

Cheryl German-Chung

St. George, Utah

1st Lieutenant

Army

Nurse Corp

"Escalation"

Interviewer

Tell us your full name.

Cheryl German-Chung

My full name is Cheryl Sue German-Chung.

Interviewer

And where did you grow up?

Cheryl German-Chung

I grew up on a small farm northwest of Fort Wayne, Indiana.

Interviewer

And you went to high school there?

Cheryl German-Chung

I went to high school in a very small town called Hometown. The high school doesn't even exist anymore. They tore it down and they built something someplace else.

Interviewer

What were you doing when you decided to join the military?

Cheryl German-Chung

Well, my grandma and I had this little thing, I don't know what you call it, but every Saturday night I'd go to her house and we'd watch the late movie. Grandpa would go to bed; grandma and I would sit there in the living room and watch the late movie. And when I was growing up, one of the things that was incredibly popular were military movies. So I had this grandiose idea that I would become a military nurse and marry a military person and all this kind of stuff. And I guess I always knew, for many, many, many years, I wanted to be a nurse. But when I was growing up there were basically three options for women: wife, teacher, and nurse. And I didn't know about the wife thing. You know, I figured well eventually someday. Teacher, I really wasn't that interested in that. So I basically only had but one option at that time. My family was by far not rich so a long education to get a really good job was not really in the cards for me. So nursing was the best way for me to go. When I was in high school I was reading your senior will and so on, and I put in there I was gonna become an Air Force nurse. Well I apparently very promptly forgot that because when the Army recruiter came around, I said, "Okay." So little did I know that the Air Force had the best stuff or I probably would've gone that way.

Interviewer

What happened next?

Cheryl German-Chung

It was some time my first year of nursing school. No, I take that back, I was probably second year of nursing school. Because I joined the Army between my second and third year of nursing school. I was a PFC, Private First Class.

Interviewer

What year was this?

Cheryl German-Chung

It was '65, '66 because I graduated in '67. So it was a whack. I got a \$250 stipend a month. And to kind of put things in perspective so far as cost, one month stipend paid my entire senior year of tuition in nursing school. It doesn't do that anymore, but it did back then. And it gave me some spending money. I bought a car, I bought a 25th anniversary gift for my parents. I had lots of fun with that money. And it was the first real job I'd ever had and I didn't have to do anything special. My duty station, my school of nursing.

One of the weird things that happened to me though, when we were given Christmas break our senior year, I had to fill out a leave paper and I'm thinking, "What does the Army got to do with me taking Christmas break from nursing school?" They can't tell me no because what am I gonna do? But I had to fill out leave paper so I could go on leave from nursing school. That would've been in '67. And I graduated on my birthday, 1967. A long, long time ago.

Interviewer

And so you went into the Army?

Cheryl German-Chung

Yes. Took my nursing boards I believe in August. And in November I found out that I had passed. The rest of my classmates didn't find out until December but I figured the military probably had a little pull with the school of nursing board. So I found out in November I'd passed and I was sworn in the first part of December as a 2nd Lieutenant. And then like maybe the third of January, it was right after the first of the year, I went off to basic training at Fort Sam Houston in San Antonio, Texas.

That was a fun time. I really liked basic training. I learned to march which I'd already been doing in band. I learned how to read a map. I am a great map reader, I will have you. In fact, if I get bored in the car, I'll just pull out a map and I'll just start looking at it because I find them fascinating. The test for map reading was they took us out in groups of three or four women, we were just kind of like dropped off in the middle of what they said was nowhere and they said, "Okay, your azimuth is this, walk this to get back to base camp." I walked us right there and I just took charge. I wasn't necessarily that brave, but I just took charge.

Then after that, I had a short leave and then I went off to Fort Sill, Oklahoma where I worked in Reynolds Army Hospital. And perhaps the one biggest fault I have with the Army is that they put me in the nursery knowing full well that I was gonna be going to Vietnam and they put me in a position where I really was not going to get any experience, any exposure to the kind of patients I would be seeing in Vietnam. They put me in the nursery.

Now, it was an active nursery, I'll have you tell. I counted up how many twins and how many preemies we'd had in the few months I was there and I forget the number, but it was a significant number. I was there until November of '68. They gave me the entire month of December to go home and be with my family. And I was supposed to fly out of Indianapolis on December 26th. I was to fly out of Fort Wayne to Indianapolis and then from Indianapolis on. And there was such a horrible snow storm that they canceled all of the flights out of Fort Wayne. So Mom and Dad drove me down to Indianapolis and I went from there to Travis. Now my husband can confirm this - have you ever heard of Braniff Airways?

Interviewer

Sure.

