Ethics Robert Buckenmeyer

Below is a story of self-deception and denial. This story is a perfect example of what happens when the Greek word ***alethein***, literally, not to forget, not to hide, not to bury and not to cover up is denied. Dr. Ogden is in denial and practices self-deception, as do all of Wellville's citizens, except, that is norse Rose Mary Vossler who finally "ratted" on the "good" Doctor. The townspeople practiced morals with nary an ethical person in town! Why? The answer is simple: they were selfish and lived in fear. The result was the death of an infant, by any other definition negligent homicide. Yet, to the last denial and deception ruled because when the reporter asked Ogden about the lack of the story in the newspaper "...he burst out laughing. "Oak told you there was a story? There was no story. He was protecting me. Oak's a good man." So much for a "good man" but what about the life of a baby?

New York Times Magazine

May 5, 2002

Did You Hear About Doc Ogden?

By MICHAEL WINERIP

It's early tuesday, Jan. 20, 1998, in Wellsville, N.Y., and the sky is beginning to show streaks of light over in the east, behind Madison Hill. On Main Street, at Texas Hots, the waitresses are already pouring customers a second cup. Each morning, a half-dozen men huddle out front, waiting for the bank clock to strike 6 and the restaurant to unlock its doors so they can replant themselves on their rightful counter stools. By 6:45, Main Street is lined with pickup trucks, their exhaust white in the frosty air as they head over for first shift at Dresser-Rand, Wellsville's biggest employer, manufacturer of electric-generating steam turbines.

Like most places, Wellsville has people with old money, new money, just enough money and no money. It's the old money -- oil money made in the nearby Pennsylvania oil fields at the turn of the last century -- that built those big homes along Main Street and gives Wellsville its special charm. As recently as 20 years ago, there were still "oil widows" in those elegant houses, but today it's the new money, mostly doctors, lawyers, business executives, who, for $200,000, own rambling Victorians that would go for a million or more in a New York City suburb.

On mornings like this, Oak Duke, publisher of the local paper, The Wellsville Daily Reporter, likes to get out early with his bow and arrow and hunt white-tailed deer before going into his office on Main Street. It is a measure of Wellsville's isolation -- the closest cities, Buffalo and Rochester, are each a two-hour drive -- that The Daily Reporter is still an afternoon paper, delivered by boys and girls on bicycles. And while there are those in town who refer to the paper as The Daily Distorter, the truth is, if you carefully read what's not on the front page -- the police blotter, the paid obits, the births, the daily list of patients admitted to and discharged from Jones Memorial Hospital -- you can piece together much of what's happening in this village of 5,241.

On this winter morning, Dr. Gary Ogden is heading down Main Street to the hospital -- the Jones, as everyone calls it -- to deliver another baby. Since moving here in the mid-1970's, Ogden, a general practitioner who's pushing 50, has delivered more than 3,000 babies, as many as 300 a year. In June, when The Daily Reporter runs a head shot of every graduating high-school senior in the county, Doc circles the ones who are his, and it's always a big number. He delivered Mindi Grant, and he delivered Mindi's daughter, Kylee. He delivered all 12 of Beverly Slawson's grandchildren, and if the parents didn't have money, they gave him half a cow. That's another thing about Ogden. He is what Stephanie McKinley calls "a people's doctor." You wouldn't know it from Main Street, but this is one of New York's Appalachian counties. Out in the countryside, living in trailer parks, are some of America's poorest citizens. Among these folks, Gary Ogden is known as a doctor who treats according to symptoms, not pocketbook size. When Jeanene Austin could not afford to fill prescriptions, he gave her free samples. When Maryann Sparatta couldn't get a ride to his office, he made house calls to check her blood sugar. When Mark Sisson was having breathing problems, Ogden visited his auto-body shop and suggested ways to better ventilate the painting room.

Ogden's home phone is unlisted, but he's a soft touch and constantly gives it out, so naturally, people call all evening. From the day he arrived, he has been a 24/7 doc. He delivered babies on the first night of his honeymoon, and on more Thanksgivings and Christmases than he can recall. And he's not one of those "slam, bam, here's your baby, ma'am" docs. Women like Nan Allen say it didn't matter how many he'd done, Dr. Ogden had a way of letting you know he thought it was a miracle too. As Hope Zaccagni says, Ogden is "concerned about who we are and how we feel emotionally, not just how the physical plant is doing."

All of which helps explain why so many looked the other way for so long when they could see, plain as the restored cupola on the Wellsville public library, that Ogden was heading for disaster. Thornton Wilder once wrote, "In our town we like to know the facts about everybody," and people sure did when it came to Ogden. Oak Duke, the publisher, first realized his friend had a serious problem back in 1982. It was during a weeklong camping trip that the Wellsville hunting and fishing club made to Canada. Some of the most powerful men in town belong to that club. All good friends of the doc. All of them knew, too.

And Nan Allen, the music director at her church and someone people tell things to (because, she says, she herself is not one to gossip), was aware he had a problem 20 years ago when she went shopping for a family doctor. But she chose Ogden anyway, because she felt that what he did in his free time was not her business.

