

Military nurses bring expertise and dedication to the task of caring for America's injured servicemembers.

By Nanette Lavoie-Vaughan



Solace & Care



At Iwo Jima in 1945, a Navy flight nurse cares for a wounded Marine; in Iraq in 2004 (above left), an Army nurse wipes blood from a soldier's face.

PHOTOS: LYNSEY
ADDARIO/VII/CORBIS;
RIGHT, BETTMANN/
CORBIS

ONE NEED ONLY LOOK TO THE CRIMEAN WAR SERVICE OF FLORENCE NIGHTINGALE, the founder of modern nursing, or to the thousands of volunteer nurses during the Revolutionary and Civil Wars to find the roots of military nursing. Their mission was simple and remains unchanged more than 200 years later: to bring comfort to the wounded and the dying and to provide the highest level of nursing care to the ill and recovering.



Forming a corps

Until the beginning of the 20th century, the military relied on volunteers to provide nursing services to troops. It took the sacrifice of the contract nurses during the Spanish-American War, many of whom died from typhoid and yellow fever alongside their patients, to bring about the formation of a formal military nurse corps.

In 1901, the Army Nurse Corps (ANC) became an official part of the Army Medical Department. The Navy Nurse Corps (NNC) followed in 1908. The Air Force Nurse Corps became an independent unit in 1949. The Marine Corps and the Coast Guard chose not to establish a separate nurse corps.

In the beginning, military nursing mirrored civilian nursing, with an

absence of men and minority women. Men served as orderlies during both World Wars and the Korean conflict, but it wasn't until the passage of the Frances Bolton Act in 1955 that men were allowed to become nurses. The first male military nurse, Lt. Edward T. Lyon, was commissioned in the ANC in October 1955. Today, male nurses make up 85 percent of the ANC and a substantial part of both the NNC and AFNC.

During World War II, despite a huge demand for care providers, the ANC only reluctantly accepted African-American nurses, via a quota system that allowed 56 to join in 1941. However, in 1948, Executive Order 9881 desegregated the U.S. military, and African-American nurses finally were able to take their place in ANC history. Della Rainey Jackson, a graduate of the Lincoln Hospital School of Nursing in Durham, N.C., became the first black nurse commissioned in the U.S. Army.

The three military nursing corps always have maintained a tradition of service and duty to country. Through the decades, military nurses have earned numerous medals for bravery, been captured as POWs, and made the ultimate sacrifice, giving their lives in the line of duty.

Each branch maintains extensive archives documenting nursing his-

tory with photos, journals, uniforms, and other memorabilia. Nursing also features prominently in the Women in Military Service for America Memorial exhibit at Arlington National Cemetery in Virginia.

Ready, caring, proud

The ANC came to the forefront during World War II, when more than 57,000 Army nurses were assigned to the European and Pacific theaters. In Europe, Army nurses developed the concept of recovery wards for postoperative care and gained a crucial understanding of the treatment of shock and the use of blood replacement and resuscitation in saving lives. Army flight nurses helped to establish an incredible record of only five deaths in flight per 100,000 patients with the use of aero-medical evacuation.

Military nurses proved their bravery and commitment when, in the Pacific theater, 67 Army nurses spent three years as prisoners of the Japanese. Many were captured when Corregidor fell in 1942 and subsequently were transported to the Santo Tomas Internment Camp in Manila. They were liberated in February 1945.

In Europe, Army nurse Lt. Reba Whittle (later Tobiasson) and her crew were captured and imprisoned



Lieutenant Colonel Judd was an Army Reserve nurse practitioner.

"I volunteered. I didn't wait to get activated. I wanted to do this. ... [My wife] was in the military for 21 years. ... Yeah, she didn't like me being gone. Yeah, she was lonely, but she understood.

"After you got to know these young troops, they would pour their hearts out to you. ... Many of these young people had never seen a dead body before. They were very young to see the level of carnage a war brings. ... I had been in Vietnam as a young soldier before I became a nurse, so I could really appreciate the perspective of the young grunt.

"Compared to where I lived in Vietnam, the [containerized housing unit in Iraq] was a five-star hotel.

"Working with the soldiers was the best. I've never seen doctors and nurses work so well together. ... The bonding of our military people will always stand out in my mind."

