



Janet Krane Transcript

ROSALIND HINTON: -- in Metairie, Louisiana. Today is Thursday, November 2, 2006. I'm conducting the interview for the Katrina's Jewish Voices Project of the Jewish Women's Archive and the Goldring/Woldenberg Institute of Southern Jewish Life. Janet, do you agree to be interviewed and understand that the interview will be video recorded?

JANET KRANE: Yes, I do.

RH: So, if we can just begin with how old you are and your education growing up and how you came to be in New Orleans.

JK: OK. I'm 53 years old. And although I was raised in Bastrop, Louisiana, which is North Louisiana, I moved here to live with my family in 1984. My husband, who -- as we go through education I'll tell you. I have a BS degree in Occupational Therapy from Northeast Louisiana University, which is in Monroe. And, every year, for one semester, the occupational therapy students come down to Tulane Medical School to do cadaver anatomy. We usually get the cadavers after the medical students. So, I actually met my husband, who was in Tulane Medical School, through that cadaver anatomy connection, and we both lived in the same --

RH: How romantic.

JK: Yeah, it's lovely. [Laughter.] I lived in the same hall that he did downtown at the medical school, so that's how I met him. And then I married him --

RH: Tell me his name.

JK: Kevin Krane.



RH: OK.

JK: Yeah, I guess I should do that. We married when he was a junior in medical school. And then when he graduated, we moved to Massachusetts for a year, and he did a year of internship there. Then we moved to Michigan where we lived for a few years where he finished a residency, went out and practiced in internal medicine for a little bit at Henry Ford, did a year of chief residency at Henry Ford -- then decided he wanted to be a nephrologist and finished his fellowship there. And then upon leaving his fellowship is when we moved here in 1984. So, that --

RH: So are either of you from here?

JK: No. Neither one.

RH: And so where he's from?

JK: Kevin was actually born in Switzerland. His dad was in medical school in Geneva and his family has lived in Michigan for a little over 40 years, but when you ask them where they're from, they're from the Bronx. They lived on Gerard Avenue, very close to Yankee Stadium, and that's where they're from. So, they lived -- he moved to Michigan, I guess, for his OB-GYN residency and I was the first Southerner and first non-Jew in the family. So, we came from completely different backgrounds.

RH: OK. So what was your religious background?

JK: I was raised as Southern Baptist and baptized at Cherry Ridge Baptist Church in Bastrop, Louisiana. And my father died when I was seven, and so my sister, who is five years older than I and my mom -- she was a legal secretary -- lived in Bastrop and raised Southern Baptist and knew at least two Jews in the entire city because there's not a lot.

RH: But there were two Jews.



JK: Yeah, because of the dry goods stores. There was Seligman's. There was Snyder's. And, actually, a lot of the families around here have connections with Bastrop, because of the families. So it's kind of nice.

RH: So, why did you and your husband pick New Orleans?

JK: You know, the funny part was at -- we had lived here as students and it's great being a student here. It's great fun. But we never thought about raising a family here or anything. Then, when he finished his fellowship, he looked at a couple of job offers and he had two job offers from New Orleans. One with a private practice and one with Tulane. And it just turned out that he seemed happier with the one at Tulane, so that's when we came down.

RH: OK.

JK: So, he moved down to open the dialysis unit. Tulane University Hospital, at that point, was just opening a dialysis unit on -- adjacent to the hospital, and that's what Kevin came down to run. So --

RH: So, tell me about your neighborhood. Why did you choose Metairie?

JK: We actually chose Metairie -- we looked Uptown. At that point -- we're kind of like the economic kiss of death. Where we move, businesses fall apart. So we were moving from Detroit, which where, at that point, the car business was going down the tubes. And we moved here, and it was right at the oil boom problem area.

RH: The bust.

JK: Right. The bust. So, we had a problem in the fact that our house in Michigan hadn't sold. We had two young kids. This is not -- we didn't exactly have a lot of cash to put down. And so we looked at houses Uptown, actually. And my husband, who is from



suburban Michigan, OK -- if you want new homes, you go plow down a cornfield and you build up a new subdivision. So, we walked through some of the homes Uptown and Kevin said, "These homes look a little older." And, in fact, they were, like about 100 years. So, it didn't seem like he was going to be a good fit for Uptown homes. So, we found -- we actually decided, OK, well, we can do this. We moved into an apartment for a while, over by Doornacks, right at the parish line. And stayed there for a year and bought a lot and built a house very close to there. So we lived there for a while and moved -- which was in Metairie -- and then moved here, I guess about probably 13 years ago now. So --

RH: So tell me about the neighborhood. What do you like about it?

JK: Our neighborhood is great in the sense that by the time we moved here, we had -- two of our children were born in Michigan and we had -- our son, Stewart, was born here. So, by the time we moved here, I wanted a pool because it was really hot all of the time in New Orleans. And also the synagogue was actually a big part of our lives, and it's very, very close. So, that was kind of a nice thing.

RH: So what's the name of the synagogue?

JK: Gates of Prayer.

RH: OK.

JK: Congregation Gates of Prayer. And we moved here and we found out one great family, the Lazarus's, lived down the street, and it's a close little condensed neighborhood and we just kind of fell into it. It was nice. At the time we moved, one of Spencer's good friends, that's my older son, lived down the way, so it was just a nice place to be. It was a drive to Uptown because all the kids went to Newman, which is a school on Jefferson, and so we learned to commute together. And, you know, it's been a nice neighborhood. Very safe. Very inviting. So --



RH: So, what's kind of the center of your social world here in New Orleans? Your family's social world?

JK: The center of our social world has got to be, really, the synagogue and where we kind of fit in with that. One of the really interesting things -- we've been really blessed in a lot of ways and, you know, I told you, my husband and I met in cadaver, really. His -- there are typically six cadaver partners with a cadaver from medical school, and one of his cadaver partners is Mike Wasserman, who is a pediatrician in the area. And so we -- he was always friends with Mike. Mike then, started hanging out at the Loyola Law Library, where his soon-to-wife was in law school. And so, when we moved back here, they had been here and have children very close to our aged children. So, we were kind of adopted by the Wasserman family, which has been wonderful, and remain -- we've been friends with them -- for what? -- 30 years. The other one very fortunate thing that happened was -- when Kevin and I decided to have children, it was our decision, and really, my kind of stressing it, that I wanted to raise the children to be one religion, not two or three or not to choose between, because I kind of felt that after a certain point, kids are going to rebel, and I wanted to give them only one thing to rebel against and not an option there. So, Southern Baptist, the way I was raised -- it was more focused on negative. You were not -- it was not like a positive thing, oh, that's very good. It was more like this is wrong so you do this and it was also focused on what you do -- your rewards after life. And some of it really never made really sense to me. But you know, you don't think about it. If you're born in a religion, you kind of stay in that religion without investigating it. So I decided, OK. The negativity really kind of bothered me, so I couldn't say the kids had to be raised Southern Baptist. So, we moved down here and we were going to enroll them in a nursery school, because they were like four and two at the time. And I called Gates of Prayer and asked them, you know, can we enroll the children in the nursery school, and the first question on the phone was are you Jewish. And I said, no, but, and I never really got through the but because I got this whole thing about, well, if you're not Jewish, we don't accept non-Jewish children, blah, blah, blah, blah, and it



was -- finally, I got to get out the rest of my statement that said, but we want to raise the children as being Jewish. And it was like, fine. That's great. Come in. So we were welcomed in at Gates of Prayer and one of our other good friends had a child in the same class as Spencer, the Spizers, Gary and Eilene Spizer, and, you know, we had the kids plays together on afternoon. I met Eilene, and she asked me, I think, three questions. One was, do you know so-and-so. Oh, you're from Bastrop. Do you know so-and-so, because Eileen's from Bogalusa. And I said, no, I don't know them. And she goes, well, did you do this. And it was like going to a camp or something. And I went, no.

RH: Camp Jacob.

JK: Right. And then the third question was, you're not Jewish are you. I went no and we've been best friends and our families are best friends since that point in time just because you were on the same wavelength immediately. She was raised in Bogalusa. Her family has adopted us as well. So -- in fact, we have, between us, we have four redheaded kids. So, they all think that we're related if you don't know us, so we just kind of keep that going. So, we've been very, very fortunate. The Jewish community here has adopted both us and our family and so it's been a very nice social setting. Now, Kevin and I both work. I mean, Kevin's at Tulane. I'm now at Tulane but have been at other hospitals, too. So we kind of have a social life on the outside, but the real thing that holds us is the synagogue and the social life there and the friends that we have. So that's nice.

RH: So, have -- can you give me like a most vivid memory, either within the Jewish community, or just in New Orleans that just kind of summarizes how you feel about New Orleans?

JK: About New Orleans?



RH: Yeah, or the Jewish community.

JK: Oh, just one memory?

RH: Well, you don't have to give me just one. You can give me two or three.