For his part, Ogden thought he'd been pretty clever about hiding it. When his hands started shaking, he took Inderal, using the free samples the drug companies sent. He usually induced pregnant women so he knew when to expect the delivery and could be as alert as possible, for a man in his condition. And when a baby popped out in the middle of the night and Doc was bad off -- he either refused to come in or his wife, Julie, lied for him.

On this January morning in 1998, over at the Jones, a 19-year-old single college student is in labor, waiting, along with her mother, for Ogden to arrive and deliver the baby. There is a midwife present, but the young woman has been stuck at nine centimeters for several hours, and

the midwife thinks it's time for Ogden to do a vacuum delivery. Truth is, the midwife thought it was time for Ogden hours ago, at 4:45 a.m., but when she called his house, he had refused to come in. Right away, the midwife, Susan Dougherty, felt a chill and thought, Oh, God, drunk again.

Ogden arrives at the hospital at 7:30, as usual looking a little disheveled, but chirpy. He always has a comment for the switchboard operator in the lobby, is such a jokester that Linda Trasks's kids call him Dr. Funny. This, however, will be his last lighthearted moment for a long time.

Very soon, a 6 pound 5 ounce baby girl will lie lifeless in his shaky hands, and in the terror of the moment, there will be many errors: he will fail to immediately call in a specially trained pediatrician to take over resuscitation; on the first try, he will place the breathing tube in the infant's stomach instead of the lungs; he will push away a nurse trying to revive the baby's heart and scold her, panicking his medical team.

Everyone present that awful morning can still, four years later, hear that poor 19-year-old wailing, "Don't let my baby die." What happened in those few minutes changed an awful lot in Wellsville. Within two weeks, a state investigator arrived and was asking all sorts of pointed questions about Dr. Ogden. That was not easy for folks. Ogden was the family doc for many of the nurses who worked at the Jones. Several talked among themselves and decided not to say a word about his drinking. They feared the ramifications would be enormous. And they were right.

Of course, none of this was written up in the local paper, Gary Ogden and Oak Duke being such good friends. Information circulates differently in small towns. An ordinary citizen like Tammy McQueen Kokot didn't need a news story anyway; she heard the details from a nurse who was there that morning. Over time, the people of Wellsville figured it out.

Among our most basic longings is the wish for a doctor who will always be there for us. In "Our Town," the first Grover's Corners resident we meet is Doc Gibbs, walking down Main Street, heading home after getting out of bed at 1:30 a.m. to deliver twins in Polish town. (Popped out "easy as kittens," Doc tells Mrs. Gibbs, who rises at dawn to make him bacon, eggs and coffee.)

This is the pedestal we placed doctors on for a long time. I remember as a young reporter for The Rochester Times-Union in the 1970's having trouble getting a story on disciplining physicians into the paper, because my editor would not believe a doctor could be a drunk or drug addict. In those days, New Yorkers made just 160 complaints annually about their doctors, and the state disciplined a dozen a year.

In 2001, New York investigated 7,000 complaints and disciplined 379 doctors. Nationally, disciplinary action against physicians is up 50 percent in the past decade. Currently 1,200 problem doctors in New York are being overseen by monitors who may watch them urinate into a cup or stand at their side during surgery.

The heightened enforcement -- a state responsibility -- is a lesson learned the hard way, often from a horrific case that explodes onto the front pages. In the mid-1990's, New York officials were moved to act when an abortion doctor, who was disciplined after one of his patients died, was allowed to continue practicing during his legal appeal and botched another abortion, killing a second woman. That spurred New York to close the worst loopholes in its laws and increase its disciplinary staff 50 percent.

Gary Ogden's story spans the old, lax approach, and the new, more aggressive effort aimed at stopping dangerous doctors as well as intensively monitoring those judged capable of practicing again. And many do return; in New York, 52 percent of disciplined doctors either remain in practice or have their licenses renewed.

While we understand that our doctors are human, there is a part of us that keeps longing for Doc Gibbs and feels cheated when our doctor falls short of that ideal. We want to know why our favorite physician in the four-doctor obstetrics practice can't come in special on the night our baby is born. We want to know why we have to make a trip to the E.R. for chest pain on a Saturday night, when we just need a little reassurance from our doc that it's indigestion or a pulled chest muscle or our damn jobs. We're not sure if it's managed care, greed or golf, but something is preventing our doc from being the doc who must still exist in some old-fashioned place -- like Wellsville, for example.

For a long time, Gary Ogden of Wellsville tried being Doc Gibbs of Grover's Corners. He visited with Lynn Biancuzzo's mother and persuaded her to go through with the cancer treatments that saved her life. He knew when to send Larry Tucker home with indigestion and when to rush him to the E.R. with a heart attack. About the only thing Ogden didn't know was how to say no to all the needy people, and it nearly destroyed him.

