Wisconsin Veterans Museum Research Center

Transcript of an

Oral History Interview with

ALICE M. DORN

Air Force, Korea

2003

OH 403

Dorn, Alice M., (1928-), Oral History Interview, 2003.

User copy, 3 sound cassettes (ca. 180 min.), analog, 1 7/8 ips, mono. Master copy, 3 sound cassettes (ca. 180 min.), analog, 1 7/8 ips, mono.

ABSTRACT

Alice Dorn discusses her Korean War service as a flight nurse with the 801st Troop Carrier Squadron airlifting wounded soldiers from Korean to Japan for treatment. A native of Sleepy Eye (Minnesota), Dorn talks about her childhood during the Great Depression and World War II. She comments on having her family's house receive electric lighting from the Rural Electrification Administration (REA) and recalls the rationing of shoes, sugar, gasoline, and tires. After graduating from high school, she entered the Nurse Cadet Program, a government program started during World War II to alleviate the shortage of nurses. Dorn describes working at a veterans hospital in Yangton (South Dakota), enlisting in the Reserves at the outset of the Korean War, assignment to March Air Force Base (California), and living on an Air Force base with B-29s flying constantly. Dorn talks about lack of military uniforms for nurses, treating Air Force personnel with self-inflicted wounds, care for airmen that were injured in crashes, volunteering for overseas duty, and her perception that the military was not prepared for the cold Korean climate. Stationed at an airfield outside of Seoul (Korea), she talks about treating United Nations troops and air evacuating troops to Japan. Dorn describes the conditions aboard the aircraft including the engine noise which made it difficult to talk to patients, problems of icing on plane wings, and flying on planes that were not pressurized. She mentions leave in Japan, living conditions in Korea, trading liquor for clothing, and eating at the officer's club. Dorn provides an interesting discussion of life as a nurse on an Air Force base including Christmas parties, interest in knowing what songs were popular on the radio, and the sister-like relationship among the nurses. She comments on the ship ride home including seasickness, dropping off military dependents on Okinawa, meeting a Marine aboard the ship that was a distant relative, and awaiting discharge in California. Dorn used the GI Bill to attend Marquette University (Milwaukee, Wis.) and worked at the Wood Veterans Hospital in Milwaukee.

Biographical Sketch

Dorn (b.1928) served as a nurse with the 801st Troop Carrier Squadron stationed in Korea and Japan during the Korean War. After the war, she worked at the Wood Veterans Hospital (Milwaukee, Wis.) and eventually settled in Middleton, Wisconsin.

Interview Transcript

Tom: This is an interview with Alice M. Goblirsch (??) or Goblisch (??) – Dorn who served in

the United States Air Force during the Korean War. This interview is being conducted at Alice's home at the following address: 7610 Knights Circle, Middleton, Wisconsin on

July 16, 2003. The interviewer is Tom Colby. Good morning, Alice.

Alice: Good morning, Tom.

Tom: Alice, let's begin by telling me and whoever may read this about your background and

life circumstances prior to going into the military. Where were you born, Alice?

Alice: I was born in Sleepy Eye, Minnesota which is south central, about 110 miles from

Minneapolis, on a farm. I had four brothers and a half four brothers and a sister and I

really couldn't wait to leave it.

Tom: What year were you born?

Alice: I was born in 1928.

Tom: OK. And your father and mother; were they in the military at all?

Alice: My dad was in World War I, but it was toward the end of the war.

Tom: Brothers or sisters?

Alice: My youngest brother is in Oklahoma City. He made a career out of the Air Force. He's

retired now. My older brother, who is deceased, was in Japan after I left. He was in the

Army.

Tom: Did you grow up in Minnesota?

Alice: I grew up on the farm. My great grandfather settled in this rural area so my grandfather,

my grandmother lived there; my uncles and aunts lived next door, so it was a nice

upbringing. We were very close; the family and cousins.

Tom: OK. Tell me about your schooling?

Alice: I went to a one-room school for six years and parochial school then high school. And

then when I went into nurses training that was run by the Benedictines in Yangton, South Dakota. It was a diploma hospital school. That was three years, so I graduated in 1948

from nursing school.

Tom: And when did you graduate from high school?

Alice: In '45.

Tom: And what high school was that?

Alice: That was St. Mary's High School in Sleepy Eye and I just remembered the other day my

whole entire years were during the Second World War.

Tom: And what was life like during the Second World War for a high school girl?

Alice: It was pretty much like anybody else's, I guess. There was a lot of rationing and so we

were sort of limited to gasoline, shoes. My mother preserved quite a bit of food, so she

worried about the sugar supply. There wasn't a problem with meat. Those were also stamps at the time, but we had our own meat and supplies. Farmers worried about tires, how much they needed and whether they would get it for their fieldwork. I grew up without plumbing, without electricity until the sixth grade and that was wonderful when the REA [Rural Electric Administration] came through, because I used to read in bed with a flashlight at night. It was just—it was hard. But we didn't think so, because everybody else was going through the same thing.

Tom:

So World War II ended in '45 and then you decided to go off to nursing. How did you come about choosing that career?

Alice:

Oh, my mother was really the one who pushed me into that. She thought it was wonderful and in the meantime during my high school years I used to really keep tabs on World War II, what was happening. I would read about the Army nurses and what they were doing and I finally did go. The nursing cadet program was in session, so they paid for our education and gave us about \$10 a month. Most of our training was without RNs except for the supervisor on the floor. There were no aides. We would make up the room after a patient was discharged. We scrubbed surgery floors after our surgery was completed for the day. We did the sterilizing and the folding. We did all of that. I can't believe what is going on now, how terrific it is today with packaging and everything is very sterile and I used to worry about the sterile instruments and so on. I remember one time, I had a particularly tough first floor supervisor in men's medical. At that time, everybody was segregated; men, women and children. I was responsible for sterilizing the tubing and I always checked to see where I might be when this sterilization session was over and this time they burned. I smelled it down the hallway and this nun came along and said, 'You did it; you did it.' (Alice laughs). But I got to her first and she said, 'I always want to know before I find it. I want you to tell me,' and so that was my big day with her. (Alice laughs). But patients stayed in bed longer. At that time too they began to start ambulatory after surgery. They started getting them up, because they found in World War II when men didn't have enough beds when they came in that they would have to get them up after surgery. They found that they would eliminate embolisms and thrombosis and they got them moving. So, when a woman stayed to have a baby, I think it was two weeks when my mother had the children at home, and then it was a week. Today it's like three days. So, there have been a lot of changes.

Tom:

Let's back up a little bit. You mentioned the Cadet Nursing Program. Tell me about that. I've never heard of that.

Alice:

During World War II there was such a shortage of nurses that the government decided to help them get through school or entice them into school, I guess. So, they had this program where they would pay your tuition and they would pay your board and give you an allowance, which wasn't really very much. I think tuition at that time was like \$300 per year. But then you have to remember we did a lot of the work. We didn't have cleaning people except to do the hallways and the floors in the patients' rooms. But we did all of that. Then we spent like six months after our training was finished when we could choose wherever we'd like to work. And there were no classes.

