Laura Calkins: This is Dr. Laura Calkins of the Vietnam Archive at Texas Tech University. I am initiating an oral history interview with Dr. Jim Evans, a Veteran of the U.S. Army. Today’s date is the 12th of April 2004. I am in the Interview Room on the campus of Texas Tech in the Special Collections building. Dr. Evans is in Dallas. Good morning, sir.

James Evans: Good morning.

LC: I would first like to get some basic biographical data from you. Can you tell me where you were born and when?

JE: I was born in Ft. Worth, Texas 11-23-43.

LC: Do you have siblings, Jim?

JE: I have a younger brother. David is four years younger.

LC: Tell me a little bit about your parents. First of all, your dad. What was his name and what did he do?

JE: My father was Floyd Louis Evans. He was an accountant in Ft. Worth. He managed a small office building.

LC: He had been an accountant all of his life. How had he trained for that?

JE: He did not have a complete high school education. He was educated in Ft. Worth in night school. He started in the 1920s as an office boy. Went to a variety of business [schools] in Ft. Worth and eventually became an auditor and an accountant.
LC: So he was a self made man, is that fair?

JE: Pretty much. He grew up on a farm. Although he never said it, always said his motto was ‘I will never go back to the farm’.

LC: Really. Where was he born?

JE: He was born just west of Hillsboro in Hill County, Texas.

LC: What about your mother, what was her name?

JE: Her name was Celestine Nora Wansley. She was born in Lindale, Smith County, Texas.

LC: Into what kind of family was she born?

JE: Actually it was like a rural family, but her father and family moved to Ft. Worth about 1920. Her father was a mechanic who worked for Texas Power and Light Company.

LC: What about her mother?

JE: Her mother was a housewife. Was born in, well Pittsburg, Camp County, Texas.

LC: Did your mother work outside the home at all?

JE: My mother had like two years of college. She had worked before she and dad got married. Briefly she had a business she tried to start in early 1950 of infants and children’s apparel. It lasted probably a year or two at most.

LC: Was that in Ft. Worth?

JE: In Ft. Worth.

LC: Was there any military experience to speak of on either side of your family?

JE: My father did not serve in World War II. The story was that he was too old. He had a family and he was in a critical business. He was involved also in oil and gas business. However, I’m not sure about that. I’m rather suspicious because I have an article that said he had a very low draft number. I’m not sure what went on with that because my family, they basically didn’t talk about much of anything. I had one uncle, my father’s brother, was in the U.S. Cavalry in the 1930s.

LC: Do you know much about that service?

JE: No. That’s all I know.

LC: Now I know from speaking with you earlier that you’re a genealogist.
JE: Yes.

LC: Is there military service further back in line at all, on either side?

JE: You know like the Civil War.

LC: Sure. What states?

JE: Predominately from the South like Georgia, Texas.

LC: But none of that kind of came down to you through your own family’s oral traditions?

JE: No.

LC: Jim, tell me about your early schooling. Did you attend public schools in Ft. Worth?

JE: I attended public schools in Ft. Worth. I lived in the Riverside Area of Ft. Worth. Started public schools after kindergarten. A lot of the people I was with, I was with for 12 years.

LC: What kind of a neighborhood is Riverside? Or was it at that time I should say.

JE: I lived actually in the part called Oakhurst. It was like middle class. Everybody pretty much was the same. Nobody had a lot. There were a few families that were very wealthy but very, very few. It was pretty average. Most of the parents did not have a college education.

LC: Was it exclusively white?

JE: Yes, it was white. At first I sort of think about my neighborhood. You know, that it was somewhat traditional but I also realized a lot of immigrants in the area. There was Mrs. Gibb who lived across the street who was from Germany. She was the grandmother. Down the street there was Mrs. Kosici, who was from Finland. Then around the corner there was four or five families that we knew. The Greeks. They were farmers, like truck farming, in the Trinity River bottomlands.

LC: What kinds of agriculture crops were out there just for someone who is not familiar with the area?

JE: I think like lettuce, tomatoes.

LC: Where there tensions, do you remember around people who were different?

Kids of immigrants or was it kind of more a melting pot sort of area?
JE: It was pretty much a melting pot. I think the Greek family names was like Barto or Bartos. We very rarely saw them. They were on a side street that was a dead end. Those children didn’t play with the rest of the neighborhood. I didn’t feel any tensions about that.

LC: Were there religious differences, maybe some people were Catholic or Eastern Orthodox, or do you know.

JE: The Bartos I really don’t know. Harrison’s that lived across the street were Roman Catholic. The Gibb’s were Roman Catholic. My family was Presbyterian. That was really not an issue.

LC: Did you go to church as a kid?

JE: I went to the First Presbyterian Church in Ft. Worth.

LC: That was something that your parents did as well?

JE: Yes.

LC: Tell me about the public schools. Did the school have a name that you attended?

JE: Elementary School was Oakhurst. The junior high was Riverside Junior High and the high school was Amon Carter-Riverside.

LC: What kind of student were you Jim?

JE: Probably A, A-.

LC: Were the studies easy for you? Were there certain subjects you liked particularly?

JE: I studied but I did very well in virtually everything. It was probably relatively easy, looking back.

LC: Were your parents encouraging of your academic work or did they kind of take it in stride?

JE: Well the way it worked out. They didn’t have to encourage me because I just always did what I had to do. My brother was not; I mean he was probably just average. I really sort of felt like they didn’t want me to shine because it would embarrass my brother. So that was always sort of a subtext part of the relationship.

LC: Did your brother actually feel embarrassed or did you guys kind of work that out as you got toward high school?
JE: Well I think he was subject to a lot of comparison. I had done very well and he was struggling. I think there was a certain amount of tension. We never were very close and still aren’t. In fact I finally just had to sort of divorce my family because they were not emotionally supportive in different ways. That was a very hard decision to make but actually I’m very happy that I did it.

LC: At what point did you kind of take that decision?

JE: About four or five years ago.

LC: Jim, did you participate in extracurricular at school, say high school, like student government or sports or debate or was there anything like that for you there?

JE: I was in the band. Played clarinet.

LC: Were you in the band all four years?

JE: Yes.

LC: So you went to, I presume, football games and all that kind of thing?

JE: Oh yeah.

LC: Was band like a specific group? I know my whole high school, the band people kind of hung together. Was that sort of your social group as well?

JE: I was probably closer to the people who were not in the band.

LC: Really? Were you always anticipating that you would go to college?

JE: Yes.

LC: Did your parents play a role in that or again was that kind of under your own steam you were thinking of that?

JE: Well I was determined to get away in the sense of succeeding emotionally and professionally. They were very encouraging I think about college and medical school. They paid for all my expenses.

LC: Jim, where did you actually go and why did you choose to go there? This is as an undergraduate?

JE: I planned to go to Rice but I did not get in with the first round of acceptance. One of my father’s friends had graduated from first class at Rice and I think he intervened but I decided I really didn’t want to go there. One of my classmates wrote in my annual, he was the son of a state senator. He said all you have to do to get into Rice is ‘pull.’ He got in and I didn’t. I thought, ‘I don’t want to go there.’
LC: Because of that kind of attitude or climate?

JE: That and actually people I met from Rice I’m pretty glad I didn’t go. I went to TCU. I really feel like I got a superb education there. Classes were small, professors were excellent, and I graduated in three years.

LC: I should just clarify the year of your high school graduation.


LC: What high school did you graduate from?

JE: Amon Carter-Riverside.

LC: And you graduated from TCU then in 1964, is that correct?

JE: Yes.

LC: What was your major?

JE: It’s called Combined Science.

LC: Was that pre-med?

JE: Basically pre-med. No, let’s back up. My major was Psychology. The minor was Combined Science; it was Chemistry, Biology, and Physics.

LC: So you were a Psych major?

JE: Correct.

LC: Did you have it in your mind that you wanted to get into medical school?

JE: In the sixth grade I wrote that I wanted to be a scientist, but by high school I realized I wanted to go to medical school.

LC: What clarified things for you along that line?

JE: Well I think one of the reasons I wanted to go to medical school was the scientific interest and seeking explanations, being helpful.

LC: So it was sort of internally driven reasons rather than I could make a good living or that sort of thing.

JE: Well that was part of it. My parents emphasized being practical. I always painted but they didn’t really encourage me to do that.

LC: To be an artist or to pursue that professionally.

JE: No, because it wasn’t practical and I think they are right. I have certainly been able to pursue that on the side.
LC: And I want to talk to you about the artistic piece of who you are and that sort of element a little bit later on if you’re ok with that.

JE: Ok. Sure.

LC: Jim, tell me about TCU at the time you were there in the early ‘60s. How big was the school? What was the tenor of the curriculum that you encountered? What went on on campus, can you remember any of those things?

JE: The school at the time probably was like 7,000 people. I mean it was not that large. Classes were fairly small. It was pretty homogenous in the sense of our backgrounds were pretty much the same. I don’t remember any African-Americans. There were a few Hispanics. I was not in a fraternity so I was not involved in that.

LC: Would it be fair to say that you were pretty much flat out pursuing the curriculum and working toward that early graduation?

JE: Right. It partially just sort of happened because I didn’t listen to my counselors.

LC: What did they say that you didn’t listen to?

JE: They actually didn’t read the catalog. They were making recommendations and I read the catalog and I knew what I had to do to get through. When I couldn’t get summer jobs then my parents said, ‘Go to school.’

LC: Ok so you stayed in during one or two summers?

JE: It was like three summers. I started immediately after graduation of high school.

LC: Oh really.

JE: Yes.

LC: So you started in the summer term of ’61?

JE: ’61.

LC: So there was not a lot of time elapsed between graduating high school and beginning college then for you?

JE: No.

