



Kent:

Today is May 24, 2002. This is Judith Kent speaking from the private home of Rhona Prescott in Flagler Beach, Florida. Mrs. Prescott was born on June 28, 1941. The interviewer and Mrs. Prescott are the only persons present. I represent the Flagler County Public Library and this is my first face to face meeting with Mrs. Prescott who volunteered for the interview.

Mrs. Prescott, for the record would you state your name and which branch of the service you served?

Mrs. Prescott:

I am Rhona Marie Knox Prescott. I was at the time Captain Knox and I was in the Army Nurse Corps.

Kent:

During which war did you serve?

Mrs. Prescott:

I served in-country, Vietnam.

Kent:

OK. Where were you living at the time that you enlisted?

Mrs. Prescott:

When I enlisted I was living in New York City where I was born and raised. I was in my last year of nursing school and they recruited nurses then because the Vietnam War was escalating.

Kent:

Why did you respond to that recruitment?

Mrs. Prescott:

Well, a number of reasons: I needed my senior year tuition desperately, my cousin was in the military, my high school chums were in the military. A number of them were in Vietnam. It just seemed that all the time we were bombarded with the idea of war. I figured that since I was to be a nurse, and operating room nurse, that would be the best place to use my skills.

Kent:

You chose the Army Nurse Corps...

Mrs. Prescott:

I did.

Kent:

Because...

Mrs. Prescott:

Because although all of the branches were recruiting nurses the Army was the one that mostly guaranteed that you would go right to Vietnam, also because members of my family were military officers in the Army.

Kent:

So you came from a military tradition.

Mrs. Prescott:

A tradition, yes.

Kent:

Do you recall your first days in service?

Mrs. Prescott:

In service? I sure do. The first year was actually spent at my nursing school; they just paid me every month to stay in school. But after I sat for my State Boards [Examinations] and I became licensed they flew me to San Antonio, Texas which compared to New York was really, really hot. I remember getting off of the airplane and just gasping from the heat and learning for the first time about Texas; the "wide open spaces" of our country. So it was pretty thrilling.

Kent:

The training that you received there, was that like Officer's Training?

Mrs. Prescott:

Well, they called it "Basic". We were all female, so I guess it was somewhat modified, but we did the marching and the shooting of the guns and rifles. We were learning about insurgency and war and prisoner-of-war stuff. Basic things like the fellows would have.

Kent:

Did you have advanced medical or nursing training to prepare you for the kind of casualties that you might meet?

Mrs. Prescott:

Not at that time. Later on in my career the Army sent me back to school to become officially skilled in operating room nursing. I had already worked in the operating room in my school of nursing after graduation, through the Cuban missile crisis actually. Later the Army also sent me to what they called the Officer's Career Course which was an administrative kind of setting.

Kent:

Do you remember any instructors that stand out particularly from that period?

Mrs. Prescott:

No, I don't. I guess it was just a blur. I think my mind was more on the nursing than on the school. I considered the school just a resting place between assignments.

Kent:

The group that you were with there [in Basic Training] were they pretty much dispersed or did you go as a unit to your first assignment? Prescott: No, we were all dispersed. I don't think that any two people went to the same place. As soon as Basic was over we had our orders and off we went to our respective destinations.

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Kent:

And yours was?

Mrs. Prescott:

Mine was Fort Bliss, Texas; they didn't send me very far, it was in El Paso.

Kent:

What did you do there?

Mrs. Prescott:

I worked in the operating room. While I didn't have the official skills; they called it "MOS"; I already had a number of months in the operating room so that's where they sent me to work.

Kent:

What kinds of cases were you treating?

Mrs. Prescott:

William Beaumont was right on the Texas/ Mexican boarder, so we got mainly dependents, family members who had routine scheduled surgical needs. I don't remember any emergencies except perhaps for appendixes and things like that. It was pretty much like a civilian operating room would be.

Kent:

You weren't getting casualties from the war?
Mrs. Prescott:

No.
Kent:

How long did you stay there?
Mrs. Prescott:

About a year, give or take.
Kent:

And then?
Mrs. Prescott:

Well, I had been putting in my request to go to Vietnam. So I got orders, but they were not for Vietnam, they were for Korea; so that's where I went.
Kent:

[laughing] The Army in its wisdom...
Mrs. Prescott:

Oh yes, it's an old Army rule.
Kent:

What was it like there?
Mrs. Prescott:

It was amazing. I had never been in Asia. I had no clue about the Asian culture. Korea at that time was very primitive. The roads were dirt, there were oxen wandering around and little piles to step over (if you know what I mean). There were Buddhists in their orange robes and people who were obviously enjoying their opium pipes. The native Koreans at that time pretty much wore their traditional garb and displayed their customs. It was actually intriguing. I lived on a military compound, but I took a crash course in Korean and learned how to read the symbols and got around on my bicycle whenever I could.
Kent:

Exploring the countryside?
Mrs. Prescott:

Yes, exploring the countryside- it was amazing.
Kent:

And your work assignment was?

Mrs. Prescott:

Operating room.

Kent:

What kind of cases were you treating there?

Mrs. Prescott:

There it got a little more serious. During the Korean War we and other countries had laid down a lot of land mines and many of them had not been picked up; nobody knew where they were. So a lot of cases in the operating room were little Korean children who had been running out and playing in vacant lots or fields, as children will do, and would step on one of these things and end up minus a leg. A lot of them were amputations. So I guess in a round about way that was my first taste of war.

Kent:

But you had supplies and modern equipment?

Mrs. Prescott:

We did... well modern you would have to define. It was old Army equipment but it was adequate. We were in a building that had air conditioning. It was called hooch; it was a metal building but it was outfitted inside to be a safe place and an adequate place for an operating room.

Kent:

And you had sufficient staff?

