

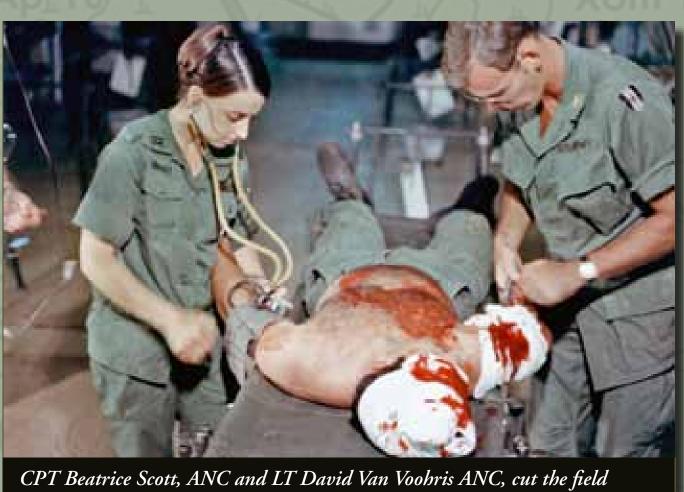
MILITARY NURSES IN THE WILLIAM STATES OF THE STATES OF THE

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Whether stationed with training units, in hospitals, on planes, or aboard ships, in the Pacific Theater, or the United States, military nurses served with distinction throughout the Vietnam War caring for U.S. military personnel, Allied troops, and civilians.

In April of 1956, three Army Nurse Corps officers became the first U.S. servicewomen to serve in Vietnam. Majors Jane Becker, Francis Smith, and her sister, Helen Smith, were placed on a temporary duty assignment with the United States Military Assistance Advisory Group's Medical Training Team in Saigon, Vietnam. Their principal responsibilities were to educate South Vietnamese nurses in modern nursing care practices. One of the tools developed and translated into Vietnamese was a nursing procedure manual. In 1962, as America's commitment expanded in the Republic of Vietnam, Army Nurse Corps officers helped establish the 8th Field Hospital in Nha Trang, South Vietnam.



CPI Beatrice Scott, ANC and LI David Van Voohris ANC, cut the field bandages from a newly arrived patient at the 2nd Surgical Hospital. Lai Khe, Vietnam, September 23, 1969. Photo by SSG Ronald DeLaurier. U.S. Army photo, National Archives

In 1963, the first Navy Nurse Corps officers arrived in South Vietnam to help establish the U.S. Naval Station Hospital, Saigon. Within a few years, additional Navy Nurse Corps officers served on board two hospital ships, the USS *Repose* and USS *Sanctuary*, off the coast of South Vietnam. These floating hospitals arrived in 1966 and 1967, respectively. Their primary mission was offshore medical support for American and Allied Forces in the I Corps Tactical Zone from Da Nang to the Demilitarized Zone (DMZ) at the 17th parallel. In 1966, Navy Nurse Corps officers helped establish the Navy Support Activity (Naval Station Hospital) in Da Nang, which was to become one of the busiest combat casualty treatment facilities in theater.

In February of 1965, as fighting intensified and U.S. combat forces were committed to Vietnam, the Air Force Nurse Corps augmented the 9th Air Evacuation Squadron, Clark Air Base, Philippines with male nurses to help evacuate wounded American servicemen from Vietnam. In February of 1966, the first contingent of female Air Force Nurse Corps officers arrived for duty at the newly established 12th U.S. Air Force Hospital and the casualty staging unit in Cam Ranh Bay. Other Air Force nurses soon followed, serving in aeromedical evacuation squadrons, such as the 903d, and dispensaries throughout the Pacific Theater. The Air Force assigned nurses to two types of air evacuation missions during the war: "intratheater" or in-country flights transporting the sick and wounded to military hospitals within South Vietnam; and "intertheater" flights from Vietnam to U.S.



