

## WALTER SCOTT BROWN, MD, 1906-1985

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### Abstract

Walter Scott Brown was a physician and surgeon who practiced in Seattle, Washington from 1932 to 1985. He was the son of general surgeon and grew up in an academically and financially supportive environment. He established the W.S. Brown Clinic in 1948. The clinic had a fully equipped operating room and he performed many outpatient procedures at a time when most surgical procedures required the patient to be hospitalized for several days. Dr. Brown was a general practitioner who transitioned to plastic surgery without additional formal training. He began his medical practice before the American Board of Plastic Surgery first offered certification in 1941. He had four prime interests: (1) plastic surgery, (2) business, (3) golf, and (4) effecting positive change by providing financial gifts and scholarships.

### Introduction

Dr. Brown was Black and felt the weight of racial discrimination when he served in the Army during WW II. He also felt this at several other times during his long career but was proud and quick to take credit for his many accomplishments. He said he “felt sorry for those who practiced racial discrimination.” Dr. Brown overcame the obstacles of severe hip dysplasia, racial prejudice, and resistance to outpatient surgery. He had many successful business enterprises outside his medical practice. Dr. Brown was a sports enthusiast and avid golfer. Many of his friends were from golf, which he pursued with a passion 2 or 3 days a week. He amassed considerable wealth, which he used to influence the outcomes in his areas of interest.

Dr. Brown had the ability to reinvent himself and redevelop his life narrative during the changing times he practiced. He inspired loyalty in his staff and provided lifetime income to his employees who remained with his practice for more than 20 years. Dr. Brown designed his own training and innovated many surgical techniques, not all of which were successful.

By the end of his career, Dr. Brown had gained membership in the recognized plastic surgery associations despite his lack of formal training and Board Certification. He provided scholarships and awards through these societies, which continue today. Dr. Brown’s gifting was designed to benefit both the recipient and build the Walter Scott Brown, M.D. brand.

Dr. Brown was also a talented storyteller and narrative creator. There was as much myth as fact in his life story. He like to take a drink and loved classic cars. Walter Scott Brown sometimes – but not always – celebrated being Black. He was assertive but not confrontational concerning Black rights. He won over many people with his personal charm and charisma. Dr. Brown’s spirit was challenged many times, by the death of a healthy young woman in his operating room, several professional liability suits, and arthritis that made it difficult to walk. He never retired and dealt with each challenge with dignity. He was a prolific and persuasive letter writer.

### Early Life

Walter Scott Brown was born on August 16, 1906 in Birmingham, Alabama. His father was Arthur McKimmon Brown, M.D. (1867-1939) from Raleigh, North Carolina. His mother was Mamie Nellie Adams of Athens, Georgia. His father

graduated from the University of Michigan Medical School in 1891. His mother received a Bachelor's degree in education from Atlanta University. His father practiced as a general surgeon in Birmingham but also was with the 10<sup>th</sup> Calvary Unit in the Spanish American War in 1898.<sup>1</sup>

His mother was active in the Baptist church and both parents were active in local Black organizations. Initially, Walter attended segregated public schools in Birmingham but later attended Talladega High School, which was integrated and had a strong academic environment. Walter Brown worked for the Birmingham Reporter initially delivering newspapers and later as an assistant sportswriter. He was able to make more money delivery waybills for the railroad by bicycle and then worked as a runner for a bookmaker. In college he worked as a waiter and played saxophone and clarinet at dances. He graduated from Talladega College, a primarily Black liberal arts college.<sup>2</sup>

Walter wanted to follow his father into medicine and his father recommended he do this in the North. His father arranged for Walter to live with a pharmacist and his wife in Chicago. Walter enrolled in the University of Illinois Medical School and graduated in 1931. He was grateful for his father's advice, mentioning this later as a pivotal path.