— Nurses in War, Scannell-Desch/Doherty, 2012, Springer Publishing Company, LLC.

Major Millie was an operating room [OR] nurse in the Army.

"In the operating room, we cared for just about any type of trauma injury you could imagine. It reminded me of when I worked downtown [Chicago] on a Saturday night. ... However, Iraq was a real challenge, even for an old OR nurse like me. ... The volume of patients when the choppers came in, or if an in-country air evac plane landed, took some getting used to.

"We never talked about what was bothering us over there. I might see three young soldiers die in the OR today. I'd go back to my tent and not say a word about what I just saw and experienced to anyone.

"Since I came home, I just don't have much tolerance for little things people complain about. ... I really had to learn patience again.

"I think the transition back was probably the biggest hurdle for me. It was unexpected. I thought I would just resume things. Well, the transition turned out to be harder than I thought."

— Nurses in War, Scannell-Desch/Doherty, 2012, Springer Publishing Company, LLC.

Three services, many wars, one mission:

(clockwise from top) An Army nurse prepares a wounded soldier for transport in Baghdad, Iraq, in 2005; in 1967, a Navy nurse on the USS *Repose* (AH-16) tends to a soldier wounded in Vietnam; an operating room nurse removes a sterile field from a patient at the Balad, Iraq, Air Force Theater Hospital in 2007. (facing page) Army nurses head home after being freed from Santo Tomas Internment Camp in the Philippines.



when their medical evacuation plane was shot down. Though wounded, Whittle selflessly performed nursing duties for the other prisoners in the camp. At the time of her repatriation to Switzerland, Whittle was awarded the Air Medal and the Purple Heart.

During a 2011 medical evacuation mission, an Air Force critical care air transport nurse, right, cares for a critically ill patient.

As a result of their selfless sacrifice, Army nurses received a total of 1,619 medals, citations and commendations during World War II. Sixteen medals were awarded posthumously to nurses who died as a result of enemy fire.

Six Army nurses died at the Battle of Anzio, when Germans bombed the hospital in which they



were working. Four survivors were awarded the Silver Star. The hospital ship *USS Comfort* (AH-6) also was bombed, off Leyte, killing six nurses and wounding four others. In total, 212 Army nurses died for their country by war's end.

During the Vietnam War, 5,000 Army nurses served in 44 hospitals throughout the Pacific arena. The concepts of shock-trauma units and specialized care for wounds developed from their experiences. Eight nurses lost their lives from enemy fire or plane crashes. Operation Desert Storm saw the first use of DEPMEDS, Deployable Medical Systems, a self-contained intensive care unit set up on the battlefield, which improved survivability and recovery rates for the wounded.

The sacred 20

The first 20 Navy nurses were appointed in 1908. One of them, Lenah S. Higbee, later served as superintendent of the NNC during World War I

and became the first living woman to receive a Navy Cross. During World War II, 16 Navy nurses spent three years as prisoners of the Japanese along with the Army nurses captured on Corregidor, and five Navy nurses were captured on Guam. They were held for three months in Zentsuji Prison Camp on Shikoku Island and then moved to Eastern Lodge, in Kobe, until their expatriation in August 1942. In May 1943, 11 NNC lieutenants were sent to the prison camp Los Banos, where they established an infirmary despite having virtually no medicine or supplies. There, they continued to nurse the sick until Los Banos was liberated in February 1945. 1st Lt. Annie G. Fox received a Purple Heart for injuries received during the bombing of Pearl Harbor, and two nurses on Bataan were awarded the medal for wounds received when their hospital was bombed.

Fit fighting force

The AFNC has distinguished itself in the fields of air evacuation and space medicine. In January 1943, the first strategic aeromedical evacuation flight, with a crew of two, transported five patients from Karachi, India, Bolling Field, D.C., a journey of about 11,000 miles that took 61/2 days. Lt. Elsie S. Ott (later Mandot), the flight nurse on board that historic-making flight, received the first Red Medal to be awarded a nurse.