Mrs. Prescott:

Yes, we did. We also had South Korean Katusases (they called them in the military) there who were also working with us to staff the hospital.

Kent:

How long were you in that assignment?

Mrs. Prescott:

That was about thirteen months, as I recall.

Kent:

How did that come to an end?

Mrs. Prescott:

It was just a normal tour of duty. The Army has these mysterious time frames that they put on assignments. My time was up so I went back to the states.

Kent:

OK. What did you do there?

Mrs. Prescott:

Then for some reason unknown to me I went back to Fort Sam Houston, Texas to what they called Officer Career Course. I don't have a clue why I went; it was a very posh assignment. It was for persons who were destined to become chief nurses and administrators; top notch people. I was the youngest and lowest ranking ever to go. It was a six month course and I dutifully sat through the classes, wondering all the time why I was there. [laughing]

Kent:

How did they use your new found skills?

Mrs. Prescott:

Well, they didn't appear to until I did get to Vietnam a couple of years later. There I certainly used them, so perhaps that was in the master plan all along.

Kent:

So you were still trying for a transfer to Korea; I mean Vietnam.

Mrs. Prescott:

Vietnam. Yes, as soon as Career Course was at an end of course I put in again for Vietnam; but in their wisdom they sent me to Fort Belvoir, Virginia, which was a pretty area of the country; I enjoyed it. There I officially; well OK, let me back up, I made a mistake. Before Fort Belvoir, they sent me to Ft. Benning, Georgia which was and still is the home of the 82nd Airborne and their basic training. There I was to take the operating room course which would lock me into the military occupational specialty that I had been working in all along. So I had another six month course at Ft. Benning.

Kent:

That was technical skills or administrative...

Mrs. Prescott:

It was both, you know, learning things about sterile technique. This was redundant; I had already been doing these things but the Army wanted it to be on paper just to make sure. It was that and actually working in the operating room with supervision to correct any deficits that there might be. I enjoyed it; I learned a little bit. It was just a nice, laid back assignment.

Kent:

But you were still angling to...

Mrs. Prescott:

Yes, I put in for Vietnam. Every time you come to the end of an assignment you have an opportunity to put in a request. So I put in again for Vietnam, but they sent me to Ft. Belvoir, Virginia. It's in Alexandria, right outside of Washington; a very nice area. Again, I worked in the operating room. Our cases were nothing spectacular, they were pretty

much just dependents and military that were stationed there; routine. I got to do a little bit of teaching some enlisted men who were assigned under me [and] who I was in turn to teach operating room technique.

Kent:

These would be corpsmen?

Mrs. Prescott:

Corpsmen who were training to be medics, working in the operating room.

Kent:

Good. We can't get you to Vietnam...

Mrs. Prescott:

Well, of course I did put in for Vietnam and actually this time I did get my orders to Vietnam, and off I went.

Kent:

What was the trip like- getting there?

Mrs. Prescott:

The trip was long. Air travel was not as sophisticated as it is now. We flew in a commercial airliner. It was either a TWA or Pan Am; I can't remember. They were contracted to the government. We stopped in Hawaii to refuel, stayed in Hawaii about twenty minutes. They wouldn't let us off the plane, which bothered me because I had a friend there and could at least have called him. Then we were back on the plane and we went across. I was the only woman on board except for the stewardesses who were not the stewardesses that I had become accustomed to. They were older and weathered. It seemed to me; my perception of it was that the flight crew was not there by choice. They were taking what assignments that were available because they were getting close to retirement. The flight was long and they kept feeding us; they fed us and fed us and fed us. [laughs] As the hours went by I started thinking about, "Are the fattening us up for the kill?"

Kent:

So you were getting anxious at that point.

Mrs. Prescott:

Yes, the karma, the vibes, there was something just not peaceful about the whole thing.

Kent:

And your first sight of Vietnam?

Mrs. Prescott:

It was beautiful. When we came down it was daylight; Vietnam from the air is gorgeous. It is all green like Ireland, all shades of green. You can see the divisions of the

rice paddies separated by hand made dikes. It is very hilly and fertile and of course it has the sea all around it. It was gorgeous coming down.

Kent:

But when you came down...

Mrs. Prescott:

When I came down it radically changed. We were not allowed to disembark right away from the airplane. We were told to put on our helmets and to run single file to a site on the tarmac- to go as quickly as possible and not to look back. When the doors opened the heat just kind of hit us in the face. It was really hot in Vietnam; it was close to one hundred thirty degrees. We were being fired at; there were snipers there along the runway; somewhere in the bushes— that they hadn't been able to remove. We were just to run, so that we did. Nobody got shot. It was a real eye-opener!

Kent:

Quite a welcome party.

Mrs. Prescott:

Yes, no more illusions.

Kent:

From there you went to the Third Field Hospital in Saigon?

Mrs. Prescott:

Yes, first we spent a few days at a replacement company which was right near the air strip. There we lived in tents and waited for our assignments. Mine was to the Third Field in Saigon where they had a pretty active operating room. But basically it wasn't why I had volunteered to go. It was a pretty traditional hospital. It had been an old French school house, a stucco, cinder block building. It had air conditioning and it was pretty well equipped for the military. The operating room treated neurosurgical cases and chest cases mainly that couldn't be dealt with safely out in the field. So my operating room skills were certainly put to the test. I learned an incredible amount of things there; techniques and shortcuts, and worked with the best surgeons, neurosurgeons and chest surgeons.

Kent:

So those were some long days?

Mrs. Prescott:

Those were really long days. When surgery started (it was usually brain surgery) they had no idea what they would find and the [surgical] techniques weren't perfected at that time. It was kind of go in carefully and slowly, see what you could find and test the areas of the brain to be sure that you could cut there without doing more damage. It was a very slow process; once we got into a skull we stayed until the work was done to the best of our ability. We had a lot of cases because that was the neuro- surgical center. We worked

really long days and scary days. Kent: So you saw more trauma in those first days than you had seen. Prescott: Yes, since they were head injuries it stands to reason that there were also facial injuries. These young fellows on these litters; they were like Halloween masks; they just didn't even look human. It was [pause] really challenging.

