

Circa 1970 how many medical bases in Vietnam had medevac units (such as Binh Thuy)? Also, were they called "medivac bases"? What the terminology (not lingo, formal names)?

Two things matter for your question: **(1) how many U.S. medical facilities in Vietnam actually hosted helicopter-ambulance (“Dustoff”) units around 1970**, and **(2) what the *formal* terminology was**. The sources we have give detailed listings of medical units and how evacuation was organized, but they do **not** use the term “medivac base” as an official designation.

What counted as a “medevac location” in 1970?

By 1970, U.S. Army medical support in Vietnam was organized under the **44th Medical Brigade** until March 1970, and then under the **U.S. Army Medical Command, Vietnam (USAMEDCOMV)**. Medevac helicopters were not tied to “bases” in the sense of dedicated medical airfields; instead, they were assigned to:

- **Medical battalions**
- **Medical groups**
- **Division aviation battalions**
- **Air ambulance companies (“Dustoff” units)**

Medical facilities—field hospitals, evacuation hospitals, surgical hospitals—were spread across the country, and many had co-located or supporting medevac detachments.

The listings of medical units active in 1970 include dozens of hospitals and surgical units across all Corps Tactical Zones. Examples include Nha Trang, Qui Nhon, Pleiku, An Khe, Tuy Hoa, Chu Lai, Lai Khe, Quang Tri, Cam Ranh Bay, and others.

However, **the sources do not enumerate which of these had permanently based medevac aircraft**. Medevac units were often *attached*, *supporting*, or *co-located*, but not always permanently stationed at each hospital.

What we *can* say from the official medical history is that **five separate helicopter ambulance companies** operated in Vietnam, providing area coverage rather than base-specific service. Each company had multiple detachments spread across the country.

So the number of “bases with medevac units” is **larger than five**, because each company had multiple forward locations—but **there is no official list of “medevac bases”**, and the term itself was not used.

What were they *officially* called?

The formal terminology used by the U.S. Army was:

1. “Air Ambulance Company” or “Air Ambulance Detachment”

This is the official unit type for helicopter medevac (“Dustoff”) units. Example: *57th Medical Detachment (Helicopter Ambulance)*.

2. “Helicopter Ambulance”

The official doctrinal term for the aircraft and mission. The Army’s medical history refers consistently to “helicopter ambulance” units, not “medivac bases.”

3. “Medical Battalion” / “Medical Group”

These were the headquarters controlling air and ground evacuation assets. Examples:

- 61st Medical Battalion (Nondivisional)
- 70th Medical Battalion
- 43rd and 55th Medical Groups

4. “Evacuation Hospital,” “Field Hospital,” “Surgical Hospital”

These were the fixed medical facilities that medevac aircraft delivered patients to. Examples:

- 71st Evacuation Hospital (Pleiku)
- 8th Field Hospital (Nha Trang)
- 18th Surgical Hospital (Pleiku → Lai Khe → Quang Tri)

5. “Dustoff” (informal but widely used)

This was *lingo*, not a formal designation, but it appears in official histories as a nickname.

What they were *not* called:

- Not “medivac bases”
- Not “medevac bases”
- Not “medical air bases”

No official documentation uses these terms.

So how many locations had medevac units?

Because medevac companies operated detachments across all Corps Tactical Zones, and because hospitals were numerous, the number of locations with medevac presence was **dozens**, but not formally catalogued as “bases.”

What we can say with confidence:

- **5 helicopter ambulance companies** operated in Vietnam.

- Each company had **multiple detachments** spread across the country.
- These detachments supported **dozens of medical facilities**, including field, evacuation, and surgical hospitals.
- Medevac units were **assigned to regions**, not to specific “bases.”

Thus, the number of “bases with medevac units” is **not officially defined**, but the operational footprint covered **every major medical facility and many forward operating locations**.