JK: Well, there's so many things that I guess make New Orleans New Orleans. And one of the things that I've been very fortunate to do is learn with my kids and, if you're not Jewish, you kind of have to create Jewish memories for your kids. So you kind of have to -- you're learning with them and trying to create memories that you don't have. It's not like I grew up with, you know, Hanukkah, so you kind of have to make memories for them. So we've tried a lot of different things, but one of the wonderful things is how the Jewish community in New Orleans is -- it takes you in. It engulfs you. And things that are just wonderful, through the friends that the kids have had, we've been invited to family Hanukkah parties, where everybody brings their own Menorah. And you use their Bubbe's applesauce recipe. So I think some of my fondest memories have to do with where we have been included and loved. You felt a sense of belonging, even though you knew maybe three people in the room plus your own family, but you have always felt a sense of belonging. And I don't think that that's probably typical in other Jewish communities where the reach is so strong between -- it doesn't matter the congregation or the synagogue. It's more like it's a community. And when you have a Hanukkah lighting on the Riverwalk and you're overlooking the Mississippi River and you're there with your children and they're tasting latkes and doing this kind of thing and in the middle of it you see a band, you know, a jazz band just happens to be there. Or a clarinet player whose got his little thing out in front of them and wanting money. And -- or playing for money. And it's just a wonderful environment of a mix of all cultures together. So, I don't guess any one memory stands out other than the sense of warmth that you felt. It's a wonderful thing. One of the things that I think is neat about New Orleans is that our kids are very accepting of all different types of cultures.



[phone rings]

RH: Let's stop taping for a second.

[break in audio]

RH: OK, one of the neat things you were talking about.

JK: Well, one of the neat things about New Orleans is that nothing throws -- if the kids are raised here, nothing throws the kids off. I mean, you know, you'll be walking down the street and someone comes up in a Superman costume, and this is not related to any holiday, like Halloween or something. Someone comes up in black tights and a cape and roller skates and streams by, and I've noticed our kids are just like, eh, and they go on and nothing bothers them. I was having drinks with my friends at work one day at the Columns on St. Charles. And one of our friends couldn't find it. He was driving past it. Now, we're sitting there out on this huge porch with about eight or 10 tables of, you know, people just enjoying themselves after work, and someone comes up in a gorilla costume. A male gorilla costume. And everyone looks to the side and the gorilla goes over to a table. Now, this is in the spring. This is not related to anything. And about, you know, we were all just kind of, eh. And about two minutes later, a female gorilla costume comes up and they walk off. And we're still kind of giving directions to this person that's driving, and it never dawned on any of us to say, "Oh, just look for the big porch that has the two gorillas on it," you know, because that's like New Orleans. It never occurs to you to state something like that. It's just like, oh, that kind of goes with the culture. No one batted an eye. The gorillas went over and had a drink at a table. And you know, no one asked why or where. It was just kind of one of those things. And I think growing up here the kids just kind of have that, oh, OK, great. This is fine. The other thing that the kids have is a real sense of community. They know because of all of the Jewish organizations and Jacob's Camp, and everything else that they've been to, they know kids everywhere. And from all walks of life. And so it's a real -- this is home to them. So,



it's -- I guess -- the thing about New Orleans and Jewish memories is they are merged into a sweetness and an appreciation that you're different. But an appreciation that you're also bound by a wonderful culture of hospitality and graciousness. And I think that's a nice combo. So, I think we've been very blessed.

RH: Well, why don't we talk about the changes in New Orleans?

JK: Oh yeah. Oh yeah.

RH: And I guess, before we start to talk about the changes, because you've certainly set a gorgeous picture of New Orleans, tell me about the Katrina story you have. So, when did you first realize, and what -- that the storm was coming. And what's your routine where you work?

JK: Well, we have -- actually, our family has a different routine because our children, since they were little, we've never evacuated. They've been at the hospital with me or with my husband. [break in audio]. Hurricane Andrew, which was, you know, several years ago, we went to -- Stewart was little. I have three children. Spencer is the elder -- the eldest. Abby is the middle. And Stewart is our youngest. So, Stewart was a baby. He was walk -- he was about six, I guess, or seven. And we went to a hotel close to the hospital and I was, you know, doing my hospital duties and the kids would -- Kevin would hang out. And if Kevin was on service, I would watch the kids and he would go. I mean -- so our kids, we've never really evacuated. That's not been on their radar list. So, when Katrina came, I worked at Memorial Hospital, which is at the Baptist Campus. I was over at the Cancer Center there. And we had a director's meeting that Friday afternoon. And hospitals here in New Orleans, you know when a hurricane is in the Gulf. We know the stages. We know what to do. And it was interesting because -- Katrina was different because it had been there, but the path was projected to go up toward Florida, toward Apalachicola, I think. And Friday we had a big meeting, I mean, Memorial had like 2200 employees, so this was about 315 beds and it was not a small



hospital. So, we were all meeting and our Director of Nursing, who's over at the safety program said, "Oh, by the way, you know, we're watching this hurricane, but it looks like it's veering. Just check -- bring your cascade call list with you," and that kind of thing. Which, we all do. Everybody during the hurricane season, you have your call list of -- if you're at the out-patient facility, you have your call list of your patients to tell them on the next day or Monday, don't come in, we're closed, or this is where you go. So everybody took their call list home and that was that. And the kids were here. It was no big deal. Then, on Saturday, I think, is when it was like, no, this storm is big and we're not sure of where it's going. And I remember the weather reports were -- you looked at the Gulf and you couldn't see the Gulf because the swirling, it was Katrina, was in the center, so I'm getting a little concerned now. I'm thinking -- I knew I was going to go into the hospital. That's what you do. Kevin was not on service at that point and he was thinking, well, either I'll evacuate you know, I'll go to my mother's house in North Louisiana, which was going to be our evacuation route, I guess, or he'll stay here. About Saturday afternoon, I think, you know, I've been called by the hospital by now to say, "You need to be at the hospital at nine o'clock on Sunday morning." So I know what I'm doing. Abby, who's the children's director at the JCC, had just bought a condo on St. Charles, and she was here. We were thinking about, ok, what to do. Spencer, our son who is in med school here, I call him to say, you know, "I think you need to think about leaving." And he said, "Well, I'm playing rugby on the West Bank. I'll talk to you later." And Stewart had left about 10 days before for the University of Michigan, which is where he is in school. So, I think -- I think it was Saturday night, the kids decided, OK, you know, we're going to leave. Spencer decided to go to Atlanta with his girlfriend and drove up that way. Sunday morning, Kevin and -- Kevin had called the nephrology service, and he wasn't on service until Wednesday. So they said, "Look, we have enough coverage, no need for you to come in, go with your kids." Because we all thought, oh, it's going to miss us. Usually -- for hurricanes, you only pack for two or three days, you know, because you leave, you come back in, that's it. So Kevin says, "Yeah, this is kind of weird. It's the first



time I've ever left." But they have enough people. So he packs the car and Abby is -- goes up in her car with her little dog, Lucy. And Kevin takes Schlomo. And we all leave. I go to the hospital, and they go off their separate ways. The interesting thing about Katrina, though, for -- Saturday night, Kevin and I were here, and it was the first time we had ever moved anything up. You know, we never -- like, this rug, we rolled up rugs and put up because we thought, you know, just in case something breaks, the levee, if there's any flooding, because we live a block and a half from the lake, I'm thinking the lake water could blow over or whatever. But we did. We put up some things and we've never done that before which is really, really interesting, when you look at that now. But, anyway, so everybody left and I go to the hospital.

RH: What's your position at the hospital?

JK: I'm the administrator of the Cancer Center there, and the Cancer Center had just been built. It was a couple of years old on the first floor in new building. And so, luckily for me, in some ways, the Cancer Center is pretty much outpatient business. You have radiation, oncology, patients getting treatment for -- radiated -- this is a program of outpatient visits. We did have a bone marrow unit. We had two bone marrow patients in house. And then we had outpatient infusion in my building, but that also is outpatient. So, I went in thinking, OK, we'll see what's doing, and like I said, we've all done this 100 times. You pack your bag. You pack blue jean shorts. Whatever. And you either camp out in your office or you use a hospital room or whatever. So my office is in a medical office building that was adjacent to the hospital. And I had kind of a little suite area, so I went in there. Most of the other staff from the Cancer Center didn't come in, because I was the administrator so was the one that was always there. So, I went in. We had a meeting of all the directors, just like we normally do. This is what's going to happen. You listen to the radio. You get the reports. You have emergency plans that come in. I was giving out arm bands to people that come in. You usually have the hospital divided up to essential personnel and non-essential personnel. So the essential personnel could bring



family members. You can't evacuate everyone. And pets. You can also -- at Memorial, you can bring pets in. And our medical records department was kind of turned into a vet, so you had everything from birds to -- I think there may have been some cats, dogs, and other sundry animals. But so, some people brought in their pets. So, that day, you're kept busy thinking this is what you're doing. I mean, this is very routine. But we knew that this was a big hurricane. So, as it started coming our way, then we started taking a lot more action. At the hospital, and this is so bizarre to talk about this now because I hadn't really spoken about it, but at the hospital, the first -- it had a basement, which is unusual. The building itself was about, one of the buildings was about 80 years old. And it has a basement. And in the basement is where all of the food service was. The kitchen and materials management, which is all of your purchased supplies. So, I think it was Monday -- no, it was Sunday, we decided, or it was decided at the command center, because that's what hospitals do, they have a command center and it was on the first floor of the hospital in administration, and it was decided we needed to move the food as best we could, and food supplies, up to at least the second floor, just in case the basement flooded. So, we did that. I mean, I didn't have any patient responsibilities. I'm not clinical. So, you know, we -- I helped everybody move just like we always did, and moved supplies and that kind of stuff up, and I remember, it was like Sunday -- Sunday night, I spent the night in my office, and I remember thinking, I should have asked for a bed, because I thought that I could just sleep in between two conference room chairs, which did not work. But I think it was -- I guess that -- we went in on the 28th, and Katrina hit on the 29th. And one of my buddies at the hospital is the head of facilities management. We prepared. So I kind of worked to bring things up and down and went to all of the command center meetings. So, as the hurricane came in, I was walking with him, and I remember, he put his arm around me and he went, "Oh, dahlin'" -- he's from Belle Chasse, and he goes, "Oh, dahlin', it's worse than we thought," because more windows were breaking than we thought. And the wind was really picking up. And that night, I spent the night in my office and my office had windows from the floor to the



