

U.S. NAVY MEDICAL DEPARTMENT ORAL HISTORY PROGRAM

ORAL HISTORY WITH LCDR (ret.) JUDITH ROBERTSON, MSC, USN
FIRST FEMALE PHYSICIAN ASSISTANT IN THE NAVY

CONDUCTED BY
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The date is February 10, 2015. Today we have the great pleasure speaking with retired Navy Physician Assistant, Lieutenant Commander Judith Robertson. Over the course of her distinguished career, Commander Robertson served in a wide variety of medical and leadership assignments across the Navy and Marine Corps enterprise. In 1971, she would make Navy medical history and Navy history as the first Navy female Hospital Corpsman selected for the Physician Assistant Program. This interview today is being conducted as part of the BUMED Oral History Project.

Q: Commander, let me say again, I really appreciate your time today. It's an honor for us to talk to you.

Now, oral histories are first and foremost narratives and all narratives must have a beginning and I'd like to start off with your beginning. I know you were born in Canton, North Carolina. Did you grow up there as well?

A: Yes, sir. It's about 20 miles west of Asheville.

Q: What do you remember about growing up in that part of North Carolina?

A: The smell of the paper mill. The paper mill has a very distinctive smell, like rotten eggs at times, and that was before the EPA came along and made them clean it up. It

was very small; everybody knew everybody. If you didn't work in the paper mill you probably didn't live there.

Q: Were your parents involved with the paper mill?

A: My dad worked there and we lived in a mill house in a village where the mill had built houses.

Q: When you mention mill houses and villages, it all sounds very quaint.

A: Yes, it was. It was interesting. When my parents put new windows in their house they found that the house had been insulated with newspapers, and the newspapers were anywhere from 20 to 30 years old.

Q: Any interesting news stories printed in your walls?

A: I don't know, I was small. But it was fun.

Q: Do you have any siblings?

A: I have two brothers, both younger than me.

Q: So what did you do growing up?

A: Worked on my uncle's farm in the summer, and we'd plant and hoe tobacco and pick tomatoes. In the winter I went to school, and I helped take care of my mother who was ill most of my life. When she was well she was very good, but

when she was ill then we were required to be caregivers and caretakers. And maybe that's why I like medicine, I'm not sure.

Q: I was reading these newspaper articles about you and one of them says that you had an interest in medicine from an early age. Would you say this was because of your mother?

A: I think so because we had so many doctors with her. I think I just sat back and watched and really developed an interest.

Q: What aspects of medicine did you like?

A: I think I was just fascinated that they could make her better at times, and at times they were frustrated because they couldn't help her. I think I wanted to be able to help people and I think that's why I pursued it.

Back then, I wanted to be a nurse. I went to nursing school at Grady¹ in Atlanta, and I disliked it. Perhaps it's because it was the first time I was away from home. So, I came home and my father gave me a very short time to get a job, so he was ahead of his time.

¹ Grady Memorial Hospital—founded in Atlanta, GA in 1890, Grady Memorial Hospital is the largest medical center in the state of Georgia.

Q: At some point you made the decision to enter the Navy. How did that come about?

A: My dad was in the Navy. My father always thought I should join the Navy.

Q: Really? What did he do in the Navy?

A: He drove the boats that brought the troops ashore on D-Day. He's 90.

Q: Wow. Has he ever told you some of the stories?

A: He has. He's told some stories. I have some paperwork on him. His twin brother was killed on the USS *Jarvis*² during World War II, and his brother who's older than him served in the Navy. My father always thought the Navy would be good for me.

Q: So you were certainly inspired by your father to make that choice.

A: Oh yes.

Q: So you went to a recruiting office?

A: No, I was working at K-mart. I remember it was snowing one day, and this lady and man came in wearing uniforms and I

² USS *Jarvis* (DD-393)-a Bagley-class destroyer sunk off Guadalcanal on 9 August 1942. She is only one of two Navy ships sunk in World War II without any survivors (the other being USS *Pillsbury*).

just asked them who they were. She said, "I'm the Navy recruiter."