Members of the 4th Battalion, 173rd Airborne Brigade, load casualties aboard a UH-1D (Dust Off) helicopter to be extracted from Hill 875, located 15 miles southwest of Dak To, in preparation for the final assault. Republic of Vietnam, November 22, 1967. Photo by SSG Alfred Batungbacal. U.S. Army photo, National Archives



An aerial view of the 93rd Evacuation Hospital. The helipad of the 45th Air Ambulance Medical Company is in the background. Long Binh, Vietnam, November 10, 1969. Photo by LT Berlin. U.S. Army photo, National Archives

military hospitals in Japan, Okinawa, the Philippines, and the United States. During the Tet Offensive in February of 1968 the Air Force evacuated more than 10,000 patients.

By December of 1968, Army Nurse Corps officers were assigned to seven surgical, five field, eleven evacuation, and one convalescent hospital within the four Corps Tactical Zones of South Vietnam. These hospitals provided regional medical support to U.S. forces as far north as the 18th Surgical Hospital, Camp Evans near Quand Tri (only 21 miles from the DMZ), and south to the 29th Evacuation Hospital, Can Tho, South Vietnam, in the Mekong Delta region. Reserve and National Guard medical units were also deployed.

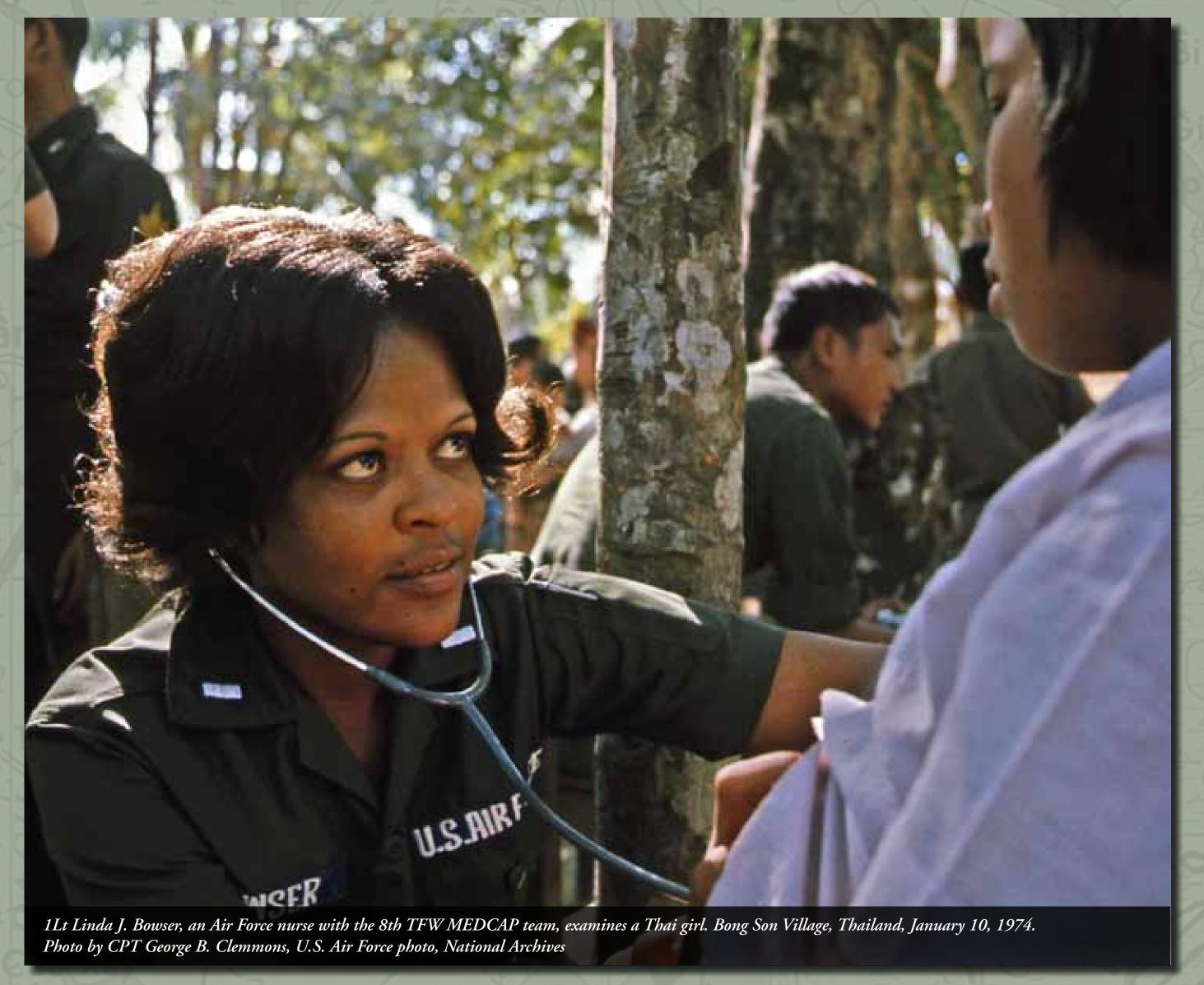