Tom:

So there were no sit down, book learning classes for nursing?

Alice:

No. And, it was just giving back, I guess. But they operated this way. Most hospitals did.

Tom:

So when you say you had to give back six months, did you have to go into a military service or just someplace?

Alice: No, just to work there, or we could have. We could select a veterans hospital. So many

people in one class could. It was a percentage thing. You could go to a VA hospital in the area or a public health service. I know I tried, but there were two or three other people had already decided they would and they went off to South Dakota. In the Black

Hills, there's a VA hospital out there I think.. But that was OK.

Tom: So, you graduated from that program with an RN?

Alice: Yes.

Tom: When you did the six months did you have to stay in nursing or did you just have to work

for free for six months?

Alice: It was part of the experience.

Tom: So it was more like an internship for six months and you chose to stay in Yangton at that

hospital?

Alice: Yes.

Tom: Did you specialize in a particular branch of medicine at that point or how did nursing

work then?

Alice: No. You could select a ward or a floor. I liked medical. It sort of evened out because

our whole class would select another area and it worked out very well.

Tom: So you finished up your time at Yangton and then what happened?

Alice: I was all set to get out into the world then my dad told me that he had ocular melanoma

which is probably common with farmers. He had blue eyes and light skin. He asked that I stay home and that really broke my heart besides the fact that he had cancer. So I took a job in New Ulm which is the town next to Sleepy Eye. He would come in for treatment and be out and maybe spend a few weeks and he would go to my floor. The staff was very good about that and so when he did come in to spend his last weeks at the hospital he would be on my floor until he needed more attention and they let me just live in his room. They had sort of a trumble and I'd spend the night there and so on. At that time all cancer patients went to hospitals to die. They didn't die at home as hospice care is now. He died on New Year's Eve and he had made me promise over and over, 'Would you stay home for a year with your mom?' which I did. Then eventually she saw how unhappy things were sometimes and she didn't need me so much so she let me take a few nights at Sleepy Eye Hospital or go back to New Ulm Hospital and work so many days a week until my year was up. I had met some other nurses who were going to Denver and they said, 'We'll wait for you. We'll stay in Denver until you get here.' Well, by that time, they had gone on to California so I moved to California and took a job at Whittier.

Tom: What year was that?

Alice: It was the end of 1949 and the beginning of 1950. You could get a job at any hospital at

that time and we stayed there for awhile – six months and decided we'd move to San Diego which we did and took a job at a tuberculoses sanitarium – sans being still in existence at that time. Then the Korean War started in June of 1950 so we decided to enlist. We went to the Marine reserves in San Diego and they put us on active duty. Very shortly I went to Riverside to March Air Force Base for a year and that was a 60-bed hospital. It was nice duty. It was a B-29 base so for the entire day you would hear this roaring. They would rev those engines – I still don't understand why, but you would

hear that night and day. I think they were taking care of the mechanics of it, or something.

Tom: So you were with the Marine Corps to start with?

Alice: That was just the closest place for us to enlist.

Tom: OK

Alice: They said, 'You have to go to this Marine Base,' and I forgot what place it was.

Tom: Was it Camp Pendlelton?

Alice: No. It was in San Diego. It was a little station.

Tom: Oh, it was Marine Corps Recruit Depot, San Diego?

Alice: Probably. And we had our physicals and so on. My apartment mate was sent to South

Dakota to Rapid City and I was sent to March.

Tom: Tell me about the enlistment process for nurses? How did that work?

Alice: They gave us some papers to sign and they said, 'We'll call you in for a physical,' or I've

forgotten what other exam we had and we had the physical. I think within a couple of weeks. And they told me that I only had to sign for a year. That was great news because I had decided that if I didn't like it I could get out and do something else. Then, I think we just waited for orders after that. We were told whether or not we had gotten through the exam and so on. We waited for orders and I was sad to see my roommate go to Rapid

City and she spent the entire three years there.

Tom: Did you have a choice as to what branch of service that you wanted to go into?

Alice: Oh, yes.

Tom: Why did you choose the Air Force?

Alice: Because it had just become the Air Force in, I think, 1948. It was the Army Air Corps

before that. And I don't know if this is new so we went in and we didn't have uniforms. We didn't have basic training. I can still remember going to March [Air Force Base] and the old guard, the World War II nurses, had the first floor in the barracks and we had the second floor. And, we stood there and tried to teach each other how to salute. I never did learn to march, but we had the march later on [laughs] and all we would hear about was,

'You should have been here when, -' [laughs]. But I guess we all do that.

Tom: Probably so. So no uniform. What did you do?

Alice: I just had the white uniforms and there was no need for us to have military uniforms and

we would have to send for them from Ohio. There was a place in Ohio. And I don't think I wore that more than processing out. Oh, maybe there was New Years Eve. There was always something you had to appear for on New Years Eve at the general's house.

And those two dates were the only times I wore it.

Tom: So you were commissioned as a – what rank?

Alice: Oh, second lieutenant.

Tom: And what was a second lieutenant's salary at that time?

Alice:

I wish I could tell you. I don't know. It wasn't very much, plus you paid for food and you paid for the uniforms you wore. It was better than being enlisted, I'm sure. It was a quiet base. It was hard to date. I'll tell you why because all of the B-29 pilots were married. They were much older. I think there was one person in the officers group who was single. One male and he probably went in about the time we did. We had a good staff at March. They went on 12-hour duty, which I really hated, from seven to seven to seven, and I thought it was just too long. We had people coming back from Korea with, of all things, frostbite and self-inflicted gunshot wounds. They just weren't prepared for the weather. It was a miserable thing. The footwear for them wasn't very good. We didn't have too many of those. They would stay here until they were sent back to a hospital closer to near their home. But then we were a small hospital with only about 60 beds. Then we had dependents and I was never happy to be in the obstetrics ward and that was my duty. And another nurse friend of mine, Ettie (??) or Eddie (??) and I were cleaning up the OB wards. We had three babies that morning and it was 7 a.m. and we needed to get all of this set up again for the next ones. We were really tired and the chief nurse came through and said, 'I have three openings for FEMCOM,'(??) which was the Far East. Eddie (??) or Ettie (??) looked up and said, 'I'll go,' and I looked up and said, 'I'll go.'

Tom: And it was just like that, huh? [laughs]

> It was a time [laughs] and she said, 'Well, it depends on seniority, really, but I'm giving you the opportunity to say yes.' And we got it. Our biggest problem was wondering where. Where could mean the Philippines or any place like that. So I think it was a month I took leave and went home for a couple of weeks in November of 1951. And we went to the base in San Francisco. Some of the nurses drove us there and stayed with us. We took a little time out at Sequoia and so on, and saw us off. But we spent a week or more there before we were shipped out. There were a hundred of us in three or four C-54s. I don't know what that was in civilian planes. I never did know. They carried about 30 nurses. We all left at the same time but our plane was having some difficulties so we

> Let's just kind of go back a little bit. When you were at March Air Force Base you were talking about the different wounds and injuries that you saw. Were these Army soldiers, Marines?

stopped in Hawaii. Now those were propellers - I can't tell you how long but it seemed to me that it took three days to get to Japan. Then we knew we were going to Japan.