I told her that I would see her in the morning. She didn't believe me, and I was sitting on the steps when she got there the next morning.

Q: Was this in Atlanta, Georgia?

A: This was back in Asheville.

Q: What did they tell you?

A: She told me she was a Navy recruiter and she said that she was there shopping after work. There were two of them, a male and a female; I wish I could remember their names. But, we got to talking and she told me where the office was, and I said, "Well, I'll see you in the morning." So that's how I joined the Navy.

Q: With the Vietnam War going on and the military not being very popular then she was probably thrilled to have such an eager recruit.

A: I don't think they thought I'd show up. She was amazed when I was there the next morning because I can imagine the number of people that would tell you they would come and not show up, even today.

Q: I'm curious, what were some of the opportunities open to women in the Navy in the late 60s?

A: Well, you could be a Corps WAVES,³ a Corpsman. You could be in administration or a radioman. This was what they offered to me. I told them that I wanted to be a Corpsman. I ended up going to boot camp at Bainbridge, Maryland⁴ in a very cold winter. We got there in November and we were there through January.

The most important thing to us at the time were the young men that would march every day with a drum in front of them and they were the submariners. We called them "trees" because we could look at them but we could not interact with the men.

Q: This must have been a very intimidating experience.

A: I wasn't frightened at all. In fact, I was very fascinated by the whole experience of being in boot camp and being yelled at. I don't think I had time to be scared.

Q: So there was no turning back?

³ Women's Reserve program or WAVES (Women Accepted for Voluntary Emergency Service). Although officially established after World War II the term was continued to use in the Navy through the 1970s.

⁴ Bainbridge—the U.S. Navy Training Center (USNTC) Bainbridge established in Port Deposit, MD in 1942 and was home to "boot camp" and Class "A" schools for Navy enlisted personnel. The site (part of the Tome Preparatory School) and name (Commodore William Bainbridge of Barbary Wars and War of 1812 fame) were selected by President Franklin Roosevelt. USNTC was first deactivated in 1947 and reactivated in 1951. The Training Command was finally decommissioned in 1976.

A: Right, you didn't have the time. When we first got there we were in cubicles on the first floor of an old barracks, and they used to tell us there was a ghost that walked the top floor and we couldn't go up there. Then they moved us into brand new barracks just before graduation. But the most important thing about boot camp was that I nearly froze to death. It was SO cold. That was the only thing that really amazed me about boot camp was how cold it was.

Q: How long was your boot camp?

A: From November 1968 to January 1969. We were there for Thanksgiving and Christmas, and I think we were there for New Years.

Q: Did they separate the women from the male recruits in '68?

A: There were no male recruits on that base. There were only women and sub-mariners. The males still went to Great Lakes and San Diego.

Q: Well, this is really your first Navy experience. What are your first impressions at this point?

A: People yelled at you and you have to be able to tie a tie. I couldn't tie a tie so I polished shoes in trade. I should also mention that we were an older boot camp company. All the women in my company were over 20, and had all been

places and done things, so it was like my company wanted to be there. I think we wanted to make a difference. We all thought we would go to Vietnam but enlisted women were not allowed overseas in 1969.

Q: So were there many of you that ended up at Hospital Corps School afterwards?

A: I think there were 11 of us that went to Corps School. I was in class 6911 at Corps School.

Q: Let's talk about Hospital Corps School and that experience. What do you remember most about that time?

A: Great Lakes. I remember the hospital. Our barracks were next door to the chief's barracks. So we had fire watch at all the doors 4 hours at a time. Maybe our chief thought we would party with the chiefs. We took care of the people that came back from Vietnam. We got to know a lot of them because we spent a lot of our social time at Ratskeller⁵ and would see them there. It had a pub and a pizza place and music; and you got to meet all kinds of people who were coming from Vietnam who were disabled or who had problems. At the time, the Corps School was located in very old Quonset huts across the base which had been base housing in

⁵ German for "Council's cellar," the term has been used to denote a bar or restaurant located in a basement.

years past. The men lived down at Corps School. We marched to school for classes daily.