### Medical Training

Dr. Brown accepted an internship at Seattle's Providence Hospital in 1931, where he met his wife, Helen Marie Stein, an operating room nurse. She worked as his nurse anesthetist for many years after he opened his clinic. After one year of postgraduate training, Dr. Brown entered practice in Seattle. He primarily worked as a general practitioner, establishing his practice initially on Beacon Hill and then later at 1001 Broadway. He also worked with a general surgeon and increasingly performed his own surgical procedures. His practice was successful, and he never closed his general practice. He continued throughout his career to treat some patients for other than plastic surgery procedures.

He used medications he received from Mexico and Puerto Rico to treat arthritis and liver disease. He later turned over much of his general practice to Bill Lacey, M.D., a family friend from Alabama.<sup>3</sup>

In 1942, Dr. Brown enlisted in the army and was commissioned as a Captain. His wife followed him to his assignments. He had cultivated a friendship with Eleanor Roosevelt and used this relationship to get the assignments he preferred. He worked as a flight surgeon at both Randolph Field and Selfridge Field near Detroit. He learned some plastic surgical skills, including dermabrasion to deal with gunshot powder staining in the skin. He also was an early adopter of using full-thickness flaps to close wounds. He used and taught this skill at Harborview Medical Center in Seattle and became a Clinical Associate Professor of Surgery at the University of Washington.

Dr. Brown was interested in trauma throughout his career. Many times, he left the golf course to attend to patients even late in his career, when many other physicians had moved on to elective only practices. As a sports enthusiast, he attended many professional boxing matches and repaired the boxers' injuries after the bouts.

Dr. Brown's case load increasingly turned toward aesthetic surgery in the 1970s (Fig. 1).



Fig. 1. Walter Scott Brown, MD, in 1968.

He injected free silicone for breast augmentation. However, this was poorly conceived and led to poor outcomes and several lawsuits, some of which were reported in the newspaper.<sup>4</sup> He continued his interest in silicone and was an early adopter of breast implants for augmentation and reconstruction. He also used implants for chin and facial augmentation. A Dr. Brown facelift

was known to result in an obvious change in appearance rather than a subtle improvement. This was desired by some of his patients, but occasionally he received unfavorable reviews by others with a more sophisticated aesthetic eye. He performed many body-sculpting procedures in the pre-liposuction era.

In 1968, a healthy young woman undergoing a breast procedure died in his clinic operating room. This was just before the Medic One program began in 1969. He handled the rescue efforts with just his staff. The exact cause of death was not concluded (or not disclosed) as to whether this was bleeding, a pneumothorax, a drug reaction, or other cause. There was an investigation, but no sanctions or charges followed. Dr. Brown made a personal settlement with the family and endowed a scholarship in the patient's name at Seattle University, where she was a student.

By the next year, Dr. Brown's chronic hip arthritis had become severe enough and he decided to undergo hip replacement surgery. He watched the operation first at Providence Hospital performed by Robert L. Romano, M.D., who pioneered joint replacement surgery and performed some of the first total shoulder replacements (Fig. 2).



Fig. 2. Robert L. Romano, MD and other members of Orthopedics International, 2010.

He later underwent the procedure performed at Swedish Medical Center by Dr. Burgess. Dr. Brown did not work at Swedish but rather at Providence and Cabrini and at smaller hospitals such as Maynard, Seattle General, and The Doctors Hospital. He donated a bust of himself, which was placed in the physicians' lounge at

Seattle's Providence Hospital after his death (Fig. 3).

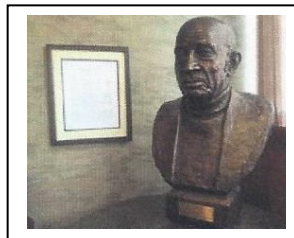


Fig. 3. Bust of Walter Scott Brown, MD.

He also provided an endowment and operating room #9 at Providence was named the Walter Scott Brown, M.D. Operating Room.<sup>5</sup>

Dr. Brown was far from a model patient after the hip replacement surgeries; he left the hospital early and had a least one prosthetic dislocation. He had less pain after the hip replacements but struggled the remainder of his life with a limp and weakness. This limited his practice abilities and he became more dependent on his staff to assist him with parts of the surgical procedures.