LC: Were you able to get through college then without taking on sideline employment?
JE: I did work probably the beginning of my second year at Cook’s Children’s 
Medical Hospital.
LC: This is when you worked in the laboratory?
JE: Worked in the laboratory.
LC: Can you talk about what you did?
JE: Did finger sticks or drew blood. Did complete blood counts.
LC: So like Med-Tech?
LC: Did you enjoy doing that?
JE: Yeah, it was good. Sort of the practical. You’re getting experience and seeing 
what part of medicine was like.
LC: How did you come by that position?
JE: I think it was probably through Dr. May Owen. Who was a pathologist with 
Terrell Laboratories and Terrell Laboratories ran the lab at Cooks Children’s. She was 
very supportive of people who wanted to go to medical school. She was probably one of 
the very early women graduates of medical school [in Texas].
LC: Where had she gone, do you know?
JE: I’m not sure. Probably Galveston. She was just very supportive of anyone 
who wanted to go.
LC: Was she on the faculty at TCU as well?
JE: No.
LC: How did you meet her?
JE: Probably through, my father knew Dr. Bradshaw who is head of Public Health 
in Tarrant County. That may have been the way I got to Terrill Laboratories. I’m not 
exactly sure of the connections. She wrote letters of recommendation for people in 
college. I suspect she probably supported people financially. She lived very frugally and 
she lived in Blackstone Hotel in Ft. Worth. Just had a few dresses. She worked until she 
was like 98.
LC: She sounds like a very, very interesting character.
JE: Yes, I think she was.
LC: How do you spell her last name Jim, do you remember?
JE: O-w-e-n. The Tarrant County Community College district, there’s a building in downtown Ft. Worth that’s named after her.

LC: Really? Ok. That’s interesting too. Would you classify her as a mentor of yours or was she sort of more generally available to a lot of people?

JE: I think she was more generally available to a lot of people.

LC: Did you spend much time with her?

JE: Not that much.

LC: But she was a figure.

JE: Oh definitely. I think if there would have been, if I had a need, she certainly would have been there.

LC: That’s a good feeling too, even if you never have to call on it. Jim, during the time that you were an undergraduate the President was assassinated here in Texas. I wonder if you recall that?

JE: It was like Friday and I had finished the [chemistry] lab and my father had picked me up at one at TCU because I was going to work at the Cook’s Children’s. He said, ‘The President’s been shot in Dallas.’ It was really stunning. This was my third year of college and the next day I had my medical school interview at Southwestern in Dallas.

LC: Oh gee, really?

JE: So I came over here. The medical school was pretty much closed down. Parkland was pretty much closed off. They didn’t want people just wandering around over there. So I mean it was very immediate because being here in Texas but the next day here I am in Dallas at Parkland Hospital.

LC: With business to attend to of your own.

JE: Yes.

LC: Did you actually drive up to Parkland to see if you could get into where you needed to be?

JE: No, I drove up to the medical school. That’s where the interviews were going on.

LC: Now spatially where was the school in relationship to the hospital?
JE: Well it’s within a block. It’s basically one building. I mean there are several buildings that are interconnected. What I remember is that we had lunch with Dr. Gregory who is an Orthopedic Surgeon who looked after John Connally.

LC: Do you remember much about that lunch?

JE: Yeah, as a matter of fact. Dr. Gregory didn’t say, as I remember, much about it. It’s sort of strange what you remember, like we had blueberry muffins.

LC: And your dad was accompanying you, is that right?

JE: As I remember I drove over to Dallas myself.

LC: Ok, so you were on your own.

JE: He picked me up at TCU on Friday the 22nd.

LC: Did you notice as you were, I don’t know trying to find a place to park or walking to the school from your car, did you notice security around? Could you tell something had gone on? Was it still kind of a heightened sense of if you want drama or upset in the vicinity of the hospital?

JE: Not really. I think because the medical school was pretty much closed down so the parking lots were pretty widely open. I’m sure if you’re trying to get to Parkland, the parking lots would have been a very different situation. They told us that normally we would take you through some of the medical floors in Parkland, however because what’s happened it’s off limits today.

LC: Were there people, to your recollection, kind of milling around and almost sort of memorializing what had happened the day before or did you not see anything like that?

JE: I didn’t see anything like that.

LC: Where did you go after your meeting with Dr. Gregory?

JE: I think with that the interviews were over and that was the end of the day.

LC: Did this congruence of events kind of shake you up a bit Jim?

JE: Oh I was crying on the 22nd. I was pretty upset.

LC: Did you have a political or personal affinity to the President? How did you feel? You said you were upset.
JE: I just thought it was an incredible tragedy of the President being killed.

Probably as much as anything, at the time I was Republican so I think I liked him personally, the way he appeared to be, but maybe politically it was not where I was.

LC: Did you in the end choose to attend Southwestern?

JE: Yes.

LC: Or did they choose you or how did it work?

JE: I was accepted at Galveston also and I think I ended up going to Southwestern because it’s closer to home. It was not an easy decision because either one of them I could’ve got in to. I got small scholarships from both places.

LC: Was there any curricular preference that you had? Any dimensions to the programs that were special at Southwestern?

JE: At that time the medical schools were pretty much the same.

LC: What about the faculty? Any particular persons there that you were interested in working with or that you knew about?

JE: No.

LC: What really did govern your decision? Was it location?

JE: It was probably just location as much as anything.

LC: Did it turn out to be a good decision for you Jim?

JE: Yes I think I got a superb education. My initial impression was that Galveston was a much warmer place. I think in the sense emotionally people had a sense of community down there. They were on the island. The fraternity houses and places to stay were very close to the medical school. In Dallas that was absent. That’s also somewhat retrospectively looking at it.

LC: Right, and Southwestern is basically downtown Dallas in a big urban setting so that way different from obviously what you described with Galveston. Did the urban setting suit you at the time?

JE: Well it seemed fine. I lived in the fraternity house in the Oak Lawn area. So it was in 15 or 20 minutes to the medical school.

LC: Did you drive back and forth?

JE: Oh yes.

LC: Was there special arrangements for students to park and so forth?
LC: Tell me about the fraternity house. What fraternity was it?
JE: Theta Kappa Psi.
LC: Was that just the most convenient place to live as a student or did you choose that specifically?
JE: I think I liked the people who were in it. This is on Holland Avenue, about two blocks off Oak Lawn. There were two other fraternities on that same street, same block. Theta Kappa Psi had probably more housing on the side and it was like 20 to 25 dollars a month.
LC: Wow. Did you have expenses aside from your normal living expenses and tuition and fees? Were there also laboratory fees and other things like that that you had to make and how expensive were your books? Do you remember that being a problem managing the…
JE: No, the tuition was like 400 dollars.
LC: That’s just unbelievable now.
JE: Yeah it really is. There may have been some lab fees. The books were expensive but at least for the few years at least we were using general medical texts so they were not nearly as expensive as during residency.
LC: Sure. Yeah that becomes a different order of magnitude. Can you outline for someone who is not familiar with the sort of curricular development of medical school education at that time, sort of first year, second year, third year, how the courses were kind of organized?
JE: The first year we had gross anatomy, which is very well named because we had to dissect a human cadaver. There was neuro anatomy and the basic purpose of that I think was to create a hurdle so that some people wouldn’t make it.
LC: So what might be thought of as a weeding out class?
JE: Yes.
LC: Did it serve that purpose well?
JE: Yes. We did physiology, biochemistry. Second year we began getting into methods of diagnosis, internal medicine, sort of hard to remember at this point.
LC: That’s ok, just whatever you can recall that is helpful.
JE: Then third and fourth year we began clinical rotations. Some of them were at Parkland. I was at Baylor Hospital and St. Paul Hospital in Dallas.

LC: Did you do especially well in the course work, in the classroom work, or did you do better on rotations and clinical work? Or were both pretty good for you?

JE: I think I did very well because I graduated like number 10 in my class.

LC: Ok well that’s pretty good. Were there things about the education itself that particularly you enjoyed?

JE: I found it very hard but I think everybody found it to be hard. Partly because most of us were somewhat perfectionists and there is always this fear of failure. The professors certainly didn’t do very much to encourage you. I do remember one pediatrician who was from Germany. He was a very jovial man. If you got something right he would go, ‘Ya, Ya, Ya.’ I mean he was wonderful because he took pleasure in learning. That’s what I really found frustrating with medical school was that in college the professors were very pleased when you learned something and in medical school it was like their goal, at least at Southwestern, to trip you up. Which I didn’t particularly care for that educational approach. In medicine, yes you need to learn and you need to learn very carefully but you also need to be encouraged.

LC: Was there anyone who emerged on the faculty as a mentor of yours?

JE: Not really.

LC: Really? That’s interesting. Jim, what year did you take your MD?

JE: 1968.

LC: At what point in the year, do you remember?

JE: June. June the 3rd I think.

LC: By that time of course, as I’m sure you were aware at the time, Dr. King had been assassinated. Do you recall that?

JE: I remember that. Just after that I had seen Gone with the Wind again and I was thinking how inappropriate it was. What we now call ‘politically incorrect’.

LC: But you were aware of that at that time?

JE: Yes. Also during medical school, like in microbiology, parasitology they would say. They would talk about things like yellow fever or typhoid fever and ‘Oh you may see this in Veet Nam,’ is how they said it.
LC: Veet Nam?
JE: Veet Nam. We all laughed because it was going to be over.
LC: That’s what you were thinking?
JE: It wouldn’t get us. This is ’64 to ’68.
LC: Sure. I was going to ask you how much awareness you had given the heavy
schedule that you were pursuing and everything else, how much awareness you had of
the American escalation over there. Were you paying attention to it? Did you see it as
anything that was going to impinge on you?
JE: Well certainly in the background for all of us, but there was like ’67 Israeli
War and then you know we were concerned that medical education might be accelerated
to get us out and to get us into the Armed Forces, something else had developed from
that. All these things were brewing.
LC: Were you and the other students, did you talk about this, did you chat about
this over coffee or when you were taking a break from studying? But the possibility
existed, that you might have to go into the military service?
JE: Well you know when they said about Vietnam I mean we all laughed. We
didn’t talk about it, because it was going to be over. It wasn’t going to get us.
LC: Where did that belief that it was going to be over come from?
JE: Because it seemed like it was just sort of a sideshow. It didn’t seem, at least
beginning of ’64, ’65 that much was going to happen. Then we started getting the
military build-up.
LC: You guys still sort of felt that there would be a draw down and an exit before
it might touch you?
JE: Well that’s sort of the way it was presented. I have some diary notations that,
I have to go back, but I mean it was beginning awareness. I can remember going to anti-
war play. Someplace east Dallas. It was over the Vietnam protest and how upset the
<em>Dallas Morning News</em> got about the hippies.
LC: Did you see or know about protests there in Dallas? I mean were there local
protest that you remember hearing about even if you didn’t attend them?
JE: No, but it was like at least I was aware enough that I went to this you know, it was like a small theater that I knew was going to be an anti-war show. [Poverty Playhouse probably on Knox Street.]

