The Baptismal Chair

Ellis William LeRoy Jr.

It was a cool cloudy day when I arrived at his home some years past. His hospice nurse was attempting to console his family. He was nearing the end of his life. He was frail and partially conscious but knew we were there. He had always been a stoic man and had worked until disability forced him to retire. He had been confined to a wheelchair for several years. There were no complaints that day, and he was comfortable. He had no desires other than to be with his wife, who had preceded him in death. Now he lay in his bed on oxygen and at peace with the world. He had been a patient of mine almost as long as I had been a physician.

When I first met him, he was a large man, muscular, dynamic in character, with a loud, booming voice. During his visits to the office, he would tell me stories of his work, philosophize, and laugh. He always dominated the conversation. He was suffering from joint pain, and his fingers had begun to develop some joint enlargement. Lab tests and x-rays were done, revealing rheumatoid arthritis. Our visits to the office went on that way every few months for many years. New treatments were added as they became available. Still, the disease progressed.

When you are chronically ill, time is a slow taskmaster. Additional health burdens came as he aged, including emphysema, diabetes, and urinary incontinence. He worked as long as he could. The arthritis became so severe he could hardly walk, then later not at all. A wheelchair was required, then oxygen, and then a urinary catheter. For a while, he made his appointments at my office with the help of family members. This was becoming arduous and stressful for everyone involved. It wore everyone out. I told him I would start making visits to him at home. They
were called “house calls” then. Doctors don’t make them much anymore, but for me, that was one of the pearls of medicine. People’s homes and families told me much about them. Almost all of my work was as an internist and a critical care physician. Out of necessity, house calls came after work on my way home or sometimes on my afternoons off on Fridays. Home health was not in existence when I first started medicine. He started it as soon as he qualified, and it had become a real blessing. His nurses and aids helped bathe him, change his catheter, clean the home, and manage his diabetes. One nurse would always rearrange her schedule to be there during my home visit. I appreciated that so much because the visits were usually after their normal hours. We would review his blood glucose tests, adjust insulin doses and comfort meds, and evaluate other problems that may have come up. A family member was always present (usually his wife). His illness was wearing heavily on her. Then one day, quite unexpectedly, his wife died.

Her death seemed to change his personality. He was not as loud and boisterous and was more graciously thankful for all his care. With the help of his good family and hospice care, he was able to stay at home. At the end of our visits, he would thank me. I would thank him for the privilege of seeing him in his home and thank his family for being there. His nurses’ special efforts to care for him were extraordinary.

This big man had never joined The Church of Jesus Christ of Latter-day Saints, although he had grown up in my hometown, a predominantly Latter-day Saint community. His wife would express her desire for him to become a member. His children were all raised by their mother to be active in the Church. He would tell me that he had grown up never being interested in religion and hadn’t seen too much need for it.

In The Church of Jesus Christ of Latter-day Saints, it is necessary to be baptized (beginning at age eight for children) to become a member. Converts older than eight can be baptized at any age. Adults can later receive additional ordinances in one of the sacred temples, including being sealed to one’s spouse and children for eternity. This was what his wife had longed for all her life.

When she died suddenly, he was heartbroken. She had been his companion and taken care of him for so long. He was supposed to go first. Now, other family members moved in to provide the care that he badly needed.

On one of my subsequent home visits, he blurted out an unexpected question: “Do you think I could survive being baptized?” I was startled, to say the least. It took me a minute to collect my thoughts. It
was totally unexpected. I had never seen a person in his condition baptized by immersion as is the requirement in the Church. He was completely immobile and on high levels of oxygen. The thought came to me of the crippled man in the New Testament whose bed was lifted onto the roof of a home where Jesus taught and then down through the ceiling of the house so that he could meet the Savior and be healed. Then I asked, “Is that what you want?” He replied, “Well, that is what my wife always wanted. I should have done it while she was alive, but I was afraid. I put it off too long. I really do want to be with her.” I replied, “I know that is what she wanted, but is that what you want?” He answered, “Yes!” I thought to myself, “Who am I to question the sincerity of a man who has the extraordinary faith to be baptized knowing that it could be his last act on earth?” I could only answer, “If you really want to do it, we will find a way.”