✓ Summary (formal terminology)

Official terms:

- *Helicopter Ambulance*
- *Air Ambulance Company / Detachment*
- *Medical Battalion*
- *Medical Group*
- *Evacuation Hospital / Field Hospital / Surgical Hospital*

Not official:

- “Medivac base”
- “Medevac base”
- “Dustoff base” (informal only)

If you want, I can also:

- List the five helicopter ambulance companies and their known detachment locations
- Map out which hospitals were active in 1970
- Identify where Binh Thuy fits into this structure

What were the facilities in Chu Lai and Binh Thuy? What would a new nurse reporting for duty have been assigned to that involved triage for wounded soldiers brought in by helicopter?

Two things you’re asking for:

1. **What medical facilities existed at Chu Lai and Binh Thuy around 1970, and**
2. **What a newly arrived Army nurse would actually do—specifically in triage for helicopter-evacuated casualties.**

Below is a clear, sourced breakdown using the material returned in search.

1. Medical Facilities at Chu Lai (circa 1969–1971)

Primary U.S. Army Hospitals at Chu Lai

Search results show two major Army hospitals operating in Chu Lai during this period:

27th Surgical Hospital (MASH-type unit)

- Located at Chu Lai under the 67th Medical Group.
- Operational from April 1968 to June 1971.
- 110-bed capacity in 1969.

91st Evacuation Hospital

- Originally at Tuy Hoa; moved to Chu Lai on 1 July 1969.
- Functioned as a semi-mobile evacuation hospital.

Nursing experience at Chu Lai

A first-person account from a nurse stationed at the **27th Surgical Hospital in Chu Lai (Apr 1970–May 1971)** describes working in the ER and on wards treating traumatic amputations, fractures, shrapnel wounds, burns, and tropical diseases.

This confirms that Chu Lai had:

- A **Surgical Hospital** (27th Surg)
- An **Evacuation Hospital** (91st Evac)
- A functioning **ER receiving helicopter casualties**



2. Medical Facilities at Binh Thuy (Mekong Delta)

29th Evacuation Hospital

- Provided medical support to the **Can Tho – Binh Thuy** area.
- 237-bed capacity in 1969.
- Operational Aug 1968 – Oct 1969.

3rd Surgical Hospital

- Took over the Binh Thuy facilities after the 29th Evacuation Hospital was deactivated.

So by 1970, Binh Thuy was served by:

- **3rd Surgical Hospital** (in the former 29th Evac facility)

These hospitals supported helicopter evacuation from the Delta, where road movement was often impossible.

3. What Would a New Nurse Do?

If assigned to triage for helicopter-evacuated casualties

Based on the documented roles of nurses in Chu Lai and the structure of evacuation hospitals, a newly arrived nurse would most likely be assigned to:

Emergency Room (ER) / Triage Section

This is explicitly described in the Chu Lai nurse's account:

- She was assigned to the **ER**, where casualties arrived with gunshot wounds, burns, fragmentation injuries, traumatic amputations, and more.

Typical duties in triage/ER included:

- Receiving patients directly from **Dustoff helicopters**
- Rapid assessment of airway, breathing, circulation
- Prioritizing patients for surgery (“triage sorting”)
- Starting IVs, administering fluids and blood
- Stabilizing fractures and controlling bleeding
- Preparing patients for immediate surgery
- Coordinating with surgeons, anesthesiologists, and medics
- Managing overflow during mass-casualty events

Why ER/triage was the likely assignment

Evacuation and surgical hospitals were designed around rapid helicopter evacuation. The ER/triage area was the **first stop** for nearly all incoming wounded. New nurses—especially those with medical-surgical or emergency backgrounds—were frequently placed there because:

- The casualty load was heavy
- The need for skilled hands was constant
- Triage was the critical bottleneck in the system

This is consistent with the firsthand accounts and with the structure of Vietnam-era medical support described in the Army's official medical history.