LC: Do you remember anything about going to that performance?

JE: What I remember was there was a character named Death who is a whore and she said, ‘I welcome you with open thighs and a closed heart.’

LC: Wow. What did you make of that? Did you have a way of interpreting or a background for all of that?

JE: It just felt so real.

LC: Really?

JE: Yes.

LC: How did it come about that you actually were drawn to the U.S. Army or drawn toward it, or it sucked you in. How did it actually happen that you entered the military service?

JE: Well what was going on was called the Berry Plan. They intended to provide physicians in the military. You might get deferred for residency. You might get deferred for one year or you might have to go in after internship. I’m not sure what the process was. I think it was related to what the military, the various services required and I think I sent in a preference for the Air Force. I got a letter back saying, ‘Congratulations the Army has selected you.’

LC: About when did you get that letter, do you remember?

JE: Probably like ’68 or ’69. I’ve got it in some of my files that I may have sent already. If not, I will.

LC: That will be terrific. You had been given an opportunity to express a preference in some way for the Air Force.

JE: Yes.

LC: Why had you chosen that branch?

JE: Because I figured I wouldn’t go to Vietnam.

LC: Really? What made you think that?

JE: Just because what I had read and what I knew about the Air Force. I would be less likely to get sent to bad places.
LC: And you have no idea what happened in the interim such that you received this letter from the Army?

JE: No, I think the Army said we need so many physicians. So they looked at all the graduates after internship and said you get this many. The Army gets this many, the Air Force gets this many, and the Navy gets this many.

LC: Sure. And you just happened to be in the group that went to the Army. What happened for you next? Was there an outline of how you would enter service, where you had to report, or did that come later?

JE: It was a very gradual process that began when you turned 18 in Selective Service; you had to register for that. Then I got student deferments when I was in college. I was deferred because of medical school as were everybody else in medical school, as long as you didn’t flunk out because the military wanted physicians.

LC: Your actual transition to basic at Ft. Sam in late 1969 came about how Jim? Did you get a letter saying you have to report at such and such time or how did it happen, do you remember?

JE: Well it was just sort of a series of things. Probably like ’68 I was getting letters saying you have been selected for the Army. Then you start filling out forms. They did security clearance, just looking at some of the things, next thing to go out, but it was like 28 October 1968 appointment is as first lieutenant.

LC: They just sent you a letter saying your now first lieutenant?

JE: Yes. There is like all these things you have to fill out. Where you live, where you are employed, and so the appointment was contingent on security clearance.

LC: Ok. Can you describe that process or anything you remember about it? You had to fill out a bunch of paperwork I’m sure.

JE: Yes.

LC: Were you ever interviewed? Did they send anyone to interview you?

JE: No. What they would be sending is like a copy. Actually it’s the original, it was seven different things you had to do in terms of forms to fill out. It was the 9th of December 1968 status for registrar, let’s see, from headquarters fourth U.S. Army.

Basically I was going into the Army.

LC: And are you looking at the documents now Jim?
JE: Yes. I’m just trying to find what I’ve got.

LC: Sure, take your time.

JE: 28 October 1968 first lieutenant reserved commission. Appointment for indefinite term, how’s that for chilling?

LC: That is actually. Particularly in 1968.

JE: Yes.

LC: At some point you were told I’m sure that you had to report to Ft. Sam Houston. Is there any indication in the paper work that you have there or do you recall the Army taking cognizance of any further training that you might have signed up for or that you were interested in pursuing?

JE: Well the options were you either went in after internship or you could do one year of residency afterwards [then go into military].

LC: And what did you choose?

JE: I did an internship. I figured they were going to get me one way or the other.

LC: Right so you did the one-year internship first?

JE: I just did the internship after medical school.

LC: Where did you do that?

JE: Methodist Hospital in Dallas.

LC: At that point for someone like myself, who isn’t really familiar with the course of higher medical education, are you specializing at that point in the internship?

JE: When I did my internship it was 1968, 1969. They were all pretty much the same. About that time you could start pursuing like specialized internship but what I did was like rotations through Pediatrics, Internal medicine, Surgery, OB/GYN, maybe a few electives.

LC: This is kind of hard to formulate, were you thinking at that time that your military service was now inevitable or were you still thinking that you might not have to go into service because Nixon was in office? He was talking about drawing down the number of troops. Did any of that enter your thinking as well?

JE: No, because I mean it just felt like the footsteps of fate because I kept on getting all these things in the mail. I’ve got a commission as a reserve officer like 10
January 1969 and then that spring I remember getting a registered letter that I picked up that said I would be inducted in the Army for assignment in Vietnam.

LC: Ok, and it specifically said that?

JE: Yes. I just remember I felt like somebody kicked me in the gut. I remember, I guess maybe when I was on the emergency room rotation there was a nurse RN named Maggie Grimes. She was like a Major in Air Force Reserves and she said, ‘Oh it’s just fine. You going as an officer, there is not anything to worry about.’ But I don’t think she had ever been in a war zone.

LC: Did you ask her?

JE: I don’t remember asking. I was just really, you know you get these orders and it’s stunning because you realize you’re going to get sent to a very bad place.

LC: Her sort of reassurance, although you remember it now, it was sort of cold comfort? It didn’t offer you much in the way of reassurance at all?

JE: No it really didn’t.

LC: Were there other people Jim who were saying to you, ‘Oh don’t worry about it. You’re going to be fine. You’ll be in the rear areas.’ Did people say stuff like that to you or did you not discuss it very much really?

JE: Well part of it was like oh you’re going in as an officer; you’re going in medical corps so you don’t have anything to worry about. In my like internship group, they were like 17 or 18, everybody went in they either did public health service or they went in the military.

LC: By going into PHS did you have a different, was there different priorities assigned to you in terms of potential military service?

JE: That was considered the equivalent.

LC: Ok. So it was in a way a route by which you might avoid going to Vietnam?

JE: Right. The thing is I don’t think I knew enough at the time to know about it.

LC: How did people find this kind of stuff out?

JE: I don’t know. There was like two of my people who were in my internship class went into public health service. So I’m not sure how they found out about it. I’m not sure how they got there.
LC: Did you feel frustrated? I remember you saying that you weren’t so keen on
going to Rice because of the whole idea of pull. Did the same thing kind of operate here
for you?

JE: Well yeah. I felt like I didn’t know what my options were or how to explore
them. My parents were always at teaching about duty and obligation and not about
questioning or reviewing. My father was, what I would describe as a totalitarian, you
didn’t…

LC: Just do it.

JE: Yeah, whatever it was you’d do it. You didn’t disagree with him because it
was, you know, I called him Stalin because…no I mean he was like that

LC: Right, it’s not yours to disagree with in a way.

JE: Yeah, he was, what I call the Evans curse because what I know about my
father, my grandfather, and my great grandfather they were always very much that way.
Part of my resolve was I don’t want to be like that. Unfortunately, I think my brother,
that, you know, you got the Evans curse.

LC: Does he recognize that?

JE: No.

LC: Really. That’s interesting.

JE: Well it’s a strong history of depression in the family. I’ve had it. My brother
has it. I suspect it’s also been an issue with my father and my grandfather. They tend to
be very negative, very consistently.

LC: Yes and sometimes coping mechanisms are just you know do what you have
to do. Do what you’re told.

JE: Yes, exactly.

LC: What about your mom? When she found out that you had orders effectively,
orders for Vietnam did she have a particular reaction that you recall?

JE: I guess what I am astounded by; looking back is their lack of reaction.

LC: That’s not in the middle of the curve I would say.

JE: No. I’ve got a lot of letters that I’ve got from my folks and it’s like they had
no clue where I was, like I was on some picnic. I was sending photographs back so it
wasn’t as if they didn’t see where I was.
LC: Well also presumably, if I have an accurate picture of them, were watching the news, you know, the middle classes watched TV in those years and watched the news and they knew about the conflict on some level. Did they ever express a concern to you about your younger brother going to Vietnam as he would now, at the point where you were about to serve be certainly in the age group?

JE: Well what happened with my brother was that he was not a good student in college.

LC: Where did he go to school?

JE: He went to a variety of schools, like Stephen F. Austin. He eventually graduated from Texas Wesleyan. He flunked out of several schools. Then he got a low draft number so he volunteered for the Navy probably like 1970. My parents were frustrated that they had two sons that are serving the military when a lot of families none of their sons went.

LC: Was that their way of expressing concern? Or was that not clear?

JE: They felt like it wasn’t fair.

LC: Oh ok. It was less about you and more about them.

JE: Yeah. I remember when I came back I asked my mother, I said, ‘What if I had been killed over there?’ She said, ‘Oh we would have been proud of you.’

LC: Wow.

JE: Not that we would have been sorry you got killed. We would have been proud of you. I think it was very much in character.

LC: Well Jim, you had to report to Ft. Sam.

JE: Yes.

LC: That would have been in the fall of ’69?

JE: Right. Originally I was supposed to report sometime in the summer.

LC: Ok, what happened?

JE: Well I’m not exactly sure what happened but they began delaying when I was supposed to report. Eventually I reported I think the 17th of September.

LC: What was it like to show up at Ft. Sam, do you remember that day?

JE: Well a friend of mine from medical school, Bill Elkins, we met and had been friends ever since freshman year of medical school. He had reported like two weeks
before I did. So I had visited with him. I had been to San Antonio because he was
staying at the Villa Fontana. It sort of specialized to the people who were at Ft. Sam
Houston on a temporary basis. Just get them like a two-month lease.

LC: What is Villa Fontana?

JE: It’s just an apartment house but it was off base. So I knew part of what to
expect just from visiting with Bill.

LC: Sure. So you had kind of a little bit of a preview?

JE: Right.

LC: What actually happened to you when you first crossed the gate on your own
and entered into Army life? Do you remember? Were there examinations? Did you
have to be ‘processed’, get uniforms, all of that?

JE: Well we had to have a physical examination. That was done at Armed Forces
and Entry and Examination Station in Dallas.

