



U.S. Army Captain Elizabeth Jane McCarthy (Ret.) Served in Vietnam, 1971

Elizabeth Jane McCarthy joined the Army Nurse Corps in 1968 while she was attending Massachusetts General Hospital School of Nursing. After the six weeks of basic training in Texas, she was stationed at Walter Reed Army Medical Center for ten months in the Recovery Room/Intensive Care Unit. Then, at age 22, with that minimal experience under her belt, she was sent to the 95th Evacuation Hospital in DaNang, South Vietnam where she worked as a Captain in the pre-operative and receiving area as a triage nurse, separating patients based on severity of injuries and what medical treatments were needed. Sometimes, all she could do was hold a soldier's hand as he breathed his last breath.

In the 1960s, the young men McCarthy grew up with in her town of fewer than 7,000 were being drafted. She was coming home every six months for a funeral of one of her friends, the guys who had to go. By the third funeral (of Allen Keating who was killed in Vietnam at the age of 21), she stood at his grave and said, "I have to do something." She wasn't in favor of the war, but if these men could sacrifice, so could she. At that time, women could not serve in the military except as nurses, or go overseas in another capacity, like with the Red Cross or other aid organizations.

Captain McCarthy came home radicalized, joining Vietnam Veterans Against the War in college and went to protests. Looking back, she realizes now that her difficulty adjusting back to civilian life and subsequent depression at the time were symptoms of undiagnosed PTSD. She has remained active as a Veteran and returns to her home town in Cohasset, Massachusetts, every year to march in the Memorial Day Parade to remember the high cost of war.

Upon returning from the war in Vietnam, Captain McCarthy went to college and nurse anesthesia school using the GI Bill to help pay for her education. She worked as a nurse anesthetist for several years and in 1980 returned to school and received her PhD in Physiology in 1985 from the Uniformed Services University of the Health Sciences in Bethesda. After completing a fellowship at Navy Medical Research Institute she joined the U.S. Public Health Service as a Commissioned Corps officer where she worked for the Food and Drug Administration (FDA) as a regulatory scientist reviewing data for the approval of FDA regulated products such as medical devices and drugs.

Captain McCarthy retired from the US Public Health Service Commissioned Corps in 2006 and she continues to work in academia as a professor at the University of North Florida. She served as the first woman Veteran on the Montgomery County Commission on Veterans Affairs and her primary goal on the Commission was to improve care for Veterans in Montgomery County especially those returning from war experiencing the difficulties of post-traumatic stress. Captain McCarthy currently resides in Olney, Maryland.

Following pages include Captain McCarthy's Memorial Day speech at the Vietnam Women's Memorial, Washington, D.C., on May 28, 2018.


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Jane McCarthy, PhD, CRNA, FAAN

Rank during Vietnam tour: First Lieutenant, U.S. Army Nurse Corps
Served in Vietnam: 1970-1971, 95th Evacuation Hospital, Da Nang, Vietnam

The majority of the profile below comes from Jane McCarthy's Memorial Day speech at the Vietnam Women's Memorial, Washington, D.C., May 28, 2018: "My Reflections on Serving as an Army Nurse in Vietnam."



It's always so special to be here and a part of this event on Memorial Day. Since I came back from Vietnam, it has been very meaningful to me, and I believe it is a day that's more than going to the shopping mall, it's about remembering the high price of war. That's why I do something every Memorial Day to honor this occasion. It's special to be here today in remembrance of our Vietnam Nurses Memorial that's been here now for 25 years.

What I'd like to do here is share my story about how in the world did I end up in Vietnam, what did I do in Vietnam, and what was it like coming home from Vietnam.

In 1968, I was in nursing school at Massachusetts General Hospital School of Nursing in Boston. My hometown is Cohasset, Mass., which is a small town just south of Boston. I grew up there and there were a hundred kids in my class - we were together all through school. We knew each other. In '68-'69, I was coming home every six months to a funeral. And for those of you who remember those times, we were either demonstrating against the war, or watching our fellow brothers, friends, being drafted into the service to go to war.

I remember standing there at the gravesite of one of my high school friends and saying to a friend of mine, Craig, "I can't keep doing this, just coming home to these funerals! I've got to do something." And here I was, studying to be a nurse, and I thought, what could be more meaningful than to go into the Army to take care of these friends, guys, that had to go? They had to go into the service, and they had to go to war and be killed or injured.