Cheryl German-Chung

You know why they're no longer in business? No piece of luggage ever went with their customers. When I went to San Antonio, my luggage took four days for me to get my luggage. When I flew to Travis before Vietnam I had to stay there like three or four days because my luggage never made it with me. So I'm convinced that's why Braniff no longer is in business because they could never get their luggage and their passengers together. But anyway. So I was there at Travis Air Force Base for about three or four days. Then I got on a big plane. It was commercial as opposed to my husband. And we knew to Vietnam. I was the only woman on the plane.

Interviewer

What was going on on the plane?

Cheryl German-Chung

Nothing. A good portion of the flight, as I recall, was at night. But there was no conversation, people were not moving around a lot. We were all terrified what was gonna happen. And believe it or not, I was still pretty shy back then. And even though I really, really needed to go to the bathroom, I was so shy I couldn't because everybody on the plane was gonna go what I was doing. So I held it until we landed and then it was a mad dash to the nearest bathroom. Thank goodness we kind of off-loaded somewhat by rank. It was company grade officers, women, the rest of the officers, and then the NCOs and the enlisted. So I was able to get off fairly early.

Interviewer

So where did you land?

Cheryl German-Chung

Hawaii, but it was dark so I didn't really see very much. You know, I just kind of vaguely remember kind of like

walking over a bridge and seeing some of those koi fish, but it's a very vague memory. I think we landed in the Philippines and then directly into Tan Son Nhut Air Base. Or did I land at Bien Hoa? One of the two places. Bien Hoa, Tan Son - they're fairly close together.

Interviewer

What time of day was it when you landed, do you remember?

Cheryl German-Chung

No, I don't. All I remember is that when you walked to the door of that aircraft there was this - people refer to it as this wall of heat and humidity. And I didn't find out until many years later that the smell that went with it was not normal. The smell that came with that heat and humidity was pesticides, herbicides, jet fuel, or maybe one or two other things. But I didn't know that. I just thought, "Well this is the way Vietnam smells and it wasn't very pleasant." But that's the first imprecision is whoa, it's hot here and it's humid here.

Then I went off to what's called the 9th Replacement Company. And because of my delay at Travis, I was at the 9th Replacement Company New Year's Eve. And the club, I don't think it was just an officer's club, I think it was an any rank club - they were having a party. I thought, "Well I'll go party with them." And I went down there and I suddenly realized, hey, all these people are leaving and I'm just coming. All of the sudden it wasn't much of a party anymore. So I went back to my bunk and I just went to bed. But that's how I celebrated New Year's Eve in Vietnam. Sleeping it off.

Interviewer

What year was this?

Cheryl German-Chung

1968, New Year's Eve. So unlike a lot of Vietnam veterans, when they say, "Well when were you in Vietnam?" They'll say, "'68 to '69" or whatever, and whatever, and I say, "'69." Because I don't consider one day in '68 is worthy of mentioning. So I was there in 1969, January, to December.

Interviewer

Where did you go from there?

Cheryl German-Chung

Well, I was at one hospital my entire time there. As I recall, it look like maybe one, maybe two days to decide where they were going to put me. And they kept me very close, they kept me at the 93rd Evac Hospital which was part of that huge large base called Long Binh. And the first ward that I worked on was a strictly medical intensive care ward. We took all kinds of illnesses except hepatitis. So we saw drug overdoses, snake bites, heart attacks, fevers of unknown origin, dysentery, whatever. Just no hepatitis. They needed separate latrine facilities and so they had their own separate ward. I was there about six months. Saw some very interesting things.

A young man who came in with a snake bite. And you could clearly see the fang marks. And just the tiniest little rim of red around each fang mark. And no swelling. And the doctors were just a little befuddled by that and so they asked him have you ever been bitten by snakes before? And apparently quite nonchalantly, he said, "Oh, yeah, I've been bitten three times by rattlesnakes." So the young man was carrying his own anti-venom around with him because of the previous bites. Normally snake bites created quite a bit of swelling. We had basically two kinds of venomous snakes over there.

One was a water snake, which of course, being mostly on land we probably never saw. The other one was the pit viper and that's where most of the snake bites came from was them, and they were venomous but not as bad as the water snake. Snake venom will attack one of two things, it will either attack your coagulation process in the body, and you will swell, and bruise, or bleed to death, or it will attack your nervous system. And if you want to be bitten, choose the former than the latter, because if it's a venom that attacks your nervous system, you're going to be dead in just a matter of seconds, that's how rapidly it just wipes out your nervous system. So we saw those.