In the 1960s and 1970s, Providence Hospital had highly active research laboratories. Dr. Lester Sauvage and Dr. Mark DeDomenico were working on the first open heart and coronary artery bypass procedures. Initially, these procedures were performed in the dog laboratory behind the hospital. For two years in the early 1970s, Dr. Donnal Thomas had his stem cell laboratories for leukemia treatment at Providence Hospital.

Dr. Brown enjoyed medical testifying, as an expert for his own injured patients and independently as an expert. He was very adept at taking questions and explaining even complex medical concepts with clarity. He also worked on many forensic cases and was designated by the Seattle Police Department as an Honorary Police Surgeon in 1975.

A significant life goal for Dr. Brown had always been recognition within in his profession. He regularly attended meetings of the Seattle Plastic Surgery Club (later the Plastic Surgeons of Puget Sound) and valued his friendships with other

plastic surgeons and mentored many. He became an Associate member of the American Society of Plastic and Reconstructive Surgery in 1979, American Society for Aesthetic Surgery in 1980, International Society of Aesthetic Plastic Surgery in 1981, and the Northwest Plastic Surgery Society in 1980.<sup>6,7</sup> He was a vigorous defender of plastic surgery as something that was not just for the elite but available to all. A published summary of a call about this was made available in the National Medical Journal in 1982.<sup>8</sup> He established a scholarship at the University of Illinois where he attended medical school and was once a commencement speaker.

### **Business Interests**

Dr. Brown grew up under privileged economic circumstance. Both his parents were proud of their ability to provide for his education. He inherited their estate in 1939. Dr. Brown also found his various jobs, including his work with a bookmaker, lucrative. During the depression of the 1930s, he had the freedom to get married, buy a home, invest in his medical practice, and join golf clubs.

### Alabama Holdings

Dr. Brown said of all his business interests, real estate was the most important. His first real estate holding was his family home in Birmingham, which he inherited in 1939 when his father died. This was a Craftsman Style Cottage and located at 319 Fourth Terrace North in the Smithfield neighborhood. It was designed by the prominent Black architect Wallace A. Rayfield. The home cost \$10,000 to build in 1909. Dr. Brown rented the property for many years and it was a consistent valuable asset, as he owned it debt free. The house was listed on the National Register of Historic Places in 1974. Dr. Brown donated the home to become a community center named after his father as the A.M. Brown Community Center for Arts and Crafts. Later it served as the headquarters for the Birmingham Chapter of the National Association of Minority Architects. Dr. Brown also owned a large parcel at the end of the football field at the University of Alabama. He

owned this for many years before selling it to the University in the 1970s.

### Ocean Shores, Washington

Dr. Brown's participation in the acquisition and development of Ocean Shores was his most interesting and likely his most successful economic real estate investment. He was able to keep his involvement quiet, which he thought best. The State of Washington owned a significant and critical part of the Ocean Shores property. The State sold this property to a private development group, which made it possible to commercially develop the property. Dr. Brown befriended Don Eastvold and Moksha Wendell Smith. Don Eastvold was the Attorney General for the State of Washington and Moksha Smith was an Assistant Attorney General. Eastvold and Smith later formed a law partnership after crafting the sale of the State property to the investment group that they later headed.

Moksha Smith had excellent training and skills as an attorney, but his interest was to be a developer of recreational property. He was a member of Inglewood Golf Club. He played left-handed and was not a very able golfer, but he became a close friend of Dr. Brown. Another Inglewood member was Russkin Fisher. Mr. Fisher was the surveyor for the Ocean Shores transaction. The friendships blossomed over the successful sale of the Ocean Shores Property for development. A golf course, hotel, and restaurants were developed. Don Eastvold married actress Ginny Simms. The annual Pat Boone Celebrity Golf Classic drew the most important celebrities of the era from the entertainment industry, such as Bob Hope, Bing Crosby, and Milton Berle. Dr. Brown became a friend of Bob Hope.