Kent:

How does one deal with that every day?

Mrs. Prescott:

This one didn't deal well. One incident that I remember; because I was the assistant supervisor so I was pretty much operationally in charge; I remember one day the hall was just so filled with litters with fellows on them with decimated faces and skulls and other body parts. It was so filled that you had to kind of shimmy around to get down the hallway. One of the corpsmen just lost it. He just started screaming and crying and slid to the floor, actually. I remember just yelling, yelling, yelling at him that he had to get himself together and go ahead and function. What I remember him saying back to me (between gasps) was that a specific litter contained a person who he knew and had gone through basic training with, and was in fact his buddy. It was a real moment of truth when he verbalized what he did. I had to come to grips with the fact that what we were dealing with was absolutely impossible.

Kent:

So you had to not only deal with your own feelings but with those of the corpsmen.

Mrs. Prescott:

Right, and also [with] what patients were conscious. They were really scared and you had to deal with them and try to pass some kind of confidence on to them. In a way it was so very dishonest, but it was the thing to do to give them the best chance of recovery.

Kent:

How long did that assignment continue?

Mrs. Prescott:

That continued for about five months. I had hoped to work in the field, meaning where the casualties came out really raw. Coincidentally, a person who had been at the Career Course with me turned up in Vietnam. I didn't know her background, but she turned out to be quite a high ranking member of the Philippino Army Nurse Corps, which brought attention to myself because she asked to see me. The chief nurse then noticed me, of course, because I had to go to the office. She looked into my background and found out that I had the Career Course, so she asked if I wanted to do something different. I said yes, I wanted to go out in the field. So within a very short period of time I had orders to go to the field to be acting chief nurse in this remote hospital in the Central Highlands.

Kent:

Was that the 616th?

Mrs. Prescott:

Yes, it was.
Kent:

The Clearing Company?
Mrs. Prescott:

Yes, it was the 616th Clearing Company; it was in An Khe. It was up in the mountains; it was called Camp Radcliff which was the home of the First Cavalry at that time. That was the elite fighting unit of the Army; they were all specially trained.
Kent:

Can you tell us what that was like?
Mrs. Prescott:

Well [takes a deep breath] the hospital was a series of tents; big green tents held up by poles with stakes into the ground. The floor was a tent liner which was just a kind of plastic and canvas material that sat on the ground that was lumpy. There was of course no air conditioning, the tent flaps were left open. It was hot. The First Cavalry had a helicopter unit. There were a lot of helicopters flying over which pulled up with their rotors a lot more of the dusty clay. So, it was not only hot, it was really dirty; there was just dirt flying all the time and it was hotter than Hades during the day and it got really cold at night. The operating room was just one little area with these two little metal tables and an autoclave that was akin to a pressure cooker that we might use at home for cooking.

It wasn't really safe. The stuff was old. Since I was acting chief nurse I decided that the casualties would all just go into the receiving tent where there was more room and more tables and where the doctors posted themselves. That tent became our surgery. It was beyond primitive; it was beyond the MASH movie and TV show. It was dirty; it was a non-sterile environment. We didn't have enough instruments. We didn't have enough hands. Needless to say we shared things during surgical procedures that were absolutely needed to save lives, but they weren't sterile. We didn't have suction, we didn't have penicillin to irrigate wounds, didn't have enough blood to transfuse, we just didn't have... We did have so many casualties right out of the field. They just brought them all in there. The First Cav. put their people in that staging unit hoping that we could fix them and send them back into the war. So, we were [sigh] way above our heads.
Kent:

It took a lot of improvisation...
Mrs. Prescott:

It did. There were eight other nurses; they were all RNs. They were all less experienced than me, which isn't saying much because I didn't have a whole lot of experience under my belt. Everybody just pitched in, the same with the corpsmen and the same with the doctors. We had kids right out of medical school; it was not a posh

assignment. It was where nobody else wanted to go, but it was where the greatest need was. Everybody was fresh. Everybody was open to anything in terms of staff. We did improvise and it was amazing what we were able to do with mayonnaise jars from the mess hall, rubber tubing from where ever and plastic from here, there and the next place that we got recycled and built into things like suction machines. We just divided up what [intravenous] fluids we had and what blood we had and spread it around as best we could. There wasn't enough.

Kent:

Were the corpsmen pretty skilled?

Mrs. Prescott:

Most of them were youngsters who hadn't been out of their basic training very long. There was one man who was a master sergeant; I don't remember his name. He had been a medic in the Korean War and we owe him a great deal (as do the casualties) because he had been out in the field. He knew how to suture, he knew how to debride wounds, he knew how to do minor surgery and he taught all of us how to do that.

Kent:

And you did.

Mrs. Prescott:

We did it, yes, because there were only two doctors there and we had to do that.

Kent:

On any given day how many casualties might you face?

Mrs. Prescott:

It varied. It depended on what battles were going on in the area and which battles engaged the First Cav. Sometimes the choppers would just come in one after another and each having six wounded men. Whatever we got in we treated until they were all treated.

Kent:

As the senior nurse you performed triage.

Mrs. Prescott:

I did. That was the very hardest part because there were certain rules about triage that logically make sense but when you are dealing with human beings it is very difficult to put them into practice. Those rules are that you have categories of wounded and those categories determine how you are going to treat them; there are three. Basically, the ones that are operable and can be fixed in one operation get the operating room tables first, because they have the best chance of survival. Those who have minor wounds (gun shot wounds are never minor, but relatively minor wounds) they just have to wait until there is time for them.