We had a woman come in, a Vietnamese woman. And the story we got-and I say "story" because you're never able to really confirm any of this information-she had eaten rat poison. Whether my accident or on purpose, of course we don't really know. We tried to find out, "Well what's the antidote?" And somebody else, somebody probably in administration was trying to find that out. And the information they got back was two things. One, it's proprietary information so we're not going to tell you what is in the poison. And two, there is no antidote. Well I guess they told us three things. And there are multiple ways of being exposed. You can eat it, which she obviously did, or you can inhale the air the patient is breathing out, or you can absorb it through your skin by touching any body fluids. We immediately transferred her to a Vietnamese hospital because we did not feel it was ethical to expose every other patient on that ward. And we all had to go back to our rooms and shower and wash our hair and change clothes and all that kind of stuff. So that was a little interesting.

One of the saddest cases that I ever helped care for there was a young man who was at the replacement company and his life had been manifested which means-let me step back a moment. The way you get out of country is they take you to the 9th Replacement Company and they put your name on a list. And then when a plane comes in, let's say the plane holds a hundred people, well then maybe the first hundred people on that list are then manifested for that plane. And if you're not in that first hundred, then you wait for the next plane to come in. And it might be tomorrow, it might be two days from now, whatever. So he was manifested, he was basically on his way home. And because he wanted to sleep all the way home, because sleep deprivation was one of the biggest problems in Vietnam, he went the mama-san out to get him something to take to sleep all the way home. And there was two small bottles. And he drank one because it was a liquid and it appears as though it was pure opium. The morphine

that we would give you as a pain injection is like the equivalent of morphine cut a thousand times. So within just moments after he drank this stuff, he completely shut down his respiratory system. And the only reason he survived to get to the hospital was that there was a doctor very close by who diagnosed with problem very quickly and treated him. So he came to our hospital in an absolute coma.

A few days later, I forget exactly how many, he seemed to be waking up and we thought, oh, good, then see if there's any kind of permanent damage. But he didn't come fully awake as I remember, he went back again into a very deep coma. And I remember thinking, "This young man is going home permanently damaged, probably." And there's not a visible sign on him of any injury. There's no scratch, there's not a bullet hole, there's nothing. And yet he is never ever going to be like he was before he came to Vietnam. To me that was just incredibly sad.

We treated all kinds of patients, didn't make any difference what branch they were in. And we even an Aussie in there one time and it was kind of fun talking to him with his accent. I don't remember getting any Vietnamese on that particular ward, they were all military personnel. I take that back, there was the woman who ate the poison, she was a civilian. But there were not very many, they were mostly military personnel. I wanted to go to the orthopedic ward. That's what I was working before I went into the military and I loved it. And so I thought, "Okay, I'm gonna ask for a transfer to the orthopedic ward." But I thought, "I might do better if I give the chief nurse a choice," okay? List orthopedics first and something else second and give her the impression that I'm flexible but this is what I really want.

So I guess I wrote down orthopedics and ICU and you can imagine where I went. Yup, they sent me to ICU, that's not what I wanted. But there I was. And the first day I was on the ICU ward, and I have a picture of my hospital someplace - our hospital was cross-shaped. It was four quads of huts just pulled together cross-shaped. We were the only one in Vietnam. So it was three wings of surgical and intensive care and one wing of recovery meaning your surgery wasn't that severe, you were going to be with me for an hour, and then go to some other ward for follow-up.

So it was my orientation day and I'm being shown around the ward and I have to admit I was terrified. Just terrified. And I realized that every time I stopped moving, if I didn't grab something really quick, I would've been horizontal on the floor. My blood pressure was just that low. It was probably approaching zero, I swear. But I made it through that one day and then the actual formal orientation was three weeks in what they called colostomy row. The three wings of the surgical ICU was divided up into chest cases, belly cases and everything else which was like burns, fractures were probably the biggest things. So you spent your first three weeks on colostomy row which meant they were all belly cases of various descriptions. Not everybody had a colostomy; it was just the nickname of it. But it is

tremendously demanding of you because let's face it, if you're standing close to a grenade that goes off and the shrapnel hits you, the biggest part of your body is from your neck to your groin and that's every patient that ended up on that ward or that wing. So very demanding. I guess I'm kind of surprised that I survived it.

But one of the reasons I survived it was the incredible corpsmen we had. They were just unbelievable. They worked very hard, they were very helpful to the nurses. Seldom did you have to ask them to do something twice. They were always very eager to step in and help out. So I think that's maybe one of the big reasons why I survived. We did a lot of things that were probably not quite that kosher but necessary. Like mixing up IV's for the next 24 hours all at once and putting them in a refrigerator; that definitely would not happen today, that would be very much frowned on today. So after I survived my three weeks there, then I would move to the other areas.

We worked 12-hour shifts, 7-A to 7-P. And if you worked 7-A to 7-P, you would only get one wing. If you worked 7-P to 7-A you got two. You would get like the recovery and the belly wing or you'd get the chest wing and the other wing. I don't know why, but I guess it was because then you could see all your patients at once. If you got the recovery and the belly wing, at night you wouldn't get too many patients from recovery so you could concentrate on that wing. And that probably was the most demanding wing with all the belly patients. I saw more civilians on that wing. I'm not exactly certain why, but I can recall three. If I think really hard maybe I could get one more.