Lynn Hankes monitors troubled physicians and understands that no one is more blessed with the skill to beat an alcohol or drug test than a doc with a habit. Hankes is the immediate past president of the Federation of State Physician Health Programs and during 20 years in the field has seen doctors outfox the monitors a hundred ways. Like the alcoholic doc who gets a call to be tested in an hour, at 5 p.m. Before leaving for the test, he goes into his bathroom to urinate. Next he inserts a catheter through his penis to his now-empty bladder and then attaches a funnel to the other end of the rubber tubing. He lies on the floor and, holding the funnel as high as he can, pours in a clean urine sample he has saved for just this moment, which flows down the tube, refilling his bladder. At 5 p.m. in plain view of the monitor, he's urinating clean.

In 1990, long before that baby died at the Jones, the Committee on Physician's Health, a division of the Medical Society of New York State, got a complaint about Ogden's drinking. Doc was contrite when confronted, admitted abusing alcohol. "I can't continue doing what I'm doing," he told the committee. He signed a contract promising not to drink for two years, to submit to urine tests and to see a therapist.

Within two days he was drinking again.

Over those two years, he urinated into a monitor's cup 75 times -- always his urine, never pulled a switch. The whole time he drank, pouring himself four, five, six stiff gins a night, four ounces per drink plus an olive -- the equivalent of 20 shots at a bar. And he never did test positive.

Around the time Gary Ogden came to Wellsville in the 1970's, another bright young doc, Joe Felsen, arrived and put out his shingle a block off Main Street. They must have seemed like two peas in a pod, but there was a difference that their youthfulness masked. Ogden was the first in his family to go into medicine and had a romantic vision of doctoring. He grew up on suburban Long Island, the son of a businessman, earned his medical degree at McGill University in Montreal, then came to Wellsville as part of the National Health Service Corps' push to bring quality doctors to poor areas. Much of his McGill class became specialists, but Ogden loved that Wellsville was a place where he could do a little of everything. By intellect and temperament, he was a generalist. And bright? His across-the-road neighbor, Bill Emrick, stopped watching "Jeopardy!" with him; it was too aggravating sitting with someone who knew the answer to every question first.

Joe Felsen was another story. Even as a young man, he had a good deal of cynicism about medicine. The last thing he wanted was to be the local hero. He knew that world too well. He had grown up in Wellsville, the son of Dr. Irwin Felsen, a family doctor for the previous generation. During those years, the father made it to just one of the son's Little League games. "I still remember that game," Joe Felsen says. "Dad thought he didn't have time for his family, said he was married to medicine." Irwin Felsen was behind every good cause, including raising the money to build the Jones. Over time, the son saw the strain on the father. "He'd work all day, come home, have a couple of drinks, then go back for 7 p.m. office hours." Then one day, after a patient's untimely death, his privileges to practice at the Jones were quietly taken away.

Joe Felsen became an internist, holding his work week "to just 50 or 60 hours." He coached his son's Little League team. When asked to join the county health board -- the same board his father had served on until his drinking became a public embarrassment -- the son declined. "Who wants another Tuesday-night meeting?" the son said.

Dr. Ogden, that was who. When the local ambulance companies needed a medical director, Ogden obliged. When the Jones needed a chief of staff in the early 1980's, Ogden said yes, and when no one wanted to take over the next year, he volunteered to stay on -- without consulting his wife, Julie. She was furious when she heard, though he didn't notice, and by then, she'd stopped nagging; she was used to raising their two daughters alone.

"Gary was on a pedestal -- so much compassion for everyone," Felsen said. At parties, Felsen saw Ogden pouring down drinks, but says he never noticed it spill into the workplace. Still, he wondered: Would history repeat itself?

The Wellsville hunting and fishing club -- officially the Newboro Lake Bassmasters -- is a testament to how much more competitive small-town life is than it appears to be. The club's 10 members are successful businessmen. One of their guiding spirits is Oak Duke, who, besides being a publisher, writes a hunting-and-fishing column for the paper. During their weeklong

summer trip to Canada, they take a full-time cook. Each day, there's $150 in prizes for the top catch. Partners are switched daily to ensure that everyone fishes together and that no boat is stacked with talent. Boats must stay at least 100 feet apart. "You don't want fights about how close you can come if the next boat has a hot spot," Duke says.

Duke first got to know Ogden as his family physician. When Duke's son Ethan was little, the boy had a racing heartbeat so pronounced, the father worried the child's chest would explode. Ogden suggested a Buffalo specialist, who prescribed medication. But Doc continued checking the medical journals and discovered that sometimes a child's stomach swells and pushes against the heart, touching a nerve that sets off an irregular beat. Ogden felt that if Ethan could get out the gas that caused the swelling, his stomach might stop bumping the nerve. "He taught Ethan to burp," Duke says. "Ethan sounded like a little frog, and that ended the problem."

On their trips, Ogden was different from the others. "He loved the aesthetics more," says Duke, "the log cabin, the smell of coffee at dawn, the sounds of the boats on the lake." At night, he liked to take a book and bottle, go up in the cabin loft and read. "Gary would never be the competitive fisherman the rest of us are," Duke says. "He didn't have the same fantasies and glories."

