

The Experiences of Vietnam Veterans with Combat Related Limb-Loss: Phase II Findings

Report Prepared for the
Amputee Veteran Research Project, an Initiative
of the Indiana-Ohio Center for Traumatic
Amputation Rehabilitation Research

September 18, 2010



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School of Liberal Arts
Indiana University-Indianapolis

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TABLE OF CONTENTS

CITATION GUIDELINES	3
ACKNOWLEDGEMENTS	4
A. EXECUTIVE SUMMARY	7
A1. Background and Methods	7
A2. Phase II Key Findings and Research, Policy, and Practice Implications	7
A3. Organization of the Report	16
A4. Brief Overview Of Sample and Findings Sections C-J	16
B. METHODS	23
C. SAMPLE OVERVIEW	26
D. MILITARY EXPERIENCES	29
D1. Reasons For Entering The Military	29
D2. Pre-military Self	33
D3. General Military Experiences	37
E. THE INJURY EXPERIENCE	44
E1. Describing Amputation Levels And Other Injuries	44
E2. Immediate Experiences Pre-Injury	49
E3. Immediate Experiences Post-Injury	56
E4. Amputation Experiences	62
F. RECEIVING CARE	68
F1. Experiencing Overseas Care	68
F2. Experiencing US Care	79
F3. Experiences With The VA	84
G. LIVING WITH INJURY I	91
G1. Responding To The Amputation	91
G2. Coping Mechanisms	97
G3. Experiences With Prostheses And Other Assistive Devices	105
G4. Experiences With Physical Therapy	114
G5. Experiencing Disability	118
G6. Experiences With Race And Masculinity	126
G7. Experiencing Discrimination	128
H. LIVING WITH INJURY II	131
H1. Experiencing Pain	131
H2. Experiencing Post Traumatic Stress Disorder (PTSD) And Mental Health Care	137
H3. Experiences With Medication Addiction, Alcohol And Substance Abuse	144

I. LIVING WITH INJURY III.....	149
I1. Experiences With Family	149
I2. Interactions With Patients.....	156
I3. Interactions With Other Veterans	160
J. OUTCOMES	163
J1. Negative Life Outcomes.....	163
J2. Positive Life Outcomes	167
J3. The Biggest Challenge	170
K. IMPLICATIONS – RESEARCH, POLICY, AND PRACTICE	175
K1. Implications For Research	176
K2. Implications For Policy	178
K3. Implications For Practice	179
L. VETERAN PROFILES	182
Profile of Mr. Pete Smith (Above the Elbow)	183
Profile of Mr. Liam Hall (Below the Knee).....	192
Profile of Mr. Frank Robinson (Below the Knee)	199
Profile of Mr. Willy Wilson (Hip Disarticulation, Below Elbow, Above the Knee)	207
Profile of Mr. Gary Thomas (Double Below the Knee)	223
Profile of Mr. Roberto Garcia (Below the Knee)	231
Profile of Mr. Mark Johnson (Above the Knee)	240
Profile of Mr. Ian Moore (Double Below the Knee)	250
Profile of Mr. Bob Taylor (Above the Knee)	261
Profile of Mr. Shawn Jackson (Below the Knee)	268
Profile of Mr. Chris Walker (Below the Knee).....	277
Profile of Mr. Keith Lewis (Above the Knee)	285
Profile of Mr. Jason Clark (Double Below the Knee)	295
Profile of Mr. Troy Baker (Above the Knee)	306
Profile of Mr. Nick Rogers (Above the Knee).....	316
Profile of Mr. Adam Nelson (Above the Elbow).....	324
Profile of Mr. David Anderson (Double Above the Knee).....	333
Profile of Mr. Owen Miller (Below Knee and Above the Knee).....	339
Profile of Mr. Greg Brock (Above the Knee)	342
Profile of Mr. Eddie Foote (Above the Elbow, Below the Knee).....	345
APPENDIX 1: BRIEF DESCRIPTION OF PARTICIPANTS	347
APPENDIX 2: INTERVIEW GUIDE	350
APPENDIX 3: INFORMED CONSENT FORM	354

A. EXECUTIVE SUMMARY

A1. Background and Methods

The Indiana-Ohio Center for Traumatic Amputation Rehabilitation Research (IOCTARR) conducts policy-focused research on the various physical and mental health needs of veterans with combat related amputations, also known as traumatic amputations. The aim is to help determine the best ways to implement the rehabilitation processes for traumatic amputees of present and future conflicts. Researchers at IOCTARR hypothesized that United States military personnel who experience an amputation resulting from combat are likely to have unique rehabilitation needs, especially over the life course. Most such needs are not well understood and are not adequately addressed. However, the multiplicity of conflicts the nation currently faces underlies the urgency of both better understanding and more fully treating such veterans. Indeed, the Department of Defense (DOD) now considers the goal of vastly improving the long- and short-term rehabilitation of military personnel experiencing traumatic limb-loss to be a critical issue. Despite this, little is known about the long-term outcomes of traumatic amputation arising from war. Without this information, the care of US personnel experiencing limb-loss will remain less than optimal.