ceiling, and it's kind of in a U. I'm at one side of the U, and the office building kind of goes around. And the noises that you heard from the wind, you kept thinking, this is what people who have been through tornados and they talk about the train noises -- it was so amplified. It's -- it's hard to describe. The windows were shaking, and you're just watching debris fly through the air. I mean, it was very -- it was fascinating. It is not something that, you know, you want to repeat, but it was really a fascinating experience. So that was, I guess, Monday. Now, my office building was separated from the hospital by a walkway at the second floor and third floor levels. My office is on the third floor, so typically I just run across and get to the hospital. And I remember that morning I actually packed some things with me, because I really wasn't sure if I was going to be able to get back across to the medical office building. And I remember going across the walkway and the glass was cracking, and you weren't really sure that it wasn't going to crack while you were walking through. So we went back over to the hospital. You don't sleep. I mean, you know, they say that you sleep, but you don't really -- until exhaustion hits -- you don't really sleep during these kind of things. And I went back over to the hospital and by that time, I think we moved -- we had moved the command center, which was on the first floor, up to the fourth floor, which was our alternate command center site, and all hospitals do this here. I mean, we all have different sites of where should the water be here and should this break or should that break. So, I think by that time we had moved the command center up to the fourth floor, but I had a bag of stuff with me, because I didn't know if I could get back to the building I was in. And then after that it becomes a blur, but I remember my facilities guy going, "OK, the water didn't come up, the basement had a little water in it," so we thought, OK. So we move all of the food stuff back down. Now, remember, some of the elevators by this time are kind of acting up, so you're physically moving stuff. And then, let's see, we moved it down. And then, this is the part that gets blurry to me, but I remember, there was no water in the street other than rain water, and I remember looking out thinking, "God, the water looks like it's getting higher." And the facilities group and I were walking around, and I remember watching the water



go up and we didn't know what happened. By that time, a lot of communication had broken down. Most cell phones didn't consistently work. All the radios that you had through the city didn't function, or there was no information coming through. Tuesday morning, we were up in the command center on the fourth floor. We could get e-mails. Computers were still up, and faxes. And we knew, at that time, the decision was made -- we are in a survival mode only. We are not really giving patient care. And we are trying to get everyone out. And that's when, just by coincidence, we had two bone marrow transplant patients in house that morning, so when one had gotten stem cells that day, Monday, and we had one patient who was status post-transplant. And I remember thinking, "Those people have to go to a bone marrow transplant unit. They can't just be evacuated to a regular hospital." So we were in touch with our -- with Tenet headquarters in Dallas, by e-mail -- and I've saved some of the e-mails of how to get helicopters. We got the NICU babies out on Tuesday, and most of them, I think, were evacuated to Women's in Baton Rouge. And most of them went out by helicopter. But it became evident that you were not -- there was not support. That communication was really, really breaking down. And we, at that point, OK, we need to get patients out, which, in my history of being in hospitals here, is the first time we've ever really done that. So that was a very -- I mean, you realized how bad it was. Where we were, the water came up and we didn't know at that time either the levees had broken. I don't think anyone knew, but the water came up to the point that we watched cars being carried down the street by the water. So it was pretty fast and it was kind of odd because it wasn't raining but the water kept coming up. And so, where my hospital is located, if New Orleans is a saucer between the levees, the lake, and the river, we're in the bottom of the saucer. So our hospital was really -- took in a lot.

RH: Well -- so this is Tuesday, and you're watching this water rise.

JK: We're watching the water rise and now you realize that -- I can't even remember all of the sequences. I guess I could if I sat down and tried to go through day by day, but I



honestly need people with me and you'd say, "OK, did this happen Monday or Tuesday?" or whatever.

RH: Right.

JK: But I remember, by that point, and you realized just how bad things were. And you also knew the generators for the hospital were on the first floor. They typically are everywhere in New Orleans. So we knew that the power would go out eventually. So we figured we had most of the day of Tuesday until power completely went out. So, you know, each hospital has its own emergency generator system, but we knew we were in trouble. So we tried to get as many patients out as we could. And I stayed, between the command center, e-mailing, trying to get people out, and trying to talk on the phone when we could get phone lines out. Landlines worked sometime. Cell phones worked. It was really interspersed as to what worked and what didn't. And I can't remember which day that it became very evident we were not getting support. We didn't know when helicopters were coming in. We didn't know when they were not coming in. Our hospital is unique in the sense that it has a double helipad. But the helipad being on the roof -- actually, the helipad is above the roof -- so there is a very angled staircase leading up the helipad and I remember thinking at that point, if we have to take patients up there -- I mean, it's a major issue. But it was done. At one point, a couple of doctors remembered that there were boats at a physician's office across Napoleon. And they went over and actually stole the boats and brought them back, and that's one of the things that we evacuated patients in. The water, by this time, had risen to the point where the emergency ramp of the hospital goes from the first floor to the -- really, from the street level, then goes up to the first floor, then goes back. So it's really a big ramp. The water was so high that we broke out windows of that emergency room covered area, and that was our boat ramp. That's where boats came up, and we would evacuate patients off into the boat. And the interesting -- there are so many funny things that you remember. One is how hard it is to break a hospital window when you want to. It's like thinking, OK,



you've always been cautious about breaking windows, you couldn't break those windows. I mean, we were throwing things at them, and I think that finally somebody decided that you hit it at the corner with an IV pole and they shattered down. But it's kind of funny those things that you think, wow, all this time, I thought they were kind of fragile, but no, windows are hard to break. So, they broke out a whole set of windows. And we had two points of evacuation. One was boats, from the emergency room ramp, and then one was the helipad. Now, by this time, all power was gone. This was like Wednesday, I think. And all power was out. So now you were taking patients from the 8th floor down stairwells to the second floor to get them out. And our facilities person thought of a wonderful idea. Actually, there was a hole -- the hospital is connected to a garage that angles up close to the helipad and he actually -- there was a hole there, and I don't know if they cut the hole or if they remembered that it was there, but it was a passageway, I guess, about this big or about that tall [holds out arms]. And we had patients on sheets, and we would transfer the patients in that hole to the garage side and then patients were put in a truck or whatever and got up the eight floors to the helipad, to the roof, and then you took them up the stairwell to the helipad. So it was quite -- I mean, it was great that people knew the facility so that the people could do this. And then on -- I kind of stayed in the emergency room area and ran the boat line. So -- because we never knew when people were coming or when they weren't. The National Guard came. And then they left at the end of the day.

RH: Did they take people out?

JK: No. No. They never took anyone out.

RH: Why did they come? Just to say hi?

JK: Came to protect us and then left. The police came for one day. And one guy sat on an airboat across from the emergency ramp and sat there and then left at the end of the day and I don't think we ever saw him again. The State Police came once and they left.



And I remember, at this point -- I mean, I don't think about things like this. I don't think about looters or protecting yourself. Thank God people were there who did, but I remember people would ask them to leave their weapons or leave something but none of the support services ever did. So it was a bizarre experience. I was in the Cancer Center, which is like across from the hospital. It's a building connected by walkways. And there was a Walgreen's on the corner of Napoleon and Claiborne. And before the water got really high, when the city was pretty much deserted, you would see gangs coming through, and this was a gang of about five or six kids, and I think they were probably teenagers, and they were trying to break in the window to the Walgreen's drive-through pharmacy. And when they couldn't break in the window, because I guess the window was made out of bulletproof glass or whatever -- they couldn't break it through -- they went through the parking lot and knocked out every window in all of the cars that were left there. You know, it was just like you were watching this and you're going, this is really -- this is not something that you can comprehend. It was just amazing to see. So --

RH: Who were the -- where did the helicopters come from?

JK: Well, you know, the helicopters -- there were some Coast Guard helicopters, I think. I don't know what other branches came through from the helicopters, but we, by that time, we had as an administrative group I guess, the COO and the CEO and one of the administrators there had said, "Well, Janet, you're by yourself in your office. Now, you're coming with us. We're not leaving you in a deserted, blacked-out building. You're going to come over with us." So, by that time, they kind of took me in and OK, this is what we're going to do, and they had a radio, a battery-operated radio in that room, and we heard the governor say that she was diverting the helicopters. This was at night because at night we all kind of got back together. And we heard the Governor say she was diverting the helicopters to go rescue people on roofs. And I remember sitting there going, "We probably had about 2,000 people in that hospital." Patients, patient family



members, staff, staff families, and we were there. Condensed, you know, one spot. And yet, there was not a group of helicopters that kept coming in and kept coming in to get us. At that point, or maybe it was the next day, we finally got in touch -- our Tenet group in Dallas, we didn't know this at the time, but they were pretty much told, "You're on your own." And Tenet, the parent company, called Ross Perot, who we have a relationship with on the computer side, and I guess got advice from him, and Tenet itself sent helicopters and that's how I got out, and a lot of people got out, because of helicopters that Tenet sent. So --

RH: So they were privately contracted --

JK: Yeah. Yeah.