I went back to Boston, found an Army recruiter and went into the office there and said, "I want to join the Army," and of course he was very happy, right? Boy this is a good one. And I knew when I raised my hand that they would own me for the next three years - my last of nursing school at Mass General and two years later, the Army would own me. They would tell me what I was going to do, but I thought, I can do just about anything for two years. Two years is not a lifetime.

And what more meaningful purpose to my life could there be except to take care of these wounded guys that had to go? And it didn't mean that I supported the war, but it meant that I felt that that was my purpose - to care for these guys.

I finished nursing school and took my exam for my license as a registered nurse. I then went off to basic training in Texas, finishing up there as a second lieutenant. I reported to Walter Reed Army Medical Center here in Washington, D.C., where I worked in the recovery room/ICU. I worked so hard at Walter Reed - I was a brand new nurse out of nursing school, and I was taking care of wounded there that had been wounded for maybe a week. They got the wounded back here pretty quickly for more surgery and I would take care of them there in the recovery room. In those days we didn't have ICUs per se. We just kept patients who were on ventilators. You couldn't send them back to the wards. You kept them there in the recovery room overnight.

The guys that got sent back to the ward - there were so many wounded then - our back wards, we actually called them the back wards - where there might be 40-50 patients on a ward, with one nurse between two wards. I mean you knew they would be getting very limited care once they left our recovery room. We tried to send them back in the best shape we could.

I did that for about 10 months. And during that time, I went to see the movie "M*A*S*H" - everybody knows M*A*S*H, right? Funny movie, right? - so I go to that movie and everybody else is laughing, and I'm crying. I'm like, "Oh my God, is this what it's like to be a nurse in a war zone?" And I thought, "I don't think I can do it. I really don't think I can do it. I don't think I have the strength to do it." But the Army thought differently. The Army in September 1970 ordered me to go to Vietnam. By myself, essentially.

I went home to my family and visited with them for a few days. I came back here to D.C., and got on an airplane to Travis AFB in California by myself. I showed up there, and they say, well you don't have a ticket. I didn't know I was supposed to get a ticket for the airplane. They said, we'll find you a ticket, no problem. They got me on that airplane, and I flew from Travis and

landed after about 26 hours in Saigon. I remember we didn't have any orientation of how you do nursing in Vietnam or in war. There was nothing. An anesthesiologist, Bob Watson, in the recovery room back here at Walter Reed heard that I was on orders to Vietnam, so he took me in the back, what we called the back, into the operating room, and he taught me how to start an IV. Because he knew I needed to know how to start an IV. He had just come back from Viet Nam. And that was the extent of my orientation of how to do nursing in war.

So off I went, and I landed in Saigon at Tan Son Nhut airport, and somebody picked me up and took me to a hut somewhere that had a wire perimeter, and there was a guard there. I stayed there for three days. I remember the guard, and I wondered, is he guarding to keep the enemy out, or to keep me in? I wasn't sure, because I didn't know what they were going to do with me!

They finally arranged for me to see the Army Chief Nurse in Saigon, the chief nurse of Vietnam. I went and met with her, and she said, "I'm going to send you up to Da Nang." I don't know if at that time I knew where Da Nang was, but come to find out, Da Nang is in I Corps, the northern part of South Vietnam, about 25 miles from the DMZ (demilitarized zone), and 35 miles from Laos. We were right there in the perimeter where the war was going on.

Vietnam was a country at war that had been at war for many years, and it was a third world country. I did not get to experience much of South Vietnam because I was not allowed to leave the hospital base without being in a military vehicle that had a destination of another military base.

They put me at the 95th Evac Hospital. We were a 250-bed evacuation hospital. We were the most sophisticated type of hospital in Vietnam. We had neurosurgeons, orthopedic surgeons, general surgeons. We had electricity; we had running water. We had air conditioning. We didn't have them all at the same time sometimes, but for the most part, that's what we had.



I worked in what was called pre-op and receiving, which you all would know as the emergency room, basically, but they called it receiving. I always thought that was strange. Receiving, like you were receiving goods or wares. Well, it was receiving the wounded on the helicopters. We had a helicopter pad and they would land there - the wounded and the helicopters. I cared for not only freshly wounded soldiers and Vietnamese civilians, but also other medical emergencies such as patients with malaria,

snake bites, drug overdose and drug withdrawal patients. Half of our wounded patients were Vietnamese civilians. My hospital had a prisoner of war (POW) ward with wounded Viet Cong and POWs that I cared for when they were admitted through pre-op and receiving.