Alice: Air Force.

So you pretty much dealt with Air Force casualties?

Alice: Yes, they were all Air Force on the base. I think the Army would go someplace else. There was a Navy base near Camp Pendleton.

The Navy base was down in Coronado. North Point is where the medical facility was at.

There was also a small one south of -

OK. In your time of nursing at March with these casualties, was there anything – stories that stick out in your mind about the patients that you saw – anything that specifically impacted on you?

> We had a psychiatric ward and there were a couple of people there that were uncontrollable which was very hard for me because when I went into nurses training, that

Alice:

Tom:

Tom:

Tom:

Alice:

Tom:

Alice:

was not available to us there except for the state hospital which was near Yangton. We sort of went there for classes and, you know, there were patients that were brought in as a 'subject today' and so on. But I had never ever been around patients who were destructive and psychotic. And I'm still not comfortable there. I'm just not. I think those people come to mind. Otherwise, I can just remember one day that every soldier on the base came in with an upper respiratory. There was something that went right through that base and they were hospitalized. They were really in sad shape. We had them everywhere in the hallways. It was just sort of a two-or-three day thing but they couldn't stay in their barracks. Otherwise, it was pretty much like the outside.

Tom: Did you lose a lot of patients?

Alice: No, not there. No.

Alice:

Alice:

Alice:

Tom: So if they made it back to the states, they were pretty much assured of survival?

Air Evacuation would bring them from Hawaii. There was a base there that was air evacuation. They would bring them to the states to a base in San Francisco. And then they were dispersed to where their homes were. They were air-evacuated to the closest hospital to their home. So we got the people who were from that immediate California area. It was the usual thing. Otherwise the guys came in for surgery or treatment just like we have on the outside.

Tom: You made your decision to join the Air Force. How was that received on the home front?

Not very well [laughs]; not very well at all. I was far enough away in California that I didn't hear about it very much. But my mother worried. I don't know how many rosaries she said in her life just for this girl, you know. But, I had itchy feet. I still do some times. And I liked to see what was out there, and this was one of the ways to do it. And I was also interested in the GI Bill. That made a difference.

Tom: So how did your mom find out that you were going to -?

Alice: Oh, I wrote and told her.

Tom: You wrote her?

Alice If my dad had been alive, I think I would have thought about it a little more because he was very, very – this never happened with children to be in the service.

Tom: Well you had two brothers who were in the service. Did they go in at the same time?

Alice: No, they went in later. My youngest brother was four-years-old when I left home and my oldest brother was a couple of years older. He was drafted. There were too many brothers on the farm, so he was drafted into the Army.

Tom: What year was that?

Alice: In 1951. He went to Japan after I came home and I was always sorry about that because we could have seen each other and gone places or something.

Tom: So mom found out by a letter that you had gone in and then I imagine the letter back was

She was pretty placid. She was not that type of woman. She would let you know but it was your decision. She would – you know I think she was a little ignorant about what

was out there because she was a farm wife who had never been out of Sleepy Eye and you just know your neighbors and the things that go on there. It was a nice life, but it was a hard life for her. But no, she wanted her daughters home and they're the ones who didn't stay home.

Tom:

So you came home on leave. How was that? How did you get home?

Alice:

I flew. You could hike planes, you know - on military planes. But we checked it out and everything would go to Texas. And to Minnesota - there wasn't too much going in that direction. So I think I flew to Kansas City and from Kansas City to Minneapolis and my brother would meet me there and let me know how everybody else felt [laughs]—sort of warn me. And yet, he was envious because he was the oldest brother and he had to stay on the farm. He used to tell me, 'oh, I wish I had stayed in the military' because he was the older in his outfit. He was in his late 20s and he said, 'You know, I was kind of a dad to all of these guys and on payday I held all their pay. I was their banker.' And they would say, 'Hold this, don't let me spend this,' and that is what he did. He was in supply - he was enlisted, but he was often sorry that he hadn't stayed because farming was tough. The economy wasn't very good. Well, the economy was very good during World War II – it brought us all out of debt. I can remember when my dad and my mother borrowed from their grandmother. She always loaned money. They had six sons and they set them up in farming. But then they always paid the interest to the grandmother. And she was kind of dominant – not kind of – she was dominant; and sort of made decisions for everybody. I've forgotten where I was going with this –

Tom:

You were just telling us about your -

Alice:

Oh, I recall now. I remember when my dad got his \$300 – what was it called for being in the service? That was the greatest day of their life. They had so many bills. I've forgotten what it was called – a bonus. They had a bonus during World War I. They had a bonus during the Korean War too, in Minnesota, which I did get. I can't remember what it was but --. And I was home on leave on my two weeks. There was nothing too different about that. I think we all got together. I didn't have any married brothers or sisters at the time. Umm, and then I went back to March and was sent to an Air Force base nearer to San Francisco and we had these planes that you had bucket seats? They had no insulation. You couldn't hear anything. It was noisy. But in the middle of the plane were two wonderful seats like the ones we have out there – plush, comfortable; the kind that you could lean back. There were two senators in those going overseas to check out the war. And we were, we were really - 'how can they have those seats.' We had our bath – our facilities were behind a blanket, an Army blanket or two and there were all the nurses just sitting there – we spent the whole time. We landed in Hawaii and spent the afternoon there to have the plane repaired. So we were later than the other three planes and the next stop was Wake Island.

Tom:

OK, let's just stop there a minute and I'm going to change the tape.

OK, we're going to start the second side of the first tape. We've had a little delay due to a power outage, so we're back with Alice.

In our little break, you recalled that while at March Air Force Base in California you made application for nursing flight school.

Alice:

When they were short of flight nurses in Japan and Korea they had two of our nurses go on TDY (Temporary Duty) to do flight nursing without any training. But they needed people to help patients evacuate. When those two came back to our base they made it sound like it was really interesting so we applied for Flight Nursing School at Gunther Air Force Base, Alabama – it's outside of Montgomery. And it was a six-week program. You learn how to care for patients; how to load planes. They give you ambulatory and so on, how to put them into different size planes and there were some flights to the Gulf

where we would be patients, or nurses and so on. They would tell us what our injuries were or ambulatory, or paraplegic, whatever. And along with that there was a lot of class work on nuclear – that had just come in then; on everything; scientific and oxygen; how to use all of these things on the plane or drugs. What to expect from different injuries and what not to give patients who might have head injuries over someone who has pain in their legs. But we later learned that before we picked up the patients or left the ground the doctors at the point of where the patients were being picked up would have them sedated or we very seldom gave them any pain medication. And they were very carefully selected when we did pick them up. They probably went back. If they just stayed in Japan, they went back to fight. Or, otherwise they went back to the states. It was kind of a tough course. I didn't swim. Out on the farms there aren't too many swimming pools or lakes around where I grew up. And, she finally said, 'as long as you can float get your clothes off and you jump in the water fully dressed – and get your clothes off and see if you can survive long enough to float,' and so on. We had ditching exercises and we had a little pond nearby where we worked. Every Friday was the day to get in the water and I really kind of hated it. But today I'm a lap swimmer [laughs]. So that took care of itself in the end.

