

U.S. NAVY MEDICAL DEPARTMENT ORAL HISTORY PROGRAM

ORAL HISTORY WITH LT (ret.) MARGARET CROWE, NC, USN

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TELEPHONIC INTERVIEW

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Telephone interview with Margaret Crowe, nurse stationed at Naval Hospital Guam during the Vietnam War.

Where are you from originally?

Newport News, Virginia.

When did you decide you wanted to be a nurse?

I'm probably older than a lot of the people you've been interviewing. "Ben Casey," "Dr. Kildare," and "The Nurses" were the TV programs of the day, and I was very inspired with all of that. That's probably what started me on the path.

Where did you go to nursing school?

Riverside Hospital School of Nursing in Newport News, VA.

When did you graduate?

In '66.

Did you decide right away that you wanted to be a Navy nurse?

Yes. In fact, I went into the Navy right out of nursing school. The Navy recruiters came and spoke with us. My father had been in the Navy.

What was your first assignment?

St. Albans in New York.

Did you have any kind of orientation into Navy life or did you simply report to St. Albans and begin working immediately?

That's right. There was no orientation. It was all on the job training.

How did you find St. Albans as an assignment?

I liked it. It was exciting to be in New York because I'd never been there before. I learned a lot about nursing and about myself.

What did you do there?

I was on an orthopedics floor. We were getting the Vietnam casualties and we were very busy. It was 1966.

So things were already heating up over in Vietnam.

Yes.

Was St. Albans, like Philadelphia, one of the centers for orthopedic injuries?

It was one of the big ones. Actually, they also had a huge TB facility. Then with the Vietnam business, they started bringing in

the casualties and began gradually using it more to treat them.

Where did you go after St. Albans?

Guam.

How did you learn you were going? I know there are some folks who ended up at Guam with only a few hours notice.

Oh, no. I had some lead time but I don't remember how much. No, it wasn't like, "You're going tomorrow." There were several weeks' notice, at least.

When did you get there?

I got there in the spring of '67.

What did you do there as a nurse?

I worked in orthopedics and then worked in what they called the air evacuation ward. It was a central location where all the casualties came in. It was like a disaster triage team. Every patient who came in was seen by a physician. They were then fed, bathed, had their dressings changed, orders were written, and they were stabilized for the night. Then they went to their respective units. We got in anywhere from 20 or 30 to as many as 150 at a time. Usually they came in three or four times a week.

You might get over a hundred at one time?

At one time. At the time I didn't even realize it. It seems incredible that you could get a hundred patients and they'd all be seen, bathed, fed, medicated, and orders started on every one of them before they were bedded down for the night. It seems like that would be an impossible thing to happen but it wasn't.

There must have been a good size staff, then.

People were on call every time an airevac came in so there would be a team of physicians, a team of nurses, and a team of corpsmen, plus the staff. Once everything was done--once all the orders were written and taken off, then that team could leave and the staff stayed to get the patients through the night.

When you say a team of physicians or a team of nurses or corpsmen, how big were these teams?

There might have been 10 physicians, 15 nurses. I don't remember exactly.

You must have seen some pretty horrific injuries--traumatic amputations, the whole range.

Yes, we did.

Had you had any kind of training for that?

No. People have asked me about this. At the time it seemed normal. Does that make sense to you?

Well, in the context of the fact that you had already been seeing orthopedic injuries at St. Albans, there probably wasn't much difference except that these were fresh injuries.

Yes. These were fresher. They had dirt in the wounds. There could have been less than 24 hours from injury to their arriving at the hospital or 48 hours. Usually, they were stabilized in Vietnam and then they either came to us or went to Japan. There was usually some place they went prior to our seeing them. Depending upon how stable they were, they may have come directly to us within a day or two of the injury.

So when you say bathing, you were responsible for cleaning the wounds.

We were cleaning them up and changing their dressings. We were assessing, assessing, and assessing to see where they were. We'd get patients who had to go straight to surgery. Something had happened in flight. They might have gotten very unstable during evacuation or they would get to us and start bleeding. It was really a trial by fire for us but it seemed normal then. It wouldn't seem normal now.

Do you recall the layout of the hospital? Was it a large hospital?

There were open units with beds in rows. You would have 40 or 50 patients on a unit.

Open bay.

Yes, open bay. The dependent units were rooms but it was open bay for the soldiers. There might have been some private rooms for critically ill patients you didn't want in the main stream, or infectious patients, but it was mostly open bay. So you could see a lot of what was going on. You could just look down the areas to do a quick assessment.

Did you work in that area the whole time you were there?

Yes. I worked on the officers' unit. If they didn't have an airevac, then you worked on other units. Mine was mostly orthopedics.

They also had an SOQ there and you worked there also?

Yes.

And that's where you met COL Holladay?

Yes.

He certainly remembers you.

Yes. That's interesting because I've kept in touch with a corpsman. Actually, Mike's the only patient who has found me but corpsmen have. In fact, I keep in touch with one. He and his wife came through Knoxville last summer and we went out for dinner. And, of course, there's a group of nurses. We meet periodically and correspond.