Dr. Brown was a very close friend of both Bill and Murdock MacPherson. They operated the very successful MacPherson's Realty, which provided the initial realty services for Ocean Shores. They also shared in interest in professional boxing and attended most of the major boxing matches in the 1950s through the 1970s. They also played golf together.

The initial transition of the Ocean Shores property in 1960 was very successful for Dr. Brown. He had provided working capital as a silent partner. He was repaid in full and at a significant premium. The development was taken over by the Wendell West Company and many lots for individual purchase were created. While the initial sales were strong, over a few years it became increasingly difficult and in 1970 the Wendell West Company failed. Moksha Smith continued as a real estate developer with Kamala, Inc. Dr. Brown invested small amounts with Smith in a couple of other projects in Oregon and near Bellingham, Washington, but neither was successful. In 1980, Moksha Smith was convicted of defrauding lenders by creating spurious buyers for the developing properties and spent two years in the Federal Penitentiary. He lived to age 91.

#### W.S. Brown, Inc.

Dr. Brown met Ed Olds playing golf in the early 1950s. Ed had lost his right leg below the knee in a train accident but became a successful prosthesis user. Ed's gift for golf was significant, particularly in putting and the short game. With Dr. Brown's help and encouragement, he participated on several occasions in the National Amputee Golf Championship. He won an event in 1954 and could shoot par or sometimes better. Ed Olds was an automobile mechanic. He worked for Riach Central Oldsmobile on Olive Street in downtown Seattle. Dr. Brown suggested they combine Ed's mechanical gifts with his love of golf and enter the electric golf cart business. Dr. Brown set up agreements to pay golf clubs for the rights to rent golf carts to their members/players. The golf carts were from the Lectro Co. in Astoria, Oregon. Ed Olds maintained and repaired the golf carts.

Dr. Brown bought several homes on Jackson Street in Seattle and these homes were remodeled just enough to be used as storage and maintenance facilities for the golf cart business. The business did very well for a number of years until aging made it difficult for Ed Olds to continue. The business was later sold. The Jackson Street Properties became the site for Seattle Opportunities Industrialization Center (SOIC). The SOIC was created by the Office of

Economic Opportunity, the federal agency funding the "war on poverty." It taught skills to the unemployed. It closed in 1986 after federal cutbacks.

The property was purchased for very little at a time when there was deep concern about the viability and safety of Seattle's Central Area. The area improved greatly over time and the properties were sold in the late 1970s with significant realized appreciation.

#### 515 Ninth Avenue: Walter Scott Brown, M.D. Clinic

Dr. Brown's life goal was to have his own operating room. His father encouraged him. The dream was for a first-class facility. Dr. Brown had worked as a runner for a prominent gambler bookmaker between age 17 and 21. He encouraged the rumor that he had learned and been successful in betting on horse racing through a process called "past posting." After he returned from military service, he located property to realize his dream of a clinic and operating room. The property was at 9<sup>th</sup> and Jefferson Street in downtown Seattle. He had the means to build this with no partners.

The building was across the street from the King County Hospital (Harborview). Dr. Brown employed the architectural firm of Chiarelli and Kirk to design a clinic and apartment. The first floor had an operating room and generous clinic space. The second floor was an apartment for Dr. Brown to stay and work. It was large and comfortable. There was protected parking in the back for his classic automobiles.

