Giant," 12.

²⁶ Levin, "Truman G. Blocker, Jr., 4-5; Truman G. Blocker, Jr., Commencement Address. University of Texas Medical School at Houston, 1979, Unpublished. Blocker Papers, Box 79, BHMC; Bremer, "Giant," 12.

²⁷ Knappe, "Virginia Irvine Blocker." Blocker, "Virginia Howard Irvine Blocker, 1913-2005."

²⁸ *Ibid.*

²⁹ Saul Jarcho, as quoted in T. Ziporyn, "Historians Strive to Improve Perspective, Practice of Medicine," *Journal of the American Medical Association* 254 (1985): 2713-20, p. 2720.

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³⁰ Truman G. Blocker, Jr., "Renaissance Roots in Modern-day Medicine." Address to Phi Rho Sigma, 1979, Unpublished, Box 79, Blocker Papers, BHMC; Larry J. Wygant, original compiler: *The Truman G. Blocker, Jr. History of Medicine Collections: Books and Manuscripts*, pp. ix-xii. Galveston, The University of Texas Medical Branch, 1986; Cooley, "Truman G. Blocker, Jr., M.D., 28-29.