Q: Were there any instructors that stand out in your mind?

A: The captain. Her name was Captain Kovacevich.⁶ She was the nurse in charge of Hospital Corps School. She wore a wig and her hair stuck out from underneath it. That's one of the things you remember because wigs were not prominent back then. That was just one of those things that stood out about her. And then her name too, I'd never heard a name like that. That name stuck out because I'd never heard it before. She was a taskmaster at Corps School, a tough lady and very strict.

I remember we did a lot of training in the woods around Hospital Corps School like litter carrying, giving immunizations to each other, and first aid classes.

Q: Immunizations?

A: Yes, we got to do that to each other in order to learn how to do it.

Q: Afterwards you were received additional training at the Naval Hospital in Great Lakes before graduation?

⁶ CAPT Mary Terese Kovacevich, NC, USN (1918-??). Kovacevich entered the Navy as a Reserve Nurse in 1944 and would serve until her retirement in November 1, 1970. She served at the Hospital Corps Great Lakes from May 1967 until November 1970.

A: Yes.

Q: Are there any patients that stand out in your mind?

A: There was a young man who called himself "French Fry." He had been napalmed from head to toe, but survived. He really was an upbeat kind of young man. He was an inspirational young man because it didn't seem to get him down that he needed all these skin surgeries. He was an amazing young person.

Q: So you graduated in '69?

A: Yes. I still have a medal I got from Corps School for having excellent grades.

Q: Were there any classes that you enjoyed the most?

A: All the classes with the exception of playing in the snow and rain.

Q: So you graduate, and then you received your first orders to the new Naval Hospital in Orlando?

A: Yes, I'm sent down to the Naval Hospital⁷ that they're taking over from the Air Force.

Q: So this was the old Air Force Hospital that was...

⁷ Naval Hospital Orlando was commissioned in July 1968 to provide medical assistance to the new Naval Training Center. Originally, the training center and hospital had been part of the Army Air Corps in World War II and later used by the Air Force.

A: Yes, and we worked with Air Force nurses for a while. As the Air Force and the Navy were transitioning, there were some Navy nurses and a few Air Force nurses still there when we got there. There was a girl named Joanne Jones who was in my Hospital Corps School Company. She and I went to Orlando together.

Having not worked with Navy Corpsmen the Air Force nurses were unsure of our job. I think working with young physicians who only had to give 2 years made me want to do more. These MDs would do rounds with us, send us home to look up our patient's diagnosis meds and prognosis then discuss it with all the Corpsmen (WAVES) the next day. It was excellent training.

Q: Certainly this is a big training station down in Orlando?

A: Yes, boot camp had just been built and opened. My husband went to boot camp in Orlando.

Q: Is that how you met your husband?

A: No. He was at boot camp when I was there, but I met him years later.

Q: So, who was being treated at the hospital in Orlando? Were these mostly recruits?

A: We had recruits; we had dependants. We had a labor and delivery floor. We had an ER, dermatology clinic, surgery clinic. It was interesting because it was the concept of a separate building for each type of ward with a connecting ramp in case one was blown up or burnt down. Then you still had a hospital. The ER was a separate building from all the wards. And our barracks were owned by the base where the boot camp was because the Air Force had had their barracks over there. The hospital was off the base actually.

Q: Really, I didn't know that.

A: Yes, you had to come off the base into Winter Park, and the hospital was off the base to the right. Now, I guess, there's a new VA hospital⁸ where the old hospital was.

Q: That's right. And so were you going on rotations to different wards?

A: I actually worked the female ward when I was first reported. We worked seven days on and seven days off. And you worked the days, nights, and PMs. And then I got to go work in the SURG Clinic as I got promoted. I made E3, E4 and E5 there. When I was working SURG Clinic they came to me one day and told me they needed a second class Corpsman

⁸ Orlando VA Medical Center is located on a 65-acre campus in southeast Orange County on the site of the former Naval hospital Orlando, FL.

in New Orleans. I was then transferred to Gretna, Louisiana to the Naval Supply Center.

Q: Where is Gretna, Louisiana?