The clinic opened on December 1, 1948. It was a historic event and well-celebrated at the time. However, 18 months later the Internal Revenue Service began a several years-long investigation regarding the source of the funds for the clinic, as there were no records of borrowing. Dr. Brown had just reopened his practice in 1946 after returning from military duty. After several years and using records that included his inheritance, loans from his mother-in-law, and his military pay, he settled with the Treasury Department. The basis for the investigation was that he had

used funds that had not been subjected to taxation in building the clinic since his tax returns did not show the taxable source of the income. There was no admission of tax evasion. Dr. Brown made payments to the IRS sufficient to satisfy their concerns and his ownership of the clinic continued. There was no charge, civil, or criminal, ever filed. Dr. Brown later owned and maintained a home for his mother-in-law near Green Lake in Seattle.

### Harris-Conley Golf Shop

Rod Harris and Chuck Conley were promising local professional golfers in the 1960s. Rod Harris qualified for the U.S. Open in 1967. They worked for Al and Pete Puetz at the Puetz Golf Range on Aurora. For 3 years, Harris made most of his living gambling on his golf in high stakes matches at the local golf clubs around Seattle. The most celebrated events were the “bring your best ringer” matches of 1966. During these weekly \$10,000 competitions, two teams consisting of a club member and the best golfer no one had yet heard of would play a best ball and aggregate match. A series of matches were contested with Rod Harris playing against the ringer LeRoy Niznik and others at Seattle Golf Club, Broadmoor Golf Club, Rainier Golf Club, Sandpoint Golf Club, and Inglewood. Dr. Brown played as the club member in the Inglewood match. Harris shot 29 on the back nine of this match. Rod Harris was successful in three matches. His fiery temper precluded professional tour competition but for many years he competed as a club member.

In the 1960s, premium golf equipment was offered only through professional golf shops and, except for Puetz, these were all part of Golf Clubs. Dr. Brown funded the novel concept of creating a golf pro shop on 1<sup>st</sup> Avenue in Downtown Seattle in 1968. This was successful and later a full driving range and shop were created in Bellevue, where balls were driven into a man-made lake. The second enterprise was not successful, but many Pro Golf outlet shops followed in shopping malls, changing forever the model for golf equipment merchandising.

### **Golf**

Walter Scott Brown had a passion for, if not an addiction to, golf. He played two and often three times a week. He had beautiful hand crafted, hickory shafted, mallet-head putters and was very skilled in the short game. He was not a long hitter. He was not very tall and not athletically gifted. He played primarily at Inglewood Golf Club. He donated the funds to erect the Walter Scott Brown, M.D. flagpole behind the 9<sup>th</sup> green at Inglewood. This was the aiming point for the tee shot, as the green was not visible from the tee on this challenging dog leg par 4 hole. He was also a member of Glendale in Bellevue and his home was at Overlake Golf Club. He was also a member of Dorado Golf Club in Puerto Rico.

Dr. Brown spent a lot time at the golf club playing cards, socializing, and enjoying cocktails. He valued his friendships and many times had business interactions with other members. He was generous with his tips. He had beautiful leather shoes both for dress and for golf. Dr. Brown had three identical sets of customized MacGregor golf clubs at any given time. He changed these with each equipment upgrade. These clubs were nonconforming with a high coefficient of restitution allowing additional yardage. He gambled heavily on his golf matches and he liked to reminisce about great matches he had played. He said he was once a 1 handicap and had shot as low as a 66 at Inglewood. By the 1960s he shot consistently in the mid-80s and lost many more bets than he won. But he was always good natured about his loses and headed to the practice range to work on his game after his matches to see if improvements were possible. He liked to talk with caddies at the club as he practiced.

The golf matches at Inglewood were very elaborate in the 1960s and 1970s. On a typical Sunday, at least four foursomes would aggregate, and the bets were worked out on the first tee (which sometimes took a full hour). The first group off would be the better and longer hitting players such as Bob Smith, Rod Harris, Frank Pizza, Jake Werschkul, or Ray Koch. The second and third group would have John McPherson, Ernie Horton, Ralph Sullivan, L.P. Martin, Ken

Morgan, Phil Andrews, Dick Seibert, Art Schilling, Jack Kyllingstad, Elmer Favaro, and Jim Pritchett. The last group to tee off typically had Dr. Brown, Ed Olds, George Squillace, and Howard Neffner.