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So they are waiting without medication (pain or antibiotics) and their wounds are festering. Then the other category is called "expectant". They are the ones who are critically wounded and they will die without surgery for sure and very possibly even with surgery. In that setting in An Khe those people were just set aside and let die because there was no way we could take care of them. So my job was to say, "Let that one go; put that one on the table; this one can wait." And those decisions were all just like the flip of a coin because my experience was certainly not vast enough to be able to predict who would live and who would not.

Kent:

You said in another context that it was like "playing God."
Mrs. Prescott:

It was. That is exactly what it was.
Kent:

Where did you find the strength to do that?
Mrs. Prescott:

I don't know. I don't know where it came from. I guess it was just because there was nobody else to do it and it had to be done because time was of the essence and any delay in making any call would just cause further lives to waste away.

Kent:

It is hard for us; for me; never having been in a setting like that to imagine what the smells and the sounds must have been like.

Mrs. Prescott:

[tearing] When we were busy (which was most of the time) you had to somehow block out the smells and the sounds because the smells were of dirty, putrefied flesh and blood that was some running free and some that was old. There were insects and there was dust and other organic material that didn't smell good in the area. The sounds were of people crying and screaming and praying and then there were people on our own staff who were also pretty flustered and uttering back and forth. The sounds were chaotic. The

smells were astounding and the only way to function was to somehow block those things from sensory perception or you couldn't go on. So that is what we did and I don't know how we did it. I guess there is some innate gift in all of us and I really think it was the hand of God there.

Kent:

When you left the operating theater, you went [pause] home [to] your tent?

Mrs. Prescott:

Home was up the hill. We had wooden buildings that you could live in that were a little better than tents. We had cots to sleep on which were at least off the floor, which is more than I can say for the patients, because many of them wound up on the tent floor; there weren't enough cots for them. I don't remember much about being off duty. I think the shower stands out in my mind more than anything because we were covered with blood and human waste and [also] perspiration from ourselves. There was one shower; it was outside and there was a little tent around it and [it was] open to the air above. It was a big old water bag, I forget what they called them, but they filled them with water every day. That was our shower. It was heated up by the heat of the sun, so that was good; it was warm water. You just had to run down to the latrine with your towel around you and get your shower quick. You were not to waste water; there were others coming. [laughs] Some of the fly boys thought it was comical to fly overhead while we were showering. They got a big giggle and sometimes we were worried about what might be open to view. The water was so welcome it didn't really matter. That was the highlight of "home" as you say.

Kent:

How about the food?

Mrs. Prescott:

The food? [laughs] Well, you were so hungry! We worked such long hours. Basically we were given... The mess hall had rations of real food plus a vast array of canned goods called c-rations. We had a cook there [laughs] who was almost miraculous. He would open all these little cans (like tuna fish cans, c-rations) and somehow mix them and warm them up and set them out warm for us. It wasn't half bad.

Kent:

Compared with?

Mrs. Prescott:

Compared with just cold out of a can.

Kent:

How long did you stay in that setting?

Mrs. Prescott:

It seemed like a lifetime, but actually it wasn't that long; it was just a couple of months. What they did since we were under tents and because we had such vast amounts of casualties, they decided in their infinite wisdom that they really needed a hospital there. Duh! So the Army had to go through all the paper-work, staffing and whatever and it took a while. They did actually begin to build a hospital, meaning something made out of wood with a roof and a floor. At that point they assigned personnel who were prepared for this kind of work (meaning field grade and up) and made it a real hospital. So they transferred me and just about everybody else; everybody, all my eight people. [They] transferred us all out and brought in "qualified" (I put that in quotation marks) personnel.

Kent:

Somehow the word was out that this was a terrible need.

Mrs. Prescott:

Well, I think that is where I made my first "boo boo". I had been to this Career Course and they taught us, among other things, how to do these things called "staff studies" which was to justify equipment and personnel. So I spent a few extra minutes doing that and I sent this written document down to Saigon, spelling it out very clearly that they had to have a hospital there now and people and supplies. And I did get a visit from a woman who was somebody high ranking in Saigon. I don't recall her name. She was not friendly and she had some comments about how we looked, which was pretty grungy and how the hospital looked, which was pretty primitive. I don't know if that staff study did the trick but they did put a hospital there. I was not a popular person because that was not an area that anybody wanted to go to, but there was a need so they did have to go. That was for the men's benefit. Casualties of war deserve treatment.

Kent:

Absolutely! So you were reassigned then...

Mrs. Prescott:

I was reassigned. They told me they needed me at a hospital, again in the central highlands, that was being built. I hitched a ride on a helicopter to the hospital to check it out. It was indeed being built. They wanted me to set up the operating room. There is a way to set up a operating room; there is a way to run in the electricity. There are a lot of nuts and bolts: things that should be done to make it safe because there is oxygen and flammable things running through an operating room. The basic stuff that was there was not done correctly. I realized as I stood there looking at the cinder blocks and the electrical outlets very close to the floor that were in that it would have to be redone. I really didn't have enough energy or strength or presence of mind to fight the bureaucracy and get the whole thing redone. So I refused that assignment, which is something that isn't done, but I did. So that was my second faux pas. So they sent me to a prisoner of war hospital in Qui Nhon, which was an absolutely awful assignment.

Kent:

Was that the 85th Evacuation Hospital?

Mrs. Prescott:

Yes, the 85th Evac.

Kent:

Tell us about the "awful".