A: Across the river from New Orleans, across the Mississippi Bridge in Gretna.⁹

Q: That must have been an interesting duty.

A: Yes, it was. I got to do my first Mardi Gras. When we stood duty in the clinic it was a very small clinic on a supply base.

Q: Would you say that you're almost operating like an Independent Duty Corpsman?

A: We did at night, yes, when we were the only Corpsmen in the building.

Q: So, why did you decide to go to MST school?¹⁰

A: Because it was offered and I decided if I was going to stay in the Navy I better take every class I could get. MST School was a year long. It was in Virginia, and we went for a year. There was one woman in the class before me; she was a chief. And in my class there was a chief and a first-class, and I was a second-class at the time.

⁹ On the West Bank of the Mississippi River, Gretna is the second largest city in Jefferson Parish, Louisiana.

¹⁰ MST—Medical Supply Technician School, Norfolk, VA

Q: So what were your expectations when you graduated this school? What did you expect to be doing?

A: I thought I would be an Independent Duty Corpsman like the men and maybe get to go out on a ship and maybe go with the Marines. Women didn't get to do that. I could go work on a base and do sick call, that kind of thing.

Q: Well, this is certainly a very interesting time in the military; there was a doctor's shortage throughout the services, and we see the development of this physician assistant concept.

A: Well, the first class of Navy Physician Assistants went to George Washington University in Washington, D.C. So when I put in for the PA Program, my master chief, whose name was Cuppet, said that they would never take a female and that it was only for male Corpsmen. I said, "Okay, fine. Thank you very much." So I put in my application and got selected.

Q: This is '71?

A: Yes. I knew a couple people in the first class, one of them was Ron Cope, he was also in the MST course with me, and

they went to George Washington.¹¹ And then the second class was the first class at Sheppard Air Force Base; I was in the second Navy class at Sheppard.

Q: Was this strictly a Navy class or was it combined with the other services?

A: Just the Air Force and the Navy.

Q: Can you talk about the school and what it entailed back then?

A: When we got to Sheppard we found out that we would be in class from eight to ten hours a day, five to six, maybe sometimes seven days a week. The program was intense. We went through anatomy and physiology; we did chemistry; we did physical assessments. We did everything you would do your first year of medical school in one year.

Q: You mentioned GW. Did GW continue operating their school while the Sheppard PA school was operational?

¹¹A 1971 Bureau of Medicine and Surgery study suggested that physician assistants could relieve physicians of the basic, routine, and repetitive aspects of medical care, such as physical examinations and primary outpatient care. At this time the use of physician assistants in outpatient care was rapidly on the rise in military and civilian settings. But with only about eighteen hundred graduate physician assistants nationally, it was apparent that the services would be unable to recruit sufficient numbers. The Army and Air Force began employing physician assistants in the early 1970s. In 1971, the Air Force started a Physician Assistant program at the School of Health Sciences, Sheppard Air Force Base. The Navy joined the program in 1972. Soon after, the program was accredited by the University of Nebraska Medical School. Students completing the school were awarded a bachelor's degree.

A: Yes. They were still having classes. There were a couple classes that went to GW, I don't know how many.

Q: And how did they decide who went to Sheppard and who went to GW?

A: I don't think we knew.

Q: When did you graduate?

A: In 1973. I was selected in '71, went there in '72 and graduated in '73. Afterwards I went to Naval Hospital in Camp Pendleton, California to start my preceptorship in '73.

Q: Were you still a second class?

A: I was a first class. I made first class under four years, which did not enthrall some.

Q: So, you didn't become a chief warrant officer until after your preceptorship?

A: That's correct. We did our year of rotations in Camp Pendleton with the family practice residents. We did everything from surgery to internal medicine, pediatrics, dermatology-anything that a family practice intern did we did with them. We actually worked very well together. And

Mike McGrath¹² was the first PA to come to Camp Pendleton and I was the second.

Q: As a physician assistant, one the "new kids on the block" did you feel accepted by the rest of the Medical Department? I've heard that some physicians were not always the biggest fans of the program back in the 70s.