This is just an informal group?

Yes.

Besides COL Holladay, do you remember any other patients?

There are some who stand out in my mind but I don't remember the names. I remember events.

Anything unusual or they all pretty much the same. COL Holladay, for example. He was giving me his story from his point of view. He remembers the day you walked in. He said you were a no-nonsense kind of nurse but very kind and attentive to everyone's needs. How do you perceive yourself?

I don't know.

Well, he says he owes you a debt of gratitude because you helped pull him through a very difficult time. You gave him a lot of time and inspiration.

I don't remember much. It's funny because I've heard that sort of thing before. You don't see yourself that way. You're doing what seems needs to be done. I teach nursing now and I've had students say that I'm an inspiration or how I got them through it. But it will be little things that you've done. For example, there was a student that I had who had failed a semester and had to leave. But then she came back. She seemed like a deer in the headlights, just terrified that she wasn't going to make it again. And I said something to her, just in passing, like "You're gonna make it this time. I know that you are. So try to relax and enjoy this."

She told me at pinning that that's what turned her around. I wouldn't have thought that what I said to her was life-altering.

Maybe not for you but for her. And probably it was the same for COL Holladay. With all the other patients you had, he may have seemed just like another patient but he perceived you differently.

Yes. He'd did very well with his injuries. He had,

potentially, very life-altering injuries but because of his fortitude and determination, he has had minimal, if any, residual effects.

And had a full career in the Marine Corps.

Which is even more amazing. He went to the other extreme. He was going to do whatever it took.

Did you see a lot of that kind of determination among some of your other patients?

I think so. Certainly, that was a different time. We were all young. I don't think we really realized what some of the ramifications were going to be. For me it seemed like it was all just taken in stride. Nothing seemed abnormal. There was nothing you couldn't deal with. "This is the hand you've been dealt so how are we going to get you through it? How are we going to get you on your feet?"

And that was the main thing--getting them back on their feet, even if they didn't have a foot. Anything was possible. At that time, I was initially blessed with having physicians who were really good. They were top of their line and doing state-of-the-art stuff. Some of the procedures that were done really enabled some very seriously injured patients to get a new lease on life. That whole period was really incredible.

We would see horrific injuries. Someone had stepped on a land mine or whatever. "Okay, that happened; now what? This is what we need to do."

Number one, we were dealing with a young, healthy population. So there were so many things that were possible. I felt like I was on the cutting edge.

When I got out of the military in '70, I didn't go back to work in a hospital until January of '71 and it was like, "Oh, dear!" Nothing was done the way it was done in the military. I didn't think it was for the better either. Military nursing was so much better. And I still look back on those days. They were the best. We really did a lot with little. Now we have so much and we don't seem to be doing quite so much.

Back then every day was different. As a young nurse, it was learning, learning, learning. And when I left there, I felt there was nothing I couldn't do as a nurse.

It's been over 30 years since that era. Do you think about that time very much anymore?

I do think about it but I don't think about it in a bad way. Several years ago, at one of our nursing meetings, I was asked to come as a Navy representative. There was an Army nurse, me, and an

Air Force person. And their experiences were all very different. When it was my turn, my take on the whole thing was different. I really enjoyed that time. I thought that it was just a special time.

I don't think I was a hero or anything of the sort. It was a time that you just did what you were supposed to be doing. I see some of the military stuff on TV now and I'm just amazed that we would even be having these discussions. There was not much room for discussion during my era. You did it and didn't say, "I don't believe I like that option or I don't want to do that." You did what you were supposed to do. We knew what the procedure was and we did it. We weren't voting.

And no one was saying, "You girls are great. You're doing a wonderful job." That was never a part of it. So, as I said, I don't think of myself a hero.

One of the things I've heard from many physicians, nurses, and even corpsmen from that time, is that after a critically injured patient left their care and proceeded along the chain of evacuation back to the States, they never knew what happened to these people. And they felt very frustrated by the fact that they never knew the outcome. Did you ever feel that way?

You did wonder what happened. When they dedicated the memorial to the Vietnam nurses in Washington several years ago, several of us went. I had no notion how that would be. In fact, a group of us from Guam were going to meet and just have a good time. I was really awestruck by what was going on. There were many, many patients there looking for their nurse. And some nurses looking for their patients. As you said, they didn't know what happened to them and had hoped that they were coming to this gathering. I was kind of surprised at the impact we all had. I hadn't realized that we mattered as much as we did.

And you got out of the Navy in 1970.

Yes. That's when I got married. Back then it was different. You could be married but you couldn't be pregnant. You had to get out immediately. There were many restrictions placed on women. My husband and I moved back to Tennessee. He was going to school.

I played with the reserves for several years and then retired from the reserve in November of 2003. I have been very fortunate my whole military life.

What do you do now in your civilian life?

I teach nursing at Roane State Community College in Knoxville, TN.

Thank you for spending time with me today.

I've enjoyed it.