Our corpsmen would go out with a gurney, pick up the wounded from the helicopter, bring them into the receiving area, and we had sawhorses. We'd pull out the sawhorses and go to work. And the guys would come in, of course, in uniform, we'd cut off the uniforms, they were right from the field. They would check first at the door for weapons - M16s or grenades - so they didn't come into us with that. Other than that, they came in fresh to us to cut off their uniforms, throw on a blood pressure cuff, start some IVs, and then I would do what's called a femoral stick. I'd have a 10cc syringe with a needle on it, I'd do a femoral stick into the femoral artery, take out 10ccs of blood, put it in a couple of red-topped tubes, send it over to the lab. We had a blood lab across the hall.

In the meantime, I'm starting the IVs, getting the patient stabilized. Then they'd bring over a couple of units of O neg, low-titer blood, the Universal donor blood. After those two units, the blood transfusions would be type-specific for that patient, so the next units would be the blood type for that patient. We'd stabilize, get a stable blood pressure on him, check out the wounds, decide what x-rays needed to be done. They'd want to see if there were frags in the abdomen and the chest. Most of our wounded were amputations, leg amputations, chest wounds, head wounds. My job was to triage them, get them over to x-ray, through x-ray, then over to the pre-op area or right up to the operating room. If we could stabilize their blood pressure. Of course, the other job was to call the surgeon, we had to decide what kind of surgeon this patient needed, get them over there, and call the operating room to get set up for the surgery.

The triaging would be: how many cases could the OR handle? If they couldn't take them all at one time, if I had stable patients, I'd bring them over to the pre-op area and have them wait to go up to the operating room. Or we would do suturing right there in the pre-op area. Basically, that was my job.

How does a 22-year-old girl from a small town in Massachusetts tell a 19-year-old soldier that he doesn't have a foot or a leg anymore? And the head wounds – the patients expected to die, not candidates for surgery -- I just held them or sat with them until they died.

I wondered why we were fighting this war. I thought I would find answers in Vietnam, but I didn't. I did learn that war causes death and mutilation.

Our base was hit two times during the time I was there – once with small arms fire and once the helipad was bombed.

When we got R&R time (rest and recreation), I went to China Beach – a military in-country R&R center in Da Nang that had an Officer's club and a place where we could change into our bathing suits.

I saw Bob Hope at the 1970 Christmas show in Da Nang.

I was there in Vietnam for 10 months, I was supposed to be there a year, but I wanted to come back to college. I wanted to start college in September because this was 1970 and a lot of the guys were getting a school drop - the war was standing down a bit, and I wanted to start college in September. So, I put my application in, and somehow I just never got a response from anyone. I went to the IG, the Inspector General of Vietnam, and I said, you know, I haven't heard anything back about whether I can leave here a couple of months early so I can start college. And he said, well let me look into it. He got back to me and he said, oh, they lost your paperwork. And I said, it must have fallen out of the airplane on the way back to D.C., or something. I thought, this isn't right.

My chief nurse of the hospital, when I asked her about it, she said, I didn't start school til I was 42, you can wait too. I thought, no, I'm not going to wait that long. My brain might not work at 42. No, I want to go now.

One night I was working. We worked two shifts: either 7 a.m.-7 p.m. or 7 p.m.-7 a.m. That night shift, I was basically by myself, because the corpsman went to sleep, the physician of course went to sleep. But nurses never slept, nurses never sleep. I'm there, we were waiting for the choppers, even the radio guys would tell me, "I'm going to be sleeping over here. If you hear a chopper..." Okay.

I was sitting there one night wondering what am I going to do, I want to go back to school. I wrote an eight-page letter, hand-written, to my senator: Senator Ted Kennedy. And in those days, as an officer in the military, you didn't write a letter to your senator if you wanted any kind of future in the military. Especially in Vietnam.

But I wrote my letter, and I told him, that I wanted to come back early to start college, and my paperwork had gotten lost, and I can't get any kind of response from anyone around here. I don't know what I wrote in those pages. But you know what? Six days later, on a Sunday, I was working, and the chief nurse came running down the hall and said "McCarthy, go pack your bags. You're out of here." And that was my goodbye party from Vietnam!