A: No, they weren't, and they still aren't, by the way. There are certain doctors who still are difficult to work with as a PA, and that's their problem, not ours.

Q: How did they decide where you'd be working and how you would be utilized?

A: When I graduated in '74, I got to work in the OB-GYN clinic at Camp Pendleton because they had a shortage of OB-GYN providers. I have to give credit to the OB doctors they were very receptive to me helping them because they were short and they were having a tremendous amount of labor and delivery of babies and people. Marines reproduce rather well. I also worked the ER. See, when you stood duty back then and it didn't matter if you were a surgeon or an OB doctor or whatever, you stood your time in the emergency room. There weren't true emergency doctors at that time,

¹² PA CWO-4 Michael McGrath served in the Navy from 1965 to 1985

and so we all had to work. So I worked emergency room at the same time for my duty there.

Q: Would you say that you were properly utilized at Pendleton with your talents and skills?

A: I certainly was. And I worked OB for ten years there and then they decided that they needed me to work the clinics. I then worked the 13-area clinics, which is where the engineers and such were stationed with Marines. I worked 52-area,¹³ which is where a lot of the recruits are. I went to 21-area,¹⁴ which is down by the flight line. I also took care of the Vietnamese when Vietnam fell because I was sent out there to be the GYN provider for the females at Camp Talega¹⁵ in 1975.

Q: That's kind of an overlooked operation.¹⁶ That was pretty big; they were bringing in medical personnel from other areas to help.

A: They came from all over the United States to help out. And we had Vietnamese; we had some black Thai people; we had

¹³ 52-Area Branch Health Clinic, School of Infantry, Camp Pendleton, CA

¹⁴ Bachelor Enlisted Quarters, Del Mar, Camp Pendleton, CA

¹⁵ 112-acre cantonment that has served as home and training ground for thousands of Marines, Sailors, and other service members in both war and peace from its inception in the Second World War to the present day (source: <http://www.marforres.marines.mil>).

¹⁶ Operation New Life—from April to October 1975, Camp Pendleton served as home to over 50,000 refugees from Vietnam and other Southeast Asian countries. The Navy and Marine Corps personnel at Pendleton created an entire city of tents and Quonset huts, accepting, housing, feeding and clothing over 50,000 refugees

Montagnards¹⁷ from Vietnam. It was a fascinating time to learn and to see things that you'll probably never see again. It was a very interesting concept.

Q: I've spoken to a couple nurses that were at Pendleton in 1975, and they thought it was kind of a life-changing experience in many respects. They were young people too and got exposed to certain things they'd never saw before—different cultures and what not.

A: That's right, and I had a friend who had worked in Vietnam and she came over with them and she actually worked with me at the time while she was waiting to be placed in the United States. She was just fascinating. I used to sneak food in because they liked American food better than what they were getting at the camps. But it was fascinating. The people were very kind. Within the camps some of them didn't get along at all; there various factions of who thought they were better than others. It was like a big city. It was just a fascinating nine months doing that.

Q: What was a typical day like?

A: We would start there, and then we would do GYN exams; we would do pap smears; we would refer people. Some of these

¹⁷ Montagnards or Degar are the indigenous people in the central highlands in Vietnam.

people had vaginal cancers and cervical cancers that they probably had had them all their lives, but we found them then and brought them in for treatment. We did OB checks; we did well women checks, and then we ran a female clinic at my dispensary.

While at Camp Pendleton, I also worked a community clinic in Vista, California, and became one of the first PAs in the state to get a California license. The clinic in Vista was a primary care facility for poor, indigent, low-income people. If you had insurance you paid; if you didn't you did a sliding scale. If you had no money we still took care of you.

Q: How did you have the time to do all this?

A: In the evenings, after work.

Q: Did you sleep at all during those years in Pendleton?