Tom: What time period was it that you ended up going to Alabama?

Alice: It was in June. It was really hot – June to the middle of July of 1951. There were Navy nurses training with us and the rest were Air Force. And then we would go back to our base and hopefully we would be assigned that service.

base and noperuny we would be assigned that service.

Tom: It doesn't sound like you were, at least, initially, because where we left off you were just

getting off the plane at Wake Island.

Alice: For a few minutes. And then – no I did not know what we were going to be doing. But there is a list of numbers next to your name, when you are sent out, that tell you what your qualifications are and ours was flight nursing. So Ettie (??) Eddie (??) and I -- and we had another member from our hospital, she was a hospital nurse and she was outside of Tokyo and we saw her a couple of times. And when we got there it was evening and

we sat on this blue bus all night because they didn't even know where to send us.

Tom: Was this at Wake, or –

Alice:

Alice: No, then we were in Tokyo.

Tom: Let's talk a little bit about Wake.

Alice: No, I was just there a very short time.

Tom: What happened at Wake when you? –

Well, they refueled. We had to stop to refuel and we got off the plane and looked around

and there was nothing there; sandy beaches, some straggly and just a place to wash up

and buy a soda.

Tom: Did you see remnants of the war?

Alice: Yes, I saw a tank. A tank was half buried on the beach and I thought, 'Wow, that looks

like something I saw in the movie "Wake Island."

Tom: So then you got back on the plane and the next stop was –

Alice:

The next stop was Tokyo. And most of the nurses had a place to go. We were all on a bus and we were sent around to various places where they were going to be assigned and Ettie (??) or Eddie (??) and I sat on the bus. They didn't know where to take us. They didn't know where we were supposed to be going. And I think it was an overnight on the bus and at 9 o'clock in the morning we went to another station someplace, a base, and they weren't sure about that but they would write up some orders, 'and I think you're going to be sent here,' so the sergeant who drove the bus said, 'I'll show you Tokyo,' and he took us through the worst parts of Tokyo like where the food's out on the stands and the flies are all over the fish and umm, he was very nice boy [laughs] but he'd take us to all these places, to shock us, I guess. And when we got back to the orderly room we had an assignment to Tachikawa Air Base, which is right outside of Tokyo. And we were going to be doing flight nursing, or air evacuation.

Tom: Kind of, if you remember an approximate date, kind of put this in chronological –

Alice: Oh, this would be December of 1951.

Tom: OK.

Alice: And I stayed until 1952, December of 1952. So it was one year. See, I had re-enlisted

that year so I could go overseas.

Tom: Oh. That one year kind of – it was good, huh? The first year was good so we sign up for

a second year. And so now you're heading off to your new home. Do you remember

how to spell that?

Alice: Tachikawa?

Tom: Yea.

Alice: T-A-C-H-I-K-A-W-A. And I had the most beautiful – we were in a Quonset. It was like a U-shaped Quonset where the bedrooms were on one side and the hallways were on the window side. And our luggage, our suitcases and trunks were all on the window side and

window side. And our luggage, our suitcases and trunks were all on the window side and you could barely walk down that. There were about 30 of us in this whole unit, but we were not all in one place. We had double rooms and Ettie (??) or Eddie (??) again had shared a room. And I had a beautiful view of Mt. Fuji. Every time I looked out the window I could see Mt. Fuji in the distance unless, you know, it was foggy or something.

Tom: What rank were you at this time?

Alice: I was, for 18 months, I was still a Second Lieutenant, at the bottom of the heap. And

umm, we would be assigned on a rotating basis to another base in Ashia. Six of us would be there. It is the southernmost island of Japan and I never understood why, but they were closer to Korea and maybe the flights going there are the shorter flights. Then we were assigned for a month to Seoul or Taegu in Korea. And there were always four of us. They let you go with your friends, you know, people you got along with. You lived in one room. It was a barracks attached to the men's barracks, the doctors and so on, who were in charge of the patients. It was near an Army hospital. It was the 121st. It was a huge tent hospital. This is where our patients probably, would leave from Japan, would leave to go to Japan. But the people in Seoul, the four of us then would use smaller planes, a C-46 or C-47 and go to the little places, the MASH (Mobile Army Surgical Hospital) hospitals to bring the patients back to Seoul. That was all every day. You'd make these little stops depending on how much fighting there was. It all depended on the fighting, any air evacuation. We were not prepared for clothing. There were always like two sheepskin coats for somebody tall and some shorter ones and the first time it was cold. It was winter when I was there and we had this little potbellied stove in our little

room. We'd heat water and this is what we would use to bathe. And we had an outhouse where two, old Korean gentlemen that were armed with these long rifles would walk us there, wait for us there and we always felt like we'd probably have to protect them (laughs) if anything happened.

Tom:

Where was this?

Alice:

This was near Seoul when we were at — when four of us would go over. And then the other time I went was in the summer. It was always rotation because you stayed in this outfit for either flying time of 500 hours or one year, whichever came first. You rotated back to the states. So there would be very few hours if someone was there permanently like, if we went from one landing strip to another, it would be flying time like 10 minutes. Then you go another 10 minutes. But in between you were doing all this loading and unloading and so on. And there was no heat in the planes and we were always cold. I sent a message to my mom asking her for long underwear, which she sent. And I know the men were not prepared, until later, for this kind of weather. But we managed all right. We had a good time as far as the four of us. You know, we all got along well. But two of us would fly one day and have a day off and the next day we'd be back to doing it.

Tom:

Let's kind of put this in chronological order if we could. So you arrived in Tokyo then you moved to your Air Force base. What happened, how were you assigned, or when did you make these different jobs?

Alice:

We were all on a rotation basis so when you were, it was time – You would be informed the night before or the afternoon before that you were going out on a flight and that you would have so many patients. And we always had C-54s from Tachikawa. And umm you would know how many patients were ambulatory or on stretchers. And you went with one technician and usually two nurses and two technicians, I should say, from Japan. You would leave at 2-or-3 am depending on how many stops. You would take a load of equipment along, or one time, we had a load of cabbages. The whole plane was full of cabbage heads. And, usually you had to stop along the way to pick up more equipment or transport something to that base from Tokyo. So, it would take a little while to get there because it takes a lot of time to unload and load. Then you would get there about 10-or-11 am and your patient load would almost be ready, but they'd always have you have lunch first with the Army people. Then they would load food for the troops who were coming back, for the patients who would be coming back. I will always remember, there would always be canned grapefruit juice and I don't know why. And the men would always ask for milk because there was never any milk there. Then the men baked the bread and the, you know, their sandwiches were like four inches, if not more, with a big slab of ham in between usually. And we fed the patients but they always wanted milk and grapefruit juice is a little hard to digest on an empty stomach. Then the doctor would talk to us about our patients. We had a clipboard with their problems on it. And, you know, we had UN (United Nations) patients, we had quite a few UN patients at that time who would go with us except for Australia. Australia had their own nurse and they would take those back to their country.