RH: -- and kind of commercial? Like two-person or --

JK: Yeah. I mean, the one -- yeah, they all varied in size. That's why you couldn't figure out like what patients to take out or take up the helipad, because you never knew what size helicopter was coming in or what it could take. It was the same way with boats. I mean, the Plan OPS guy had his boat there. There were a couple, obviously, they had taken from elsewhere and so those boats we knew maybe would hold like eight or 10 people, somewhere in there, but we never knew what other -- what else was coming to help us. So, it was -- and you didn't really know where you were taking people. I know that we went out and to St. Charles, which was -- maybe just had a little water -- and from there, people were put on busses and taken either to the airport or somewhere like that, but that's all we could tell people. I mean, here people were lining up to get out of the hospital. A dark -- it was -- I can't even begin to tell you. The smell, the heat -- I think they measured the temperature at one point and it was 106 degrees inside the hospital. So, here -- but you couldn't tell people you were evacuating where they were going. I mean, and because I was running the boat line for a while, I mean, with lots of help -- everybody helped, everybody did whatever they could -- you'd say, OK, mom, you just



had your baby. You can take your baby out, but we can't allow the dad to go with you because, quite frankly, we're responsible for your baby and you and we don't know when the next boat is coming in, so we can't -- we can't send -- we are responsible for you. We know it would be great if you could take your family members and all with you, but we can't do that, because our responsibility is for you first. And it was just -- it was just a horrible thing. It was the right thing, but it was still horrible.

RH: It's like evacuating the Titanic.

JK: It was a very, very horrible thing. Then we had -- there was one floor of the hospital that was rented out. Hospitals can do that. You can rent out space to -- this was a skilled nursing unit. And their medical director, apparently, never showed up. I didn't know this at the time. So we were responsible, really, even though we weren't responsible for their patients -- now they're all in the mix of ours, so you had to take care -- I mean, the images that you have, we moved, finally, all of the patients down to an open area on the second floor and the third -- first floor and second floor -- because from those areas, you could evacuate maybe by boat and that was where the hole was cut through to take patients to the helipad. So, and also, you could combine staff and patients and make better use because, if not, the patients were just in a room, a dark room, upstairs. So that was all done. All of the patients were moved down. I can't tell you the lines of people taking patients down sheet by sheet. You know, patient by patient. Nobody was hurt. Not one patient was dropped.

RH: So they weren't in beds?

JK: No. You can't take a patient in a bed down a stairwell. I mean, there's no way you can do that. So -- patients were taken down in -- and you would -- some of the older patients who could walk, but for short distances, you would try to walk them where they could be evacuated maybe by boat, because if you were ambulatory, you could probably at least step on the boat and get, you know, be taken to safety. So it was just an



amazing, amazing experience. My -- the CEO who I worked with, had spent a couple of years in Vietnam, and he said, that was kind of the closest that he had, the lack of communication, not knowing things, just the environment -- he said it brought back memories of that and I can honestly see now -- there was really no guidance. All of the things that you depended on, your government, your whatever, all of the plans were just thrown out the window. There was no plan. But you knew what you were responsible for and you knew what you weren't. So you just had to kind of go on those things.

RH: So what did you see your responsibility was?

JK: My responsibility was to comfort the patients that were there, and the family members, make sure their needs were met as best I could, and make sure that I followed the plan that was given to me by our command team on getting patients out. And so, for me, it was kind of different because like I said, I didn't have -- I'm not clinical. I didn't have a floor that I was responsible for or five patients. You know, I didn't have that kind of thing. Plus, I had known the hospital really well. I was the administrator on call during the year and I had been there for a few years so I kind of knew where things were. So that's a big help, to have employees that had been there for a while and knows where the secret closets are where you have stuff hidden. That's a good thing. So I pretty much did whatever I was told to do, to try to help.

RH: Was it panicky inside? Was it orderly? Was --

JK: You know, it was amazingly orderly. And amazingly hot. And amazingly, people tried to keep their calm about them. The problems -- the hurricane outlasted a lot of people's endurance. You know, you're expecting two or three days for a hurricane when you go in. This one was so devastating. I -- there was one point where I'd gone to -- I think they were looking for, I don't know, some kind of line or something, and I walked with one of the facilities guys, this great big tall sweet man, and I looked at him and said, "So how do you think you made out?" Because by that time, we did get some faxes. We



knew if we were flooded with 10 feet of water, you know, other people were really hurting and areas of the city were flooded, and you'd get some kind of -- like a fireman would come up every now and then and say, this was gone, and then, you know, or Belle Chasse was hurt, or Chalmette was devastated. Now, people are now beginning to understand, oh, my house may be gone. I don't know this. And I remember looking at this sweet man who would do anything for you and I said, you know, "So how do you think you made out?" And he looked at me and he had big tears in his eyes and he said, "I lost everything." I mean, he lived in, I think, Chalmette, and he lost everything. He knew his daughter had lost everything, and he knew his, maybe his parents. But it was a whole conclave. That's where they had grown up. That was their home. And it was gone. It was all gone. And he knew that then. Yet, all he did was help. You know, he just -- all he did was help other people. And that's the kind of thing that kept people going was you knew -- one of the wives of one of the administrators who was there, you know, she was accompanying her husband, that's where they evacuated, and she was from Chalmette and I remember looking at her one day, and she was breaking down in tears. She had just heard from one patched cell phone to another that her family was on the roof of their house waiting to be picked up. And then, you know, you don't hear anything for days or hours or whatever. And everybody had a story. Everybody was going through that kind of thing. Yet, the focus was take care of the patients. Do what we can. Try to get everybody out to safety. And safety was kind of odd, too. You didn't know where you were sending these people. We had no idea the airport was a disaster or, you know, if people went to the Convention Center, what kind of shape it was in. We didn't know that. We just knew that where we were was not sustainable and we were getting no support. So, you knew you had to leave. So, that was that.

RH: What were the food services like?

JK: Oh that -- hospital -- I read this in the paper later about Memorial. They said there wasn't enough food. You could have stayed at Memorial for months and had food, but it



would have been pinto beans, OK. But, you know, you would have had food. The cafeteria people, the food people were wonderful. I mean, we made sandwiches. That's another thing. I made sandwiches. Or you passed sandwiches out. After a while, you started rationing in the sense that, OK, you can only have two sandwiches and one granola bar and one thing of water because we just weren't sure how long this was going to last. But there was food. And typically, the hospital, you try not to feed everyone. Like, if I had brought in my family with me, you'd have brought enough food for your family to eat for a few days. You know, that's -- because the hospital is not going to sustain you. But, at this point, we fed everyone that came in the door. We had -- when the water started rising, you know, I told you we had given armbands to everyone to identify them and their family members and where they were, so you knew who was supposed to be in the hospital and who wasn't. But, you know, after a while, you lost track. This one -- a couple of guys came in. They had to be from around the area. I mean, I don't know. And they were telling me they needed food and water. And they were patients there. And I said, you know, I don't know, if you're a patient here, you'd have an armband on. And he said he was a dialysis patient, which is the only thing that I know, and that's because my husband's a nephrologist, so he picked unwisely. So I said, are you a dialysis patient? Well, where did you get your last treatment and let me see your arm, because if they're a dialysis patient, you know, typically they'll have a shunt in their arm and that's where they get their treatment. And you know, this guy looked like I did. And I said, you know what, we're going to take care of you anyway. You're OK. I said, "You'll have food and water. You don't have to tell us you're a patient anymore. That might complicate matters when we try to evacuate you." And he said, OK, good. So it was like, OK, I thought I had to pretend I was a patient. I'm not.

RH: So was that a policy or was just early on people got into the building at some point? Did you have to kind of -- ?



JK: Yeah. Early on, after a while, we had to stop letting people in because, really, we didn't know how we were going to get out, so taking in extra people was hard. Plus, by that point, when people would come in from the neighborhood and they were walking in the water or floating on something, a door, we would tell them, "Look, you can't stay here because we are evacuating, but if you can get down to St. Charles, which is so many blocks away, that's where we're taking people. We know you can go there." And so at least by that point, you kind of had a spot to tell people, look, you made it this far. Have a glass of -- have a bottle of water and then go this way. I mean, we -- in fact, I still, to this day, don't drink bottled water. I couldn't stand it. There was so much hot bottled water. I mean, there's only so much hot bottled water you can do in your lifetime, and I think I did mine. But you would tell people, all right, you can take this and then you can go and be evacuated, you can go here. But we didn't really have any help for them.

RH: I'm going to stop this tape right now --

JK: OK.

END OF AUDIO FILE ONE

RH: I'm with Janet Krane, and we were just talking about Memorial Hospital and you said you wanted to talk about this Jewish couple that was there.