One was a young boy who had been burned over about 40-45 percent of his body. He'd been there a long time when I started working on the ward. And as I recall, he was fairly close to discharge. And I think we did discharge him while I was there. The other one was a young man who had taken a lot of shrapnel from his head, all the way down. And we didn't do head cases. We basically worked on everything below the neck. But we got him first. And the surgeons worked on him and did whatever it was that they did to him.

And then my sister hospital on the same base, Long Binh, took head cases. They took other things, but that's where the head cases went. We got burns, they got head cases. And somebody called 'em up and said, "Okay, well we're gonna send him over." And they said, "Wait a minute. You do all your surgery and if he survives that, then you can send him to us." So we did. We did all the surgeries, sent him over there, they did their surgery and they sent him back. We were really hoping that they were going to keep him, but they sent him back. He ultimately died. His injuries were just so severe that we basically were just waiting until he succumbed to his injuries and he did. I remember a fourth civilian.

The next civilian I remember took a wheeled vehicle across his abdomen and apparently prolapsed or pushed out a lot of his bowels somehow out the rectum. And so they had to do some massive abdominal surgeries. And he

became very infected which was quite the norm over there. And we had put him at the very end of one of the belly wing to try and just keep him a little isolated, to try and maybe keep the infection there so that we basically kept the bed right next to him empty. And one day during morning report, one of the corpsman was giving him some care, I don't know exactly what it was, but he called out something like, "I need some help back here." And apparently his tone of voice, we all immediately got out of report - which report just happened around the nurses' station which was just two large desks set back-to-back. We all went back there; the head nurse from the department, she grabbed the sheets that was covering him and just through it back so we could have a complete view of him. The infection had apparently eroded through a main artery and we just watched him bleed to death in about a minute and a half. The head nurse started giving orders, "You go do this, and you do this and you do this." But it was already too late by the time we saw it. We stood there and watched him gasp for air. The reason he was gasping for air was there was no blood to carry the oxygen.

The fourth civilian I remember, a very interesting young man, he again took a wheeled vehicle. He took one across his throat and found out several days later, the other wheel apparently went across his legs. And he had surgery. He didn't lose his larynx, his voice box which is I think quite surprising. We kept in, of course, the intensive care. And he was funny. We gave everybody we could a breathing treatment to try and prevent pneumonia. And it was a rather crude piece of equipment. And you put a mask over their face and then when they breathe in it triggers the machine to kind of force a little air in along perhaps with some medication and expand their lungs even more. Well, in order to make him breathe with the mask on, I had to hold it incredibly tight on his face so he couldn't suck any air in around this mask.

Eventually he got to the point where he could do it himself and he'd hold that mask so tight against his face it would leave a mark around here. Now he didn't need to, but he felt that that's the way it had to be done because that's how we were doing it in order to get him to do the treatment. And then it was several days after the initial injury, he was complaining of pain in his one leg. And I remember kind of stepping back and saying, "Okay, we think he was run over by a jeep." Now one wheel went here and the wheel base on a jeep is about - of course I was just guessing, I really didn't know-and sure enough, this was about his lower leg.

So I called up x-ray and I said, "X-ray, when you're not terribly busy, could you just run over here and take a simple x-ray of this lower leg?" And it was on the night shift and so when the doctor came in the next day I held up this x-ray film. And at that time nurses were not allowed to make a diagnosis so I held up this x-ray film and I said, "I think he has a broken leg." And it was extremely obvious, you know? Nowadays I'd hold it up and I'd say, "It's a tib fib fracture. We need to do something about this." But back then nurses weren't allowed to make those kind of definitive statements. "So it appears as though he has a broken leg." He survived. We eventually discharged him.

He went wherever he went.

But those are the only four civilians I remember on that ward and all the rest were military of various injuries. We saw relatively, for that ward, relatively simple injuries to incredibly severe injuries. Incredibly severe. injuries that I am quite certain that they may have survived the stay in our hospital to be able to be transferred someplace else, but I'm quite certain that they did not survive much longer. Their injuries were just that severe. I stayed there until December and then I came home. I came back to the States anyway. I had a little more time I needed to serve and so I served a very short period of time at Letterman General Hospital and then I was discharged. I came home. That was it. It was over. It was done.

Interviewer

What did you do on your days off? How many days on and off?

Cheryl German-Chung

Twelve hours a day, six days a week. So your one day off, you could sleep. There was a swimming pool within walking distance, you could if you wanted to, you could walk over there. They eventually built a swimming pool right next to the hospital so you could go there. We had a beauty parlor so you could get a perm or get your hair cut or whatever you wanted.