A: No, not really. But I had fun and I learned a lot. After I left Camp Pendleton I went to Treasure Island,¹⁸ California- in the middle of the Bay Bridge between Oakland and San Francisco. The clinic was attached to Naval Hospital, later Naval Medical Command, Oakland. There was a small security base up the coast, it was covered by my clinic. It also

¹⁸ An artificial island constructed in San Francisco Bay for the 1939 Golden State International Exposition or World's Fair. The island later served as home to the Naval Station and Naval Hospital/Clinic (1942-1995).

covered the one at the air base there and the one over on Alameda. And so we became a clinic's command, and when we did that I became not only the PA in the clinic, but the credentialing officer for that command.

Q: How was your Treasure Island experience different than your tenure at Pendleton?

A: I did no admin at Pendleton, I did strictly patient care. This was an opportunity for me to do some administrative work so you don't get burned out as quickly just doing patient care. I loved the Bay area of California and often got homesick for all you can do there.

Q: So, at this point in your career did you realize that you were going to do 20 years?

A: I knew as soon as I left boot camp. I decided I liked it, and I knew I was probably going to stay.

Q: The other thing I noticed you had two fairly long tenures at two Navy command—about ten years at Pendleton and seven at Treasure Island. Is it something that they just didn't move PAs as much?

A: I don't think they moved me.

Q: Because they liked having you at these commands?

A: I don't know if that was it or they just didn't move me. Honest, I don't know. I was kind of an enigma wrapped in a puzzle and very proud of it.

Q: Well, I know in '79 or '80, you see the development of the specialty advisors in the Medical Service Corps. Did the PA program have its own special advisors or "champions" for the program?

A: We had, I guess, an advisor at the time. I don't think we had a specialty advisor that was a PA until later. I can't remember when that happened. I do know that when I was at Pendleton, we were the group that started NAPA, the Naval Association of Physician Assistants. There were seven of us. I also know that we were the group that was pushing to get commissioned and tried to get that started for a full commission versus a warrant.

When I became a warrant I was permanent. Women were permanent warrants once they were commissioned, but men were temporary and could revert back to their highest enlisted rank up to a certain time. But for women you were permanent from day one once you became warrant.

Q: I would think that was probably very important too, and I think you became a very tight-knit community because in

some respects, PAs were a little bit like outsiders in the early years.

A: We were. Once I had a nurse tell me that no female, let alone a warrant officer, was ever going to deliver babies as long as she worked on the labor deck. Eventually we became great friends once she saw that I was hard working and I was going to do my job.

Q: What was your next duty station after Treasure Island?¹⁹

A: Marine Corps Base Kaneohe, Hawaii.²⁰ You know, I had heard all the tales how Hawaiians didn't like people from the mainland, but they were wonderful. I so enjoyed my time there, but I'm a Marine kind of person and I love being on a Marine Corps base was very happy to have been stationed at Kaneohe.

Q: I bet. What do you remember about that time?

A: I remember my children growing up and going to private schools there and playing sports there. I remember my house that was close to the ocean, so we could walk down the street and watch the ocean. I remember that that was during the first Desert Storm and we had to scan all the people who came from the Reserves. They kind of sent a lot of

¹⁹ LCDR Robertson served at the Naval Medical Clinic Treasure Island, CA (1990-1993).

²⁰ Robertson served at the Naval Medical Clinic Marine Corps Air Station, Kaneohe, Hawaii (1990-1993).

people there to get physicals. I remember how beautiful it was there, it was just beautiful. I loved it.

Q: Now, you mention your children, I know your husband is a retired Corpsman, where did you meet him?

A: I met him at Camp Pendleton during my year of preceptorship. I went to a party and there was a man cooking chicken, so I figured if he knew how to cook I should get to know him.

Q: And the rest is history.

A: Yes, we got to be friends and then we got married, and we've been married 40 years.

Q: So you were able to serve in the same locations over the years?

A: We served, sometimes, together, not necessarily all the time. Sometimes he was in San Diego; sometimes he was in Okinawa with the Marines; he was a Marine FMF Corpsman. And then I have two children and my daughter and son both served in the Air Force for four years.

Q: Why not Navy?

A: Couldn't get them to go.

Q: That's a sacrilege.