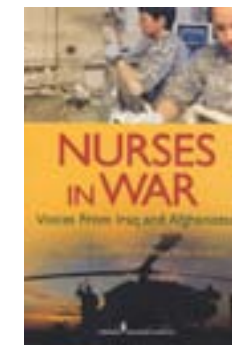
On Feb. 18, 1943, the first class of flight nurses graduated from the Air Force School of Air Evacuation, 349th Air Evacuation Group, at Bowman Field, Ky. Lt. Geraldine Dishroom-Brier was the first flight nurse commissioned from that class. A little less than two decades later, June 28, 1966, the first two nurses graduated from the aerospace nurse course at Patrick AFB, Fla. Prior to starting the aerospace class, in 1960, Lt. Delores O'Hara served several months with America's first astronauts, known as the Mercury Seven.

Special training programs the AFNC has established have made a significant contribution to the military and to the field of nursing. Most beneficial have been the Battlefield Training Initiative in 1983, the Nurse Midwifery Residency Program established in 1973, Women's Health and Pediatric Nurse Practitioner Certi-

Leaders of the Cadet Nurse Corps and the Public Health Service mark the first birthday of the U.S. Cadet Nurse Corps, established in 1943 to meet the demand for nurses in World War II.



First-person accounts were reprinted with permission from *Nurses in War*, by Col. Elizabeth Scannell-Desch, USAF (Ret), Ph.D., R.N., and Mary Ellen Doherty, Ph.D., R.N. (2012, Springer Publishing Co., LLC). To order the book, visit www.springerpub.com/product/9780826193834.



fication programs in 1973, a master's program for nurse anesthetists in 1987, and, in 2002, the opening of the Center for Sustainment of Trauma and Readiness Skills in Baltimore, which offers a three-week advanced trauma course for nurses.

Public Health support

A history of military nursing would be incomplete without mentioning the U.S. Cadet Nurse Corps, a special program initiated by the Public Health service in 1943 to meet the demand for nurses in World War II. A total of 124,065 nurses were trained between 1943 and 1948. Graduates of the program were not considered military nurses, but they played a significant role in supporting the military nurse corps in the field.

Members of today's military nursing corps follow in the steps of their predecessors by serving in operations Iraqi Freedom and Enduring Freedom and on military bases in the U.S. and around the world. Wherever the next conflict requires U.S. troops to be, members of the nursing corps will be on the forefront of nursing care for burns, head trauma, and the devastating injuries sustained during combat. They will continue to bring comfort to the wounded, pride to their country, and honor to the uniform. **MO**

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Commander Rita was a nurse anesthetist and naval officer.

"We got on buses and were transported [from Kuwait to Iraq] in a convoy with tanks and snipers sitting up high on the tanks. ... As we kept going, it got dustier and dustier, and you couldn't see anything out the windows. There was sand on the inside of the bus and sand on the outside of the windows as well. When the sun came up, all you could see against the horizon was sand and more sand.

"When the war started, we took on heavy casualties. I went without a shower for 11 days. The OR was like a litter box. We just scooped out bloody sand and other bodily secretions.

"We had trained so much and practiced so much, we were like a well-oiled machine. We took people from our bases up and down the eastern U.S. who had never worked together and threw them into a horrific environment. No one was panicking because we had done it so much before.

"It was rough doing surgery out in the field when you could hear shooting in the distance. ... You wondered how many of the Marines would be injured or killed trying to protect our position so we could keep doing surgery. You concentrated on your work, you kept your weapon nearby, and you prayed."

— *Nurses in War*, Scannell-Desch/Doherty, 2012, Springer Publishing Company, LLC.

Captain Alice was an active duty Air Force critical care air transport team nurse.

"We would frequently open the back ramp before we landed so we could get the patients aboard in three minutes or less. ... We'd take off as the back ramp was closing and get the hell out of there. ... Sometimes, we'd count the bullet holes in our fuselage after we returned to our base.

"We cared for not only the severely wounded or burned troops but also the guy who was sitting next to them in the vehicle that escaped with only minor injuries. ... He can see his buddy who is struggling to breathe and has burns all over. ... I think we are going to suffer as a society for this ill-prepared situation for a long time to come.

"I guess the reward for me was to bring those guys and gals home. Wherever I may be taking them, it was a step on the path to bringing them home.

"Because of my deployments to Iraq and Afghanistan ... I am by far a better nurse, a better leader, and a better human being.

"I'd go back in a heartbeat."

— *Nurses in War*, Scannell-Desch/Doherty, 2012, Springer Publishing Company, LLC.