Some of the nurses were perhaps more creative in their thinking. I think I vaguely remember some of them saying that they got into Saigon on that day off. I guess I never quite figured out how to do that, and maybe never really had much of an interest in it. But I never went into Saigon. I did one time. Yes. We'd not been in-country too long and as you can imagine, there were not nearly as many women in Vietnam as there were men. And somehow we were informed that there was gonna be a party at Cu Chi. Cu Chi was west of us, I don't know how far. It was the home of the 25th Infantry, lots of men. It was also the home of another hospital, I think it was the 36th Evac. I'm not absolutely certain. But anyway, there was a hospital. So there was a supply of women at Cu Chi. But they were gonna helicopter us in. Okay, well I thought that would be fun. So we went. The party got quite late. Two young men gave up their room so that another woman and I could sleep in their beds that night. And they were gonna wake us up the next morning and get us back to our hospital in plenty of time. Well we woke up the next morning, guess what? Everybody else was gone. It was kind of like, "Oops!"

Now at that time we were only working eight-hour shifts. I had to be back there by three o'clock and I'll tell you what, I was kind of panicked. All the chopper pilots around me were saying, "Don't worry. Don't worry. Not a problem. We'll get you back there." And I'm thinking, oh, I'm dead. I'm AWOL, they're gonna kick me out, whatever, whatever. Well believe it or not, they were right, I was wrong. They got me back in plenty of time to make my shift. I mean back then, a nurse could probably wink an eye at a helicopter pilot and get whatever she really wanted so far

as, "Will you take me here, will you take me there?" They were really great guys. So I did make it off the base once that way.

And then I started dating a helicopter pilot. Yes, I dated a helicopter pilot. He was apparently the best helicopter pilot in the 45th Med Evac Unit because he gave check rides. A check ride is where you fly with another pilot and you make sure they're doing a good job. He gave a check ride to the colonel who was the commander of that unit. So that's why I say he was probably a pretty good pilot because he gave check rides to the colonel. But anyway, I was dating him and another nurse was dating another pilot. And they were gonna go on what was called a third-out mission, it's a distribution. They take men and mail here, here, and they pick up here and they fly there and so on. And so I asked him, I said, "Would it be possible that we could go with you?" And he said, "Sure. No problem." He said, "You be here at this time and you watch and we'll wave you in." And so he excused-he went down, which was the POL, it's petroleum, oil, and lubrication; it's where they fill up with gas and so on. And he told his crew chief and his medic you're excused. And she and I got on.

Well, believe it or not, I have a half-an-hour stick time in a helicopter. Oh, it was so much fun. He actually allowed me to fly the helicopter. We only went straight forward, we didn't do anything too terribly spectacular. But he said, "Char, you see that tree out there?" I said, "Yeah." He said, "I want you to decrease your elevation, your altitude by 100 feet or whatever it was, by the time we get to that tree." I thought, "Whoa, this is fun!" And I did it. I was surprised. Of course now I'm quite certain that his hands were probably one-sixteenth of an inch away from the controls in case something really happened. But basically, I through that helicopter for a short period of time and it was fun. We didn't get away with it.

When we came back to Long Binh, he took us to a different helipad and we got dropped off. And then when he got back to where he should've been, his commander called him off to the side and said, "You know, you're really not supposed to do that. So don't ever do it again." And when he told us about what happened, I said, I guess it really wasn't fair of us to put him in that position so I never asked again. But it was fun. Incredibly dangerous. When I think back on it now I'm thinking, "I could've been blown out of the sky," you know? But you're young, you're in your 20s and you actually think you are invincible. And I guess I thought I was invincible. And I guess back when you're in a position like that, you're sometimes willing to take risks for enjoyment and pleasure that looking back on it you just shake your head and say, "What was I thinking?" But it was kind of fun.

Interviewer

Were you aware of the protests?

Cheryl German-Chung

No. Didn't know anything. I didn't even know they walked on the moon. Many, many years later they were talking

about walking on the moon and I'm thinking, why do I not remember any of that? And whatever story I was listening to at the time they said it was in July of 1969 and I said, "Okay, that's why." No, I knew nothing about what was going on back here. I never got a newspaper from home. If I'd asked for it, I know Mom and Dad would've sent it to me. I never asked.

The only newspaper I saw over there was "The Stars and Stripes" and they would never put anything like that in a newspaper. The newspaper was to uplift you and kind of give you some information. But news about the protests and stuff back here would've been counterproductive, so no, I had no idea what was going on back here. Only with my family. They'd write me letters and that's it. But nothing else.

Interviewer

You're seeing so much heartbreak and so much sadness. How do you handle that?