JK: It was the cutest story. By this time, you know, it's -- people are condensed to maybe the second floor or maybe the first floor of the hospital, just because the rooms are dark and you don't want to be there. And what we found out was like maybe a helicopter would come to take patients, but then they would drop off people that they had just picked up from a rooftop. So it was not like a zero-sum game. You were gaining, but you were supposed to not be gaining. And there was a couple -- I was walking through the hallways, kind of going back, or getting something, because like I said, I didn't have



any clinical responsibilities so if someone needed something and I knew where to go, I'd go get stuff. So I was walking through, and it just so happened that I had packed wisely for this hurricane because I had packed shorts and T-shirts. And I typically pack blue jeans because you're in air conditioning so eventually you freeze to death. So I had packed shorts and I had on my son's Hillel Michigan T-shirt, and it's Michigan written in Hebrew. So, I'm walking through and these are patients and people and there was this one very striking couple, very distinguished looking elderly couple, and they're sitting on the edge, you know, kind of looking around like this. They're obviously in different surroundings than they're used to. So, the lady -- and I'm walking by and she -- and people ask you 100 questions as you go by and you don't know the answers but you try to be nice so the lady touches me and she goes, are you Jewish? And it dawned -- I had no idea, I was like yeah -- and then it dawned on me that I was wearing a Hebrew shirt. And she said, I don't read Hebrew. I don't know what that means. But we need a little comfort now. And I said, well, I'm not really sure how much comfort this is going to bring you because this says Michigan. And she started laughing and she -- this was a couple who were on the roof of their home and had been picked up by a helicopter and here this couple thought they were being taken to safety -- they got dropped off at Memorial. So -- and so here they are in the hallway, and probably the only Jewish couple there, just judging from the usual. And so I said, here, let me see what we can do for you, and she tells me her story and it's a horrifying story. They're an elderly couple and they had to get up to the roof of their house, get out, their son is still there and they're very concerned. And I don't know them but I make sure they have water. I mean, it didn't matter that they were Jewish or whatever, it's just that they had stopped me, so I made sure they had things. And they didn't have -- I mean, literally, these people were dropped in from another planet. They had never been to Memorial before, I'm sure. So, after that, I tried to make sure they were OK and as we evacuated out, OK, you're together. You can both walk. We're going to put you on the boat. You're going to be OK. Things will be fine. And it took a long time, but they did get out. And I never heard from them, either, so I



hope they're fine. But they were very sweet, and it kind of gave me this, oh good, I can kind of look out after someone. And I just felt so sorry for them thinking, you know, they were going to be evacuated out and not. But it was a very sweet --

RH: Were you every afraid?

JK: You know, I was really never afraid. There were a lot of odd moments. One -- in the middle of all of this, I tried to find my wallet. For some reason, my wallet was gone, so either my wallet was stolen or whatever. So I thought maybe I left it in my car, so I take off to the garage, which is dark and I had my flashlight with me, my trusty flashlight, and I'm thinking, well, if I left it in my car -- because I figure I'm going to need cash and a driver's license -- and I went to the -- and it was deserted, just completely deserted. But I -- at one point, I heard noises in the stairwell and that I actually became scared because A) I had done something really stupid to head over there by myself, and B) I didn't -- I knew there was crime. You could hear gunshots through the neighborhood echoing out, so I didn't know what was going on, so I kind of hid and left. But, before I did that, I stood out and here you are, in the middle of New Orleans, Louisiana, and it was like being in the middle of the Negev. You could see the Milky Way. You could see every star. And not only that, but it was being reflected in the water below me. And I'm in the -- I'm at Napoleon and Claiborne in uptown New Orleans. And that was -- it was perfectly still and it was the oddest experience, just to think, here you are in the middle of all of this devastation and look at the stars. I mean, look -- it's just unbelievable.

RH: What a dramatic beauty.

JK: Very dramatic. And in the middle of all -- I mean, you just -- the thing I kept thinking of was -- and I'm sure every religion has this phrase, but I always remember it from the Yiddish phrase book -- Man makes plans and God laughs. And I kept thinking, oh wow. All of these things that you made, and the to-do list that you had for tomorrow, and whoa. You know, we're just concerned, now, to get people out. I was also -- I mean, I



was concerned about my family, not for their safety but because I couldn't get in touch with them consistently. There was one night when I was able to speak to Kevin and talk to him and logically I knew that they knew I was safe because, you know, in a hospital setting -- and they've been through it before. They knew. Of course, they'd never been through anything like this, but logically, they knew physically I was safe. It was just more like what were you going through. And, you know, you never want anyone to do that. But, on the helipad, we finally got everyone out Thursday. OK. So all of the patients are gone. And there was about 70 of us left. And we go up to the helipad, or the roof because the helipad is above it, and we're thinking we're getting out that night. We have a generator out. Lights are out. And then apparently, FEMA or someone, stopped all helicopters coming in and we knew that we had to spend the night there and they were going to come in again in the morning we thought. So that was the probably the night that was the scariest in the sense that I was with the security people or whatever and they had thrown things down the stairwell so they would hear people coming up in case people did come up. You heard gunshots everywhere. You'd see fires, fires everywhere. And we were told to turn off our flashlights because people were actually aiming at flashlights. I mean, it's a hospital, you know. That was kind of scary. But mainly, by that time, you're just kind of too tired. The thing --

RH: How many were left on Thursday night after you --

JK: Seventy. There were about 70.

RH: Seventy? Oh, that's right.

JK: There were about 70 of us.

RH: Mm-hmm.

JK: And then I got out Friday midmorning, I guess.



RH: And had you been in touch with your family?

JK: I had gotten a couple -- I could get a text message out to, I think, my daughter, and by that time Kevin had gotten another phone, a 318 number, thinking that that would help, but it didn't. I was able to call him when I got out, but even then you could only use satellite phones not -- the phones didn't consistently work. I was lucky. One of the things that I was able to do, the bone marrow unit in the Cancer Center has stem cells in it and they are handled by liquid nitrogen. You have to keep them below a certain level, a very low level of a temperature. And so I was able to go and get the liquid nitrogen fixed so that -- I figured, it's the best you could do. If you were going to save something, that was the best you could do. But, because the emergency power stayed on a little bit longer in some of the bone marrow areas, I was able to charge my phone. So, my phone was a little bit charged. And I was trying to get messages out, but it didn't really work. So --

RH: So, what did you do with the stem cells?

JK: The stem cells, they're in freezers, in big freezers. And the stem cells actually are for patients who have had bone marrow transplants. They might need more of their cells, or they might need to be retreated or whatever. So, what I did was just try to keep them viable so if a person had a transplant and needed, again, to be treated with their own cells, then those would be viable and they could. You know, we haven't still seen if they are all viable, but we had them tested after the storm and they were. So --

RH: Did they go out with you at some point? Or was --

JK: No. They're in huge freezers. There's no way to get them out, so -- they're still there, now, and being taken care of. So --

RH: They're at Memorial?

JK: Mm-hmm. They're still at Memorial.



RH: Wow.

JK: All this time. So --

RH: So, there's a lot of controversy about Memorial.

JK: Oh yeah.

RH: And there were evidently some people left behind or -- I don't even know how you want to characterize it. There's obviously been an indictment of a doctor and two nurses, and a discussion of --

JK: Euthanasia.

RH: -- euthanasia. So, do you have any thoughts on that issue or --

JK: I guess the only thought that I would have is that, first of all, the people who were there were doing what they could for patients. I mean, the kids of family members were standing fanning patients. We were doing everything we could to make them as comfortable as we could. I remember our CEO talking to me, saying how badly he felt that we could only evacuate patients with what they had on and their eyeglasses and, you know -- you just felt so badly for people because you wanted -- no one should have to leave a hospital just looking -- just making sure that they have their one or two things with them. You just felt so badly for them. I mean, I knew -- I know Anna Pou really well. I don't know the nurses that well, but everybody was doing what they could to make the patients better. The unfortunate thing I see there is that we focused on the wrong thing. The Attorney General or whatever focused on things that I'm not ever sure will ever be proven. I just -- if you were there, you understood. It's a very hard thing to say, but the enormity of the situation and trying to make people better and to get out -- and these are sick patients. Sick patients. And I can't imagine three days in 106-degree temperatures helped anybody. So, you just -- you just felt so badly that, not only did



people have to go through what we all went through, but it won't end. Now, people have to go through and re-live this again and again, so you kind of feel very badly. I mean, I don't know. I wasn't present with anything or with anyone at patient -- all I could do for patients was give them water, fan them, try to take care of them the best I could, and I can't imagine that anyone else wasn't doing the same thing. So that's, you know --

RH: So you said they focused on the wrong thing, I guess the Attorney General's office. What should the Attorney General focus on?

JK: I think the Attorney General should have focused more on what was not done. Why were these people left in a hospital with no evacuation directed at hospitals? Why, in fact, did all communication breakdown when I thought our country learned a lesson after 9/11 where the one thing you need to keep going is communication. You know, there are so many things that could have come from this and to have these people look at it and I guess I don't want to say if they did something wrong, yeah, they should be punished, but I just don't think out of the enormity of the situation that that is what should have been looked at.

RH: It's like focusing on individuals when there are so many systemic problems.

JK: There are so many issues going on, and I feel bad. You know, I just feel badly.

RH: Were there any Jewish concepts or frameworks that helped you that week?