A U.S. Air Force flight nurse and a Red Cross nurse attend to American wounded aboard an Air Force C-141 prior to an aeromedical evacuation from Tan Son Nhut Air Base in Vietnam directly back to the United States, January 5, 1967. U.S. Air Force photo, National Archives. Courtesy Women's Memorial Foundation Collection

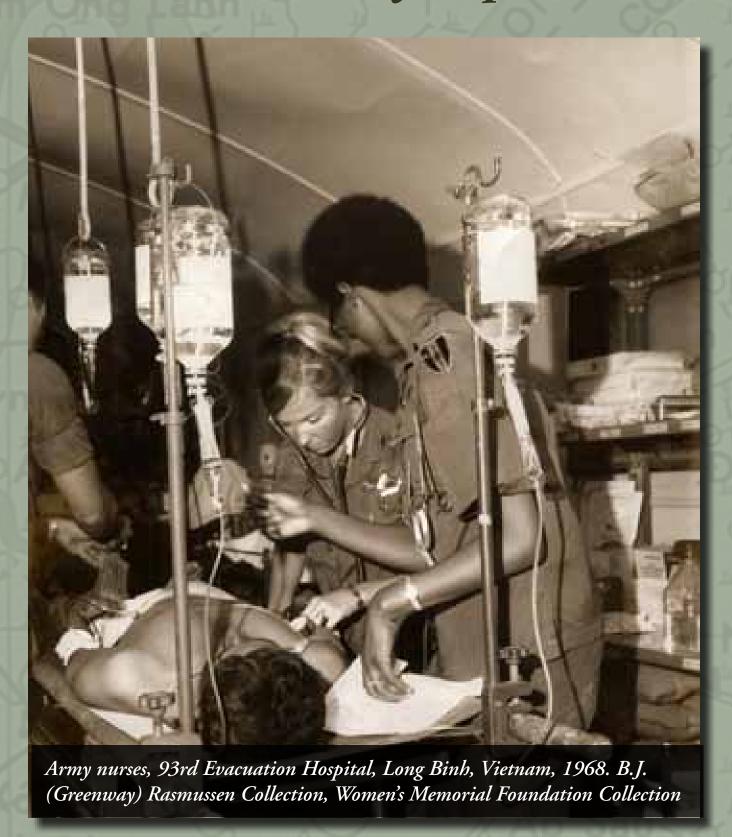


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Renowned for their ingenuity, compassionate care, and leadership abilities, military nurses in Vietnam treated 153,303 wounded warriors. The expert quality care provided by military nurse corps officers greatly contributed to the fact that 97.4 percent of wounded service members admitted to military hospitals survived.



Air mobility of the wounded and increased patient acuity characterized service in Vietnam. Evacuation by helicopter (which began in 1962) brought severely wounded servicemen, who in previous wars would have died from their injuries, to medical facilities within minutes flying time from the

battlefield. Artillery, mortars, high velocity bullets, rocket propelled grenades, booby traps, punji sticks, and claymore mines all inflicted vicious multiple wounds. Trauma care specialization as well as shock/trauma units were developed from this experience.