Cheryl German-Chung

Well you're so busy working so hard to keep these young men alive. I guess you just didn't have time to sit and wail and gnash your teeth about what was happening. You worked to save them and that was it. That was your job. And if you saved them, that's great, that's fine. And if you didn't, you knew why. They were just so horribly injured, you knew why. And we always transferred our patients just as quickly as we could. Certain injuries required a specific amount of time in-country.

Like burns had to be stable for three days before we could transfer them out. Vascular injuries, injuries to arteries and veins I think had to stay like 10 days and then they could be transferred. So many of them, if they died, they did not die at our hospital. I truly remember only four people dying the six months I was on that ward: two U.S. military and two civilians. And that's it. Of all the patients that came and went, I only remember four of them dying. Now, did some of them die later on? I'm absolutely certain of that. But I didn't know about that.

One very uplifting event happened. The first vacation I got, I went to Japan. I went to stay with another nurse that I'd gone through basic training with. And while there, we might have walked into the officer's club, although I'm not certain. But I heard a voice and I said to myself, I recognize that voice. And I'd just come in from a very, very bright outside so my eyes, it took quite a while for them to adjust. But I found a young man I'd cared for in Vietnam. And he was doing wonderfully. He'd had a chest wound. And he was doing so well that he was not going to be going any further back for his recovery and I think probably, he expected within a few days to a few weeks he'd be back in Vietnam. And that was a help. It was nice to know that someone I'd cared for, that had been transferred definitely did survive. And it was nice. It was very pleasant to know that apparently we had done something really good and we'd been successful in that. So that helped.

And that's also one of the sad things is when I go to visit the wall; I know that there are names on that wall that I cared for. But I don't remember a single name. Not one. None. So I can't look them up. I might, if I pushed the issue, I might be able to find out a name or two, but I'm kind of past that now. The one thing that I got out of Vietnam was I went in a fairly new nurse, I'd worked on an orthopedic ward a short time between graduation and when I went to basic training. I worked in a nursery.

So when I went to Vietnam, I really did not have a lot of nursing experience for what I saw over there. But I will tell you that when I flew back, when I flew back from Vietnam, number one, if I needed to go to the bathroom, I just got up and went to the bathroom. I was in such a state I could've said, "Okay, guys, I'm going to go number one if that's okay with all of you. I'm gonna go to the bathroom and do a number one." All right. And that was fine. I didn't care. And number two, I came back with perhaps a false sense of bravado because I had this feeling, give me your worst patient, I can take care of them, I can fix them. I can give them nursing care. My nursing skills had grown incredibly. And I will tell most people today I would not trade that experience for anything but I'd also not give you a plug nickel for it because my experience was not worth the life and limb that it took for me to get that. But I think I truly am the nurse I am today because of what happened over there.

Interviewer

Did you have some close friends?

Cheryl German-Chung

We didn't stay close. Not like my husband. My husband had some friends that he always stayed close with. I'm not certain I know why other than most of the time when you were working, you were working by yourself. Maybe with a corpsman, but rarely with another nurse. There were not enough nurses to put two on one wing of ten patients. There was just you. So you'd come and you'd work your 12 hours, you'd go back, you'd sleep for eight hours or so and then do something for four hours and then go right back to work for 12 hours, basically by yourself. Would you sit around and talk to each other? Of course. But you basically were working alone. Basically you worked alone.

Whereas I think with my husband, they worked far more as a group of people together. And that might be the difference. Now I never really stayed in touch. I've talked to one or two that I've worked with since we've come home, but for whatever reason I've never really pursued the relationship to be really close to them. And I don't think it's because of memories, frankly, I think it's because of distance. They never lived that close to me.

Interviewer

Do you remember anything about the music or anything going on at that time?

Cheryl German-Chung

Oh, no. The reason I say no is because I don't think we had a radio on the wards. We had TV. Especially on the ICU ward we had a TV. And we only had one station and so there was just this kind of noise in the background but

you never really had time to really pay attention to it. I do remember one day, the show that was on was a language show. The young lady was teaching Vietnamese. And what struck me was there was two letters, I think it was "C-A" although I could be wrong on that. But in the Vietnamese language there are so many nuances to pronouncing that "A" that I jokingly say, it meant everything from airplane to horse or further. But if there were eight different pronunciations, each slight different pronunciation of that "A" was something totally unrelated to all the other pronunciations so far as what it meant. And I thought was interesting. And that's the only thing I remember of all the television I may have heard.

On the first ward, the medical ward, I don't remember any kind of radio music in the background. The hospital didn't have an officer's club per se. The helicopter unit had the officer's club and so I would go down there occasionally and yeah, there'd be music in the background but I'm not a big musical person. My husband talks about how if you look at the span of Vietnam that it is basically the history of rock n' roll and I just say, "Okay, fine, good, I believe you." And that's it, because I just never paid attention. And I didn't get to go to the Bob Hope Show. Never, never.