Tom:

So what is a typical load of patients? Would it be more than just Air Force that you were air evacuating?

Alice:

Oh, they were all Army. They would be Army and Marines.

Tom:

Then a UN patient was what?

Alice:

They would have been Dutch, United Kingdom, French, Turkish, and I will always remember, I asked one of our men about the Greeks and so on. And he said they were really terrific in hand-to-hand fighting. They were the best. And then, or you would have

Ethiopians, Italians, Belgians; I don't know how many, there were so many. But I always told my kids that one day I got into Seoul, we were based outside of Seoul and it must have been the day every UN force arrived because it was just beautiful. And the ones that struck me more than anything were the Indian troops. They had the beautiful silk turbans with the jewel in them and they were all dress uniforms. There were the blues, the Khakis, the yellows, I don't know. It was just tremendous to see all of them there and I just felt so sorry for them because they were all going to fight. They had just arrived. But that was something. I've forgotten where we left off.

Tom:

We were talking about the different sorts of patients that were –

Alice:

Oh, there were psychiatric, head injuries. I had one day when we had all head injuries and it made me very uncomfortable because they were not lucid and you wondered how they would get along with the altitude. We were nonpressurized. But it went well. We would carry IV (intravenous) fluids and the doctors would tell us, 'Don't give this patient anything and just get them there.' And then as we went back to Japan they would either be, they usually went to Tokyo. If they didn't go to Tokyo we would have to take another shuttle. It was a smaller plane and they would go to northern Japan to another hospital up there. And I don't know how they selected people or why they went there. So we'd get back about 4-or-5 PM and then get home and write up our reports. It was a long day. If we went from Ashia, it was mostly the same kind of trip, but it was shorter. Or, we would go to Pusan. We would pick up at Pusan from Japan. But those were about the two places, or three places: Taegu, then they switched the flight line to Seoul. And I can remember Gayle asking me, 'What did you buy there?' And there was nothing. There was nothing to buy. There were no stores. The troops had gone through Seoul twice. It was all a bunch of holes and buildings with holes in them. And all you could find on the street was maybe Kimchi or some vegetables like that. So I never did buy anything there.

Tom:

No souvenirs.

Alice:

No souvenirs.

Tom:

Would you make multiple stops on a flight to pick up wounded soldiers?

Alice:

You would make them within the country itself when we were stationed there.

Tom:

I mean would you one day make two or three different stops for patients or would you just evacuate from one base on one day and then another day, another --?

Alice:

Are you talking about Japan, coming and going to Japan from Seoul; to the hospitals in Japan?

Tom:

From Korea back to Japan.

Alice:

Except for that one shuttle trip out of Tokyo going north. That would be about once a month we would pick up another load, but not in the same plane. It would be a smaller plane.

Tom:

But when you started out in the morning on your run, would you stop at various spots to pick up patients or would they all just one day you would you go to Seoul to pick up patients and not stop anywhere to Taegu or –

Alice:

Just equipment, of course, and so on.

Tom:

When you were picking patients up any memorable experiences, any ones that are lasting?

Alice:

I had a load of patients once and not one could speak English. I mean, I couldn't understand them. There was a Dutch soldier who could speak English and I think the others did too. But there was a French patient who had some problems. I don't remember what they were and had some questions and I had to have him interpret for me. And that was a problem that day because you hoped nobody really needed anything. But, they were a very somber, sad, depressed group; all of the soldiers were. Those who where ambulatory, and I think they were just hoping they would go home. We also carried prisoners within the country, but not back to Japan. And they were very frightened people. You know, before every flight, I hate to think of it today, but we had a DDT bomb. We'd walk through the plane with a DDT bomb and I wonder about the effects of that sometimes, especially patients whose resistance was low and so on. But they were very careful about sending people who would survive the trip, except for the head injuries.

Tom:

So you didn't really have to deal with any medical emergencies?

Alice:

One day I think we were worried about a patient who needed fluids, and it was fluids; or someone having pain. Our biggest problem maybe was ears, going up to altitude and back down, hoping – I think we passed out gum very often if they liked it. But, you know to talk to anyone, they were just morose, they just were very, very unhappy guys. But, they were glad to be going back to Japan and hoping that they wouldn't have to return.

Tom:

Did you have time to write letters for soldiers while they were in transit or were you pretty much consumed taking care of their needs?

Alice:

No. I didn't do that. No. You know, do you have a picture of how the stretchers would be. You would have four stretchers, four stretchers, four stretchers and they probably were that close to the stretcher on top of them. It's like living in bunk beds and really being close. And so the technicians and the technicians at the base would always set it up so that, then they'd carry the stretchers in. And then those who sat, could sit, would be in the bucket seats. And we always had a full planeload, so it was hard to talk to anyone. And the noise; you know there was no insulation on those planes. And there was no heat, usually, or very little. But, they did very well. I think World War II taught them that getting a patient back to a hospital, or an emergency unit, would save their lives, much faster than keeping them where they were wounded. Air evacuation really started in Europe at the end of World War II, or Africa. And to get them back to where the surgeons could get to them in a hurry without a lot of loss of blood and so on. We didn't carry blood. We carried plasma and it was really a short flight when you think about it.

Tom:

Did you ever come under enemy fire or anything?

Alice:

No.

Tom:

Any on-board emergencies with the equipment on the plane?

Alice:

The only thing that ever really bothered me was when the crew chief would get really busy. You know, if we were going someplace and he'd be up, down, around; up to the pilots, back to the back and really, because it was really his plane. He was the most important person; some pilots said that he's the most important person there is on the plane. And he peered out the windows and it would be icing. I really dreaded the icing, you know, if you have to go down because of icing on the wings. That was the only thing that ever happened. Before I left the service, or left Korea, the C-124s came in – or the C-121 or 124s and they were a double-decker. And they carried 110 patients. I think they

learned that it would take so long to load that plane with an elevator to the second floor and, you know, just a wide open cargo ship. It took such a long time to load those planes and get underway. They were just heavy old things. And I don't know that they used them very much after that.

Tom:

When you were in Korea did you get up to the front or to MASH (Mobile Army Surgical Hospital) units? Did you see combat?

Alice:

No, but the units that had the first-aid station, we just would get to the first aid station; wherever there was a flight line we could get into. There was an accident. A ROK (Republic of Korea) corporal we went out to get one day who had some injuries. A helicopter brought him to the plane I was in and they said, 'Wait for a minute. This helicopter is bringing this corporal in,' and he had some injuries in a vehicle of some kind. We went out then especially just to get him. And there was one Navy pilot we went to get another time where the doctor in our unit came with us because they didn't know how injured he was. He went of f the coast of, is it the Sea of Japan?

Tom:

Uh huh.

Alice:

And another helicopter brought him to us, but there wasn't anything unusual, you know, the injuries weren't.

Tom:

Could you speak to the setup, kind of give us a picture as to how the medical system worked in Korea, how a soldier on a line is injured in combat, what was the process for providing him – say he was gravely injured and needed medical care? How did that whole process work?