That's how I left Vietnam. Let me just share with you a little bit about what it was like coming back from Vietnam. A friend – a surgeon I worked with who had a jeep - brought me to the airport in Da Nang, and I flew to Chu Lai, then left out of there by myself with a few hundred other GIs. In those days you couldn't wear your fatigues home. I had to get dressed up, back in the skirt and the jacket again, with the high heels and stockings. And get on that plane for 26 hours.

I land back at Travis AFB, and by that time my ankles are so swollen I couldn't even get my shoes on my feet - those high heels. They walked me around from building to building at Travis AFB to discharge me out of the military. I get to that last place, and the guy says, "Okay, here you go." He hands me a couple thousand dollars in cash, and I say, "Okay, now what do I do?"

"Well, you go home. Where do you live?"

And I said, "Well, Massachusetts."

"Well, I'd get on a plane."

"Where do I get a plane?"

"At the airport, 25 miles from here."

"How do I get to the airport?"

"Well, you could take a cab, I guess."

I found a cab, he took me to the airport, and I remember standing there in the airport, I don't know if it was Seattle, somewhere, in some airport, and I looked around at all the people, just regular civilian people in civilian clothes, having civilian lives, and I couldn't figure out how to get on an airplane. That's when I just started crying. I just started crying. "What do I do now with the rest of my life?"

I think that's when it kind of first hit me, this is different coming back here. And so, I made my way. First I stopped in Indiana, because I had to interview with the dean where I was going to school. She thought I was

nuts when she asked me, "Where did you come in from?" and I said, "Vietnam." "Really?" She didn't think it was all that necessary, but I did my interview, I got accepted, I went home for 10 days to Cohasset to my parents.

Then made my way back to Indiana to go to school, and unbeknownst to me, I had classic post-traumatic stress disorder (PTSD). In those days, first off, there was no such thing as PTSD, they hadn't come up with that "diagnosis." And secondly, when it was described, it was for the soldiers. Nurses don't have PTSD. Why would nurses? It's soldiers. And that's kind of how we dealt with it for several years. But looking back on it, I did have classic PTSD, and in Indiana, I remember I got a job in the city hospital in the emergency room, because I figured, okay, I guess I'm an ER nurse now.

I had a student assigned to me, a student nurse. An elderly lady came in with a fractured hip in a bed, and I said, "Okay, go ahead over with her to x-ray." So, she did, and a little while later she comes back, this student, and she's crying. And I said, "What are you crying about?" And she said, "She died." And I thought, I'm hoping I thought and didn't say, "You're crying over that? I just held a guy in my arms with a chest wound who bled to death two weeks ago, and you're crying over that?" And that's when I realized I was not in the right place right now for me to be, working as a nurse, because I had become numb because of the wounds, because of the atrocities which I had witnessed, and taken care of.

And there were other classic symptoms of PTSD. I had trouble sleeping, I slept every other night. And the nights I slept, I had nightmares that I was back in Vietnam again. I had hypervigilance - any loud noise or something, I'd be down on the floor. And just ruminating over this. I was alone, basically, in Indiana. And Indiana was not the place for me to be.

I remember working in that ER, and I was working with a neurosurgeon with a patient with a facial wound or something, and I said, "I can help you with that, with the suturing." And he said, "Really, how would you know how to do that?" And I said, "Well, I was in Vietnam a couple of weeks ago."

And he put down his utensils there, and he looked up at me, and he said, "You were in Vietnam? I've never been out of the state of Indiana." And that's when I knew, this was going to be hard to relate to people.

I remember I was in an English course there, and the English teacher asked me what country I was from, because I still had a little Boston accent left. And I thought, "Oh my goodness, what am I doing here in Indiana?"

I knew I was depressed, I wasn't eating, and I remember my mother had told me, having been raised Catholic, my mother had said to me that I was eligible for a general confession because I had been to war.

I had started going back to mass, I didn't go in Vietnam, because I couldn't believe there could be a God that would let this stuff happen. I was going back to mass, and there was a young priest there, and I thought, "Let me give him a call and see if he'll give me a general confession." So, I called him on a Thursday I think it was, and I told him I'd just come back from Vietnam, I don't know what else I said to him, and I said, "Would you be able to see me?" He said, "Yes, I think you ought to come in and see me." And I said, "Okay, when could you see me?" and he said, "How about NOW?" And that kind of gave me a hint that I needed some help.