JK: I think, you know, it's kind of interesting. I thought about this and I actually asked my son -- actually Stewart. I was up at the University of Michigan for Parent's Weekend and I said, you know, I'm doing this interview and I'm kind of thinking about Jewish concepts and what -- I just kind of wanted to hear his perception of things. And he goes, mom, if you have to think about it like that, that would just be kind of contrived. I don't think that would even be a fair interview. And I said, yep, you're right. You know, once again, put in my place. But then I started thinking about it and I thought, you know, well one of the



things was you wanted, you kind of felt like, God, this epitomizes what Jews believe. This is action. You see devastation. You see what's going on and you're just trying to make it better. Then again, that was the bridge between all religions there. Everybody was trying to make it better. Everybody was just trying to do the right thing. I think one of the things that I always think about is that for a lot of people here, and it's not true -- it wouldn't be true in New York or Chicago -- but here, I might be the only Jewish person these people ever know. So, you know, to me, it was really important that you just did the right thing. You kept what you were needing to do. And luckily for me, I didn't have to worry about my family. They were safe. I didn't have to worry. You know, whatever had happened to my house had happened, but I didn't have to think about that. I could only focus on, OK, I guess the value is action, trying to right a wrong, and trying to make the best of things that were there. And that's really what you do.

RH: Was there any point where you realized that your house was under water?

JK: I realized -- it was probably about Wednesday I realized that. I didn't know if our house had a foot of water or three feet or four. I mean, I just didn't know. But I knew the first floor was gone. The -- our son, the one in Michigan, wrote a story, wrote a paper on Katrina, and he called it "Katrina, the Ultimate Terrorist." And this theory was that Katrina made people lose faith in the government and made people realize what was wrong, you know. And people had been ignoring the fact all of this time that the levees were not going to stand. And he goes into much more detail. I, quite frankly, haven't paid much attention to, you know, the levee coverage. But one of the things he put into this story, in this paper, was -- and I never thought about it from his perspective. We called him, I think, Kevin, my husband, called him that Sunday morning and said, "Stewart, we're leaving. We're evacuating. What is it that you want from your room?" I mean, that -- I didn't think about it from their perspectives, but here, everybody was thinking, OK, I might never see my house again. What do I take?



RH: Wow.

JK: I mean, that's pretty powerful. And you think -- you try to relate that to what other people have been through, but I thought, oh my goodness, we did that to our child. You felt badly. But then you realized, wow, that speaks volumes. And it also speaks volumes of nobody wanted to bring -- people wanted pictures. People wanted this -- you know, people wanted memories. And that was a really, really, really good thing, that people kind of appreciated -- you know what, this doesn't matter. This matters. And if we can live with that lesson, you know, what a gift. What a gift the kids have been given to say this is what's important and now let's rebuild. I mean, quite frankly, I really think my husband and I had no thought -- staying in New Orleans was optional. We probably could have found jobs elsewhere. But it was our kids. It was like, you know, this is home. And we're going to rebuild and we're going to stay here. So, that was really neat. The other thing that was really neat is typically on Rosh Hashanah, I have the Spizers -- you know, our adopted families, over. We have dinner here and then we go to services. So, I didn't realize this but Hurricane -- there was Ivan that blew out one Rosh Hashanah. Then, last -- the year before -- the year after that was Katrina, which just blew it out. But this year, we had Rosh Hashanah at our house with all of our friends and family. It was -- no one cared that the china didn't match. No one cared if you had this or that or the other. It was just nice to do. It was just -- it was nice to see everyone. And people had gone through horrible things. But you knew it was important. You know, immediately, you knew. So I think that's a really good lesson.

RH: What did you have for dinner?

JK: We had our typical. We had turkey. We had brisket, which one family always brings. We get the turkey. We had pasta for the vegetarian component. We had potato croquets, which I made. We had spinach. We had salads. I mean, we just had everything. It was great. And pecan pie. We always have a lot of pecan pie. And it was



just nice. You know, it was like, oh wow. We are all back together. And nobody -- you know, the apples and honey -- that's very special. It was just a very sweet time and you looked around you and there were the grandparents in their 90s, and you know, it was like OK. We were going back together. And then we got to go to our temple, which has been redone, so that was a nice thing. Last year, we had -- I went to services for Rosh Hashanah in Houston, and that was the first time, really, I had seen any of my friends. And everybody was worried. Everybody was like, where's Janet? Hold it. What do you mean? Janet is still in New Orleans? You know, because no one -- when we all evacuated, everybody went their separate ways. But people didn't really realize, well, hold it. Janet didn't leave. She's still there. So, the day that I finally -- let's see. I got out on Friday. Kevin picked me up on Saturday in Marksville, and the phone calls -- the, oh wow, you're out. It was just -- it's like, oh wow. So our last Rosh Hashanah was in Houston, and you were just shell-shocked. I mean, just totally shell-shocked. And then to have -- to be able to celebrate this year was just really, really nice. It was a rebirth of the world that really took on a whole new meaning. So --

RH: So, when you talk about being in Houston and people were shell-shocked, so you -- your husband had to set up in Houston?

JK: My husband moved to Houston for a year. He rented an apartment there. My son did. He moved to Houston for a year. I lived on the second floor of this house, which was gutted, and after -- not only during that time, my dog was in my mom's house in Bastrop. And then -- so I'm living here. My husband's in Houston.

RH: So when did you move back here?

JK: I -- interestingly, I came back, let's see, I was evacuated. I went on Saturday to my mom's home. Kevin left on Tuesday to Houston because they had to set up the medical school, and that's what they did. And then I left in the next couple of days and went -- and stayed at North Shore Hospital in Slidell, in hospital rooms. Because we were then



working with trying to get things in and out of the hospital, making sure the hospital was there, trying to close down a hospital. I mean, it was just an amazing event. So I stayed in --

RH: So you were still employed by Tenet?

JK: I was still employed. Out of 2,200 employees in the spring, we were all -- there were 11 of us there.

RH: Oh my gosh.

JK: I worked out of trailers in front of the hospital. It was an amazing, amazing experience. I stayed at North Shore for a couple -- I guess for a few nights. Then they were able to locate an apartment for me in Covington. So I stayed in Covington. I was joined by --

RH: And who located it? Tenet?

JK: Tenet did. And my daughter, who was living here, she basically -- we called her the wandering Jew. She traveled for about a month. She put, I think, 5,000 miles on her car and went from friend to friend to friend and visited and was an evacuee. She made it to the Saints-Giants game. She was everywhere, and then she spent --

RH: One man yesterday called this -- he said he took an "evacuation."

JK: That's exactly what Abby did. Our son, who was in med school, he went up. He traveled a little bit then came back and spent one weekend -- the weekend of Hurricane Rita with me. Then he went to Houston, so after -- so I was living here. I came back -- I got to come back really early because Tenet had rented -- they actually had used a third-party security force -- it was almost like mercenaries. It was a company called Dyncorp. And they were the ones who operated the helicopters. And they were armed, you know,



very -- they looked like G.I. Joes, OK. So, I had wanted to go back and see the house. It was about, let's see, probably about a week-and-a-half after the hurricane, maybe, at the most. And the CEO at North Shore said, take the truck, Janet. It's the emergency truck. They will let you go across the Causeway in that. So, I said, OK. So, I'm thinking I'm just going to drive the truck. No. The two soldiers go with me. And they're armed to the teeth, you know. So we drive in across the Causeway and it is one of the most amazing sights. You drive in and I'm looking at Metairie. And there must have been somewhere between about 35 and 50 helicopters. And they were getting big -- you know, the things of water from the lake to go put on the fires that were everywhere. It -- and windows -- the glass building at Causeway, the windows are completely blown out. Trees are everywhere. Roofs, big pieces are everywhere. Debris is everywhere. We tried to turn down Esplanade going this way, toward our house, but it was completely obliterated by telephone poles and stuff so we had to go -- we go down the wrong way and I remember telling the soldier, yeah, this is -- you know, this is the wrong way. You never go this way. And he goes, well, little lady, we're going whichever way we want. And I said, OK. So we go and we come to the house. And by that time, Drago's, one of the local restaurants, had -- was serving people for free. So we went to our house and kind of saw, OK, it's flooded. Then I took them over to Drago's and they had a free, you know, shrimp pasta or something and they were so excited because it wasn't an MRE. So I got to come back pretty early, which was nice, just to kind of see all of the --

RH: So, you stayed just the day here?

JK: Oh, I just stayed a few hours and then went back. Not even a few hours. I was here and then I went back.

RH: Did you take anything out of the house?

JK: No. I mean, at that point, you're just -- it's funny. One of our friends who evacuated to Houston, and now he and his family live in Houston, he said, you could see people



from New Orleans in the grocery store, that shell-shocked look. They were just standing in the grocery store doing this. I mean, it's so much to comprehend that you can't describe it, and you couldn't get back into your city. You couldn't -- I mean, it was just an amazing time. You couldn't come back in and check on your house until you were told you could. I -- like I said, I lived in Covington for two months. In November I moved back into the second floor of the house. The neighbors --

RH: It must have been pretty empty around here.

JK: Oh, it was awful. It was awful. There were a couple of nights that some of the workers had -- I guess, some of the people who had their houses gutted let the workers stay in their house so the workers would get -- would have too much to drink and, you know, it was like Party City for a while. It was just a very bizarre -- it was like living in the Wild West, really. It was bizarre.

RH: And you're kind of a single woman by yourself.