Alice:

Well I suppose the medic who found him would go, maybe there was a first aid station he would get him to. Ah, the roads, there were no roads. And then he maybe would be ambulanced to a MASH (Mobile Army Surgical Hospital) unit. They probably needed to send him back to the 121st Hospital. I can't tell you how large that hospital was but it was quite large.

Tom:

The 121st was located in --?

Alice:

121st Army Hospital. It was near Seoul. It was a tent hospital. And then from there they would decide, 'does he go back to fight or does he go home, or does he go to Japan,' because they had – the Air Force had big hospitals in Japan, and Army. They would go there and someone would decide if he'd stay in Japan, or if he – and maybe he would do a different kind of duty in Japan. I don't know, or if he was airlifted home eventually, because, you know, they were treated there and stayed there until they were well enough to go.

Tom:

Now when you were out-of-country did you do other nursing besides your flight nursing?

Alice:

No. That was all we did. We – If the fighting we'd work more, you know, if the fighting was going on and if it wasn't and then the peace talks were beginning, I think in 1951. Then it would stop and maybe I'd have a week I wouldn't be doing anything. But you were always there because everyday you'd check to see if you'd be going to work. Oh, I met two of my neighbors, two neighbor boys one day I was doing, within Korea, two brothers who were, which is kind of unusual that they'd be based together, were at one of the pickups. And somebody yelled, 'Hi Alice, Alice!' and they said they had met every air evacuation plane for months. And the next time when I went in they were gone. They went to the front. They were reassigned. And that was kind of interesting, and I should tell you, going home it was on a ship, a troop ship –

Tom: Now let's just, before you go home, did you get leave in country?

Alice: No.

Tom: So you worked a straight year without any leave?

Alice: Yes.

Tom: So you didn't get to see Tokyo?

Alice: Oh, Tokyo was right next door. We would go in on our days off. We would have, you

a car. There was another nurse who had some Navy friends who got her car on an aircraft carrier under, what would you call it, cover? I think I went over there for her. She couldn't believe it, you know. There was this beautiful, blue convertible she was driving. I don't know how it went home, if it ever went home. And we would go in and we wanted some dresses made one day, but the women couldn't speak English. You know, it wasn't so westernized then. There weren't too many western clothes they were wearing then and they still wore these Kimonos and so on. And we went down there and they couldn't understand what we wanted. We picked out a fabric and then we had pictures, we'd take pictures. And it's amazing. They did very well. Without patterns, they did the measurements and we never understood one word except how many yen it would cost us. I guess I don't know if I ever wore it but I know I still had it when I brought it home. And I would pick up a few things, a hibachi and some fishing poles for my brothers, um, and then a little cherry tea table, which is about a foot-and-a-half high. The children would remember it. It had beautiful designs on it, a picture, you know, inlaid and so on. And, you know, it warped in this country because our air condition is so different. It was a cherry wood, but it must have been a soft cherry wood. And I brought home little souvenirs and little silk pajamas and so on. And my albums, I always took lots of

know, if we knew we were at the bottom of the list, we could go in. One of the nurses had

pictures, which the museum now has.

Tom: That is what I understand. That was nice.

Alice: And I also had all my trips and my orders. I still have all my manuals and so on. I don't

think I ever looked at them.

Tom: How were you treated in Tokyo by the Japanese?

Alice: Very well, very well. We didn't eat there. There were very few places where you could

eat out. We went, I know we took one long weekend to Yakota to see the Buddha's and all their gardens and so on. We went into Tachikawa, it was a small town, um, attached to Tokyo, a suburb, more or less, I think. We drove in. I don't I ever took any other way of getting there. There probably was a bus or something we could've --. The rickshaws were around and the Ginza was a big item. We would go down there and see all the junk.

Tom: The Ginza is what?

Alice: It was kind of their marketplace, you know, souvenir place and then we would visit the

palace, the moat around the palace; oh, and the hotel that survived the earthquake, the Imperial Hotel that survived the earthquake back in the early 1900s was it? And that's about – because some of the offices were in that hotel, especially the AP (Associated

Press) and so on – the news reporters and the journalists.

Tom: What sort of social activity --?

Alice:

We stayed on base. We were really on base. The dependents hadn't gotten there yet. There were very few dependents. You know, there was dinner at the club every night and there was always dancing and I think the Japanese young men who served, also played in the band. And you could see them playing baseball during the day in their white uniforms. They loved baseball. We had places to go if we were bombed. The trenches were right outside of our dorms. We had a good group. It was a good group.

Tom:

How were women treated? Were they – compared to – I don't know how to compare it?

Alice:

Oh, by civilians?

Tom:

By civilians, by other members of the service.

Alice:

Oh, very well. I thought very well on the streets and so on. It was very different than it is now. We had just conquered Japan and they would bend over backward, you know, to do what you'd like them. We always had a housemaid in Korea too, which they want to earn a little money and begged you to bring them back. 'Take me home. Take me with you, take me with you.' And I think a lot of people wondered how difficult that would be, but I would never want that responsibility, not at that time. The little housemaid in Korea didn't have a family. She'd lost all of her family. But every time a new foursome came over she became their little worker. We didn't realize that she was washing some of our clothes in the Yalu River and when we did, she said, 'But that's the only way there is,' you know. And finally we taught her how to wash clothes. We'd heat up this bucket of water and showed her what to do [laughs].

Tom:

Now where was that?

Alice:

In Korea: in our little unit that we lived in.

Tom:

OK.

Alice:

We had cots and then we had sleeping bags on top of the cots and that kept us warm. And our fire would go out overnight and then we'd have to restart it in the morning, or have someone come and do it. But, we were from the farm so we knew how to use kindling and all of that. Let's see, what else was there going on?

Tom:

How about your treatment with the doctors, your relationship with doctors and nurses?

Alice:

It was good. That was good. People were always coming and going, you know. Every time somebody had their year in or 500 hours, we'd probably meet somebody we went to flight school with. There were numerous nurses from there that I met as we went along that we knew there. The doctors were just the two doctors that we saw at the hospital where we picked up our patients. A doctor was in charge, that's right; a colonel who was in charge of our troop: 801^{st} , was a doctor. We had a general who was really in charge of the whole unit and he really worked hard. I've forgotten his name, but I read some news on him recently that he did so much for air evacuation. He actually had to go over and sell it to the Army, from base to base, you know, how easily it would be how we could get these patients back and get them some treatment, instead of just patching them here and there and hoping they were OK.

Tom:

Speaking of – What was your official unit designation while you were in Korea?

Alice:

It was the 801st Troop Carrier Squadron.

Tom:

OK. And while you were in Korea, you received your 1st Lieutenant?

Alice:

Oh yea, one day. One day I got the papers that said, 'You are now a 1st Lieutenant, and I probably earned \$50 more, or something. We also earned flight pay, which was good, which was like \$100 a month.

Tom:

Combat pay?