LC: Ok, what point? Substantially earlier?

JE: That was probably like spring of ’69.

LC: So that had already been cleared.

JE: That had already been done. The view of the military was that if you can
function as a physician it’s virtually impossible to flunk the physical.

LC: Really?

JE: Yes.

LC: Did people try, do you know?

JE: Not that I know of. Basically you couldn’t flunk the physical. There was a
friend of mine after I got back from Vietnam, when I was stationed at Sandia Army Base,
who had probably like severely dysplastic hip. I mean he walked with an incredibly bad
limp. He didn’t go to Vietnam but he got sent to Korea.

LC: So that wasn’t going to be a route out of there?

JE: No.

LC: Even for people who really were in serious difficulty.

JE: Exactly. If you weren’t dying, you weren’t eligible.

LC: How many people were in that basic course that you were in, the student
medical company?
JE: I’m guessing there were maybe 60. That included physicians and vets.
LC: And vets?
JE: Right. You have a photograph of that class which will give you the number.
LC: Yes. So everyone cleared through basic.
JE: Right.
LC: Jim, tell me a little bit about the instructors and the attitude of the students towards the instructors.
JE: Actually I think the Army did a very good job of getting us in. It’s a slow process like the first week we didn’t have uniforms. We just filled out these forms and filled out the forms and you filled out these forms. Then we had to get uniforms and then the second week we wore uniforms, we had assemblies, we probably marched a little bit. The class was very hostile toward the military, the Army, and we were reminded that we had volunteered. Technically that was right but either you volunteered as an officer or you got drafted as enlisted men to do the same thing for less pay.
LC: What was the source of the hostility? Was it that people didn’t essentially believe in the war effort or was it that none of them wanted their careers interrupted in this way or were there other elements?
JE: Well I don’t think we believed in the war effort. It interrupted our careers. Like the class photo had to be repeated because a number of the guys were shooting the finger at the Army.
LC: Was this young men sort of flipping off authority or was there something more serious behind it, do you think?
JE: Well I think it’s about, first of all, authority because physicians tend to be very independent anyway. Given the situation it was reference to authority to the military to the government.
LC: Jim did they and by that I mean instructors give you an orientation in any way during basic toward the war itself? For example, did they talk about what the basis of U.S. policy in Southeast Asia was?
JE: No.
LC: Did you think that you already knew?
JE: No. Yeah it’s sort of retrospect I mean that’s what was so bizarre about it. There were some people going to be staying stateside. There were some people going to Europe. My feeling is what we got was sufficient for stateside or European assignments. Those of us who were going to Vietnam we were really not well oriented I don’t think about what our situation was apt to be like.

LC: So not very much information on big strategy questions, big issues of U.S. involvement?

JE: No, it’s sort of like if we were physicians in any situation we could practice medicine.

LC: Did they talk about battle conditions, the types of wounds you might see?

JE: They did some demonstrations about the wounds we might see.

LC: And what kinds of things, do you recall that at all?

JE: Well they did like a demonstration where they had like a two or three gallon can that was filled with very, very thick gelatin. Sort of like a Knox Blocks. They had put yellow dye on one side and then they shot a M-16 through it and it just demonstrated how the wounds have been contaminated because the yellow dye went all the way through this block of gelatin.

LC: As a physician what was the point of them showing you this?

JE: Well the point was that with the wounds we would be seeing, they were going to be contaminated. So tissues had to be removed that had been severely damaged by the concussion of the projectile, plus you had dead tissue that had to be removed, plus the projectiles had introduced bacteria and junk.

LC: So the training was that you needed to be aware of the bullet track and having in addition to physical damage cause the latent possibility of infection?

JE: Oh definitely.

LC: Is that what you remember learning from that demonstration or did it stick you differently?

JE: No it was just impressive about the amount of damage that M-16 or an AK-47 would do. I’d seen a fair number of patients with severe trauma when I was at Parkland. Probably I was better at seeing more than…seems like some medical students who had gone maybe to other medical schools. It was no preparation for what I eventually saw.
LC: Just as aside. At Parkland what kinds of trauma had you seen? Was Parkland then the central trauma hospital for downtown Dallas?

JE: For Dallas County, correct.

LC: For Dallas County. What kinds of things had you seen there?

JE: Knife wounds, gunshots, severe injuries from automobile accidents, and severe burns.

LC: So you had seen quite a bit then already in the way of traumatic and massive damage.

JE: Yes.

LC: Back to basic and to the curriculum there did you have weapons training, Jim?

JE: We went to Camp Bullis, which is outside of San Antonio for like we did a day compass course. We had previous training like with map reading and compass, you know how to use a compass and so like on a day course. Then we had a night course at Camp Bullis.

LC: How did those go? How did you do at that?

JE: It was fine.

LC: Did you have to work in teams or something?

JE: We worked in small teams. Then we were at a weapons course. We had like M-14s I think. We had one exercise one, when we were crawling on our stomachs with live fire overhead.

LC: How did you adjust to this? Did you do well with it and take it in stride or were you kind of bucking the system a little bit?

JE: Well you know it’s like you’re on this conveyer belt. You can’t get off a conveyer belt. We all did it. It was not necessarily something we were… they already had us, couldn’t get out.

LC: Did they give you any training in escape and invasion?

JE: No.

LC: Did you have any kinds of orientation about the military structure and the command structure within which you would be operating?
JE: There was some but I really think they should have been for like those of us going into Vietnam, I think there should have been a lot more about what was going on say at the battalion level.

LC: I mean again speaking now in retrospect probably, what should they have told you and why do you think so?

JE: What is the mission of battalion? How do you serve the men in the battalion? We got sent to a lot of different units. You might go to an Infantry battalion. I went to an armor battalion, which meant that we had tanks and armored personnel carriers.

LC: But at basic you really didn’t get a sense of how the units differed and what they were doing and how that would affect you?

JE: Not really because like what I found very frustrating when I was with the Army battalion was that there was never any good articulation of what our strategy was for an armored battalion, what were we doing. We were at Quang Tri Combat Base and then at six weeks at Charlie 2 so we were right along the DMZ. I mean there was no articulation about what we were doing.

LC: Why do you think that was in retrospect again? Do you think they just wanted you to do your job in the OR and do your job on the wards and not pay attention to those other issues?

JE: Oh the thing is I was going to the evening briefings for this staff of battalion.

LC: Right, officer level briefing.

JE: Officer level briefing. They were talking about intelligence, what might be happening, possible infiltrations, when there was going to be a B-52 strikes, but there was no clear articulations about what we were doing.

LC: While you were basic did the instructors have in country Vietnam experience or not, do you remember?

JE: I think a few of them did.

LC: Did they bring that to the table?

JE: Not really. One evening there was an extra thing we could go to that was presented by full bird, you know a colonel, full colonel in the Army medical corps. He was talking about when he arrived somebody met him at the airport and carried his luggage around. Well he was a colonel. We were captains. No one met us at the airport
other than the bus. Nobody carried our luggage. The feeling we all had was he was
providing the Army party line and he had no concept of what was going on. He didn’t
present to us what we would experience.

   LC: Is that in fact your evaluation of basic, is that you came out of there with no
idea what you then later found to be the truth of being a medical officer in Vietnam?

   JE: Well I think there should have been, those of us who were going to be sent to
an active combat situation should have had more information. We all got the same thing.
As I said the information we got was certainly adequate if you stayed in the U.S. and if
you went to Europe. If you got sent to Vietnam you’re going to be in a combat zone.

   LC: How many of the guys in the medical company that you were in, if you have
any idea, were actually sent to Vietnam?

   JE: I really don’t know. The view we all had was you could go to Europe, you had
to give another year, but the feeling was that you would probably get sent to Vietnam
anyway.

   LC: Oh really? Ok.

   JE: Yes because the way the military works is that you would have to give them
an extra year but there’s no warranty so they’ve got you for three years and there still
going to do with you what they want to do.

   LC: They can decide at that point down the line that they are going to deploy you
to Vietnam

   JE: Yeah. So the feeling was they couldn’t be trusted anyway.

   LC: Is that kind of the dynamic that got set up between the medical officers and
‘The Green Machine’, if you will, was that there was just no trust there?

   JE: Exactly.

   LC: And you already had that feeling at this point?

   JE: Right, I think it was pretty much uniform. They had us but I mean we couldn’t
trust what was going on.

   LC: Jim, you mentioned in the material that you provided to us that in San
Antonio in October of ’69 while you were at Ft. Sam there was some kind of anti
Vietnam or moratorium parade of some kind, do you remember that?

   JE: I’ve got the article that I saved from San Antonio newspaper.
LC: Really. Ok. Do you have it in hand?
JE: I don’t have it right here but I still have it. I’ve got a whole box of like C-rations, it’s a c-ration box that came from Vietnam that’s full of clippings. So I’ll be sending that also.
LC: Ok, super. That sounds very interesting.
JE: I just remember like 15,000 protestors in San Antonio.
LC: Which is saying something.
JE: Which is saying something because this area, there was the Army base. There were like two or three large Air Force Bases at the time.
LC: Absolutely. Big military town.
JE: It’s a big military town and for this to happen in San Antonio was I think fairly remarkable.
LC: And the summer of ’69 before you reported at Ft. Sam had also been extremely busy with a number of huge anti-war protests out west and on the east coast. I’m sure you were aware of those.
JE: Yes.
LC: And the whole climate of frustration and upset. Did some of that feed into your own feelings at the time about military service? Were you also questioning whether the United States should be there?
JE: I was certainly questioning because in my diaries of that time basically what I wrote was I plan to serve honorably and professionally but I don’t think its worthwhile going. I think I wrote I don’t think the Vietnamese wish to be saved or are willing to sacrifice for themselves.
LC: It’s interesting that those questions were already framed in you mind before you even went over there.
JE: But I also think that like with my classmates, was that we intended to serve professionally and honorably to look after patients. We may not agree with the military but I think the sense was we’re going to do what’s appropriate professionally.
LC: You mentioned earlier that in your younger days that you were a Republican. Were you pleased at President Nixon’s election in ’68 in his coming into office in ’69?
JE: I think there was a certain amount of hope. I remember like when Johnson made the announcement on TV that he would not run for reelection that was absolutely stunning because it was like a routine TV show and then suddenly at the very end he drops this bombshell.