Mrs. Prescott:

Well, there was another hospital in Qui Nhon, the 67th, which was basically for our Americans. It was a well staffed, well equipped hospital. The 85th, about a mile away from there (maybe a mile and a half) was under Quonset huts, which were World War II equipment kind of things. There was a perimeter of concertina wire (barbed wire) with guards all around. It was a place where the North Vietnamese who were captured, the Viet Cong who were captured, the South Vietnamese who were questionable but wounded, were sent for us to give medical care (as the Geneva Convention said we must do). It was a hospital for the enemy. Morale was not good. The staff was not the best. It seemed like people who were assigned there were people who were not in favor for one reason or another, either politically (like probably me) or because they just didn't have a good skill level. We just didn't have the best of everything there. The patients were scary! They were soldiers. As they recovered from their wounds their object was to kill us. It was very difficult to work; you always had to watch your back (quite literally). You always had to alert somebody else when you had to go close lest you needed to be taken out of a strangle hold.

Again we had the triage situation because there were Americans who got there because they needed to be treated quickly and they were mixed in with the enemy soldiers. The triage rules were "Regardless of which country you were serving, according to your wound you were to be treated." My challenge there in the operating room as a triage person was to determine who got the [operating] table. I was supposed to give it to the person who could best benefit, which was usually a Vietnamese or North Vietnamese person. When we had one of our guys lying there bleeding I again had to make decisions. I will say that I didn't always make them according to the rules. [voice volume drops] It was really hard.

Kent:

Kent: A hard situation for all of you.[nods affirmatively] Everybody.

Mrs. Prescott:

[nods affirmatively] Everybody.

Kent:

Is that where you met your friend, Eleanor [Eleanor Grace Alexander]

Mrs. Prescott:

Yes, it is. Eleanor was there when I got there. She was also a Captain and so we were more or less on the same level and we became friends. We also took turns covering the operating room because the person who was really in charge (a Major) for one reason or

another just didn't seem to be there very much. When ever the "pushes" came in (which means the mass casualties that would come in by the car load and by the plane load, literally) it was either Eleanor or I who ran it because the Major just couldn't be found. We co-supervised that operating room.

Kent:

So you were making the triage decisions and there would be corpsmen assisting the surgeons?

Mrs. Prescott:

Yes, and I gotta say that the corpsmen that we had were excellent. I can remember a couple of sergeants who were really top of the line, really heroes.

Kent:

And you had adequate supplies?

Mrs. Prescott:

We had pretty good supplies there, much better than An Khe. They were somewhat primitive, meaning they were World War II vintage, but they were adequate.

Kent:

There was a significant event that you have described, a mix-up with Eleanor...

Mrs. Prescott:

Oh, well, even though Eleanor and I were both Captains, I had more [operating room] experience than she in civilian life. Also I had been to An Khe and I had been at the Third Field, so I had done the absolute ultimate in nursing all kinds of casualties, so I had a skill level that you can only acquire in the field (that she didn't have.) So it was their habit every time a surgical nurse was needed in a remote area where they could staff one, they would send me. I was always going out TDY (what they called temporary duty) to here there and the next place to fill in as the operating room nurse. Eleanor and I would talk about this and she always envied that I got to do that because she volunteered for Vietnam because she was an operating nurse and she wanted to really do the meaningful stuff. There was a patch of jealousy, that part of our friendship was based on [the fact that] I had done this and she wanted to do that. A lot of our conversations were about what you do when [such situations arise] and how you manage without [staff and supplies]. So I had been assigned to these teams and another assignment came up and I was assigned to another team. The destination was unknown, the time was sort of unknown but my orders were to have my gear ready, hanging on a hook, which I did. There was a battle gearing up called Dak To which was one of the battles that turned out to be the beginning of that infamous Tet of 1968. I was the nurse on that team, there was an anesthetist and two corpsmen. Eleanor wanted to be the nurse on the team but they chose me because I had the experience. Well, we had been through a day of heavy casualties in our operating room. Eleanor was off, I was on. I was doing triage and a lot of other things. The day had ended, the casualties were treated. I had gone over to the officers club to get me a beer.

was beat. In that five or ten minutes, the call came. I wasn't in my quarters. Eleanor was close by, my room mate went and got her and she took my gear (which included my jacket with my name on it) and since time was of an essence, she got on the helicopter with the chosen anesthetist and the correct corpsmen and she went to the duty station at another hospital in my place. About four weeks later the casualties were under control and she and the team were coming back and the plane didn't make it. It did indeed crash into a mountain in heavy rain. There is a question as to whether it was shot down (because there were bullet holes found in the fuselage). [tearing, voice drops in volume and pitch] They were all killed. We don't know if it was immediate because nobody could get to them for three days, but Eleanor (probably wearing my jacket) died that day and I lived.

Kent:

When did you get that news?

Mrs. Prescott:

I got the news very soon after the plane was declared missing. Ironically, I had been (this is four weeks after the call) I had been visiting (unauthorized) a boyfriend of mine back in An Khe, which wasn't too far from where this team was sent. It was sent to Pleiku. I was in a plane, without my name on the manifest, coming back to Qui Nhon at about the same time that the team was coming back from Pleiku, unbeknownst to me. I was in the very same model plane within minutes [of hers] in the same flight pattern as she was. My plane landed, her plane (right ahead of us) went down. When we landed there was talk that a plane was missing. I didn't know at that time it was hers, but when I got back to Quinon and kind of snuck back in, it was learned that the whole team was missing and the plane was down. So I put two and two together and it didn't take too long to figure it out.

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Kent:

That must have raised a lot of questions in your mind.
Mrs. Prescott:

Ah [gasp] well, guilt! The first thing I thought was, I was so close, I was right behind her. I was supposed to be on that plane, she had my clothes on. Why am I alive? Why did she die? Why did she go? Who authorized that? Was it authorized? Do they even know it was her? What have I done? It was terrible!

Kent:

That kind of question isn't resolved in a few minutes or days or even years.
Mrs. Prescott:

No. That question haunted me for thirty some years, because I really felt deep down responsible for her death.