Alice:

No. We were not in combat. I didn't work a lot sometimes, because some of the nurses were on a three-year enlistment and they would want your hours. And, I knew I was going home by December, had I had the hours or not. So I'd give them my hours sometimes. And when we were in Ashia, the southern part of Japan, we were on the beach. We spent a lot of time at the beach. It was a small place and one night we thought we'd go to this bath house down there, not realizing what it really was. And we weren't ready for it because the way we were brought up. And here whole families without clothes on were in the hot baths, you know, and we were expected to do the same, I guess. And we still had the honey wagons in Japan, you know, the two oxen that would carry, would empty the refuse from everybody's [laughs] everybody's pot everyday. It would go down the street and you would always see the bedding. The bedding was always laid out on the um, they had sort of a balcony on most houses. And there was no paint. That was kind of depressing, never to see color. And Japan has a smell. I could, I knew it when I went over, because Ettie (??) or Eddie (??) said when she was on TDY (Temporary Duty) she said, 'smell this,' and I smelled, it smells like leather. It's that kind of an odor when you get to that country and I think it was because of the way they treated their sewerage, really. And I didn't notice it again until I got back and we sat in the harbor in San Francisco and I could smell the air over here. It was, we just sat out there and breathed [laughs].

Tom:

So it came time for you to leave Korea. Was there a party?

Alice:

Yes, there was, in the nurses' dorm. It was again, well, it was November. Just the nurses we knew well. And I should tell you too, because that reminds me of liquor. If we wanted clothing that was warm and the supply officer over in Korea wanted to give us something, he would always barter with liquor. We would go deadhead with bottles of liquor, because it was not – we didn't have liquor there. So then we'd get so much clothing for so much or he would bring me this and, 'What can I get in return.' You know, it was that kind of thing. But, yes, we had a party and then we went to the club, and there was always wonderful food there. I think we had dinner for like \$1.50 and there would be lobster and anything like that, and shrimp was very popular. I should also tell you that Christmas's were hard; New Years was hard, it was just a teary thing, and I had a good, we had a good chief nurse. She knew when the morale was down. And, she would have a party. On Christmas Eve, she'd make us decorate something, we'd have to have presents, or something, just to have different things. And there'd be a lot of singing, someone could play the guitar, and um, knew a lot of songs, and harmonizing, and there were always Bridge groups. That was kind of our out. There wasn't much else, because you had to stay on base. One of my good friends met somebody else in the outfit and they became engaged. And, we would always wonder, 'When are they alone,' because there was no place to be alone. You couldn't date because, well, you could date, but there was no privacy if you every wanted privacy. And we finally on their wedding day, they were married at our church on base. Where would you even talk about being married? And they said, 'in the chapel' [laughs].

Tom:

Communication from home?

Alice:

Oh, letters. My mom was -

Tom:

Did you ever get to call home?

Alice: No. There was really no – you didn't think about it. You know what we missed? We

missed the hit parade. Do you remember the hit - you probably wouldn't remember the

hit parade.

Tom: Yea, a little bit.

Alice: Every Saturday night there'd be the top hits and you'd see what they were, and

eventually, it was on television. This was pre-television for me. And, we would beg the nurses coming over who were new recruits, 'What are they singing? Sing it for us. Sing it for us,' you know, and it would be "Cry" by, I can't remember his name. And then eventually he did come over to entertain the troops. I didn't see him. So we'd wait for them. 'Sing, sing it.' And they would sing it and then, 'It doesn't sound very good,'

[laughs].

Tom: The mail service – how long would it take to get a letter from home?

Alice: Maybe a week. And I would write. I wrote to a lot of my friends in training and a lot of

them who didn't come with me, at the air base. And, you know, we still write at Christmas time. We've lost one or two, but I phone them instead of writing, and then they'll bring – you see I should have called somebody, you know, they'll bring all of this back. And I, you know, after we got out, I have one friend who I still have, who I went to school with after that. And, we shared an apartment, and she was my friend from that outfit. We have a group still meeting; um, reunions. I've never gone, but they didn't start meeting until we were in our 40th year, or something like that. And I don't know so many of them. So, we have a newsletter, and I had the two yearbooks that I turned in to the museum. But, they were my best friends, and so from training, too. There is something about nurses who live together for very long, you hate to lose their friendship, because you've done everything together. You know, there was always that – you'd have a new, somebody much – I was 22-years-old when I went in. And there even was somebody younger than me overseas. And there would always be someone who would watch over them, show them the ropes, 'no, you can't do that,' you know, that kind of thing. So, there was always some security. Mother wasn't there, but you had a lot of older sisters. I don't know if that's true of other umm, secretaries and so on. But, you do everything

together. You learn together. And that was a good time.

Tom: So you came back. Do you remember what ship that you --?

Alice: The USS Sultan. I still have a picture of it.

Tom: Sultan. S-U-L-T-O-N?

Alice: A-N. Sultan.

Tom: Was that a commercial ship or --?

Alice: It was a – what did they call those? They leased them. Today you would call it a lease, or

a contract. There were troops in the hold, down, because I could look out the window and see them be sick. Oh, they were laying all over each other, you know, just miserable.

Tom: Did you receive any medals?

Alice: I just got some, you know, from the 50th anniversary, they had this medal from the

Korean government. And, the UN (United Nations) medal and it's a –

Tom: Korean Service Medal I think is out now.

Alice: Yea, and P-C-U, what was that? All the ribbons had to do with being in the country and

being there. That was about it; nothing fantastic.

Tom: Now do you still receive veterans' benefits of any sort?

Alice: No. I never did.

Tom: Are you a member of any veterans' organization? You kind of alluded to that before;

kind of summarize what you are involved with in terms of your veterans' associations

and that.

Alice: I wasn't interested with being in the VFW (Veterans of Foreign Wars) or anything like

that until a vet from Waunakee contacted me. He asked me if I wanted this Korean Service 50th Anniversary Merit Medal, whatever it was, to let him, give him information on my discharge, and so on. And I did that and I wasn't able to go, but the state capital had a ceremony on Veterans Day last November and they were handed out then. But, I wasn't here. So he brought it and he talked me into being a member of the Korean War Veterans Association, which had just come into being, I think. And um, to become a member and a member locally. I never did attend as a member locally. I don't like to drive at night, and um, I would have to carry I'd probably be bored anyway. And, I was afraid of kitchen duty [laughs]. So they're meeting. Then I got the "Graybeards" magazine, which is published by the national association. And, I kind of enjoy that, because there's a lot of information about the war and the vets and they're trying to stay alive, this publication is. So this year I joined them; just the national. As far as the 801st MASH, or M-A-E-S; I shouldn't say MASH, I didn't go to any of the meetings. They're always in the South and I'm not that interested, because my friends aren't going. So, I always hear about it and they now have a newsletter so I can keep in contact. Ettie (??) or Eddie (??) now is, had a stroke or something and I cannot find out. She went to work for a veterans hospital in Los Angeles. She was never coming back to Illinois. She just loved California. But she went through all the places, services with me and she had a stroke or something and I heard from someone else that they cannot locate her. Um, they cannot locate her landlady, so I don't know what the situation is there or how to go about

Tom: Looking back now, how do you feel about the military and your experiences in the Korean War?

finding her. She'd been retired and I have no home address and that was it for her.