Duke says that during a 1982 trip he realized Gary Ogden was no social drinker. Several nights, he passed out cold. "He was never mean or rowdy," says Duke. "I said to myself, He's just wanting to punch out because of all the pressure of being on call. The guys looked at each other. He missed a lot of fishing."

As the years passed, Duke and Ogden grew closer. When Duke went through a divorce, Ogden was supportive. And Ogden introduced Duke to the Jones lab technician who would become the publisher's second wife. During one trip, Duke tried talking about the drinking. "We were on the lake at night," says Duke. "You hear the loons laughing, the moon's coming up over Cedar Island. You watch the meteor showers. I sort of tried to come at it sideways. We talked about growing up in the 60's, experimenting with drugs. I'd allude to how the drinking and drugs messed up people I knew. I said I saw it as a warning to us. I was trying to get Gary to see it was wrong, but he didn't react that way. He said things like, 'Whatever makes you happy.' Or, 'You never know another man's demons.' So I dropped it. I figured he's a smart guy, he knew where he's aiming at. I thought it was important he felt, no matter what, I love him."

The modern era of disciplining doctors began in New York in the late 1980's with Dr. David Axelrod, probably the most proactive health commissioner in state history. Axelrod was a liberal, Harvard-trained physician who fought to toughen oversight despite intense pressure from the medical lobby. Under his leadership, hospitals for the first time were mandated to report to the state an adverse outcome -- like an unexpected death -- within 48 hours. Starting in 1989, every hospital was required to appoint a medical director to police its doctors.

Medical director is a thankless job, particularly in a small town where the doc you confront is often a friend. Hospitals in Hornell and Olean, near Wellsville, have each had four in the last decade. The Jones has had just one: Dr. Bill Coch. Coch is strait-laced and demanding. His undergraduate degree is in philosophy, and he sets a lofty standard, as his sons know; one

went to Brown, the other Princeton. Like Ogden, Coch came to Wellsville with the National Health Service Corps. He started in an American Legion Hall, charging $3 per visit, and later practiced with Ogden for several years. At one point in the 1980's, Coch talked to Ogden about the drinking. "It was pretty wimpy," Coch says. "This is someone who had equal standing with me. It went nowhere."

But by 1990, Coch was medical director. This time, after a colleague complained, Coch got it in writing. He interviewed other staff members. Someone had smelled alcohol on Ogden's breath; someone was upset he did not answer late-night pages. Coch built a written case, then showed Ogden.

'I don't know what to say," Ogden said.

"I'd like you to call these people," Coch said. It was the medical society group in Buffalo. Ogden agreed and appeared remorseful. But in truth, he was thinking he'd been betrayed by another local family practitioner who was after his patients.

Monitoring was loose in those days. Today we know that you can be legally drunk at midnight with a 0.1 blood-alcohol level and at 7 a.m. pass a urine test. Back then, the medical society asked for four samples a month, at the monitor's discretion. Coch requested samples during the workday, and Ogden soon calculated he could safely drink all night.

He saw the therapist a half-dozen times and constantly lied. The therapist asked if he was sleeping well, and he said yes, though he rarely could get more than four hours. The therapist asked how he felt, and he said great, though he was always angry. Part of him knew he had a problem -- that it was insane to drink and risk his license -- and that made him angry at himself for being weak. Being forced to expend so much energy to hide his drinking made him angry. Being dictated to by bureaucrats who didn't know what it was like on the front line of rural medicine made him angry.

After two years, Coch was informed by letter that the monitoring was successfully completed and that Ogden's case would be sealed. Even Ogden's wife, Julie, was only vaguely aware he'd faced some kind of action. "To be honest," she said years later, "I still don't know the story."

Like a lot of men married to their jobs, as time passed, Ogden was less married to his wife. His life was his work, and that included taking his loving at the office. For a long time, Julie believed his main problem wasn't drinking; it was the affair he was having with a nurse. But he was such a commanding figure that she felt powerless to stop it. Late at night, their neighbor Bill Emrick often heard the Ogdens screaming at each other across the road.

Worried he'd divorce her, with no way to support herself, she returned to school for a nursing degree, then took a job at the Jones. New nurses work nights. "This one time, the nursing supervisor called me from the E.R.," she recalled. "The supervisor was not happy with the orders the E.R. doc had given and wanted to call Gary at home and have him straighten out the problem. Gary was drunk. I was always covering for him. I said, 'He's not going to come in.' And the nursing supervisor said, 'He's hammered again?'

"It was common knowledge," she said.

Even so, the town conspired to protect his secret. He was stopped by a rookie policeman for driving with his brights on. The officer smelled alcohol and radioed in the license information. The dispatcher called back explaining that the driver was Dr. Ogden -- and he was let go.

