

ADVENTURES OF AN OXY-PHILE II

By *Thomas L. Petty, M.D. with Robert McCoy, B.S., RRT, FAARC,
Louise Nett, R.N., RRT, FAARC, & Kay Bowen*

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Thomas L. Petty, MD

Adventures *of an* Oxy-Phile²

with Robert McCoy, B.S., RRT, FAARC,

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and Kay Bowen



Preface to Second Edition Thomas L. Petty, M.D. -2009

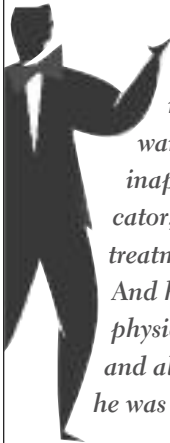
Nearly six years have passed since the writing of the first edition. During that period of time, there have been immense advances in oxygen technology. There are unfortunate and restrictive controls on oxygen reimbursement. There is an overwhelming need for new science to determine whether or not patients with mild to moderate hypoxemia need supplemental oxygen. These studies are a long way off. Many patients have unanswered questions about oxygen therapy. I have answered some of these questions appearing in the popular American Association For Respiratory Care column "Ask Dr. Tom" (web site: www.yourlunghealth.org). A second edition of **Adventures of an Oxy-Phile** was deemed necessary due to the immense experience accumulated in the past six years.

This book is written for all Oxy-Philes, their caregivers, and respiratory therapists. It is particularly valuable for the motivation of people who want to continue to pursue life and happiness by virtue of long term oxygen therapy (LTOT).



Thomas L. Petty, M.D.

Adventures of an Oxy-Phile²



"Tom Petty invented pulmonary medicine as we know it today. When he started work as an assistant professor in the early 1960s, respiratory care was in its infancy. COPD was a disorder that no one wanted to talk about or treat, and oxygen was a poorly understood, inappropriately used medication. Tom Petty, a great educator and communicator, made the world aware of the importance of these disorders and their treatment. He taught us all: physicians, government agencies, and patients. And he taught us, his pulmonary fellows, to teach. Tom Petty, a superb physician, worked constantly to improve the well being of his own patients, and all patients. To those of us fortunate enough to have worked with him, he was a constant guide, a continuing inspiration, and a true friend."

Commentary from Dr. Bernard Levine

(Dr. Bernard Levine practices Pulmonary and Internal Medicine in Phoenix, Arizona. Dr. Levine graduated with an MD 51 years ago and took his pulmonary training under Dr. Petty at the University of Colorado.)

"Dr. Petty was one of the most influential physicians impacting long term oxygen therapy (LTOT). He was a researcher who proved the science of LTOT, yet more importantly, he was passionate about how patients lived with LTOT. He knew what he was talking about and walked the talk. Patients loved Dr. Tom. Anywhere he went, when he saw someone on oxygen, he would ask how they were doing. As Dr. Kida writes in chapter 15, Dr. Petty looked at oxygen patients with "gentle eyes." That type of love for people and understanding of their disease drew all who knew him to want to do more to follow his example."

"I had the privilege of working with Dr. Petty to help coordinate the last four Consensus Conference on LTOT. His leadership and ability to reach consensus with groups of diverse people was the reason the consensus conferences were successful. He understood that we all need to be on the same team when it comes to patient care and that patients were the reason we all are working in health care. Dr. Petty was a strong leader, an excellent physician, a good friend and an inspiration to all of us working in long term oxygen therapy. At the end of one of our phone conversations while planning a consensus conference, Tom ended the call with the comment "I'm off to see what mischief I can get into" meaning I'm off to fight a battle for the benefit of patients. Tom is at rest now, yet we all can pick up his banner and fight for the needs of our oxygen dependent patients."

Bob McCoy

"When Tom was working he was very intense. He was extremely devoted to his patients and their care. The fellows could call him night or day for consultation. He loved being a doctor. His famous saying was "patients come first." After patient care, then the research could follow. If research was of primary interest then the physician was not so much a doctor but more interested in science. He never thought of patients as subjects. Patient care was a privilege which he tried to instill in all who worked with him."

"The fun side of Dr. Tom came out during conferences away from the hospital and especially during fishing trips. He enjoyed planning for fishing trips almost as much as going on the fishing excursion. He said the fun was 25% planning for fishing, 50% fishing, and the other 25% remembering the trip and looking at the pictures. We have peppered this book with some fishing quotations and some great pictures of Tom, the fisherman."

Louise Nett

**HE LEFT THIS WORLD ON DECEMBER 12, 2009,
KNOWING HE WAS LOVED BY MANY.**