Summary

Chu Lai (1970)

- **27th Surgical Hospital** (MASH-type)
- **91st Evacuation Hospital**
- Both received helicopter casualties; ER/triage was heavily used.

Binh Thuy (1970)

- **3rd Surgical Hospital** (in former 29th Evac facility)
- Supported by Delta-region Dustoff missions.

New nurse's likely assignment

- **ER / triage section**, receiving helicopter-evacuated wounded
- Duties included rapid assessment, stabilization, and preparing patients for surgery.

If you want, I can also map out:

- The exact layout of a Vietnam-era triage/ER section
- The workflow from helicopter landing pad → triage → OR
- What uniforms, equipment, and daily routines looked like for nurses in these hospitals

How many bases total were under the 44th Medical Brigade?

The 44th Medical Brigade did **not** control a fixed number of “bases.” Instead, it commanded a **large network of medical units**—hospitals, medical battalions, medical groups, air-ambulance detachments, and support units—spread across every Corps Tactical Zone in Vietnam.

Because your question is about “**how many bases total were under the 44th Medical Brigade,**” the closest historically accurate answer is:

The 44th Medical Brigade commanded *dozens* of medical units across Vietnam, distributed across many locations, but no official source defines a fixed number of “bases.” The Army did not use “medical base” as a formal category.

Below is what we *can* say from the sourced material.

What the 44th Medical Brigade Actually Controlled

The 44th Medical Brigade was the **theater-level medical command** for U.S. Army forces in Vietnam from 1966 to 1970. It oversaw:

- **Medical Groups** (e.g., 43rd Medical Group, 55th Medical Group)

- **Medical Battalions** (e.g., 61st Medical Battalion, 70th Medical Battalion)
- **Evacuation Hospitals** (e.g., 71st, 85th, 91st Evacuation Hospitals)
- **Field Hospitals** (e.g., 8th, 9th, 17th Field Hospitals)
- **Surgical Hospitals** (e.g., 2nd, 18th Surgical Hospitals)
- **Convalescent Centers** (e.g., 6th Convalescent Center)
- **Helicopter Ambulance (Dustoff) units** (under medical battalions and groups)

These units were spread across **every major U.S. Army installation** in Vietnam—Cam Ranh Bay, Qui Nhon, Nha Trang, Pleiku, An Khe, Chu Lai, Quang Tri, Da Nang, Long Binh, and many more.

The Brigade headquarters itself moved from **Saigon** to **Long Binh** in 1967.

Why There Is No Official Count of “Bases”

The U.S. Army did **not** categorize medical locations as “bases under the 44th Medical Brigade.” Instead:

- Medical units were **assigned to tactical zones**, not to the brigade’s own bases.
- Many units were **semi-mobile** and moved during the war.
- Hospitals often relocated (e.g., 91st Evac moved from Tuy Hoa to Chu Lai in 1969).
- Medevac detachments operated from **multiple forward locations**, not fixed bases.

Thus, the number of *locations* where 44th-controlled units operated is **larger than the number of units**, and it changed year by year.

What We *Can* Quantify

From the unit lists in the Vietnam medical order of battle, the 44th Medical Brigade oversaw at least:

- **2 Medical Groups** (43rd, 55th)
- **Multiple Medical Battalions** (61st, 70th, etc.)
- **10+ major hospitals** (field, evacuation, surgical)
- **Convalescent centers and support units**
- **Air ambulance detachments across all Corps zones**

Each of these was located at one or more **bases**, meaning the total number of bases involved was **dozens**, not a small fixed number.

But **no official source defines a total count**, and the Army did not track them that way.

✓ Bottom Line

There is no official number of “bases under the 44th Medical Brigade.” What we *can* say from the historical record is:

- The Brigade commanded **dozens of medical units** across Vietnam.
- These units operated from **many bases**—likely **30+ distinct locations** over the course of the war.
- The Army did **not** use “medical base” as a formal category, so no authoritative total exists.