I went in and I talked with this priest, he saw me a couple of times a week for several weeks, and he gave me the courage and direction or whatever it took to get me out to Colorado, which was where a lot of my friends from Vietnam were. I drove out to Colorado in January, in my MGB Roadster. And this was my motto back then, "Don't buy anything that won't fit in the MGB Roadster!" I never owned an ironing board. I had an iron, but not an ironing board.

I got out to Colorado and I got together with several nurses and docs that I worked with, and we just talked and talked and talked and talked for about three years. And I finished up school out there, it got better, life went on, you put one foot in front of the other, and I went on in my education to become a nurse anesthetist. I came back here to Washington, D.C., and worked at the hospital center and then at Walter Reed, but then - I want to say, this PTSD stuff, it doesn't go away. It doesn't go away.

Even though my life went on, actually, many of us veterans become alcoholics. I became a workaholic. I got my PhD, I worked hard. And then in 1991, we had another war. And I just fell apart. And at that time, I was married, and I had a young child, two years old, and I just couldn't believe that we were dropping bombs on another country again. I just couldn't believe it. I felt like I had to hold my breath until the bombing stopped. And I knew I couldn't do that.

So again, I reached out for help and got into some serious therapy then for a long time. About that same time, we had the dedication of this memorial in 1993. And it was so special. I remember being here. I came down for the dedication of the Wall, which was a few years before that, and the soldiers and the veterans there were "Rah Rah," it was a lot of hoopla, and isn't this great! But, a few years later I came down here for the dedication of this Vietnam Women's Memorial, and this was different. This was different.

We had a parade of nurses down Constitution Avenue, and each of us had our sign of our hospital. The 95th Evac Hospital, whatever. And we stood behind the banner and the veterans, the soldiers, lined up on the side of the road, and you would hear, every once in a while, when they would see the sign of their hospital, you would hear them yell out, "You took care of me!"

You know, the guys in their wheelchairs, and "You took care of me!" "I remember you took care of me." And I think that was so healing, for all of us. For the soldiers, and for us, the nurses. And it was for us nurses to begin to realize that we needed to heal too. We saw those atrocities day in and day out, and we needed the healing too.

And that's what this memorial has given to us over these 25 years, and I'm so glad that we do what we do every Memorial Day here with our histories and our candlelight service.

To end my time with you, I'd like to share with you a poem that I found in this book ("Celebration of Patriotism and Caring") - this was made 25 years ago for the dedication of this memorial. I want to share it with you.

Angels in Hell

by Darrell Nichols

Epilogue



CAPT Jane McCarthy, PhD, CRNA, FAAN, went to college and nurse anesthesia school using the GI Bill to help pay for her education. She worked as a nurse anesthetist for several years and in 1980 returned to school and received her PhD from the Uniformed University of the Health Sciences in Bethesda, Md., in Physiology, 1985. After completing a fellowship at Navy Medical Research Institute, she joined the U.S. Public Health Service as a Commissioned Corps

officer where she worked for the Food and Drug Administration (FDA) as a regulatory scientist reviewing data for the approval of FDA-regulated products such as medical devices and drugs.

Captain McCarthy retired from the U.S. Public Health Service Commissioned Corps in 2006 and she continues her work in academia as a professor at the University of North Florida. Jane served as the first woman veteran on the Montgomery County Veterans Commission in Rockville, Md., and her primary goal on the commission was to improve care for veterans in Montgomery County, especially those returning from war experiencing the difficulties of post-traumatic stress disorder (PTSD). She is a member of the American Legion and goes home to Cohasset, Mass., each year to march as a veteran in the Memorial Day parade.

She does a lot of Vietnam talks at middle schools, high schools and colleges. She plans to speak again at the Vietnam Women's Memorial in Washington, D.C., in 2020.

Overall, she considers her experience in Vietnam "Life changing!"

Links to Memorial Day talk 2022

YouTube - <https://www.youtube.com/watch?v=DQbSx3zk--0>

Facebook - <https://www.facebook.com/watch/?v=1579148222469150&ref=sharing>

VVMF website live page - <https://www.vvmf.org/live/>

VVMF website Memorial Day 2022 page - <https://www.vvmf.org/2022-Memorial-Day/>