JK: Yeah. We did have our neighbors, on this side, they would come in for a couple of nights a week. And I got to be very good friends with them since our tree had fallen on their garage. So, and all of the fences were gone. So we had a contractor who had been with us for 17 years so she helped -- we had six people come in and gut things. And I remember calling the kids going, OK, tell me what you want because this looks like it's destroyed and we're throwing it away. OK, mom. But the heartbreaker was my husband's albums from the 60s, 70s, 80s, whenever. And he had had them all packed away nicely. And I went, "They are all gone, Kevin." I don't even think -- I mean, the mold is everywhere. And we were lucky. We got to our house before most people did. So, you know, it was just like everything is gone. And here I am, standing on the phone, trying to tell my kids, no, no, there's nothing left. There is -- the first floor is gone. And we're so much more fortunate, like I said, than other people. We didn't have that much water, and we got in early, so it wasn't as moldy and stuff. But I've got to tell you -- living



on the second floor of the house when they're doing work here is not something that you want to do.

RH: Meaning, you don't have your kitchen?

JK: No. But it was just me. I never had a kitchen. I never got a trailer because I was kind of like, I'd just as soon live on the second floor of my house. If I had small kids or family to work with -- I had a refrigerator in the garage that made it through the storm. And my son, upon moving to Houston, he and his roommate dropped by their old washer and dryer, so I had that. And that made my life so much better because it wasn't like you could really wash your clothes anywhere. So, between the refrigerator where my daughter said I kept my cheese, wine, and grapes, and the washer and dryer, I mean, you know, it was fine.

RH: So, your daughter came back, too? She was able to move back to St. Charles --

JK: She came back. Her apartment had no damage. And she and I spent a lot of time together and I think will forever be closer because of it. Because you can't describe it to anyone, but we went through it and that is a very special thing. That is very special. And Spencer had come back for one weekend and needed to get his lab coat and things from his apartment, which was still, at Magazine and Jefferson, at that time, it was still, you know, you weren't allowed in. Now, I got in because of my hospital badge. But, we were pulled over by some of the policemen. They were like not New Orleans policemen but from out, I guess, the National Guard of whatever. And our son, I said, well here it is. And I can take care of it. And here's my badge. And Spencer started to make a move to bring out his driver's license and the guy points the gun at him. And all of a sudden it hit you, you're in a war zone. That was a very scary experience for Spencer. Well, for me, too, but I kind of expected it because I had been around these guys. And I kind of knew -- they don't take prisoners. You know, that's what they do. But for Spencer it was a very scary experience.



RH: So, what's it like to close down a hospital?

JK: You know, there's a lot of stuff. There's a lot of stuff that you never think about. We were fortunate we had good electronic medical records, so a lot of the records could be saved. The bad part for the Cancer Center patients were a lot of the radiation/oncology patients, their treatments are kept -- because it's like a five- or six- or 12-week period, so those records were kept on the first floor and a lot of those were gone. So now, people had to recalculate radiation treatments and things so that was bad. There's just a whole overwhelming list of things to do for people who needed birth certificates for their children. I mean, not only did we close down, the state closed down. So, vital records. Amazing things. And I felt very fortunate. I worked at a lot of levels of the hospital, so I kind of knew, OK, here you need to get this, here you need to get that. And Tenet had two hospitals close. Lindy Boggs and I -- when it was Mercy, I was COO there for a while, so I knew a little bit about that, and I knew Memorial, so it was kind of -- you felt like, OK, I can do this. I mean, for a while, we moved to trailers in front of the hospital and, I mean, I did everything from medical records to credentialing of medical staff. In fact, the hospital where I'm now, the medical staff would have to ask for credentials and they need records from the old hospital, and I'm the one who signs saying, you know, at Memorial, we have no -- I had the little phrase worked out from the attorneys, and we didn't have the records, so now I'm their hospital but they're reading my name from another one. So it's kind of odd. But I mean it's amazing what you have to do. Just totally amazing. And none of us had ever been through it before. So, you learn a lot.

RH: Do you have any thoughts about Tenet? Were there things they did right? Things they did wrong?

JK: You know, what they did right was they helped. They tried to help. They, especially on Tuesday, when we were trying to get patients out, and we were -- anywhere a patient could go, we were trying to get patients moved. At Tenet Hospitals, we could take you,



we could take this, we could take -- they were all very, very helpful. It was, you know, it was sister-brother hospitals. They also helped us go to other hospitals. When they realized the situation was bad, they sent the helicopters. The problem was that because of the controversies that came after, Tenet kind of got a black eye and I don't think it really deserved that, but I see what happened. We had -- there was one physician, I think he was an emergency room physician, who had brought up things to CNN that we were either, I can't either discriminating against black patients or -- anyway, he brought a racial issue into it, I think. And that was so unfair. I mean, besides the fact that I waved goodbye to this physician who happened to leave way before I did, so, you know, he didn't have a lot of credibility. I learned a lot about news reporters and, you know, how I might not trust everything I ever hear from CNN again. But you know, you just -- I think Tenet got a blacker eye than it deserved. I also think that after the storm it didn't really know what to do. It didn't -- do you open hospitals? Do you keep them closed? What to do with the population? So I think it was just an overwhelming experience for them, too. But, all in all, I think they probably got a black eye when they didn't necessarily need it. You know? Now, I'm at HCA and a book was --

RH: So say, HCA is --

JK: Healthcare, let's see, Hospital Corporation of America. And they run Tulane and a book was written about all of the heroic things that happened at Tulane and they were all treated like heroes. So I'm like going, OK, but you had about 100 patients, we had over 200. I mean, it's amazing, to me, to see the differences in how one is treated as opposed to the other, but then again, there were a lot of murkier issues that came up with Memorial. So, you know, it's kind of a shame that people didn't get treated the same way.

RH: By the media?

JK: Yeah. Yeah.



RH: Let's shift gears a little bit and talk a little about the Jewish community. Tell me about your relationship -- you've been on the Board at Gates of Prayer?

JK: I've been on the Board at Gates of Prayer for a long time. I've been -- when we started there, I became active in, first of all, with the kids and with continuing education. I was the chairperson of that committee for a while. Then, I was the youth group advisor for about four years when Stewart was in school. And a Board member. And I'm now on the Exec Board. I'm a financial secretary. So, I felt strongly that, like I said, you have to create memories for your kids. And being Southern Baptist, you're active in things. What can I say? And Kevin's family, you know, a lot of people that came from Jewish families were Jewish at certain times of the year. You know, like at High Holy Days. But then, it didn't seem to carry over to me. I mean, it didn't seem to carry over to regular things that you did or, yes, you knew you were Jewish by identity. But to me, I chose Judaism as a religion. I didn't choose it as a community. And so I kind of had a different perspective on it. So we've laughed -- the kids and I have laughed several times that they're probably more Jewish because they had a non-Jewish mother than they would have been had they been raised in the religion, almost, because you take a lot of things for granted.

RH: So you converted with your son's bar mitzvah?

JK: I converted after Spencer's bar mitzvah and before Abby's bat mitzvah. So, yeah. And it was a real private -- I mean, I didn't have a big ceremony. But I did the mikvah and it was a nice thing. You know, it was very nice. So --

RH: So, how did you connect with the Jewish community when you were back and when did the Jewish --

JK: Oh. I can't even -- I can't even tell you how wonderful our Rabbi and Gates of Prayer has been with reconnecting. They have been -- we had executive board meetings via telephone. He was in Houston, the Rabbi was. And I'm not sure where everybody



else was. A large component was in Houston. The people that were here kept everything going. I got more mail, I think, or e-mails from the Jewish community because, you know, everybody was reconnecting. It was a wonderful thing. And people were calling, are you OK. Relatives in New Jersey were like, you know, Janet, for Rosh Hashanah, the Krane family was mentioned because we had told them that you're still in the hospital, you were still stuck in the hospital and stuff. And it was -- the outpouring was just amazing. But the fact that Gates of Prayer stayed together -- we knew who was coming, where everyone was going. I mean, it's been an amazing experience. It really, really has been sweet. It's been sweet to see.

RH: Can you talk about what those kind of connections meant when you were kind of -- when you were back on the second floor, the first person in the neighborhood?

JK: Well, you know, you're back on the second floor and the Lazaruses down the street would leave messages under my windshield wiper -- Shabbat dinner. We'd love to see you. You know, because their house didn't have as much damage. They didn't flood. The Wassermans who had moved back here, by that time, never stopped. "How you doing? What's going on? Can we help you?" Now, you have to understand, my work was crazy. It went, sometimes, 24 hours a day; sometimes six. But everybody called and connected. Everybody kept in touch. When Kevin came back in town, we were going out to dinner at one of the two restaurants that were open. But you know, everybody kept in touch. And you kept in touch with who -- OK. This one did this and this one did that. Abby was connected with the Jewish community through the Community Center, but also through friends. "OK. Abby is here? Let's do this." And she was so excited when her friends started coming back in January, too, so she could stop hanging out with me, I think. But, you know, it was -- it meant a lot to you because you understood that that was the important thing. There was not, oh, they went to Touro. They went to here. They went to there. This was a community. It didn't matter. And you just wanted to do what you could. I think it's the most wonderful thing that Beth Israel is sharing with us.



RH: You were on the Board. Do you remember the decision-making process? Or the invitation at all?