Kent:

And yet, the next day you had to go back to work.
Mrs. Prescott:

Yes, I went back to work and nobody said a word in the operating room. The Major did show up for work. She was very tense, she spoke to nobody. Her behavior was erratic. The one corpsman who had been on the team was back in the operating room. He had taken an earlier flight. He didn't smile. The anesthetist on the team was missing. He was our best anesthetist. He was obviously not there. Eleanor was not there. Everybody just went about their chores and took care of what casualties there were that day without saying very much.

The only thing that was there to testify to her "should be presence" was the tape recorder. Eleanor had snuck a reel to reel tape recorder over into the operating room. She had gotten music from home, current music that we didn't get on the radio. She had brought in the music and the Major never noticed the tape recorder was there. It shouldn't have been in the operating room, but the music was such a gift to all of us. It soothed us and it helped us have enough energy to go on with the things that we had to do. So the tape recorder just seemed to get bigger and bigger and bigger in everybody's eyes. It just sat there but the Major never noticed it and nothing was ever said about Eleanor and Jerry and the other corpsman not being there. So that just intensified my guilt.

Kent:

Let's take a brief pause here.
Mrs. Prescott:

After your assignment with the 85th, what was the next assignment? Prescott: Well, about half way through the 85th I realized that I had to get out of the Army and I had to get out of nursing. I was burned out; I was really stressed. I was not feeling kindly toward our government, so it was just the wrong setting for me. I put in my papers to resign while I was at the 85th. Mysteriously, they got lost. So, I put them in a second time and

again they got lost. [laughs] So there was nothing I could do about this but I realized that they weren't lost. I guess the higher ups were hoping that I would change my mind. But you know, I was done. I was done. An Khe, especially, was just more stress than my human nature could endure and it was time for a change. They did send me back to the States to Fort Sill, Oklahoma, which was the artillery training center. I worked briefly in the operating room there, but as soon as I hit personnel, I put in my papers again and they assured me that they would process them. It took a few months and I just worked in the operating room at Fort Sill but my mind and spirit and heart were civilian.

Kent:

How did you keep in touch with your family while you were overseas?

Mrs. Prescott:

How did you keep in touch with your family while you were overseas? Prescott:
Letters. The mail took a while, but it got there. It was before the days of cassette recorders but we had these tiny reel to reel tape recorders. Nobody remembers them. You could make the little cassettes (not the mini-cassettes) but the cassettes. So we did that back and forth. I bought recorders for my family and I had one. So we did tapes, but mostly it was letters.

Kent:

So your family knew pretty much what your experience had been.

Mrs. Prescott:

You know, they did but they didn't. The information that came out state-side was so whitewashed that I don't think that anybody knew what was going on. They must have looked at my letters and thought, "This girl is crazy because this isn't happening!" I don't know, there was no discussion about them when I got home. I don't think they really had a clue.

Kent:

Were you surprised at the general level of knowledge in the country when you got back?

Mrs. Prescott:

I was furious. When I came back I was again the only woman on the plane. We came into Mc Cord [air base] in Washington State on a military flight and then we had to somehow get down to San Francisco to a civilian airport. In uniform now, we are. When I got to San Francisco, everybody was just yelling and looking mad and calling us names. Since I was a woman, I just ducked into a restroom and took off my uniform and threw it in the trash and "became" a civilian. I never told anybody and went across country to visit my Dad and his wife (my step mother was a nurse in the Korean conflict) thinking, "Oh this is safe haven, now I can just blab and yell and scream and get it all out of my system and they are going to understand." They didn't understand either. My Dad paced, he seemed embarrassed, he didn't say anything but he wasn't with me. My step mother

actually yelled at me and told me that it couldn't possibly have been like that. [She said] "the news says this, you say that."

She wanted me to keep my voice lowered and stop my ranting and raving because neighbors would be concerned. There was just no understanding or support in this place at all. So I just became a "little woman" who didn't talk about the military or Vietnam. I just kind of kept it all inside. From what I understand, that is pretty much what the guys did too. It was easier for me because I could hide; there were hardly any women in the military at that time. That is what we all did. Nobody would talk about it because it fell on deaf ears. There was so much emotion pent up.

Kent:

Do you think that played a part in how you behaved on a day to day kind of basis?
Mrs. Prescott:

I think in retrospect... I thought I was fine, but looking back and [with] people (friends that I made later) telling me how I was at work and this and that... I was extremely high-strung, "take no prisoners", extremely high-energy and so goal-oriented that I think that my normal personality disappeared in that year. I became a real tyrannical kind of a driven person, simply to keep myself from dealing with all the stuff that was going on inside.

Kent:

You had left nursing at this point?
Mrs. Prescott:

I tried. Well, I processed out of the military, eventually. I tried my hand at civilian nursing. I realized driving back and forth to work that if there was an ambulance or accident I would literally freeze and I would have to pull over, not to help the person but because I couldn't see straight to drive. I realized something had changed in me and I wasn't right and I really couldn't ethically do nursing because I could not render first aid. I would just stand there, stunned. Also, I had an incident. I had been married to a Vietnam vet. He had an accident. He fell off a ladder and he cut the bottom of his foot in our home. Somehow he managed to get down to an artery; I don't know how he did this but he had a gusher going. He was screaming, he was on the floor, he was bleeding rapidly. There was all this blood. I ran upstairs and got a clamp. I had my own little cabinet of surgical instruments by then.

I got a little clamp, came down, dug around in the foot, clamped off the artery just like I had been doing for the last year. No big deal. Of course, since he was awake he felt the soft tissue that I also clamped and he shrieked like a banshee. Reacting to his screams, irrationally I took the clamp off, let him bleed and called 911. Now, this is so diametrically opposed to what I had been doing for a year and how I had functioned in crisis for a year that I realized: this is a different person, no longer a nurse. That was the end of nursing for me, I got out.