LC: What did you conclude? Did you draw any conclusions from that announcement or what it portends for the election and for the war?

JE: Well I was hopeful that it would make a difference. It also made him a lame duck. A lame duck president is not very effective.

LC: What appraisal did you have of Robert Kennedy to come to the floor then very quickly in the spring of ’68?

JE: I guess the feeling I had in ’68 was there was this hope bubbling around and promise and then everything turned sour.

LC: What were the catalytic events Jim?

JE: Well with Kennedy’s assassination, Martin Luther King’s death, I mean there was all this violence. There was hope for change and then it was like it was smashed because of the violence.

LC: I don’t know if you recall the events in Chicago around the Democratic convention and the arrests, was that part of that smashing of hope do you think?

JE: Well it was sort of like watching a revolution get smashed. It was just stunning to watch it happen.

LC: Jim, let’s take a break a minute.

JE: Sure.

LC: Jim, did you have any time on your own between the completion of Basic at Ft. Sam and your deployment to Vietnam?

JE: Very few days because, you know, maybe like five weeks from when they started the classes until it was over. I drove from San Antonio back to Ft. Worth where my folks lived. Late October 1969, I was in San Francisco and reported in Oakland on the 26th.

LC: How long did you stay there? I would gather this is at Travis, is that right?

JE: No, actually the Oakland Army Terminal. It was on the bay in a warehouse district, you know, really grim place. So we got uniforms, we got our names put on the
uniforms, packed our luggage, checked our luggage, and then I think we flew out on the 28th from Travis.

LC: Do you recall the route by which you got over to Vietnam?

JE: We flew from Travis Air Force Base to Anchorage, Anchorage to Yakota and Japan, then Japan to Bien Hoa, Vietnam.

LC: Was it a flight that you were able to get off the plane at any of those stations?

JE: We got off in Anchorage. It was like early morning so actually before you got to Anchorage it was daylight and it was daylight all the way there to Vietnam. We got off, I think, in Yakota. I really don’t remember. I’m sure we did but it’s like I don’t remember it.

LC: Were you on the flight with anyone that you had known from Basic?

JE: I think Jay Hubner who was a classmate of mine from medical school, was on the flight. I think there were probably several other physicians who had been with me at Ft. Sam Houston.

LC: Was it a commercial flight that was a charter?

JE: It was World Airways, which is chartered by I guess Military Assistance Command Vietnam.

LC: Jim, can you tell me anything about your feelings or your anxieties on that flight?

JE: Well I remember it very clearly because we took at like four o’clock in the morning and it was very typical San Francisco Bay, it was foggy. I remember looking down just after take off, we’re flying over parking lots and there are pools of yellow lines in the fog and I was crying. I was leaning against the window and just scared. There were a number of infantry people on the flight and I remember my chances of coming back are really pretty good. Their chances aren’t so good. Sort of this awareness, like you know concern for them, that I will probably make it and I will probably come back in one piece, they may not. What I likened it to was like guys joking in the locker room but it was sort of like this forced joking around and you know it was still going on in Anchorage, but I realized we’re joking around but this is for our lives. Got to Japan, left Yakota, the flight got very, very quiet. Nobody’s talking. The closer we got, it was like the flight will never end. Then we were flying parallel to the coast of Vietnam and there
are all these very cosmic [dark] thunderclouds, thunderstorms. Nobody is talking. The co-
pilot or pilot said ‘Nha Trang’, so we flew over the coastline at Nha Trang. I’ve got the
photographs I took from the jet all the way from Japan to Vietnam that are this next batch
coming out. Then we land. They open the door and this intense tropical heat comes in,
like Houston. So we wait, we wait, we wait like what are we waiting for. Then finally we
walked off and like down the stairs onto the tarmac and this cheering. Wow this is great
except then you get closer and hear these guys in the faded jungle fatigues and what they
are saying is, ‘Fresh meat! Fresh meat! Fresh meat!’, because they are going home.

LC: And they were chanting?

JE: They were chanting.

LC: What did you think about that?

JE: It was bad enough being there and then you have your own men, your own
people chanting this. What the hell am I into?

LC: Yeah that’s pretty chilling.

JE: It was horrifying. It should have never have been allowed to happen but I’ve
heard from others that what happened in this situation happened before.

LC: Jim, did you think that this chant and whatever was behind it had come about
as a result of whatever these men had experienced? That it was coming from them as
having just been through a year of being in Vietnam i.e., did you attribute it to them
having been in Vietnam rather than you know just being cruel? Do you see what I am
asking?

JE: They had been through a year of hell. They were getting out. It’s hard to
know.

LC: Yeah, but oddly it was directed at you guys rather than…

JE: It was directed at us. They had imbibed the poison and now they were passing
it on. I really don’t know because I’ve never talked to anyone who was flying out. When
I came back we were not near anyone coming in so I don’t know whether that changed or
what the situation was. I flew back out of Cam Ranh Bay so I don’t know what the
situation is, whether that changed or whether they just tried to eventually separate those
leaving from those arriving.

LC: In any event though it is quite a chilling image.
JE: Oh yeah and then you get on a bus. We drove from Bien Hoa to Long Binh.
The guy driving the bus was just nonchalant shifting gears, we’re going through parts of
Saigon but there is chain link fence on the windows that keep grenades out.

LC: Did you that was the purpose of it? Did they tell you that?
JE: No.

LC: You’re sitting there wondering probably and then figure it out yourself.
JE: Sort of figure it out yourself. I was wondering the driver doesn’t have a
weapon. This is a war zone why doesn’t he have a M-16? Like, this is not a U.S. city bus
route.

LC: Was it a bus like we might think of as a school bus?
JE: Like a school bus. It was fascinating looking around; this is what Vietnam
looks like. This is what the people look like. You know, like a lot of people going by on
motor scooters, and just trying to get under your belt about where you are and why isn’t
the driver concerned?

LC: It’s a strange kind of non-incongruous image. Was anyone talking on the bus,
do you remember?
JE: No.

LC: Was it full? Was everyone kind of being driven to Long Binh, along with
you?
JE: Oh yeah.

LC: When you arrived at Long Binh what happened Jim?
JE: I think the officers there, we went to the officers BOQ and they were just
military construction barracks, you know wood with corrugated tin roofs. They were
saying well there have been robberies of people coming through at night. Like at the first,
I slept with my billfold in my underwear. I’m not sure how well I slept. Then we were
sent to MACV buildings. They were like two stories, concrete slabs on cinder blocks, you
know typical army construction. There is like a very brief interview about who we are,
what are medical background was, and then we got assignments.

LC: Was there just the two of you? Or how many people, how many physicians
JE: There was like several physicians. I don’t remember the exact number. It was
just a very perfunctory, ‘Hello, give us your orders and here are your new orders.’
LC: Was your destination already sent out in paper before this interview began?
JE: I got it afterwards but I wouldn’t been surprised if it had already been done.
So then you fill out more paperwork and one thing… I don’t know what I’ve sent already
but I will send and you fill out your own ticket, you know airline ticket, because this is
military flight and there is a map of Vietnam on the front of this ticket. It’s like
mimeographed. So you fill out Bien Hoa and then you fill Quang Tri but Quang Tri isn’t
on the map.
LC: Really?
JE: The farthest on the map, the destination that is farthest north is Hue. There is
nothing beyond Hue. Again we left at like three o’clock in the morning.
LC: And your orders for Quang Tri?
JE: Well it said Quang Tri on the ticket and it said 1st of the 5th Infantry brigade.
We landed either in Kontum or Pleiku about dawn. I just remember looking out and just
see the outline of the mountains but I didn’t know where I was. Then we took off again.
Then finally landed about ten a.m. in Quang Tri.
LC: Now where these planes, I’m taking it that you were traveling in, even all the
way to Quang Tri.
JE: Yes. I think they were C-130s. So landed at Quang Tri and then the bus took
us to 75th Replacement Company at Camp Red Devil, Quang Tri Combat Base. It was
very appropriate because here I am at Camp Red Devil and its Halloween.
LC: That’s a little bit too much kismet.
JE: Yeah.
LC: How long were you there first of all?
JE: Probably two days at most.
LC: Do you remember much about it?
JE: I remember the first night, you know trying to sleep and watching this little
radio antenna with a red light on top of it, watching the light blink on and off. You know
we got more uniforms, flak jacket, revolver, steel helmet, a whole bunch of equipment.
There was another brief interview and I think Jay Hubner as I mentioned as a medical
school classmate, got sent to the 1st of the 11th Infantry Battalion. I got sent to 1st of the
77th Armored Battalion.
LC: Now did you see Dr. Hubner again?
JE: Never saw him again, no.
LC: Do you know what happened to him?
JE: No, I don’t.

LC: But you and he parted company at this point and your orders were to go yet further north, is that right?
JE: No actually my orders were to go to 1\textsuperscript{st} of 77\textsuperscript{th} Armored Battalion, which at that time was in Quang Tri.

LC: Ok, so it was right there.
JE: He got sent farther north because 1\textsuperscript{st} of the 11\textsuperscript{th} was someplace even closer to the DMZ. Maybe one or two days later then I went to the Armored Battalion.

LC: Jim, tell me about arriving at the battalion headquarters where you would be serving.
JE: Well I checked in at personnel. I met, it was like an NCO, you know, checked me in then took me just across the path, maybe 50 feet to the battalion aid station where I met Sergeant Washburn who was the NCO for medical platoon and I met some of the medics. I met medical specialists or 91 Charlies, Mark Doom and Jaan Goad.

LC: How do you spell those last names?
JE: Mark Doom D-O-O-M and Jaan J-A-A-N last name Goad G-O-A-D. I think Lieutenant Sauer who was medical service corps was not there. I don’t know where he was. He arrived maybe, or came back, like the next day. The previous battalion surgeon had already left, so I never met him. His name was Lightburn L-I-G-H-T-B-O-U-R-N-E, or B-U-R-N.

LC: Now had his rotation come up such that he was leaving in good health or do you know?
JE: As far as I know, yeah.