Alice: I'm glad I had it. It was a different kind of nursing. It was an eye opener as far as what the men have to go through – and why. It's that 'why.' Those were young guys. Now

Richard, this cousin of mine, was 17-years-old when he went in the service. I was in my 20s, but 17. I think back about what was I at 17 - kind of stupid and 'why are they doing this?' Now, like I said, I don't even like to watch any of the movies now that they have because they make them too real, I think. I don't like to read books on it and that is one war that very little has been written about. In fact, I had a - the new Womens Memorial was opened in Washington D.C. about three or four years ago. I had a letter from a publisher, a woman who was a journalist in New York asking me questions and she had a list of names of people who were in Korea during that time. And she said, 'There hasn't been anything written about women in Korea. I would like to write something.' Well I would get communications from her here and there, and letters and um, forms to fill out. And then, for a year or two, there was nothing. I tried to E-mail her but her E-mail address was no longer in use. So I called her and she was kind of put out with me. She says, 'Well, you know, I have a young family. I'll get to it eventually.' But I just wondered if, you know, had she set up something I'd like to know when the book would come out. And she says, 'Well I have no idea.' But, I'll check the libraries over here at Middleton and there are a few books, "Pork Chop Hill" and so on. But there isn't a lot that's in there. Or, the air force has a book and it's all about the fighting end of it. I'm

glad I didn't have to stay. I have no desire to back, I have no desire to go to any of the — well China, for instance. And I think the reason is because I don't understand their history. If I ever went, I would need to know the history and China's history is so far back. And that's one of the reasons. I have no desire to — my brother went back. My brother went back to his old base, which was north of Tokyo. I can't remember the name. And, he was so disappointed. They claim there was no base there. He hired a guide to go there, because he knew where it was. And there was no base there. They would not — they wouldn't even talk about it. And he said it's almost as though the war never happened; even the Second World War. And there has been some question about what they're teaching their children about the Second World War, I understand. But, it's all gone. We still have a lot of military in Japan, I think. And certainly too much in Korea, and when I look back now at the number of people stationed in Korea for 50 years just to take care of that southern peninsula, it's hard to believe. And, I hate to see what's happening as far as North Korea and its nuclear system. And the south Koreans are becoming kind of, 'well, we can handle it.' I wish they would. I wish they would pull out their forces.

Tom: Anything else that we haven't covered?

I don't think so. I don't think there's – just the difference in nursing and the field of

medicine.

Alice:

Tom: We talked about that earlier, kind of when we were setting this interview up. What changes have you – what has been the biggest, most – biggest change that's occurred in

nursing from when you were nursing in Korea to today?

Alice: Well, I don't know about military – you know, the military part of it. But the hospital nursing, well it's so technical. And they can't take care of patients anymore. Everybody

is ambulatory, everybody is out-patient; not everybody, but – except for the most serious patients. And I can understand why nurses aren't going into the field. I don't they're paid well enough. I don't think they have many rights as far as hours. Who would want to work 12 hours a day, and with the shortages? I never worked under, 'well we don't have a replacement so you'll have to stay for their shift.' I can't understand that. I wouldn't be able to do it. I know I wouldn't. If I did it wouldn't be a very good job. And, our patients are so seriously ill today. I liked it when I was in training and you could give some bedside care and know the patient. That's what I liked about it, and get to know their families and what they were doing. I guess I've always liked that about patients. But now, when they're in and out so rapidly, umm, and they are just numbers I think. But, the technology, the fact that they have so much help; the psychological counseling, the PTs, the OTs, all the specialists, the oncology, the plastic surgeons, you know, the surgeries they do today. And I always felt that the nutrition field is one I would have liked to have been in, too, because to me, that's really important. And so much is happening in all of it. I'm seeing in womens' health because we have a nutritionist work with us and they keep us posted on changes, and there are so many changes they can't keep up. Let's see. I had a few more items here on the changes. The medications: you know penicillin had just come out when I was in hospital training and I remembered we gave the shots every three hours, night and day. And everybody was poked every three hours. I think about how hard that must have been for the patients. And we have sports medicines and the mammograms, just the diagnostic testing that is done today. And our longevity - isn't

Tom: Yes.

Alice: It is [laughs].

that wonderful?

Tom: The care and treatment of a burn victim – a soldier burn victim. What was that like?

Alice:

I can't tell you. I know there were burns, but I didn't do the hospital end of it there, so I don't know. But, they were always wrapped up pretty well, you know, so I can't really tell you. They were with us just a short time, really. But, they were glad to be on that plane.

Tom:

I bet. Anything else, Alice? Take a moment and go through your notes.

Alice:

I think about, as I told you, the sterilization. I've often wondered how effective that was. It must have been because we didn't have too many things that I am aware of, but I often think about going on duty in the morning and our first thing was to feed patients. And, by feeding patients, I mean to get the trays out. And I remember we spent hours in nursing arts class learning how to carry a tray over our heads. And we all did it. And this is how we carried the trays into the patient. Well, that's all taken care of, the meals are hot. Ours probably weren't as hot as they should be. The bed care; there were always backrubs every afternoon. We had all this set up, you know, and I remember trying to get people up. One of the patients I got up died, just right there, when I was a student and I was so frightened. She had an embolism after surgery and I really thought it was my fault. Even though we got her up fairly early, it still happened and that was just a real tragedy for me. And, preparing the bodies, and so on, for the morgue. Those are things I don't know if nurses do that anymore. I have no idea.

Tom:

What do you mean, preparing the bodies for the morgue.

Alice:

Well we would have to wash them and have them in a certain position, and make sure the eyes were closed and wrapped them up and transported them down to the morgue. Our morgue was next to our dining room. And sometimes there were autopsies. And, I still can't understand to this day, why that happened. But, we were invited to watch any autopsies we wanted to if we were off-duty.

Tom:

Now, this was when you were in nurses training?

Alice:

Yes, nurses training. Oh, and polio. So many of the diseases; when I see the grand kids and the shots they get today, I can't believe, you know, how many shots they get before they go to school. But, polio was a very scary thing in the 50s, until we got the Saulk vaccine. I have a sister-in-law who had polio at that time and she's had repercussions since with some of the paralysis and so on and she's doing much better now. But, the health insurance, the Medicare has changed things. Now you can have home health services, but I think it's a little difficult at times, to get people to help you at home. And the assisted living. That's all new. Everything has changed. I think that's about it, except --. I've gone through most everything. And now we're going to alternative medicine. I wanted to say about, how in the 50s, we thought we had eradicated – we did eradicate smallpox, but we're still giving smallpox vaccinations. But, head lice in the schools was almost gone. Now when I take the grandchildren to school, it's a common thing again. Things you thought you did away with and the statistics show were doing it; venereal disease for instance. Complete turnaround. I think that's pretty much it, for me.

Tom:

OK. This ends our interview with Alice. I would like to thank you on behalf of the Wisconsin Veterans Museum for your taking the time to have your memoirs recorded of a very interesting career you've had in life. Thank you for taking time out of your life to be in the military, on behalf of myself personally and my family. We're done.

Alice:

I appreciate you coming out to do this and I didn't realize it was a voluntary thing for you to do. That's wonderful to give your time like this.

Tom:

My pleasure.