Cheryl German-Chung

I left about the middle of December and so my guess is-because Long Bien was very large, it was a 40-mile perimeter, it was the largest military base of its kind. You can use that kind of definition to claim the first of a lot of different things, but it was the largest military base of its kind in the world. So I'm sure that Bob Hope came there but it was-maybe he didn't, I don't know. He didn't always go back to the same place year after year, I don't think. But no, I didn't get to go to him and that's okay.

I have to tell you one interest story. I just remembered this. The series M.A.S.H. started after I came back. And like most people, I avidly watched the show. And one day there was a story on there about a wounded soldier who came in who had a live artillery round in him. I can't be more specific than that because I'm not an artillery person. As I recall, in the episode, Hawkeye was going to go out and remove it and Margaret says, "Oh, no, your hands are far too valuable. We're going to send out two corpsmen." I don't think the corpsman loved that. But anyway, they put him in the middle of an open area where if he exploded he wouldn't really be hurting anybody. They took the shell out because they couldn't send the body back home with it. I recall looking out one of the doors at the end of one of the wings that kind of faced or looked toward pre-op or the emergency room, we called it pre-op. And seeing some people kneeling on the ground and I asked one of the corpsmen and I said, "What's going on out there?" And he said, "A young man came in with a live round in him and they have to take it out." And when I saw that episode of M.A.S.H. - and I don't know that I made the connection right away, it may have taken me a little while-but then I suddenly started thinking, I wonder how much of what was happening in Vietnam was used as a story line in the M.A.S.H. episode. That's the only one I can remember is the real connection between the two. There might have been others.

I was basically in a-I shouldn't say a cloistered area, but my little area of the war, some people, they assume that because I was over there in 1969 that I know about everything that happened in that country in 1969 and I keep reminding people, no. What happened up north, way north in what we called I Corps, I knew nothing about it. I knew my one little area of the war for one-tenth of the war and that's it. There was a whole lot that went on over those ten years that I know nothing about. So I do not claim to be an expert about anything but my part of the war because that's the only thing I really knew. So some of the M.A.S.H. episodes may have been taken from things that happened in other hospitals but I just remembered that one and I thought, wow, you know, I wonder how much else they may be taking to create their story line in M.A.S.H. I thought that was interesting.

Interviewer

Did you find M.A.S.H. fanciful?

Cheryl German-Chung

What I usually told people was don't watch the surgery scenes. They're horrible, they're fake, they're just lousy. But it was the interaction of the people. How they supported each other through the hard times. I never worked in surgery while I was over there so I can't speak to those surgical scenes in war. I worked mostly surgery since we've come back, so I can look on those surgery scenes and say, oh, geez, they're terrible. But that's not the important thing. The important thing of that whole episode was the way the people interacted with each other and how they survived it. I guess the main thing is that you have to work together to survive such a thing. That if you truly try and tough it out yourself you're not gonna make it.

Cheryl German-Chung

My family has a military history. I have a great-grandfather-I think it's a great-grandfather, who served during the Civil War-maybe great-great, that sounds a little bit. Anyway, my grandfather served in the Quartermaster Corps at the turn of the century for one of the Mexican-American wars. Quartermaster was not part of the military, it was what they called quasi-military at the time. My dad served in Europe in World War II. He served there. My brother went over to Vietnam about-let's see-I came back in December. He went over I think in the following June or July.

Cheryl German-Chung

He was an ARVN advisor which means he was attached to the MACV, Military Assistance Command Vietnam. And so he was a lieutenant with a group of ARVN which stands for Army Republic Vietnam Soldiers. And he spent six months behind a desk, his first six months. And then the second six months he was out in the field with his own particular unit of military people. So he's quite lucky to come back.

I have one cousin that served over there. Another cousin that served in Okinawa in the Air Force during that time. My brother-in-law went to Thailand '72, '73. So the family, they were quite proud of me when I came back. There was no problem. Did I announce to the world that I was in Vietnam? No. I wouldn't have denied it if anybody asked

me, I wasn't ashamed of it at all. And Fort Wayne, when I came back in 1969, was still very much of a rural kind of attitude. There were no protests or anything like that that I know of. So I really had no problems at all coming home. It was very supportive. Went back to work almost immediately. I took a little time off. That was it. I just went back to work.

Interviewer

Did you get close to any of your patients?

Cheryl German-Chung

No. Not at all. The closest connection would've been to that gentleman who I met in Japan. But no. I've never met any other patient. But since I don't have any names, you could've been one of my patients and I wouldn't know it because I can't remember the names. And I don't think it's because I didn't want to remember them, I think there were just so many that you just couldn't remember them. And they might come in for two or three days and then be gone, then there's somebody else in that bed. And he stays for two, three days and gone and then somebody else is in that bed. The turnover was so rapid, no, there is not a single name that I remember.