A: Yes, it is, because I figure they'd still be in if they'd gone instead of getting out. They didn't like it, but that helped them get through college with their GI bill and that's the important thing, and it was a learning experience.

Q: After Kaneohe, you went to the clinic in Charleston.

A: Yes, I closed the Naval Station Clinic when they closed the base. Then I went to work at the Naval Shipyard in Charleston at the medical clinic, and we also closed down that clinic and helped close down the civilian medical records and get them screened for asbestos and disability and things as that was closing down also. From there I went to the Naval Propulsion Training Unit which trains the submariners in Goose Creek; I was the medical officer for the sub school there.²¹

Q: And you retired from the Navy in 1998?

A: I did.

Q: Well, as you look back what are your fondest memories of serving in the Navy?

²¹ LCDR Robertson served at Naval Hospital Charleston (1993-1996), the Naval Propulsion Technical Unit, Goose Creek (1996-1997) and the Naval Medical Clinic at the Naval Weapons Stations, Goose Creek, SC (1996-1997)

A: Just the privilege of being able to do that and the privilege of being able to get as much education as possible. I don't think young people realize how much education they can get in the military if they'd just work at it. I think meeting my husband was outstanding. It was a privilege to help treat the Vietnamese there at Camp Pendleton. It was sad knowing and working with young men during the Vietnam era because a lot of my Corps School mates either came back disabled or not at all. I was very proud of the fact that we started the Naval Association of PAs and we worked toward getting commissions for the PAs.

Q: What were some of the biggest challenges over the course of your service?

A: Being female.

Q: Can you talk about that? What are some of the things that you faced?

A: When I first came in the Navy it was a very segregated male/female kind of jobs and activities. If you got married, a lot of times they made sure you didn't work the same shifts or work in the same area, so you really didn't have a lot of time together in the early days. And there was a lot of-how do I say this without sounding sexist?

There was a lot of "male pride" that prevented them from accepting other people, including females, I guess.

Q: Well, I know you're serving in the years before Tailhook, and you probably saw a lot of things.

A: In honest truth, even up until the time I retired in 1998, there were times when it felt like it had not changed that much. And there were times when you thought, "Gee, we're floating along here; we're all getting along," and then that little head would raise up again like, you don't like this, or you don't like this way, and then it would come out, and that's actually one of the reasons I retired. It was a difficult couple of years for me towards the end. I said to myself, "I'm tired, I'm not doing this any longer."

Q: This must have been very difficult.

A: I remember when we first went on ships and how wives and others said this was not going to work. It only works if you don't work at it making it work.

Q: Well, I know when you're serving in the 70s there are a lot of social changes in the Navy and some of which were led by Zumwalt and others, but they received a lot of pushback.

A: Absolutely, and you could see it on a daily basis, everything from the beards to the changing of the uniforms

to integrating women on ships or just putting more women in schools. For a long time men were the only people who really went to a lot of schools in the military other than administrative or a few Corps schools, and so they had to work through that to get and make the playing field "fairer" in order to get promotions and to be part of the military.

Q: Do you remember anybody who kind of looked out for you? Any leaders that kind of stand out in your mind?

A: I wish I could remember their names. There was a CO at Camp Pendleton and he was just so supportive of his whole staff and making sure that we were doing things to get promoted and being in the right places. He had taught at PA school, and came from PA school to be the XO at Camp Pendleton, and he was a wonderful man, but I don't remember his name.

Mike McGrath, who was the senior PA at Camp Pendleton, was really supportive with me being the second one there and getting all the training that I could get. We worked well together, and Mike was much senior to me. There was a doctor by the name of CDR Freddie Earl Burson who was an OB-GYN physician, and kind of my preceptor. He made sure that I got as much training as I could when delivering babies and taking care of the OB and the GYN people. Last I

heard, I think he's probably retired, but he had gone up to Whidbey Island.

There are lots of people throughout your life that you meet for a small amount of time, or a short length of time, that affect you, but you don't always remember their names when you get old.

Q: Well, certainly in the transcript we can always add these names and what not.

A: I will probably not ever remember them.

Q: Oh, well for example, the XO, we can find that information.