Military nurse corps officers in Vietnam ranged from novice clinicians in their early twenties, who recently graduated from the Officer Basic Course, to seasoned veterans. Possessing a broad range of clinical experience and leadership skills, military nurses quickly learned the technical skills necessary to be proficient war time nurses.

The "guerrilla warfare tactics" employed by the North Vietnamese and Viet Cong meant there was no battle front in Vietnam. This constant threat of enemy mortar, small arms, and rocket fire into the bases where the hospitals were located did not stop the nurses from their mission. When the alert sirens sounded, military nurse corps officers and medics quickly protected their patients and themselves, as well as treated fresh casualties.

Renowned for their ingenuity, compassionate care, and leadership abilities, military nurses in Vietnam treated 153,303 wounded warriors as well as those incapacitated by tropical diseases such as malaria. The expert quality care provided by military nurse corps officers greatly contributed to the fact that 97.4 percent of wounded service members admitted to military hospitals survived.



A Navy nurse offers a word of encouragement to a patient about to leave the Navy hospital ship USS Repose for further treatment in the United States, October 1967. The USS Repose was then operating in the South China Sea, a few miles south of the Seventeenth Parallel off the coast of the Republic of Vietnam. Photo by JOC R.D. Moeser. U.S. Navy photo, National Archives. Courtesy Women's Memorial Foundation Collection

The vast majority of nurses who served in Vietnam were volunteers. A tour of duty was 12 months with the nurses working an average of six days per week, 12-hour shifts, and longer when mass casualties came in from battle. In addition to their primary mission, nurse corps officers often spent off duty time as members of Medical Civic Action Program (MEDCAP) teams providing out-patient health care services to South Vietnamese in outlying villages, hamlets, and orphanages. Whether stationed with training units, in hospitals, on planes, or aboard ships, in the Pacific Theater, or the United States, military nurses served with distinction throughout the Vietnam War caring for U.S. military personnel, Allied troops, and civilians.



U.S. Navy Hospital Ship USS Sanctuary. In 1967, the USS Sanctuary joined the USS Repose, the Navy's other hospital ship operating in the South China Sea during the Vietnam War. After recording over 10,000 helicopter landings, performing over 4,600 major surgical operations, admitting 13,500 patients, and treating about 35,000 servicemen, the USS Sanctuary departed Vietnam from Da Nang Harbor in April 1971. U.S. Navy photo, Gift of The National Society of The Colonial Dames of America, Women's Memorial Foundation Collection



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one of 29 nurses aboard the hospital ship selected from 500 volunteers of the Navy Nurse Corps, April 22, 1966. U.S. Navy photo, National Archives

Military nurse corps officers in Vietnam ranged from novice clinicians in their early twenties, who recently graduated from the Officer Basic Course, to seasoned veterans. Possessing a broad range of clinical experience and leadership skills, military nurses quickly learned the technical skills necessary to be proficient war time nurses.

Three illustrations of military nurses' exemplary courage under fire: In 1964, a Viet Cong saboteur bombed the Brink Bachelor Officer's Quarters in Saigon. Four Navy Nurse Corps officers, Lieutenants Ruth A. Mason (Wilson), Frances Crumpton, Barbara J. Wooster, and Lieutenant Junior Grade Ann D. Reynolds, selflessly cared for the multiple victims even though they themselves were wounded. These officers were the first females to be awarded the Purple Heart Medal for action in Vietnam, "an honor bestowed in the name of the President of the United States to service members wounded or killed as a result of combat." First Lieutenant Diane M. Lindsay, an Army Nurse Corps officer stationed at the 95th Evacuation Hospital in Da Nang, was awarded the Soldier's Medal in 1970 for valiantly restraining a distraught soldier who had thrown a live grenade. Many additional casualties were prevented by the quick interventions of 1LT Lindsay and a male officer who, while subduing the soldier, convinced him to turn over a second grenade. 1LT Lindsay was the first African-American woman to be presented the Soldier's Medal, "the highest honor a soldier can receive for an act of valor in a non-combat situation." On April 4, 1975, First Lieutenant Regina C. Aune, an Air Force flight nurse with the 10th Aeromedical Evacuation Squadron, was severely wounded as the C-5A Galaxy she was aboard crashed near Ton Son Nhut Air Base, South Vietnam. 1Lt Aune and other surviving crew members carried over 140 Vietnamese orphans to safety from the wreckage. The orphans were being transported to the United States from Vietnam as a part of Operation Babylift. 1Lt Aune was the first woman to be awarded the Air Force's Cheney Award for her heroic and