Kent:

What were your thoughts about what you might be better suited for?

Mrs. Prescott:

I didn't know. I had married, I was by then having children so I was able to hide out at home for a couple of years. I became a military wife and went through all the motions of being a military wife, going to the social things, the tea parties and what not. We went to Germany; I enjoyed Germany and kind of lived on the surface and didn't think much, had no goals except to just to raise the kids. When we got back state side, my husband and I, he processed out of the military and then we had to make some decisions because his earning capacity wasn't as great. I had to do something and I couldn't do nursing. I had my GI Bill so I went to school, first majoring in nursing and then, realizing that was a bad choice, wound up somehow in the field of social work. I couldn't tell you how. I guess the people that I met thought that it would be good to be away from the blood and guts nursing, but still into the psychiatric field (which I really had a lot of background in from Vietnam from dealing with my staff). So ultimately I got a Masters Degree in Social Work. I did my bachelors and masters (I only started with six credit hours). I did them both in two and a half years. Talk about your "type A", driven, take no prisoners [personality].

Kent:

And raising your family...

Mrs. Prescott:

And raising the kids and cooking for my husband and cleaning the house. [laughter] I wound up working in social work, specializing in psychiatric social work. This was through the years. This was not an instant transition, but as the kids got older I learned to do psychological testing and ultimately became a licensed clinical social worker and received Diplomate Status (which means I could practice as a clinician without the need of a psychiatrist over me). I wound up healing but on a different level, no blood and guts but the mental aspect of it, and was very good at it.

Kent:

What would your case load have been like?

Mrs. Prescott:

I worked several places. A state [psychiatric] hospital was the first big place. I worked admissions. It wasn't that heavy, it was a busy day but my job was to assess new people who came in off the streets that were very crazy. They usually were [legally] committed. I assessed them and set up a treatment program for them with a psychiatrist. I was able to do it. I had no fear of these people; I always seemed to be able to get to the little thread of sanity that was in them. I guess it was a skill I got in Vietnam. I did good accurate assessments and did group therapy with a psychologist and just had a very fulfilling year; it was very successful. Then I moved on to the Veteran's Administration where I vowed I would never work, because at this point I did not care for our government and how it operated. From there I moved on to the Vet Center System where I was a therapist. That I

did for a number of years. Then on the side [laughing] back to the "type A personality" that my poor children endured, I entered private practice. I was working two jobs.

Kent:

Tell us about the, um I don't have it here [pause] the Vet Hospital where your group of friends...

Mrs. Prescott:

OK. I worked at several V. A. s [hospitals] in medical social work and then gravitating toward clinical social work that I had the background in. I met friends along the way; one turned out to be a nurse who stayed in nursing with the V.A. who had also been in Vietnam, but in a different kind of situation. I also (OK this before) was married to a Vietnam vet. (His life came to an end about nine years into our marriage so I was out in the market place again dating.) By now and my children were kind of middle school age. I met a fellow through a friend who was a Vietnam vet who was single and we dated. His job was what they called a "Service Officer" for the county. He told me that he was going to take me (because I needed to go) to a Vet Center to meet some Vietnam Nurses.

So I went with him because I was dating him and I trusted him and I was going to meet these people. Well, lo and behold that was a Vet Center where indeed, nurses from Vietnam were. They were from all over Pennsylvania, they had all somehow gravitated to this one area and there was a [therapy] group for them. Once I got there I realized that I was "home" and I needed to be there. That started my personal treatment, being in therapy. [See letter to Eleanor July 7 1991] Meanwhile I was working at a Veteran's Administration a few, quite a few miles from there. As I was in therapy concurrently, I started allowing the Vietnam vets who just sort of "sniffed me out" to come into my office and talk about their war experiences. I'm not sure how it evolved, but it was concurrent, and as I was healing I realized that I could help with some of these others that seemed to come to me. So this opened a whole new track and led to my employment at the Vet Center where I actually became an official therapist for Nam vets with PTSD [Post-Traumatic Stress Disorder].

Kent:

This book, [points to book] The Other Kind of War Story, was a labor of love.

Mrs. Prescott:

It was a happy accident. When I became engaged as a client at the Vet Center with these other Vietnam nurses, we enrolled in our group and it was sort of formatted situation. At some point the group [therapy] was over, the work was done and we formally disbanded, but several of us kept in touch. We would get together once a month for coffee. Somewhere in those meetings one of the gals said, "You know, when I was in Vietnam I used to write these letters home, and I have them. Would you like to see them?" So she passed the letters around. They were pretty poignant and somebody said, jokingly, "Gee, you ought to publish that!" Then somebody else said, "Hey, when I was in Vietnam the War was winding down and I had time to keep a diary. Anybody want to see it?" So we passed that around. That was kind of heavy duty, but it was worth while to

read. Then I meanwhile had been writing poetry (not that I knew how to write poetry) but I used to when I got really funky I would just sit down and write stuff and stash it some place in a book. So I said, "I have some of these bizarre, dark poems, do you want to see them?" [They said,] "OK". As it turned out, all of us had written from Vietnam on. It was something we all had done. It was all heavy duty, but not bad stuff. As we passed it around and edited it we had enough to put into a book. We looked for a publisher but could not find one. The War was still very unpopular and writings about it were not marketable. There was a vo-tech high school in the area and they had a printing program. The teacher in that program had his own equipment to print and for a fee he offered to print our book for us.