A: Yes. He was there in-he was there sometime in the 80s, maybe early 80s, and then, of course, there were the-I'm trying to think of the admiral that really went along with us to help try and get us fully commissioned.

Q: Was that Zimble?²²

A: Yes, Zimble. I think that was him. He worked with us; we had a PA conference in Washington D.C. and he came down and met with us. He was very positive with that. I'm pretty sure that was him.

²² VADM James Zimble (1933-2011) served as Surgeon General from 1987 to 1991.

Q: He was one of the big supporters of the PA program and I guess all the commissions were in '89, right?

A: 1989.

Q: Now, there were some PAs that chose to remain warrant officers in 1989. Do you know why that was the case?

A: I don't know. Unless they were so close to retirement they didn't want to give the time for being commissioned. When I got commissioned to lieutenant we were given so many years in grade going toward lieutenant commander. But, you know, I have a friend who was commissioned, but reverted back to enlisted to retire, and I couldn't understand that. But anyway, I'm not sure why they did that.

Some people did it because they had not taken the certifying exam, and so when we first got commissioned I think there were still some people that had not taken it, and so I'm not sure if that was part of the issue. I took it from the day it was offered and I've taken it every six years since because we have to recertify every six years, except the new people now graduating will be doing it every ten as of this year.

Q: Do you still keep in contact with active duty PAs?

A: Nope. I don't keep in contact with anyone currently in the military. I keep in contact with a friend who was in the military with me; her name is Sandy Leggit.

Q: Was she medical too?

A: No. But she and I were stationed together in Orlando and we have been friends ever since.

I also do have contact with Bill Meeker and Bill Crowell on Facebook; both were in my class at Sheppard Air Force Base.

Q: So as you look back what personal legacies are you proudest of the most?

A: Becoming a Corpsman, becoming a PA, becoming a mother and a wife. And hopefully, leading the way for other females to become PAs since I was the first one.

Q: As you look back, is there anything you would want to change about your career?

A: Maybe not being truthful, outspoken and having just towed the line.

Q: Well, how about advice for anybody who is a PA today, or thinking about becoming a PA, whether military or civilian?

A: It's a wonderful job. It is still expanding and growing. You have so much more opportunity to become specialized now. I think the sky's the limit as far as continuing your education, getting your Ph.D., being able to teach other young people to become a PA. I think that PAs need to understand, also, that PA is a primary care specialty, and with the shortage of primary care physicians in the United States, we're going to have a great opportunity as a young person being a PA, to influence a community, take care of a community, and be part of a community. But as PAs we're never going to get rich, so if you're going into it to get rich, you're not doing it for the right reasons. But you're rich in the fact that you have this great opportunity to take care of people and influence people, and maybe make their lives better just by taking care of them. That's why I still do it; that's why I have not retired.

Q: What's the next step for Commander Judith Robertson?

A: She has no idea what she'll do in retirement because I've worked since I was 13 years old, and working is my hobby. I love what I do. In fact, I cut back to ten shifts a month recently and it's driving me crazy because I miss the young people I work with; I miss the patients that I see, even though they come to the ER and drive me crazy. And I miss

the people. The group I work with here at Anderson²³ is just a wonderful group of physicians, PAs, and nurse practitioners, nurses and staff. I had a wonderful 14 years with them, but I'm going to have to make some hard decisions this summer and become a retired person.

Q: Well, ma'am, I must say I thoroughly enjoyed this and I really appreciate you sharing some of your stories with us today.

A: I hope I told you what you need to know. I keep thinking of other stories and other things and I keep thinking-I was going home from Treasure Island when the earthquake hit, so I was there for that. It was a fascinating time. Vietnam and taking care of those people during that time was fascinating. I think just being a PA is fascinating and you learn something new every single day. I just think there's not a day that goes by that you can't learn something new. And my one thing in life is if you get up every day and see the sun, then it's gonna be a wonderful day.

²³ Anderson Medical Center, Anderson, South Carolina. Judith Robertson served as a Clinical PA at Anderson from 2001 to 2015.