In the years leading up to the baby's death, even as the drinking worsened, Ogden continued to do much good. Patients appreciated his instinct for knowing when to let nature take its course and when to intervene. Annette Marsh thanked him for sticking with her through 36 hours of labor so she could have her baby naturally. Therese Fleischman was grateful he knew when it was time for a C-section. The day Larry Tucker showed up in the E.R. with chest pain, the doctor on duty diagnosed a pulled chest muscle and suggested Ben Gay. It was Ogden who reread the EKG, put him in intensive care, then transferred him to Buffalo for coronary bypass surgery.

A great athlete's skills do not go overnight. They erode slowly, at a rate invisible to the naked eye, until one day even the fan in the stands can see: Michael Jordan's legs have lost their spring. Felsen looked up and realized lots of patients were going to Ogden for pain pills.

Julie had been amazed by how often her husband had roused himself from a drunken stupor at night to give the appropriate medical advice over the phone. "In his condition," she said, "he had no business, except he was so smart, it was like he was on autopilot." Then one night she noticed, he wasn't so good anymore. He sounded nasty, sarcastic, cold. A toddler was dying of meningitis, and when a Jones nurse called him to come in at 9:30 p.m., he said, Have the doc on duty handle it. He cut more corners. Instead of doing the high-school sports physicals, he let his nurse do them and was reported to the state, resulting in a reprimand.

Bill Emrick was struck by how crimson his face was. Nan Allen was surprised by the weight he gained. At a Christmas gathering, he passed out at the dinner table, drool running down his chin. A few months before the dead baby, a nurse at the Jones, Rose Mary Vossler, gave a 40th-birthday party for her husband, and by night's end, Ogden was staggering around. The fans in the stands could see now, and yet, people hate to give up on a star. In the 12 months before the dead baby, Ogden had his best earning year ever.

The unraveling began in the fall of 1997. At the time, just a couple of people besides Ogden delivered babies in town, and only one was a woman, Susan Dougherty, the midwife. Dougherty has advanced degrees from the University of Rochester and Columbia and was popular among Wellsville women, her deliveries growing yearly to 131 in 1997. But a midwife is not independent. Under state law, she must have a contract with a physician for backup in case of complications. For years she had worked with Dr. Clifton Miller, who was certified in both obstetrics and pediatrics, rare for a rural doctor. Dougherty says their relationship was good and Miller was generous about finances.

Until 1997. The birth rate was declining, and Miller was having trouble meeting his financial goal of 250-300 births a year. Things came to a head in October, when Miller

announced to his wife that he wanted a divorce. (Ogden wasn't the only doc whose family life suffered from the 24/7 life.) Suddenly Miller needed cash and told Dougherty he would start charging her a $40,000 annual fee for backup, plus she must limit herself to 100 deliveries a year at the Jones. For Dougherty, that would have been disastrous, cutting her income by more than half. She suspected his real aim was to force her out of town. He gave her to the end of November to find a new backup.

She had one alternative: Ogden. He was happy to help and was willing to do it for whatever rate insurance paid for his consultations. The only drawback, she knew, was that he was a drunk. She talked with Coch, who urged her to compromise with Miller. "Don't do it with Gary," he warned, "Gary's not well." But Miller would not budge, she says.

On Dec. 1, 1997, she started with Ogden. If he had been thinking clearly, he never would have signed that contract. The midwife calls only when something is wrong -- and often, that is in the middle of the night.

In Dec. 19, Dougherty had a woman in labor all day, and by midnight, it was clear a C-section was needed. She phoned Ogden. "Julie would not let me talk to him," Dougherty says. Desperate, she consulted with the two local obstetricians. They were angry -- neither had a contract with Dougherty -- but both eventually came in and did a C-section.

Monday, Jan. 19, 1998, at 8 p.m., with a patient in the middle stage of labor, Ogden said he was going out for a quick bite to eat. Soon after he left, the woman began to deliver, and the Jones nurse beeped him. He took more than 20 minutes to respond; he said his beeper wasn't working right. By then, the nurse and a family member had delivered the baby. Ogden arrived in time to deliver the placenta.

Ogden went home at 10:30, drank and went to bed. Several hours later, at 4:45 a.m. the phone rang. It was the Jones. Rose Mary Vossler, working maternity overnight, was worried that the baby the nurse had delivered earlier for Ogden was at risk for hypoglycemia. The blood-sugar readings were on the low side. Vossler wanted to give the baby a glucose IV. Ogden felt he had examined the baby carefully before leaving the hospital and that there were no distress signs. But he did not explain himself. Instead, when Vossler asked, "What should I do about the low readings?" he snapped, "Stop taking readings."

The midwife wanted to speak to him, too. Dougherty explained she had a healthy 19-year-old whose labor had progressed normally since last evening, but for the past few hours had been stuck at 9 centimeters. She asked Ogden to come in to see about doing a vacuum delivery. "The baby look O.K.?" he asked. She told him the fetal heart rate was normal; the mother had no fever or bleeding.

"Call back in a while," Ogden said, then fell asleep.

Lying silently in the dark beside him, Julie was furious. She hated him for not going in. She knew Dougherty was a pro -- she delivered 90 percent of the babies herself -- and wouldn't

call unless she needed him. Julie wished for one minute he could be a woman and know the fear and pain of childbirth.