Golf professionals including Al Mengert, George Bayer, Gene Counter and other high-stakes players would come from time to time, but the competition was intense, and they left having donated to the cause rather than benefitting. The regular players had such skillful gamesmanship that significant money changed hands. Frank Pizza lived off his earnings. Art Schilling rarely lost. Phil Andrews and Dr. Brown were consistent losers. It became challenging over the years to find players who would accept Dr. Brown as a partner, but he would usually guarantee any loss and the matches continued. The quality of play was very high and several thousand dollars changed hands on a typical day. It took a couple of hours to figure out all the bets. The caddies also might bet on the outcome of the matches and it was common for caddies to run back and forth between the groups to report the outcomes of each hole and matches were often “pressed” based on this additional information (Figs. 4, 5).



Fig. 4. Photograph of Inglewood Caddy Tournament, 1966.



Fig. 5. Inglewood Caddies, 1964.

### Cascade Molybdenum Mines, Ltd.

This company was in the Rossland Area of British Columbia. It was one of the more promising mines starting in 1964. Dr. Brown was very enthusiastic about the possibilities and was an initial investor. The mine had some early success and Dr. Brown called the company Cascade Molly. He encouraged his friends from the golf club to invest. Several rounds of investment were needed to keep the mining efforts going but ultimately it was not successful, the investors were not repaid, and it was a loss. The rumor was Dr. Brown may have done well based on being an early investor on the ground lease for the mine.

### **Seattle University**

Dr. Brown was initially more closely aligned with the University of Washington. He taught surgery to the residents at the King County Hospital (later Harborview). By 1955, he had been appointed Clinical Associate Professor of Surgery at the University of Washington. In 1969, the University of Washington took over the management of Harborview. Dr. Brown did not teach there after the early 1960s. He also had an interest in teaching the nurses at Providence Hospital and at Seattle University. Providence operated their own nursing school.

In 1954, Dr. Brown became aware of the basketball player Elgin Baylor through a car dealer. Elgin was incredibly talented but was not prospering in his collegiate career in Idaho due to poor scholarship. Dr. Brown saw this as an opportunity and arranged for a private plane to fly Elgin Baylor and his friend to Seattle for a dinner meeting in hopes of interesting him in playing basketball for Seattle University. This went well and Dr. Brown funded a scholarship for Elgin Baylor and his friend to attend Seattle University. After a year of AAU basketball, his eligibility was established. Elgin played brilliantly for Seattle University and this success brought recognition to Seattle University. Elgin went on to a storied career in the National Basketball Association.

Dr. Brown was awarded an honorary doctorate in 1979 from Seattle University.<sup>9</sup> He gave an impassioned speech at the commencement and shared the podium that day with Senator Henry Jackson, who also received an honorary degree (Fig. 6).



Fig. 6. Walter Scott Brown, MD, 1982.

### Personal

Dr. Brown wore expensive custom-made shoes and suits tailored from the finest fabrics. It was said he gave some of his suits to Plastic and Hand Surgeon Alfred I. Blue, M.D. after his death (Fig. 7).



Fig. 7. Photograph of Alfred Blue, MD and James Pritchett, MD, 2019.

Usually, his attire was carefully and tastefully chosen, including his cufflinks and rings. On a limited basis, he also wore some very colorful polyester suits in the 1970s.

Dr. Brown drove a 1957 black Ford thunderbird car with a continental kit and port holes (Fig 8). He kept it immaculate and maintained it completely until his death. He kept a loaded pistol under the front seat, and it was still there when the trustee for his estate picked up the car after his death. Dr. Brown also enjoyed two classic Lincoln Continental sedans. His personal electric golf cart had the same black and white color scheme as his automobiles and included a radio and propane heater.



Fig. 8. Photograph of Dr. Brown's 1957 Ford Thunderbird.