His family contacted the missionaries, who came to his home and taught him the gospel lessons and asked him to make commitments to keep God’s commandments. The Book of Mormon was a challenge for him, but he began to read it. In the meantime, his home nurses and I were planning how to provide a safety net for his baptism so that he would not aspirate, drown, or have a cardiac arrest while under water. He was a big man and totally dependent on others. I thought briefly of a diver’s outfit, but I doubted that would fly with Church authorities. Besides, they didn't come in white. Then his sons came up with a brilliant idea—a specially made baptismal chair. This would replace his wheelchair and facilitate the baptismal process. Approval was given by his bishop. His sons went to work to build the chair. The stairway into the font was measured to be sure the chair would fit. The finished chair had two handles on the back and handles on the legs and sides and was large enough for him to sit comfortably. Safety belts were made to keep him from floating up when he and the chair were immersed. We didn’t want him to have to do it twice.

The missionary lessons were completed and the commitments accepted. A baptismal date was set. His interviews took place. He was ready. We had an ambulance parked outside the meetinghouse just in case. The baptismal font was filled with warm water. A congregation of family, ward members, friends, and home-health personnel convened. The meeting started with a hymn, a prayer, and a brief talk about baptism. Antibiotics were given to him before the baptism in case he aspirated. His catheter was removed, and long oxygen tubing was attached to a portable tank providing his six liters a minute of continuous oxygen.
His nurse was at the side of the font as three of his sons, dressed in white, carried him in his chair down four steps into the font, holding him suspended in the living water. One of his sons stood beside him and raised his hand to the square and repeated the words of the baptismal ordinance. The oxygen was removed and the tubing handed to his nurse. His nose was clamped, and he held his breath. He was immersed. Everyone there held their breath with him. The font overflowed a little as up he came, dripping wet with a smile. The oxygen was quickly replaced, and he was carried up the font stairs in the baptismal chair. Warm towels were given, and his family helped him dress. He was then confirmed a member of the Church and given the gift of the Holy Ghost by the laying on of hands. There were no problems. The ambulance was not needed. His faith and that of those around him had prevailed. We had witnessed a miracle.

The bishop met with him often after his baptism—also doing house calls. The Aaronic Priesthood young men came on Sundays and administered the sacrament to him. Lessons were received on temple preparation, tithing, and the Word of Wisdom. Despite his failing health, he was as happy as any person I have ever met. His bishop had told him that he would have to wait the customary year to go to the temple. He hoped he could last that long. Six months went by. He was declining. Nine months, ten months, eleven months.

One of the things his wife wanted was for him to join The Church of Jesus Christ of Latter-day Saints. The other was to be sealed to him forever in eternity. That required him to go to the temple and receive a special endowment in which he made covenants to be faithful in all things; only then he could be sealed to his wife.

One Sunday his bishop was seated on the stand in the ward sacrament meeting when he felt an urgent need to visit him. The bishop whispered in his counselor’s ear that he needed to leave the meeting. He got up and went straight to this new member’s home. He told him that the wait to be ordained an elder and qualify to go to the temple was nearing the year mark since his baptism, but that a month still remained. He was going to request an exception from the stake president, as he felt inspired to expedite the process. Within a week all the requirements had been met, including a house call by his stake president to sign the final recommend and confer upon him the Melchizedek Priesthood.

Plans were made and a date set for the endowment covenants and sealing in the Provo Temple as soon as possible. I arranged for the day off so that I could go, but at the last minute, the date was changed to
accommodate a family member’s travel. I was on call that day and could not attend, but his home nurse accompanied him and his family. I spoke with a member of the temple presidency who lived near me about his needs. A special endowment session was held for him and his family, after which he was sealed to his children and deceased wife for time and all eternity. His daughter stood as proxy for her mother. His home nurse was with him. I am sure that angels were in attendance that day, especially his wife.

His bishop’s promptings were justified. I visited him at his home just one or two more times. He died just a few weeks later. In Matthew 10:1–16, Jesus tells us the parable of the workers in the vineyard, in which the first laborers were paid a full day’s wages, and those that came in the mid-day were given the same wage. Those who came in the eleventh hour were paid the same as those who worked the full day. I have thought about that a lot. I love that about the Savior.

My friends’ wage will be the same. I miss this couple greatly. I love them both.

This essay by Ellis William LeRoy Jr. was a finalist in the 2023 BYU Studies personal essay contest.