He was still asleep when she got up for the 7 a.m. shift. There was a time she would have roused him, but he was on his own now.

At 7:40 a.m., after a second call from the midwife, he arrived to do a vacuum delivery. The fetal monitor showed a normal heart rate in the minutes before birth, and at 7:57 the baby's head popped out. In 10 years as a midwife, Dougherty says, she has never seen an umbilical cord wrapped so tightly around a newborn's neck. She cut the cord free. The infant gave a single gasp, then did not breathe. Ogden tried the oxygen mask and resuscitation bag, which usually do the trick, but there was no response.

All eyes were now riveted on the pale newborn girl, motionless on the delivery-room table. Nurses were screaming, were so caught off guard they forgot to get the mother and grandmother out of the room. There's no heartbeat, a nurse yelled, and began chest compressions. Ogden pushed her hand away and said, "Don't do that!" One of the nurses recalls him saying, "There is a heart rate" -- when everyone now agrees there was none. Whether Ogden said that or not -- he denies it -- the bigger problem was that he had lost control of the room. He would later tell investigators that he should have quickly reminded the nurse about the ABC's of resuscitation: clear the Airway; re-establish Breathing; then restore Circulation (the heartbeat). He wanted a breathing tube in place before beginning chest compressions, but his silence fed the panic.

As Ogden tried to intubate the baby -- place a breathing tube in her lungs -- Dougherty watched his hands shake. On the first try he missed, putting the tube in the stomach. He tried again and got it right at 8:03. A nurse started chest compressions at 8:05.

When it was clear nothing was working, at 8:06, Ogden requested backup from the pediatric specialist on call -- Dr. Miller. Ogden should have made that request the moment he saw that the baby was not responding, according to experts who have reviewed the case. Why did he delay? The panic of the moment? The shame of needing Miller's help after the midwife dispute? The cumulative effect of years of alcohol clouding his judgement?

Ogden says today he does not know why. Miller responded in four minutes, taking over the resuscitation, but the baby was dead.

Rose Mary Vossler had not been in the delivery room, but like everyone on the floor, she sensed the horror instantly. "You see people rushing in and out, you hear Miller being called, you see the looks."

She still wanted Ogden to do the glucose IV for the other baby, and though he continued to believe it was unnecessary, he felt in no position to argue. It is not easy, putting an IV in the tiny vein of a newborn. Vossler held the infant, while Ogden struggled to hit the vein, which kept rolling away. But they were pros. Leaning over the baby, they worked in sync, and every time he exhaled she smelled alcohol.

Word moved rapidly from the Jones outward. Bill Emrick, an administrator at nearby Alfred University, was walking across campus when a secretary stopped him. "Do you know what's going on with your neighbor?" she asked. It seemed that all of Alfred knew; a woman who worked at the university went to the same church as the brother of the young woman who lost the baby.

Ogden was the only one not talking. Coch suggested taking time off, and that afternoon, Ogden got a bottle of wine and drove to Alma, nearby. Sitting in his car by a pond, he drained the bottle. At home, Julie steered clear. His memory of that night is several tall gins and the ringing of an unanswered phone.

Wednesday he waited to hear from Coch. Ogden was hoping the autopsy would find some indication that this baby was doomed, like a major heart defect. He had lost only one other baby, as a doctor-in-training in Montreal more than 20 years before, and in that case, the autopsy clearly showed the fetus died prior to delivery. It was such a relief.

This time the results were devastating in their ambiguity. "Multiple abnormalities" were cited, but no clear explanation for the death. Among factors listed: a 25 percent abruption of the placenta (meaning a quarter of the placenta had torn from the womb wall, robbing the fetus of oxygen during delivery); asphyxia from the cord; and purulent material in the bronchi.

Ogden told himself that even a perfect resuscitation would have made no difference, that this was a weakened baby, with sickly lungs not hardy enough to survive being born with the cord wrapped tightly around the neck.

Indeed, many criticisms that would be made by state investigators in the months to come also noted that the outcome may not have been affected by Ogden's mistakes. For example, the state faulted him for failing to come in when the midwife called at 4:45 a.m. But the state also noted, "It is quite possible that doing nothing and allowing labor to progress a while longer would have been the most appropriate course for this patient."

James Woods, director of maternal-fetal medicine at the University of Rochester, does adverse-outcome inquiries, and he reviewed the case for this article. He says he believes that the baby was too compromised to survive. "At the best hospital, all could well have been done the same way with the same result," he said. "Twice a year I'll be called by some doc in the community who has an outcome where the baby dies despite everything looking fine and all being done the right way. And you never know why."
Of course, Woods has also seen babies with worse abruptions live; he knows that the vast number of babies born with cords around their necks thrive; he says it is possible that a more skilled resuscitation might have made a difference.

To this day, Dougherty, the midwife, cannot help wondering: if she and Miller had remained partners and he had come in at 4:45 a.m., would that baby be alive?