Dr. Brown kept a wet bar both at his home and on the second floor of his clinic. He sometimes stayed overnight in the 2<sup>nd</sup> floor apartment of his clinic. Otherwise, he went to his well-appointed home near Overlake Golf Club. He was not an early adopter of pagers or car telephones. His routines were well enough known that he was easily reached by his staff at his homes, golf clubs, or restaurants such as Vito's, which he visited routinely. Messages were relayed and the caller knew to keep the line open for whatever time it took for Dr. Brown to get to the call. It might take an hour.

Dr. Brown carried several thousand dollars in cash on his person. He paid his gambling losses in cash. He placed two \$100 bills in each shoe. He always had smaller bills ready for tips for help he valued. He never overlooked something one did for him but used grace to forgive any slight or careless comment.

Dr. Brown had a flexible approach to his narratives. When questioned about inconsistencies and lack of authenticity in his medical training, he would quote the author Sir Walter Scott "Oh! What a tangled web we weave when first we practice to deceive!" (10). A Dr. Brown narrative followed the template of a hero's adventure, in which the hero goes on an adventure and under difficult circumstances wins a victory or overcomes a loss and then comes home changed. Dr. Brown was a positive person and excellent communicator. He had a soothing voice and manner that built his confidence and that of his audience. Dr. Brown created his life story and it was backed to such an extent by his good works



that it was difficult to distinguish between fact and fiction.

When Board Certification became the benchmark for acceptable training in surgery in the 1970s, Dr. Brown told variations on the theme for why he was not Board Certified. He would say that he was discharged from his plastic surgery training near its end when they discovered he was Black. Because there was little mistaking Dr. Brown's appearance as other than Black, this narrative was told more for effect than persuasion (Figs. 1, 6). His life was busy and chronicled enough to recognize there were no gaps to provide for the time he would have been away in Los Angeles attending years of plastic surgery training he claimed. Sometimes he said he sent a case of wine each year to his Plastic Surgery Program Chief to celebrate his success. He got a good laugh from this narrative in all its variations. He offered this story in an interview with *Ebony* magazine in 1979 (11). He made sure his staff repeated this whenever necessary and it was included in his obituary in 1985 (6,7).

Dr. Brown was helpful to his patients, staff, friends, and others. He persevered without much formal training and with crippling arthritis over a very long medical career. He would comment, though, that the American Dream that simply stated everyone could succeed if they just worked hard was a myth. He felt that there were life blocks for some that precluded success no matter how hard they tried. He said he felt he felt blessed he had the personal and professional elasticity to overcome obstacles. A constant theme from Walter Brown was 'not everyone had access to the same gifts but in a perfect world all would.'

Sometimes, but not always, Dr. Brown would celebrate that his father was the 1914 President of the National Medical Association, whose membership was entirely Black physicians [8]. He wrote a letter to his friend Eleanor Roosevelt during his WWII army experience stating that he had "lived white" and wanted to be assigned to a white unit, as the military still made assignments based on race. At the same time, he wrote letters to the American Medical Association

condemning their practice of designating physicians as "colored" in their directory.

Walter Scott Brown embraced his friends throughout life. He was great with names and generous with his time. He loved athletes and donated his time the Catholic Youth Organization and Peter Claver Center. He attended Catholic church services on occasion at Sacred Heart in Bellevue, St. James Cathedral in Seattle, and the chapel at Seattle University. He did not attend service on Sunday mornings, as that was golf time.

Dr. Brown had no children. His wife predeceased him after 35 years of marriage. He had no close relatives at death. He developed a complex estate plan through his attorney, Charles Osborne. The Bank of America administered his estate. He provided for lifetime funding for his permanent clinic staff. His staff was still at the clinic when he died in 1985 even though his health precluded him from working for 3 months before his death. Surviving staff members were still being paid more than 30 years after his death. He also placed permanent endowments with the American Society for Aesthetic Plastic Surgery. His estate continues to manage endowments and scholarships.

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