LC: How many battalion surgeons were there?
JE: There was one for each company, I mean each battalion rather. So I was with 1\textsuperscript{st} of 77\textsuperscript{th}, there’s the 1\textsuperscript{st} of the 11\textsuperscript{th} Infantry, there was 1\textsuperscript{st} of the 61\textsuperscript{st}, which was an infantry. There was a medical company in Quang Tri that had several positions. They also had laboratory and x-ray equipment.
LC: But administratively that was separate from you.
JE: That was separate. Right, maybe a half mile away. There was 18th Surgical Hospital, also, Quang Tri Combat Base.

LC: As it evolved, what was your relationship to the surgical hospital?
JE: Actually very little contact. A few times went over there but what I was doing was providing… I did sick call and nothing very complicated. That was like the first month and then December 1969 went with battalion. We were transferred to Charlie 2, which is probably four miles south of the DMZ.

LC: Now the entire…
JE: The entire battalion. What the brigade did was they rotated battalions to Charlie 2 from Quang Tri, probably about every six weeks to two months. I saw a few casualties at Charlie 2, but the way the system works was that if there were guys who are hurt out on the field, helicopters picked them up, medevac helicopters, and transferred them from there to the 18th Surgical Hospital or there was also a naval hospital off the coast. So if there were severe casualties I didn’t see them. I saw a few guys who got hurt when they had rockets at Charlie 2, but they were minor.

LC: Ok, when you say minor can you describe severity?
JE: Oh like superficial skin wounds, nothing deep. It is just some of the metal grazed the skin and cut it.

LC: Nothing that is going to keep someone out of the field.
JE: No.

LC: These first couple of months when you were at Quang Tri and up at Charlie 2, did you have a feeling that since you weren’t seeing really severe battle wounds that this experience in Vietnam was not really going to be that bad? It was going to be ok and you were going to be fine.
JE: Once you sort of settled in to the routine…while I was at Quang Tri we didn’t, as far as I know, have any mortars or rockets come in. There were several incidents when I was at Charlie 2 when it got probably rockets, but rockets were more like a form of terrorism because these bases were fairly sprawling and when they fired rockets they didn’t have any…it was no sophisticated system to aim them. So most of the time they didn’t hit anything. So most of the time there were also no casualties. We would, you
know, hear like at the briefing there had been some incidents out in the field where there had been companies that had gotten hit by the NVA or VC, but we didn’t see those casualties.

LC: Jim, can you tell me a little bit about the personnel complement for the battalion aid station?

JE: The medical service corps lieutenant who was sort of the administrative officer, the noncommissioned officer was named Washburn. He was not only in charge of the medics. There were two 91 Charlies or medical specialists who had advance medical training. There were, I think a few medics, but most medics were out in the field. A lot of what I was doing was sick call. It was people with earaches, sore throat, colds, jock itch, athlete’s foot, heat rash, and I saw a few patients with fever of unknown origin, which just meant they had a high fever. You didn’t know what it was and in that situation they were sent typically to the D Medical Company because they could do like blood smears for malaria. That was fairly rare.

LC: So your services were sort of available on a walk in basis. Is that accurate, is that what sick call really is, people showing up who have some kind of illness that they then describe to and you do your best to treat them on an outpatient basis?

JE: Yes.

LC: Tell a little bit about the equipment that you had at your disposal. Certainly some things you didn’t have, but what did you have?

JE: We didn’t have a lot of equipment. We could do physical diagnosis, whatever you do to physically evaluate the patient. Deliberately we did not have other equipment because if you needed it then you had to send the patient to D Medical Company or Surge.

LC: So those more complex things that required some sort of equipment were handled outside.

JE: Right. We had a refrigerator so we could keep some injectables like penicillin. We had a ward where if somebody needed to be observed. We didn’t use it that much. I think it had been built when the Marines were there and they were getting casualties and they needed basically ward space. So actually the battalion aid station had a lot of room
because it was designed when the Marines were there when they were getting heavy casualties.

LC: Did you set broken bones at all?
JE: No.

LC: So anything like that, even from say a finger or something like that would go where?
JE: Ok, if it was like a finger or toe fracture what you would do is tape it to the next toes. That is what you would do here.

LC: Yes, now is still what they do.
JE: But for fractures they would to 18th Surgical Hospital.

LC: Jim am I right in thinking that you did a number of flights out of Quang Tri and Charlie 2 to other camps during this time period.
JE: Yes. The colonel asked me to go on flights. He asked and you said yes.
LC: Sure. Who was the colonel, do you remember?
JE: When I arrived there it was Lieutenant Colonel Miller. He transferred commands the 16th of December 1969 to Lieutenant Colonel Baird. B-A-I-R-D. We flew to places like Cua Viet, which is a naval harbor on the Cua Viet River on South China Sea within two or three miles of the DMZ. I flew to Charlie 2, Alpha 4; I think I flew to Camp Carroll, which is west of Quang Tri. One of the earliest flights I made was to Mai Loc, which was a Special Forces camp up the mountains.

LC: What can you tell me about that camp and that visit?
JE: Well we flew along the Quang Tri river, I’m not sure that’s what the Vietnamese called it, but it was the river that goes through Quang Tri city out west. I’ve got slides of that flight; it has incredible beautiful, very steep mountains covered with very, very thick jungles, narrow rivers. Then we landed at Mai Loc. I just remember this little green patch in this valley surrounded by concertina and we were there very briefly. I just remember on the flight out there like if we crash I am completely lost.
LC: Why?
JE: Well I don’t know how to survive in the jungle, had no jungle survival training. I don’t know where we are. I don’t know what to do if the helicopter crashes. I
mean it goes back to what I think was a real failure of the U.S. Army, was that they didn’t consider where we were being sent as to skills we needed, not just to practice medicine.

LC: Sure. In the event that something unplanned happened…right, what were you going to do?

JE: Yeah because helicopter crashes were not unusual even when they weren’t hit by fire. I took care of one of my classmates from medical school, James Schreiber, and another medical school classmate, Frank Elliott, was in three helicopter crashes over there. So they were fairly common events.

LC: Jim, what were you supposed to be doing on these flights? Did the colonel, either the first or his replacement later, did these men actually go with on the same flights?

JE: Oh yes.

LC: And what were you suppose to be doing?

JE: Part of the times it was like going to Cua Viet. There were companies from the 1st of 77th Armored Battalion out there or this battalion also had an attached Cavalry squadron with tanks. So it was to check on the men to see if they had medical needs that I needed to address. Check on the medics, to see if they had the supplies they needed, whether they were having problems or needed counseling, or just to be available for whatever their needs were.

LC: Now were you able to command a flow of supplies or could you get that done by reporting to someone who could if there was a shortage?

JE: The medical service corps lieutenant or the NCO for the platoon would handle that.

LC: Did that come up at any point? Were guys out in the field, the medics, didn’t have what they needed?

JE: I think it came up a few times, but it seems like it was readily addressed. Not a major problem.

LC: Is it fair to say that you were sort of bringing sick call out so some of these camps?

JE: I was available if it was needed, but pretty much it wasn’t. If the guys had had anything significant they got sent to the rear area.
LC: They would have been medevaced.

JE: Medevaced. There were these areas like Mai Loc, not Mai Loc but Cua Viet I think you could…it’s a jeep trip. A few times I went on a jeep trip between there and Quang Tri. Mai Loc, the only way into Mai Loc when I was there was flying.

LC: When you were up at Mai Loc did you see or work with any Montagnards?

JE: No.

LC: So you didn’t provide any medical services to them?

JE: No, I was only there once.

LC: Ok. Were there other things about this particular time period that you recall that you would like to include?

JE: Well we moved from Quang Tri to Charlie 2 in December. I remember I was there for six weeks. So spent Christmas there, living in a bunker. We had a few casualties, not that many. I wondered what would happen if we had incoming while I was outside and the first few times we had incoming I was in the bunker. Then I guess probably January I was outside by the Mess Hall, I don’t remember whether somebody yelled incoming because they could hear it or what it was but before I knew it, I was on the ground. I didn’t get hit but I knew what to do. Not long after I got there I was called to check on two guys in a truck that had rolled over. Had rolled down an embankment, it was very slippery clay and they said, ‘Well we want you to go down there and check and see their condition because if they are alive we will very carefully winch the truck up. If they are dead we won’t be quite as careful. I remember going below the truck, which is very precariously balanced and I thought I may get crushed too but they had been crushed together and suffocated. Like early January went to USO show. It was at Charlie 2. Gunshots fired and I was called to see a guy named Sergeant Hall who had been killed because somebody’s M-16 had fired accidentally.

LC: This was at the show?

JE: At the show. I remember going through his billfold, identifying who it was. Here’s a photos of his wife and children. You know, it’s what the military called friendly fire, but he’s still very, very dead.
LC: Did that kind of incident, that and the men that were crushed in the truck accident, did that have lasting effects on you in terms of processing your own experience? Did it bother you?

JE: Well it’s just the images are very clear.

LC: I’m sure.

JE: The feel is very clear. It was just like one more loss, one more loss, one more loss for nothing.

LC: Jim, can I just ask you a few details about how you were to proceed when you had declared someone dead? I mean was there a registration process that had to be gone through and what was that process?

JE: Generally Graves Registration took over, in terms of the identity and transferring the body and filling out the paperwork.

LC: Now, tell me anything you can about Graves Registration people. Were those enlisted men?

JE: As far as I know. I didn’t have a lot of contact with them.

LC: Were there certain forms that you had to complete as the physician on hand?

JE: Very, very rarely did I ever have to do it. The one time I remember was in October of ’70 when there was a...two helicopters collided near Chu Lai, you know, had to fill out the death certificates. I still don’t understand in that situation, they were clearly had died out in the field and in like that situation it was very odd; they were even brought into the emergency room at 91st Evacuation Hospital.

LC: And that was about the only time you really recall doing a death certificate?

JE: Yes.

LC: No real ideas as to why that incident was different from others in terms of the paperwork that was required?

JE: I don’t know unless it was part of like you know they wanted a physician to issue the cause of death, but the thing about what happened and when the guys were brought in from the crash near Chu Lai, if they wanted sort of a forensic evaluation I don’t know why they didn’t contact the pathologist who’s on the staff at the hospital.

LC: Were the men that we are talking about military, I mean, they weren’t civilian?
JE: Oh they were U.S. military guys.

LC: That’s strange. Jim, did you take an R&R break during the time that you were assigned to the 1st of the 77th at all?