selfless act of valor "in a humanitarian interest performed in connection with aircraft."

Key federal legislation impacting women in the military was enacted during the Vietnam War. One outcome was the opening of senior officer ranks to women. Anna Mae V. Hays, Chief, Army Nurse Corps, was the first female general officer in U.S. history. She was promoted to the rank of brigadier general on June 11, 1970. Alene B. Duerk, Chief,





2LT Kathleen M. Sullivan treats a Vietnamese child during "Operation MEDCAP", a USAF Civic Action Program in which a team of doctors, nurses, and aides travel to Vietnamese villages, treat the sick and teach villagers the basics of sanitation and cleanliness, 1967. U.S. Air Force photo, National Archives



Army nurses, assigned to the 85th Evacuation Hospital in Qui Nhon, arrive in Vietnam aboard the transport ship USNS Barrett, September 1, 1965. Front: First Lieutenant Joan Schwerman. Back row, left to right: First Lieutenants Kathleen Gilluly, Sharon Forman (later Bystran), and Mary Rum (later Caspers). Sharon (Forman) Bystran Collection, Women's Memorial Foundation Collection

Navy Nurse Corps, became the first woman in the Navy to be promoted (on June 1, 1972) to the rank of rear admiral (lower half), the Navy's equivalent to brigadier general. The first Chief, Air Force Nurse Corps to be promoted (on July 1, 1972) to brigadier general was E. Ann Hoefly.* Another noteworthy development created through legislation during the Vietnam War was the opportunity for male nurses to apply for regular commissions in the military nurse corps.

Ten military nurse corps officers died while serving in Vietnam—nine Army and one Air Force Nurse Corps officers: Second Lieutenants Carol Ann Drazba and Elizabeth Jones of the 3rd Field Hospital died in a helicopter crash on February 18, 1966, near Saigon; Captain Eleanor G. Alexander and First Lieutenant Jerome E. Olmstead of the 85th Evacuation Hospital, and First Lieutenants Hedwig D. Orlowski and Kenneth R. Shoemaker of the 67th Evacuation Hospital perished in a plane crash near Qui Nhon on November 30, 1967; Second Lieutenant Pamela D. Donovan of the 85th Evacuation Hospital, Qui Nhon, died of pneumonia on July 8, 1968, while undergoing treatment at the hospital; Lieutenant Colonel Annie R. Graham, Chief Nurse, 91st Evacuation Hospital, Tuy Hoa and a veteran of WWII and the Korean War, died in Japan on August 14, 1968, a few days after suffering a stroke; First Lieutenant Sharon A. Lane, the only nurse killed by hostile enemy fire, died of shrapnel wounds sustained during an enemy rocket attack on June 8, 1969, while she was on duty at the 312th Evacuation Hospital, Chu Lai; and the last military nurse to die in Vietnam was Air Force Captain Mary T. Klinker of the 10th Air Evacuation Squadron. Captain Klinker perished aboard a C-5A Galaxy that crashed on April 4, 1975, during Operation Babylift. The names of these brave military nurses are included on the Vietnam Veterans Memorial in Washington, D.C.

References can be found on The United States of America Vietnam War Commemoration website http://www.vietnamwar50th.com/education/.

* Women other than nurses were promoted to general/flag rank in the early 1970's. See the Service Women in Vietnam poster.