The next two days were awful for Rose Mary Vossler. When she wasn't at her nurses' station, she frequently cried and could not sleep. Gary Ogden was her doctor. He had done a beautiful job delivering her Kayla. He and Julie were her friends. But this. . . .

She knew about alcoholism. Her father was a drinker. When she was a girl, coming home from school, if she stepped on a stair wrong and it creaked loudly, he could explode. She never brought home friends. Anything she said, he could explode. Growing up was like living in a minefield.

As an adult, Vossler vowed to speak her mind. Friends loved her honesty and biting wit. Others found her mouthy. She did not care. She had lived the other way too long.

Vossler felt that reporting Ogden to the authorities was someone else's responsibility -- like all those doctors who knew about the drinking and made lots more money than she did. These things were supposed to be confidential, but in Wellsville, she realized, people would quickly figure out it was her. She talked with her husband. She called a close friend in Florida at 2 a.m.

Thursday, at the start of her shift at the Jones, she asked to see Coch. She told him that on the morning of the dead baby, she smelled alcohol and felt it may have played a factor. "Bill said, 'Thank you,' " Vossler recalled. "He said, 'That's the information I needed.' "

That afternoon, there was a paid obituary in The Daily Reporter that gave the baby's first, middle and last names. The explanation for death was simply "the infant daughter died shortly after birth."

Julie and Gary Ogden had tickets for a play in Buffalo Thursday evening. At dinner, he told her he'd be going away for 12 weeks to the Farley Center in Virginia. It's one of a dozen places nationally specializing in the treatment of addicted doctors. He said he'd made financial arrangements so she and the girls would be provided for. Then he did something he hadn't done in years. When his second glass of merlot was three-quarters empty, he put it down and did not drain it. That, he says, was his last drink: Jan. 22, 1998.

In the next days, Julie explained his plans to a few friends, but what's nice about Wellsville, she says, is "everyone already knew. I didn't have to tell the story."

At Farley, advice that sounded like platitudes at first -- you must set boundaries; you're using alcohol to medicate anger; you have a bad disease but you're not a bad person -- began making sense as he applied it to his life. Several times he told the dead-baby story. He would say he was pretty sure it wasn't his fault, although it didn't matter; he had been in charge. He came to see that being an alcoholic had robbed him of the benefit of the doubt.

He felt he was progressing, until a few weeks into the stay his case manager took him aside. A New York State investigator had called wanting to interview Ogden once he'd finished at Farley. This petrified him. Most doctors at Farley had lost their licenses, but Ogden thought his situation was different.

Rose Mary Vossler picked up the phone that night. It was Gary Ogden calling from Farley. "I know what you've done!" he screamed. "How could you?"

"What are you talking about?" she asked.

"You called the state," he yelled. "Everyone knows it's you."

"I don't know what you're talking about," she lied.

Vossler's husband was so enraged by the call, he punched his fist through a door. She had told the truth, yet she was being treated like the bad guy. She was finding it hard to go to work. Some were supportive, she said, but others acted as if she was a snitch. At shift change, when it was her job to update the nurses coming on, they'd tap their pens impatiently, as if everything she said was obvious. People around town made snide comments. It was wearing her down.

Then, a few days later, she was paged at the Jones, Ogden calling. He said he'd phoned to apologize. He said that he was ashamed, that he realized she had saved his life.

In mid-April, he finished at Farley and soon after visited the Jones. "I saw him shaking hands and hugging people," says Vossler. "He walked over and gave me a big hug. I made sure everyone saw. I wanted it to be good and public."

On July 28, Wilfred Friedman, the Manhattan attorney hired by the Ogdens to handle the disciplinary case, called Julie. The state was about to yank her husband's license, Friedman said, adding it might help to get some support letters. That morning Julie was working maternity with Vossler. The two looked in the ward's birth book and started phoning women cared for by Ogden. There wasn't time to mail the letters, so they asked people to bring them to the Jones.

In the next two days, a thousand people -- a lot of them poor and barely literate -- arrived with letters. Friedman had used this tactic often, and usually got form letters. This time he was amazed by what came out of his Manhattan fax machine.

Della Carl wrote: "I am vary sorry for my spelling . . . Doc . . . was there for me when I wanted to end my life. . . . He helped me find the hospital that would help me threw a nurves brake down. . . . I don't think any one of you can look in your past and make sure you never did anything rong. And if you can then please get a hold of me because I want to meet God."

Pamela Dorsey wrote that he was the rarest of docs: "Have you ever gone to a Doctor that will look you right in the eye, ask how you are, and then actually listen? Are you able to tell your doctor ANYTHING, anything at all, and know you won't be humiliated, shrugged off or talked about when you leave?" There were so many letters that they jammed the health-department's fax machine.

It did not matter. Ogden's license was suspended for a minimum of a year; he was banned from ever delivering babies again and ordered to undergo five years of alcohol monitoring.