JE: Yes. I went on R&R to Hong Kong. It was like late April 1970.

LC: Tell me what you can about how that trip came to you and what your flight pattern was over to Hong Kong.

JE: Flew form Quang Tri to Da Nang. Went through R&R processing, customs in Da Nang. I spent probably one or two days there. I’ve got pictures of China Beach, the China Beach Officer’s Club, Freedom Hill PX, the Freedom Hill USO Club interior, and then I got to Hong Kong. I just remembered I was so relieved to lie down on a clean comfortable bed. Not worry about things crashing in the night, having some good food, and just a sense of safety.

LC: Did you choose Hong Kong? Did you have a choice of destination?

JE: I chose Hong Kong.

LC: Why?

JE: It seemed like it was a cosmopolitan place to go and in terms of comfort, good hotels, and food. Kind of felt curious about being so close to China because I remember I went on a lot of tourists tours that went out to like Lak Ma Choi, things like that. It overlooked Red China. It’s like this is beautiful, peaceful scene with all these rice paddies and ducks quacking.

LC: And what? I’m sorry.

JE: Ducks, quacking.

LC: Ok, oh really.

JE: It’s like I never thought in my life I would see China, so here is this little hillside over looking China, like wow. It was sort of amazing that it happened.

LC: I’m sure you took some photographs.

JE: Yes, unfortunately I no longer have them.

LC: Really, what happened to those?

JE: I threw them away. Well, they were sort of boring.

LC: Ok.
JE: I wish I had them but in terms of color photographs I no longer have those. I do have black and white negatives.

LC: Of other parts of that trip?

JE: Of Hong Kong.

LC: Did you pal up with somebody or did you kind of spend your R&R on your own?

JE: I think the first time I went to Hong Kong I was with another officer that I knew from Quang Tri. He met his wife there, but then I was on my own. So I just did a lot of walking around, up to the Star Ferry back and forth between Kowloon and Victoria Island. Got some clothes. Went to a French restaurant, Au Trow Normand. I went back there repeatedly. It was just like good food. It just felt good. That was during the Cambodian invasion so I’m reading about that in the newspaper.

LC: What did you actually hear about it? Just that it had happened?

JE: That it had happened.

LC: And did this cause any anxiety to you?

JE: Well I figured I was going to get called back from R&R. I didn’t know militarily what it meant in terms of Quang Tri province since I was in I Corps and this is happening in IV Corps.

LC: Sure, right.

JE: I thought well it would make military sense to do something up at I Corps.

LC: Did you have a view as to rather the United States openly sending forces into Cambodia was a good idea? Did you think about that bigger question as to whether this was a positive development or not?

JE: First of all, I don’t think we should have been there in the sense of looking at the history of the area.

LC: You mean we shouldn’t have been in Cambodia or…

JE: In Southeast Asia.

LC: Oh I see.

JE: It’s like I knew when I was up in Quang Tri that it was a problem about if we… getting permission to fire back. You took fire from villages, some of them that had to go through the province chief before you could fire back. So you know we were sort of
ham strung about what we could do and ignoring the Ho Chi Minh trail that was only a few miles away. Where you have all these missions of people moving back and forth and we’re not doing anything about it.

LC: So the Cambodian invasion was just sort of the next kind of step in this, would you say in this foray into Southeast Asia that was sort of ill conceived?

JE: Right. It’s the sense that you’re going after the tail, why not go after the neck?

LC: Meaning the Ho Chi Minh trail?

JE: Ho Chi Minh trail up near the beginning rather than the tail end of it. The supplies are already down there. Why not stop it or at least do something about it more effectively?

LC: Jim, did you think at that point that the United States might also move into Laos?

JE: I wouldn’t have been surprised.

LC: Ok.

JE: When 1st of 77th got back from Charlie 2 we didn’t do much of anything. There weren’t any rumors but my feeling was it was too quiet, that something was brewing. I knew that after six months out in the field I could transfer to a hospital, so after seven months I transferred to 91st Evacuation Hospital. A few weeks after that then the brigade went out to Khe Sanh, you know out west.

LC: Did that seem to you like it might be preparatory to a move across the border?

JE: It would have made military sense. They went out there and turned around and came back.

LC: Did you keep up with what the 1/77 was doing?

JE: Right.

LC: After you left?

JE Well we got the *Stars and Stripes*. My father usually sent a lot of clippings. So he would send clippings from what was going on that would be like usually from the Dallas paper or the Ft. Worth newspapers.

LC: Did he send you anything what happened at Kent State University?

JE: No.
LC: Really? Did you find out about it some other way?
JE: It was in the news.
LC: Was it in *Stars and Strips*, do you recall?
JE: Probably was. I’ve been looking at some of my photographs and I’ve got one that I took that shows the headline that says, ‘Police kill two students’. I don’t know whether that is Kent State or not.
LC: There was another shooting in the south a couple of days later, I think. Mississippi State, I could be wrong, but there was a second shooting at a historically black college in the south.
JE: I don’t know. This date was for like February. When I did scan it and then blew it up then I could read part of the headline. I thought, ‘oh,’ and that was taken inside the place I lived in Quang Tri.
LC: That is amazing actually.
JE: On the floor you can see this painting I did that looks like Jackson Pollock you know the swirling paint. I did two of those paintings, one in Quang Tri, one in Chu Lai. Matter of fact, if anything it sort of captures the swirling chaos that I was in the middle of.
LC: Jim, there is a couple of things there that I want to ask you about. First of all, you mentioned that you were able to put in for a transfer to the evac hospital after having served a certain amount of time in the field.
JE: Yes.
LC: Was that like SOP, that after having been a battalion aid you could ask for and get a placement to a hospital?
JE: Yes.
LC: Was the sense then that being at battalion aid, because it was more forward, in a forward location, was it more dangerous placement for you?
JE: Oh yeah.
LC: Can you tell me a little bit about the regs around that, if you remember anything?
JE: Well we were just told in advance. After six months out in the field we could request a transfer back to a hospital or a rear area.
LC: Could you specify what hospital?
JE: No.

LC: Ok, so you just put in for the transfer and then whatever was needed at the
time, that was the space that you might be given.

JE: Yeah. What happened was I went from Quang Tri to Da Nang, I think it was
like the 67th Medical Group, and then they determined where I was going.

LC: I see. That happened for you in, am I correct in saying June of 1970?
JE: Oh, about the 5th, 4th or 5th of June.

LC: You mentioned that you were doing some painting while you were in Quang
Tri. Can you tell me, first of all, how did you get supplies to do that and what were you
painting on?

JE: I was painting on either plywood or masonite. I was looking at one of my
photographs and I realized that there was a small building that I thought was an outhouse
between the hooch that I lived in at Quang Tri and the aid station. I realized that wasn’t
an outhouse that was where we stored paint.

LC: Where you stored paint?
JE: Yes.

LC: What kind of paint?
JE: Oil paint.

LC: Was it cooler in there or safer?
JE: I don’t know. It may have been safer, you know it was volatile; it was oil
paint. I don’t know because I got a photograph of Paul Sauer, the Medical Service Corps
lieutenant, painting the door of our hooch red. Look behind him and here is the door open
and I realized, ‘Oh, that’s where we stored paint.’

LC: Was the paint that you were using something that was already available kind
of on the base or at the battalion headquarters?
JE: Right.

LC: So you were just kind of taking what was already there. It wasn’t something
special ordered.

JE: No, it was whatever was in that little supply house.
LC: Jim, if you can, just reflect for a minute on what role painting was playing for you at this time. Can you say anything about that?

JE: I just think it was sort of with chaos and the swirling paint that was just thrown on the canvas. Part of that sort of retrospect, even I think at the time, I wasn’t particularly thinking about what it meant. It was just what I wanted to do.

LC: Was it expressing something?

JE: Right.

LC: Outlet, as an outlet?

JE: Yeah it was outlet because two sorts of artistic outlets I had were photography and just painting. I didn’t do any more paintings but I was doing a very large amount of photography.

LC: Would it be accurate to say that you were spending a lot of your free time, in your uncommitted time, on the photography?

JE: Right. There was a Special Services Club that was short distance away from the aid station in Quang Tri so it was in a few minutes, a very short period of time I could get there. At night it was air-conditioned. They had a very good photographic lab, tons of equipment. I was getting help from Paul Sauer and Jaan Goad, who was one of the 91 Charlie’s, about photography. I had always painted since I was a kid so it was sort of, you know, I knew about composition, I knew about sort of a preference for things that I liked, things that I didn’t like from like composition. By working in the dark room I discovered it’s a lot easier to take good negatives rather than try to correct it in the dark room.

LC: Had you done much photography before you arrived in Vietnam?

JE: No.

LC: Any?

JE: Unfortunately not.

LC: Really.

JE: I got an instamatic camera maybe ’68. The last batch of stuff that I sent to the archive was like 24 rolls of Instamatic slides. I realized that I couldn’t do with that. I mean the quality wasn’t there for doing prints. So then I got a 35 mm Canon camera probably like February 1969 or ’70 rather.

LC: Now, how did you get the camera?
JE: At the PX.
LC: Was film a problem?
JE: Nope.
LC: You could get as much as you wanted?
JE: Oh yes.
LC: So you were, with the help of a couple of friends, you were sort of teaching yourself how to develop and all that?
JE: Yes.
LC: This was providing you with, I don’t know, what would you say it provided you with?
JE: Well, it gave me something to do because most of the time I was bored. I did some…light drinking. I do drink some, but like you know spent a lot of time drinking has never been an interest or doesn’t work for me. So it was what I could do in the evening, at least part of the time and realize it was very creative about what I could realize by doing this. It was documenting what happened where I was.
LC: Were you aware of that function? Were you conscious of that function of photography at the time that you wanted to keep a record of some way of what was going on?
JE: I personally like keeping a record because like in like storytelling because I mean there is like a series of calling in a medevac helicopter at Charlie 2. First of all there is a jeep, they have smoke grenades or whatever it is, so it is like yellow/green smoke. They are calling in the chopper and the chopper is coming in. The chopper is on the landing path and then taking off. Then there is another series that I took where I was on top of the medical aid station bunker and I did, after I got my 35 mm camera and I did a 360-degree panoramic view. It is just turning around to portray the whole area where the battalion was.
LC: That’s amazing. And you were thinking of it in terms of storytelling and getting sequences of things that happened?
JE: I think sequences and just where I am, what is going on and learning what I am doing and what’s working and what’s not working.
LC: And you were doing this for yourself though, is that right Jim? You weren’t thinking down the line or were you about some potential use for this material in the future? Were you doing it for yourself in the moment?