We contracted with him and we had a book! We all chipped in money to pay for it and we just figured it was part of our therapy to unload the stuff into a tangible form and maybe somebody would read it someday. It was good for us. Little by little, as we stood on street corners and we gave speeches at schools, this and that, here and there (just the five of us) the books disappeared. They all got purchased. That was rewarding because not only had we put our thoughts; had we taken them out of our heads and put them on paper (which was therapeutic for us) but other people were obviously reading them and sending people back to get more and read them. We felt that we were doing some kind of a service. Perhaps there were Vietnam vets reading it and feeling better or relating to it or perhaps there were just people who were learning about the war whatever. The books were being sold and somebody was buying them; we were taking our pain and putting it into a good place out there in the world. A side thing is that we had pledged any profits we had achieved (tongue in cheek) to the Vietnam Women's Memorial, which is actually the nurses' statue. If anybody ever looks at it, it is clearly three nurses. So we did, we sold the books and the money we made from them after we got our money back that we put in, we gave it to the Women's Memorial. So through the years two of us, and then a third joined (out of the five) and we decided to get the book reprinted. It is now reprinted and we are selling them, individually.

Kent:

he article that was in the [Daytona Beach] News Journal a couple of years back [Nov 17, 2001] talked about your life experience, the title was, "The Final Healing". Was that an apt title?

Mrs. Prescott:

It was very apt. That was another happy accident. I retired to Florida, this was many years later and became involved in veteran's organizations. There is something called "The Moving Wall" which is a replica of the Vietnam wall that is in Washington and it travels. It goes to many, many cities all over the country. So it came to Daytona Beach, which is not too far from me and they always ask for volunteers. So I went down there initially just to pass by and do my grieving for the people I know who are on that wall. Always when I go to any wall I bring one of poems that is in the book and leave it at the appropriate panel. So I did this on this day. Later in the day I got engaged in volunteering, running the computer and helping other people who came to see the wall find their people. I was working near the wall, but meanwhile my poem was meanwhile

laying down there. A gentleman came up to me and he asked for a name, so I pulled it up from the computer. He was just looking at me (I thought) strangely, there was something in the air. I had this horrible feeling that he knew my friend from Vietnam who was killed, Eleanor. So I asked him, because that was the name that he asked me to pull up. He said, "Not exactly, but I feel as if I did because I just read a poem that was by the panel and I understood that you wrote it." Actually, he turned out to be a reporter, who picked up the poem and was touched by it and decided to do a story. Over the period of a couple of years he put together the story and, in the process, was budgeted [through his newspaper] so he could contact Eleanor's family for me (which I was unable to do, although I had tried).

The culmination was that Eleanor's brother and I talked. With us talking, we were able to fill in the missing pieces of how it was that she got on the plane that day instead of me and what she felt about having that assignment. What I learned was that she wanted so very badly to go on that assignment that she not only verbalized that to me but she had a number of people on her behalf to arrange that if it were it at all possible she would go in my place. So she in fact grabs my stuff, somebody "leaned" on my supervisor to get orders cut in her name. Even though I was a stone's throw away and she knew where I was, she wanted to go. She manipulated it so that she did indeed go because she wanted to. Her letters home from that duty assignment were that she was where she wanted to be and that she was happy that she got there. So by getting her letters, talking to her brother, finding out what was really in her mind, I realized that she was the one who was indeed meant to go. [voice drops in volume and speed] She wanted to go and I had nothing to do with it. So my guilt was taken and I know that she died, happy. That was the healing for me and hopefully for her family.

Kent:

Thirty years to get the answers to those questions.

Mrs. Prescott:

Yes, thirty some odd years. This man [reporter Derek Catron] dropped into my life out of nowhere and was touched and [he] did a beautiful story, did the research and did more for me (and probably for Eleanor's family) than any therapy was able to do.

Kent:

That is a great story!

Mrs. Prescott:

A great story, a true story.

Kent:

So you continue to be involved in veteran's groups.

Mrs. Prescott:

I do, I belong to almost all of them. There is a Disabled American Veteran's organization right here where I live, about a mile and a half from where I live. I became

active there when I moved to Florida and worked up through the offices and actually became their commander and commanded that organization for about a year and a half. Now the torch is passed. I continue to do other things for veterans organizations, I've taught classes on Vietnam in high schools where I've been asked. I continue to write. I just now had published another piece in Chicken Soup for the Nurse's Soul book. I have my poems everywhere and so I am just involved in that way. It helps me and hopefully it helps any other people who had any touch in that war, or even in another war that haven't finished their own grieving.

Kent:

What do your children think of your service?

Mrs. Prescott:

My children grew up hard. [see poem by daughter Maureen Williams Southorn]They were raised by a single parent because their Dad was a Vietnam vet. He was one of those Vietnam vets that didn't get into therapy and indirectly took himself out. He was one of those. There are fifty eight thousand, two hundred and some names on the wall, killed in action. There are at least twice that many who have either committed suicide or have managed to get themselves killed who are not on that wall. My husband was one of them. The children were very young when that happened, so they grew up with a single parent who was very "type A", take no prisoners type of personality. It was hard for them. Now they are all adults and have children of their own and we have talked and they have been to the wall. In fact, my son was the one that took me to the big wall when he was thirteen. He took it upon himself to get me there. All the kids have turned out well. They are extremely mature for their age. They have all traveled a lot, they work in helping professions, so they are really very centered. They had it tough, but they turned out really well.

Two of my kids have been in the military and one of them is a girl. We keep the tradition going, so I guess coming around we still support our country. We love it and we do what we can. Although things are imperfect at times (to say the least) we believe that we are lucky to be American and our job is to go ahead and promote that wherever we can.

Kent:

Well, thank you so much for sharing your story with us, I know it wasn't an easy thing to do, but I think it is an important thing to do.

Mrs. Prescott:

Thank you for the opportunity, I hope that this story gets out with many others, especially to young people who need to learn what the wars are about in light of the fact that the history books have so very little in them.

Kent:

I think that is the whole thrust of the Veterans' Project through the Library of Congress is to do exactly that.

Mrs. Prescott:

Well, it is wonderful and the people who have put up the money for this have done truly a tremendous deed.

Kent:

OK, we'll wrap it up.