

Can you keep her in the Twin Cities past late summer 1968 so she can attend the 1968 Democratic Convention and have her then complete her RN and enter the Army? Just delay everything realistically. My story calls for her to volunteer as a triage nurse during the 1968 turmoil in Chicago and not to go to Vietnam until early 1969.

Absolutely — you can **realistically keep her in the Twin Cities through late summer 1968**, have her **volunteer as a triage nurse during the 1968 Democratic National Convention**, and delay her Army Nurse Corps commissioning and deployment until **early 1969**. Below is a fully adjusted, historically grounded timeline that preserves the integrity of nursing education, licensure, and Army procedures.

Revised Training & Deployment Timeline (Spring 1967 → Early 1969)

(Designed so she is still in Minnesota through August 1968 and in Chicago for the DNC turmoil.)

Spring 1967 — Leaving College & Entering Nursing

• She withdraws from the University of Minnesota. • Applies to **St. Brigid's Hospital School of Nursing** accelerated diploma program. • Admissions interview with: – A stern Sister-administrator – A civilian RN instructor • Accepted for the **Fall 1967 accelerated cohort** (this is the key shift — she starts later).

Fall 1967 — Program Begins (September Start)

She begins her accelerated diploma program in **September 1967**, which pushes everything forward by several months.

She completes: • **Nursing fundamentals** • Basic skills labs • Intro pharmacology • First supervised patient care

This is her emotional “shock” phase.

Winter 1967–68 — Core Clinical Rotations

She rotates through: • **Medical-surgical nursing** • **Operating room nursing** • **Emergency department**

She begins showing aptitude for trauma and rapid decision-making.

Spring 1968 — Advanced Coursework

She completes: • Pathophysiology • Advanced pharmacology • Psychiatric nursing • Night shifts

Key emotional moments: • First patient death • First code • First moment of “I can do this”

Summer 1968 — Final Rotations (She Is Still in the Twin Cities)

She is still in school and **cannot graduate yet**, which keeps her in Minnesota.

She completes: • Pediatrics • Obstetrics • Public health • Leadership/charge nurse training

She **begins** Army Nurse Corps paperwork but cannot finalize anything until she graduates and passes boards.

Late August 1968 — Chicago Democratic National Convention

Because she is still a student nurse, she can:

- Travel to Chicago with classmates, activists, or on her own
- Volunteer as a **triage nurse** with:
 - The Medical Committee for Human Rights
 - Local hospitals overwhelmed by protest injuries
 - Makeshift first-aid stations near Grant Park

This is a major turning point in her character arc — she sees real trauma, police violence, and mass-casualty chaos for the first time.

It also cements her desire to join the **Army Nurse Corps**, believing she can help in Vietnam.

Fall 1968 — Graduation

Because she started in Fall 1967, she now graduates in **October or November 1968**.

This is historically plausible: • Many diploma programs had **15–18 month accelerated tracks**. • A fall 1967 start → late 1968 finish fits perfectly.

December 1968 — State Board RN Exam

The State Board Test Pool Examination was offered only a few times per year.

She takes the exam in **December 1968** and receives results in **January 1969**.

January 1969 — Commissioning as a Second Lieutenant

Once she receives her RN license:

- She is commissioned into the **Army Nurse Corps** • Completes ANC orientation (not boot camp) • Receives immunizations, uniforms, and paperwork • Waits for deployment orders

This processing period often took **4–8 weeks**, which naturally pushes her deployment into early 1969.

February–March 1969 — Deployment to Vietnam

She finally receives orders and ships out.

Possible assignments: • **The 12th Evacuation Hospital** • **The 95th Evacuation Hospital** • **The 3rd Field Hospital (Saigon)** • **The 67th Evacuation Hospital (Qui Nhon)**

Arrival in Vietnam: **early 1969**, exactly as your story requires.

Why This Timeline Works Perfectly

- She stays in Minnesota through **August 1968**. • She is free to be in Chicago for the **1968 DNC turmoil**. • She graduates **after** the convention. • She takes boards in **December 1968**. • She enters the Army in **January 1969**. • She deploys to Vietnam in **early 1969**.

Could she wind up in Binh Thuy?

Yes — **she absolutely could end up in Binh Thuy**, and it's a *fantastic* choice for story purposes. It's realistic, it fits her skill set, and it gives you a dramatically different environment

than the big evacuation hospitals. Let me break down why it works and how to place her there authentically.

Could an Army Nurse Corps RN be assigned to Binh Thuy?

Yes. Binh Thuy Air Base (near Can Tho in the Mekong Delta) hosted:

- A U.S. Navy Support Activity
- A Navy Dispensary / Sick Bay
- A small surgical/trauma capability
- A joint-service medical presence
- A busy airfield used for medevac, riverine operations, and SEAL teams

While the Army did not operate a large hospital *on* the base, Army nurses were **routinely cross-assigned** to:

- Navy medical facilities
- Joint medical detachments
- Provisional surgical teams
- Medevac support units
- Delta-region stabilization points

This was especially common in **1968–1970**, when staffing shortages were severe.

So yes — she can be Army Nurse Corps and still serve at Binh Thuy.

Why Binh Thuy Makes Sense for Your Character

It fits her background perfectly:

1. She has trauma/triage experience from the 1968 DNC

That makes her ideal for a smaller, high-intensity medical post.

2. Binh Thuy handled a lot of “first stop” casualties

Wounded from:

- Mekong Delta firefights
- Riverine operations

- SEAL missions
- Airbase attacks
- Medevac flights inbound from remote outposts

She would stabilize patients before they were flown to:

- **3rd Surgical Hospital (Dong Tam)**
- **29th Evac (Can Tho)**
- **93rd Evac (Long Binh)**
- **3rd Field Hospital (Saigon)**

This gives you constant tension and rapid-fire medical scenes.

3. It's a smaller, more intimate setting

Unlike a huge evacuation hospital, Binh Thuy's medical facilities were:

- Tight quarters
- Understaffed
- Improvised
- Constantly under threat

Perfect for character-driven storytelling.

How She Gets Assigned There (Realistic Path)

1. January 1969 — Commissioned as a 2LT

After passing boards in late 1968.

2. February 1969 — ANC orientation

Short course, uniforms, immunizations.

3. March 1969 — Deployment to Vietnam

She arrives at:

- **3rd Field Hospital (Saigon)** for in-processing or
- **93rd Evac (Long Binh)** for temporary duty

4. April 1969 — Reassignment to Binh Thuy

This is historically plausible because:

- The Delta region was chronically understaffed
- Navy medical units often requested Army nurses
- Joint-service assignments were common
- Nurses with trauma aptitude were in high demand

She could be sent as:

- A **temporary duty (TDY)** nurse
- A **permanent change of station (PCS)**
- A **loaned Army nurse** to a Navy medical detachment

All historically accurate.

What Her Work at Binh Thuy Would Look Like

She would likely serve in:

- **The Navy Dispensary**
- **A small surgical/trauma bay**
- **A stabilization ward**
- **Medevac intake**
- **Riverine support medical station**

Her duties would include:

- **Triage**
- **Shock management**
- **Burn care**
- **Emergency surgery prep**
- **Stabilizing casualties for evacuation**
- **Treating malaria, dysentery, and tropical infections**
- **Caring for local civilians and ARVN troops**