JE: I think it was pretty much in the moment. I had an interest in like genealogy before but I really don’t think it was that much future oriented. I felt like what was going on was different and I wanted I guess a scrapbook of what happened.

LC: Jim, you also mentioned alcohol use and I wonder if you can talk about what your observations were at the time as to how much alcohol and drug use played a part in the lives of at least the people that you were around?

JE: There was a lot of drinking. The Army was obsessed about drug use and maybe I was oblivious to it, but I was certainly very aware that the drug of choice and the most obviously abused drug was alcohol but the military ignored that. Maybe I wasn’t aware of secondary, you know, other drugs that are being used with the alcohol. Certainly at least where I was, wasn’t evident.

LC: As a physician serving over there, did you ever see a diversion of medical pharmaceuticals?

JE: No, because they were pretty tightly controlled. When I was at Quang Tri we had an audit monthly by someone else who was not part of the medical platoon. We did have, like the medics would have injectable morphine, you know the unit doses. They had some out in the field but they had to account for it and we kept the rest of it in the safe at the platoon. So I don’t think it would have been that easily diverted.

LC: So the protocols around that were fairly strict.

JE: They were fairly strict, yes.

LC: Did you see or know about marijuana use or anything harder than that at all?

JE: Well I heard about it but basically I didn’t see it happening.

LC: And any of you patients ever come in with symptoms or side effects that you thought might derive from drug use?

JE: One of the medics, you know I suspect was probably doing a lot of marijuana, but I don’t know. I never saw him use it. When I was at the 91st Evacuation Hospital we saw a lot of guys who came in who were out of their heads. Most of those had been drinking, they may have been doing something else but primarily they had been drinking.
They very well may have been doing other stuff and they weren’t talking about it. They certainly smelled like they had been drinking.

LC: If I can, I want to ask about another area that is fairly unpleasant and that has to do with any observations you may have had about racial tensions during the period you were there. ’69, ’70 was one in which certainly there were heightened tensions between African-Americans and whites in the states and to a lesser extent Hispanics and African-Americans. I wonder if you saw any incidents that made you sort of sit up and take note of race relations while you were over there?

JE: One was the way the military handled a particular dermatitis that African-American men get when they shave closely. Not all get it, but they shave closely, well obviously the beard gets ingrown, get bumps. They shave more closely, which then causes bleeding. They get infected. The military’s viewpoint was that these men, to defy authority, deliberately developed this dermatitis.

LC: By doing what, shaving, pushing the razor down harder or something? I mean how would you…

JE: Well no, we were supposed to be closely shaven.

LC: Right.

JE: As for Anglos you shave closely then it’s usually not a problem. The view was that the blacks were doing it as an act of defiance. When there was the medical fact going on that they were prone to this situation. So these guys are wanting to get profiles, which you know, not to shave closely and the Army was saying no you can’t do it because it will affect discipline in the fields.

LC: Did you get this by a briefing or just kind of informal quarters?

JE: Well basically we weren’t supposed to profile for this unless it was really severe.

LC: By profiling you mean?

JE: Having permission not to shave closely or to have like, a closely cropped full beard. So I felt like this is pretty much institutionalized prejudice.

LC: Yeah. How did you handle the situation?

JE: I profiled them as necessary. That wasn’t popular with the command but I was not…there was an act of defiance like, ok, I don’t think so.
LC: Did anybody come down on you and say, ‘Evans, you need to toe the line on this issue,’ or did it kind of get by?

JE: Well I had comments from the major, brought the message from brigade. So that was part of it. The African-Americans tended to be off to themselves. So that was going on. I remember one, I mean there were quite fragging incidents which I think I already sent you in Quang Tri but one of those…there was an African-American man, Captain Osteen whose D Company had issued a direct order to and then Osteen went to arrest him. Pulled his revolver, then the two guys started fighting over the revolver. Eventually the guy was subdued and arrested. I don’t know, I think the guy refused the direct order but I don’t know what the order was about.

LC: Do you know what happened? What was the outcome of that exchange?

JE: I assume it was court-martial, but no I really don’t know specifically.

LC: You said there were quite a few incidents, how would you hear about them? Just, kind of, chatter, chatter going on, or as an officer did you hear more?

JE: First of all one of the medics named Priest who is a conscientious objector who was pulling charge of quarters in Captain Osteen’s office one evening. The medics, among others, were rotating through there at night. Some one rolled a grenade in there, into the office, and severely wounded Priest. It blew up his guitar. I’ve got a picture of the neck of the guitar. He was transferred to 18th Surgical Hospital out of country and he blamed me for it happening that he shouldn’t be pulling charge of quarters but they had been doing it before I got there at the battalion. The feeling I had was if they had not been pulling charge of quarters where they were they would have been out on the bunker line.

LC: Jim, just for reference, can you say what ‘charge of quarters’ means?

JE: Well basically just keeping the company commander’s office [open] 24 hours a day. I don’t think they were doing anything other than you have to have live, awake body in the company commander’s office, I don’t think they were doing anything.

LC: How was it that you were blamed?

JE: Well Priest felt like that as a medic he shouldn’t have had that duty, but they were doing that before I arrived.

LC: Right, it wasn’t an innovation that you introduced.
JE: It was not an innovation that I introduced. The feeling I had because I said was if they had not been there they could have been out on the bunker line which would have been far more exposed and worst circumstances.

LC: Was this incident with the grenade ever to your knowledge ever tracked down?

JE: No. I mean this is typical. Paul Sauer told me later that someone put a grenade or claymore mines under Lieutenant Colonel Baird’s hooch in Quang Tri. This is like June ’70 after I left. There was an attempt to get one of the company commanders who was West Point graduate. He was a real hard-core disciplinarian about uniforms and stuff like that that didn’t matter. It severely wounded him and his executive officer, a first lieutenant.

LC: How were they wounded?

JE: What I heard was like somebody put like a claymore mine by their hooch and set it off. There was one patient that I saw repeatedly complaining about a bad back. I finally sent him to B Med to get his back x-rayed. I saw him jump off the back of platoon half ton truck or deuce and a half, which is like four or five feet onto the ground with his bad back so the x-rays were negative and came back to the aid station. I told him what I saw, I just happened to see it happen. He later assaulted a company sergeant, first sergeant, out in the field. The first sergeant decked him, knocked him down, broke a vertebra in his back so he ended up with a bad back after all.

LC: What was the origin of their mixing it up, do you know?

JE: I really don’t know.

LC: Jim, did anybody ever come after you for not having ratified their imaginary illness or something similar?

JE: I received threats, ‘If you don’t profile it, to get me out of the field, something may happen.’

LC: Was this while you were up at Quang Tri?

JE: Quang Tri, yeah. If the guys were really politically knowledgeable they got a congressional investigation. They would write the congressmen and the congressmen would request medical information and they could get out of the field that way.

LC: Did that happen much?
JE: Not that much, a few times. I think it was not well known that you could do it.  
LC: Jim, can you say anything more about the threats leveled at you? Did it shake  
you up? Did you just kind of blow it off or how did it affect you?  
JE: Well I was worried. There had already been…there was a fair amount of  
vioence going on against our people.  
LC: It sounds like it.  
JE: So it was certainly presentable to me. I was returning people out to the field.  
LC: Did you feel like you had to watch your back?  
JE: Well the thing is when the fragging occurred they were usually at night and  
the assailant was never seen. So it was always very anonymous. I think later to begin,  
when the guys came in out of the field they had to turn in their claymore mines, their  
grenades, and live rounds of ammunition, but when I was there, that was not happening.  
LC: So people were potentially walking around armed.  
JE: Yeah, they were armed. Like in Quang Tri our hooches were surrounded by  
sand bags, you know protect against incoming. Somebody put a claymore mine or  
grenade on top of it then it could just blow up with building.  
LC: And you mentioned the two officers who were gravely hurt, did you have any  
part in their care?  
JE: No.  
LC: Were you able to track what happened to them or keep track of them?  
JE: What happened is they were transferred to 18th Surgical Hospital and then  
gone out of country. I do know about the captain who was a West Point graduate. At  
Thanksgiving 1969 his men were on bunker duty at Quang Tri and I was with Lieutenant  
Colonel Miller and he asked the men, the captain ‘Have you gotten a hot Thanksgiving  
meal to your men?’ The guy says, ‘No, we’re having C-rations.’ Lieutenant Colonel  
Miller says, ‘You will go to the mess hall right now and you will make sure that they get  
a hot Thanksgiving meal out there.’ I was very impressed with Colonel Miller for doing  
that.  
LC: For even checking.  
JE: For even checking. So when this guy got fragged later I wasn’t surprised  
either. He didn’t care enough about his men to get a hot meal out to them. The Army did
like at Thanksgiving and Christmas. I mean you had roast, turkey, dressing, cranberry
sauce, desserts, I mean they really did a good job of it.

LC: Was it your sense then that he was for punishment or somehow deliberately
depriving them, the men in the field, what was available to them in terms of a good meal?
JE: I think he was indifferent.
LC: Indifferent, ok.
JE: Just never crossed his mind. They can get by on C-rations; they had all the
rest of the time, why not now?
LC: Was that an index to you? Did you see that in some broader scope? Was it an
index to you of that man or of something bigger about the conflict?
JE: I think it was sort of lack of basic leadership skills. I think it was also
transitional view from the past where NCOs or officers could order their men to do
something and it would be done to this is the ’60s and people are beginning to question.
If you have a reasonable question it needs to be answered rather then giving a direct
order.
LC: Right, you have to be able to give some rationale.
JE: Right. I guess one thing that I read recently was Westmoreland’s
autobiography but he said he was focused on three things for men: medical care, food,
and mail beyond the military mission. Part of care giving was those three issues. I
thought ok, yeah.
LC: And those were important for you.
JE: I think they were important things for everybody that was over there.
LC: Jim, let’s take a break.
JE: Sure.