Removing one doctor left a big hole. Susan Dougherty could no longer do deliveries at the Jones, which infuriated the town's women. Several dozen picketed both the hospital and Miller's office, protesting that no one would back up their midwife. That summer Dougherty moved her practice to Olean. In the next year births increased by over 100 at Olean Hospital and declined by that number at the Jones, causing fiscal problems still being felt at the 70-bed Wellsville hospital. There were those who blamed Vossler for telling the state, and two years ago she left the Jones without having a job lined up.

Privately, Ogden found losing his license a relief. A part of him feared that if he went right back to practice, he might lapse into his old 24/7 ways. "What the state did shows a lot more insight into the disease of alcoholism than I had," he says now. "The recommendation from the therapist was to get small, live a smaller life. We had Julie's income, we'd saved money. I spent my days puttering around, throwing away stuff, cleaning up stuff, doing little projects." He never considered leaving Wellsville. "I was going to weather the storm," he says, "learn what I had to learn.

"People were wonderful. I couldn't pay for a meal in a restaurant; someone was always picking up the tab."

His fishing buddies stopped bringing alcohol on trips. "Without belaboring the point," Oak Duke wrote to the others, "it's a minuscule price to pay to have Gary with us."

For Gary Ogden, just being sober was a joy. "It's absolutely wonderful to get up in the morning excited about the day. To be available for people. To be present in the moment."

He attends five A.A. meetings a week now and is being monitored by Felsen -- the same Felsen, who even as a young doc was so careful to avoid the 24/7 life. Monitoring has changed considerably since Ogden so easily beat the system a decade ago. Recent studies on addicted doctors have shown that with five years of aggressive oversight, up to 85 percent stay clean. He has been tested six times a month and often must give a sample with no warning. "I ran into him once buying Julie jewelry," Felsen says. "I told him, 'Let's go.' " Sometimes Felsen calls at 11:30 p.m., other times at 6:30 a.m., and Ogden must come right over to be tested.

Friedman, who defends about 75 doctors a year, argues that a properly monitored doctor is as safe as any doctor, and he practices what he preaches. His 6-year-old daughter was delivered by a doc he represented in a disciplinary case. He had cataracts removed by a doc in recovery from drug addiction. "Did not bother me," Friedman says. "I knew before the operation, he'd gone in a cup."

The mother of the infant did not sue, telling friends it would be criminal to profit from the baby's death. Recently the grandmother saw Julie in town and gave her a wave so perfectly casual that you'd have to be from Wellsville to know all the feelings behind it.

After a year and a half, Ogden got his license back, although he has not resumed practicing. In one of those strange twists you could not make up, he became the county's health director in 1999.

When this was first proposed, John Margeson, the county administrator, thought it was a joke. "We're going to make a doctor who lost his license the health commissioner?" Margeson asked. "You think the voters will go for that?"

At the time, the health department was in turmoil. The previous commissioner's contract had not been renewed. Departmental infighting was vicious. Ogden's supporters felt that he was good with people, and they believed that his knowledge of the county's medical needs -- in particular the needs of the poor -- would be an asset. County officials interviewed him, though no one asked about his drinking or licensing problem. That even surprised Ogden. "I expected someone to ask, 'How do we know you won't go off on a toot?' "

Margeson says nobody needed to ask; all knew the details. "I had an aunt," says Margeson, "who was a nurse in the office where Gary practiced."

By all accounts Ogden has been a first-rate director. "Took to it like a duck to water," Margeson says. After six months, when the board moved to make him permanent, 90 percent of the department's nurses signed a letter of support. He is credited with persuading legislators to finance extra public-health staff, with winning state grants for family planning and with hiring quality people -- including Rose Mary Vossler as a visiting nurse.

He loves the job, and he can't get over the hours. "I find in government, it's hard to work more than 40 hours," he says. "If you stay late, there's no one to talk to."

His neighbor Bill Emrick has noticed the change. On Saturdays, instead of rushing off, Ogden's out riding his John Deere mower, and Emrick's on his John Deere, and they wave as they circle by each other.

At night it's quiet across the way.

Two years ago, on my first visit to Wellsville, I asked Oak Duke how a small-town newspaper handles a story when a good friend of the publisher gets in trouble. "I don't let my personal feelings get in the way," he said. "If one of my sons was busted for D.W.I., it would be in the paper." The article on Ogden losing his license, he said, "was front page, a pretty big one." Several visits and a year later, I spent a day at the Wellsville library searching The Daily Reporter microfilm, but could not find that article. I did find two front-page articles about Ogden being named health commissioner, though neither mentioned him losing his license.

So I went back to Duke, and he suggested talking to the reporter who covered the county at the time. The man had left town, but I tracked him down, and he verified there was never a mention of Ogden's losing his license.

It was back to Duke. "It's coming to me now," he said. "I think he lost his license in August when we were away on our fishing trip. I happened to be out of the office, so I guess we missed out on it."

He wanted to check once more, and called back to say a reporter had tried finding the disciplinary action against Ogden on the state Health Department's Web site at the time but wasn't good with the Internet.

When I repeated this to Ogden not long ago, he burst out laughing. "Oak told you there was a story? There was no story. He was protecting me. Oak's a good man."

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