Interviewer

Like conveyer belts.

Cheryl German-Chung

You know, if they were that sick they wanted to get them out of country. I don't recall a lot of the patients from the medical unit. If they were evacuated, they more than likely went to the convalescence hospital at Cam Ranh Bay and that might be all the further. But here again, they would stay with us until they were over the initial really sick time and then we sent them out. So there were never any patients that you got that close to. No. And I never dated anyone. They never stayed around long enough for me to date. The minute they were healthy enough to be transferred out to more definitive care or more long-term less acute care could be afforded them, they were gone. They were just gone.

Interviewer

What did you think when you saw the fall of Saigon?

Cheryl German-Chung

I don't think I was aware of it at all. Here again, I was back to nursing. In '75 I was working on my bachelor's degree. And so basically during that time it was work or school, work or school. Was there socializing in there? Yes. There was. It wasn't only work and school, but I can't remember that I was even that aware of what was going on. My time in Vietnam was over. I can't really say I followed it very much after I came back. Was it because it was too painful for me? No. I think I just got busy doing other things. I've seen those scenes but it was long after it happened.

Interviewer

Is there anything else you'd like to say?

Cheryl German-Chung

I don't think so. I think that there are some Vietnam veterans who, it may have taken many years to remember that there were times when they really laughed. There were sad times, there were terrifying times, but there were times when we laughed. I did a lot of laughing. We were young, we were very young nurses, we were in our 20s. And I remember one night there was at least one other nurse and myself. We were sitting at the nurses' station and we were talking about a topic that a lot of young 20-something's talk about: Sex. I don't remember what we said during the conversation, I just remember the topic of the conversation. And the next morning as we're finishing up for the seven a.m. shift to come on, I was standing over a gentleman who had an endotracheal tube in and could not talk. The woman I was having the conversation with was on an adjacent wing but down far enough that I couldn't see her. And so I'm doing whatever I'm doing to him, and all of the sudden I hear her voice say, "Cheryl, guess who heard us talking last night?" And I looked at him and I said, "Did you hear us?" And he got this grin around the endotracheal tube and he shook his head yes. And I was embarrassed. I was embarrassed. Oh, good heavens.

Well, getting a little further away from that, what I now say is thank goodness. Thank goodness he heard us because maybe we... we may have allowed him to leave where he was and remember his wife or his girlfriend or something far more pleasant than what he was going through. The man had pancreatitis and I'm fairly certain he probably died from it. But maybe for a few minutes he was someplace else. And that may have been one of our tasks over there, to be the mother or the wife or the girlfriend of those men that they could look at us and they may not see us, they may see someone else.

I remember one young man, he came into the recovery ward and he was not that badly injured, he was not going to stay. And a lot of the young men woke up very agitated. I think it's because if you went to surgery you never knew what you were going to look like when you woke up. Would they say the injury seems to be minor but then you wake up without your leg or something. And they always woke up agitated and using that famous F-word. And normally one of the corpsmen would be close by and he'd say, "Watch your language. There's a lady present." And their eyes would fly open and they'd say, "Where? Where? Where?" And this young man did just that. And then about three days later he came back through because he'd come back to surgery and they'd started to close some of the wounds that they had debrided. And the first time he was there he was apologizing. And he watched me as I walked up and down the row of beds taking blood pressure and giving care. And I don't know how many times he apologized for his language then, but then the second time he came back he woke up far quieter because he knew what was going to happen, he had a very good idea what he was going to look like. But he was still apologizing because during the rotation I'd just ended up right back there again and so he was apologizing again. We were treated like angles over there. So that's why I say that perhaps we were more than just nurses. So for that one man, and I have to say, I'm glad he heard us.

Cheryl German-Chung

I wrote a speech several years after coming back. And I began this speech something like that I was more than just a nurse over there. That I was the wife and the mother, you know? I was the person who read the letters you couldn't read and I was the person who wrote the letters you couldn't write. That we filled many, many functions over there. It wasn't just nursing. And I guess that's what makes us so special to our Vietnam veterans. I have had several hugs from men that I'm quite certain I did not care for. They were either not stationed anywhere close to where I was, or it was a different year or whatever, but they're just so thankful that we were there. I've had hugs from wives saying, "I'm so thankful you were there. My husband was never injured, but had he been injured, I'm so thankful that you would've been there to care for him."

And one statistic, and it's the only one I'll give you: If the injured person made it to a hospital alive, he had a 98 percent chance of survival. That is incredible when you think of the type of injuries that we saw. 98 percent. That's better than some civilian hospitals that live in "urban war zones," so I'm very proud. I'm incredibly proud of that. But I'll tell you what, we worked hard. We worked very hard. Those 12 hours, they were full. They were very full but very rewarding in a way too. So I'm glad I did it.

Interviewer

Thank you so much.