JK: Well, the decision-making process was they had no other place. I mean, what do you do? You -- I mean, what can you say? We'll work this out. It has to be done. And that's -- it's like you were very proud of us. You know? You were proud of just the Board, the Rabbi for not only realizing that people were going through a hard time, but they need continued support. The Rabbi called me and said he wanted to have lunch with me. And this was like, OK, typically this means you're getting hooked into something else. So I'm a little suspicious there. So, we have lunch together and I'm like, "OK, Bob, what do you want?" And he goes, "No, I just want to tell you -- I know you went through a bad experience and whenever -- I'm your spiritual leader there, too. What you need. If you need to talk to me, I'm here." And you know, that was a very -- this is a man who's been, you know, he's out of his house, too, and doing 100 different things. But he took the time to do that. And of course the next time I had lunch with him, I wound up hosting the college Shabbat, so there's a reason that you're suspicious. But, you know, everyone tried to do what was the best thing to do. Bridges were built that I hope don't ever go away. You know, you think, oh wow, it was a nice feeling. It was just a nice feeling to be able to do that. We had Yom Kippur at our synagogue right after Katrina. No carpet. You know, it was -- the Rabbi was getting people for services that morning. You know, calling people in. Here you do this, you do this. Now, our Rabbi is a little anal, OK. He keeps everything very lined and very -- but it's amazing. It went perfectly because the sense was, oh wow, we're home. You really realized what a home meant, both in congregation-wise, your own home-wise -- I mean, people would celebrate, we got sheetrock today. Or our windows are in. You know what I mean? It's just a -- and everybody knows. Oh wow. This is great. There is shared connections that I hope we don't lose sight of. I really hope it stays.



RH: And how do you think the Federation and the larger Jewish community managed in this disaster?

JK: I honestly don't know how they pulled it all together, but from my perspective they worked to open it as soon as they could, like the JCCs and that kind of thing. They worked to keep as connected as they could, and to keep in touch, and to provide support groups. I really don't know how they did it.

RH: Did you avail yourself of -- I mean, they offered the \$700, and such as that.

JK: Right. Our kids did, because they both needed it. I, you know, I didn't. I felt -- I felt so fortunate. I had my job. Kevin had his job. We had things. That money should go to the person who lost everything or didn't have the resources to come -- to get anything else. You know, I was blessed. So I'd rather someone else be able to do that. You know, you couldn't help being proud of Jacob's Camp and the role -- I mean, our kids grew up at Jacob's. I'm on the camp committee. The fact that they did so much through their Jacob's Ladder program and tried to give support -- just amazing. And it didn't matter. It was truly people of faith. It didn't matter -- Jews, non-Jews, Methodists, Presbyterians, it didn't matter. Everybody pulled together, and that was really a nice feeling.

RH: Are you concerned about the size of the Jewish community now?

JK: Yeah. Yeah. I am. I'm very concerned, and I'm concerned that we won't be able to pull people back here. Our congregation has gone. We've lost about probably 30 percent of our members. And we lost a good component that were active, involved, you know, and that hurts. You know, in fact, I was sitting at the meeting last night, and I turned around and I thought, "God, I really miss him," one of the people who had left. He had moved his family to Atlanta. I -- you know, it's kind of like you go, God, we just have to, like go on. You have to just roll up your sleeves and go on. And Jews do act. I



mean, that's the focus, is action. But I really worry about the community and the growth factor. I don't worry so much about the community that's here. They've hung in. I think maybe in the next year or so you might want to make some decisions about where you go, where you stay. I think my concern is that we won't be able to attract families back and that's kind of scary. On a lot of fronts. Not just the Jewish front. But it is concerning.

RH: What do you think it will take to grow?

JK: I think it will take business. I think it will take the healthcare community getting its act together and being able to offer and provide good healthcare. It will take services. I mean, if you moved into New Orleans today, you're not always sure if you have power. You're not always sure if you have water. You're not always sure you have fire department support. That kind of thing. Those are essentials you just can't take for granted. I think the crime is going to hurt us, to have people move in. I think that's what people hear in the rest of the country. You know, I think they hear a lot about the crime and it just kind of -- it breaks your heart to think that we can be our own worst enemy by not coming back, you know, in the way that we should. I sat on a couple of the healthcare task forces, and I was sitting there thinking, these guys don't get it. We need to look at how we delivered healthcare before and do it better. We don't need to do what we did before. That wasn't the best. But we need to do it better. And, you know, it amazes me the mindsets of politicians and people who just can't go -- there might be a reason 49 other states do it a different way. There might be a reason. You know, not that their way is perfect, but you know, the fallacies in our system, so that's hurtful, and I don't want to see that.

RH: Is there, as far as medical care, since you're kind of on the inside of that, is there -- do you have an opinion about the charity system or how that should work?

JK: You know, I don't really -- my opinion of the charity system -- that system didn't work well. I think there are ways that you can do it and structure that work differently. The



problem, from my impression with the way things work here is that you have the component of the LSU medical system, which is very powerful and tends to have the indigent care linked with the medical school and system, which is not the correct way to do it. You know, you need to divide it out so that the money for indigent care, the Medicaid, Medicare, and Medicare funds, follow the patient, not the system, and that's, I think -- we're making some crucial mistakes there. You know, you can have good care and not call it charity care. And we seem to just be mired in not getting out the right way to do things. And so -- that's kind of sad to say.

RH: Is there anything that would tip you, you and your husband, to leaving? As you said, you came back for your children, to give them their home.

JK: I guess if our kids kind of said, "OK, enough. We're out." Maybe that would be one thing, but, you know, for right now, for the foreseeable future, my friends are here, my life is here. During all of this, my mom had a meningioma, had brain surgery up in West Monroe, Louisiana. Was put in a nursing home. This is a lady who lived independently, and I was traveling four-and-a-half hours up and four-and-a-half hours back every weekend to go live in her house while she was in either the nursing home or the hospital. Finally, tried to move her back here post-Katrina. There's no places open. Found a skilled nursing in Mandeville, so I did the Causeway trip for a while. And now, oddly enough, my mom is in assisted living at Woldenburg Village, and is a little -- is doing well. So, but talk about adding trauma to your life. Here you are on the second floor, your husband's in Houston, one kid's in Houston, one's coming back, your daughter's here, and then your mother is ill. Pre-Katrina, it was a no-brainer. You know, you'd say, "She's coming down here. She'll get care at Tulane. Kevin will be there. Everything will be fine." Those options are all gone. So, in a lot of ways, I consider her kind of a Katrina victim, because she really had a rough go of it for a while. We didn't know if she was going to be able to independently come back and live by herself or what. So, now, her house is for sale in Bastrop and, you know, it's been a life change for her, too. So --



RH: So, is she ambulatory?

JK: Oh yeah. She's getting around fine and does her thing and is doing well so -- yeah. That was kind of shocking.

RH: Yeah.

JK: But she does well.

RH: Is there anything -- any rituals since the storm, any observances in Judaism that are more special to you now than they were before?

JK: You know, Rosh Hashanah has always been my favorite holiday, so you know, that's like very special for me. And I guess with it coming during hurricane season. We always lit candles, Shabbat candles, in the little -- our front window has a ledge to it so that's where we always lit candles on Friday. So much so that the dog, Shlomo, follows us. When we get the candles out, Shlomo goes to the ledge and stands there because, typically, after we eat challah, we throw him a piece so he stands there. So, I think, one of the first times that we lit candles with our house with no blinds, with our children with no furniture, the walls were all bare, you could see from where you lit the candles through to everything else because there were no walls, that was, you know, to see the progress that we've been through lighting candles, from nothing to OK, now we have a home. OK, now we've decided that, you know what, we're going to have a home that's more inviting than it was before even though I hope it was inviting before. So I think lighting the candles with your kids, it will have a very special meaning. And it does because you think what you've been through and how precious those little faces are to you. And even Stewart, who wasn't here, but when you read his paper and hear his passion, what he went through, wanting to help and not being here. So, I guess, yeah. Shabbat, lighting those candles will forever take a whole different experience for me. And I think that, you know, I think it will for the kids, too. I really do.



RH: Tell me what you feel you've learned about yourself this past year.

JK: I've -- that has been one thing I have learned about. I learned that I'm tougher than I thought. I learned -- I always knew that I was good in an emergency. I mean, the family will tell you that I'm levelheaded and I'm good in emergencies. I learned that in fact I do the right thing a lot. You know, I do -- it's -- you do the right thing and it's not a thought process. It's -- you are kind. You are good. You are this. It's just one of those things that you're like, oh, I'm not always trying to do things that are good. In fact, I do. I learned how to -- I learned that a lot of the things that I did in the past were good things. So I guess I learned to be proud of myself for going, you know, it was important to make sure that the kids did this, or make sure that we, as a family, did this, because when you come right down to it, that's what you have. That's what you take with you, is those memories and the relationships and the closeness. And, I mean, what else is there? So, I learned that all of those times that I went, no, I am not doing this. We are going to spend family time or do this, that those were probably -- I should have made more of those decisions, you know, rather than do something that didn't mean as much. I also learned, like I said, I learned that you can do -- you can do anything for a limited amount of time. So -- so that was OK.

RH: That was the lesson.

JK: Yeah, that was the lesson.

RH: We're going to wrap this tape up.

JK: OK.

[END OF INTERVIEW]