The Center received a funding award from the DOD in 2006 to examine these issues with Vietnam veterans who experienced combat-related limb loss (Grant#W81XWH-09-1-0375). Most such surviving veterans have lived with their amputations close to, or slightly more than, 40 years. Understanding their experiences, the basic thrust of the project, should shed substantial light on the nature of both the short and long-term needs of current combat-related amputees. The Amputee Veterans Research Project (AVR) unfolded in three phases:

- Phase I developed a large data set of the Vietnam Veteran amputees (the registry database) who agreed to participate in various phases of the study. The registry collected demographic and injury-related information from each participant.
- Phase II collected in-depth interview data from a randomly drawn sample (n=20) of registrants. These interviews probed participants' health and welfare needs during the first 12 months of injury and over their post-amputation lives.
- Phase III constructed a 159 item survey instrument administered to the entire registry to understand the health and care-giving issues associated with traumatic amputations. Researchers also conducted follow-up interviews with two sets of respondents to develop a keener understanding of survey results, especially around issues of social support.

A2. Phase II Key Findings and Research, Policy, and Practice Implications

The key findings are briefly summarized below and elaborated on in sections D-J of this report. Implications for research, policy, and practice are also briefly summarized here and expanded in section K of this report.

1. Post Traumatic Amputation Related Pain

a. Key Findings

1. Pain related to the amputation is a life-long problem and can be disabling when it occurs.

2. Nearly all of the veterans described and reported pain experiences related to their limb-loss, including stump pain (70%), phantom pain (70%), and to a lesser degree phantom sensation (55%).
- b. Research Implications*
 1. More research is needed to understand the neurological and social experience of pain over the life course for combat-related limb loss (e.g., what is the frequency of pain? How intense is it? Is there a neurological pattern? What pain management and coping mechanisms are successful? What effect does pain have on quality of life for the amputee and the amputee's social network? Do veterans from the current conflicts experience post amputation pain differently?).
 - c. Policy Implications*
 1. Policies that provide services and assistance for the combat amputee veteran should recognize that amputation related pain may persist over the life-course and may exacerbate disability due to limb-loss.
 - d. Practice Implications*
 1. The veteran amputees and their primary support providers, including care providers, should be aware that experiences with post-traumatic pain might be life-long and thus require life-long management and care.

2. Pain Medication and Detoxification Care

- a. Key Findings*
 1. Managing pain medication effectively, especially during the first 12 months of injury, but also over the life course is a major challenge for veterans with combat-related limb loss.
 2. All of the veterans experienced excruciating pain following their initial injuries and received pain medication care. Problems arose with inadequate detoxification from, or curtailing reliance on, significant pain medication usage. Specifically, veterans often were not weaned carefully from prescription pain medications and at times were cut off abruptly. Sometimes, discontinuation was deliberate on the part of the care provider but other times sudden discontinuance was inadvertent and resulted from poor coordination and communication when being transferred between facilities. This failure caused unnecessary suffering, as the veterans had to manage withdrawal symptoms on their own.
- b. Research Implications*
 1. Research is needed to investigate whether current veterans with combat related limb-loss encounter similar experiences or if detoxification care has improved.
 2. There is a need to understand how veterans perceive the need for and management of pain medication, and to better understand the communication and coordination issues involved in providing pain management care.
- c. Policy Implications*
 1. Policies regarding pain management should ensure that veterans receive better continuity of pain management care when being transferred between facilities or to different providers.

d. Practice Implications

1. The dispensation of pain medications should be carefully implemented during both the start-up and the completion phases of treatment, and particular care should be taken to ensure continuity of pain management care when transfers between facilities takes place.
2. Care providers and the veterans themselves should receive education surrounding prescription pain medication and efforts to discontinue such use should be closely monitored and occur gradually to avoid difficult withdrawal symptoms.

3. Drug and Alcohol Abuse Problems

a. Key Findings

1. Drug and alcohol abuse were significant issues for nearly half of the veterans in the sample (n=9) during their early post-amputation years, and continues as a problem for a very small minority (n=3).
2. Most of these veterans attributed their problems directly to coping with distress and anxieties that stemmed from their combat and limb-loss experiences.
3. Yet despite experiencing such challenges, none mentioned having obtained drug/alcohol rehabilitation services of any kind during their immediate post-trauma care and re-integration into civilian life, nor reported specifics about how they developed strategies for addressing their problem successfully.

b. Research Implications

1. More research is needed to investigate how Vietnam veterans with combat related limb-loss overcame drug or alcohol abuse problems, especially in the context of not receiving formal care.
2. Do amputee veterans of current conflict experience similar drug and alcohol abuse problems? If so, do they receive care and does it help?

c. Policy Implications

1. Policies that provide for counseling and disability compensation for veterans should take into account that alcohol or drug addiction may occur in response to the veterans' combat or limb-loss experience, and benefits and care should be allocated accordingly.

d. Practice Implications

1. Screening for drug and alcohol abuse and dependency, as well as education around risk reduction programs, should occur soon after the veterans start to reintegrate into civilian life and should be assessed periodically across the life-course.
2. Insuring access to mental health care and regular screening for mental health challenges may reduce the reliance on drugs or alcohol as a coping mechanism in response to limb-loss and the combat experience

4. Post Traumatic Stress Disorder (PTSD) and Mental Health Care

a. Key Findings

1. Nearly all of the veterans in this sample reported experiencing severe mental health distress in the initial months and early years following their injuries. The reported distress ranged from severe depression to PTSD symptoms.

2. Mental health care during the initial months and early years following the veterans' injuries was non-existent, and a significant number received no formal care at any point over the life span.
3. Some of the veterans who suffered from PTSD did not understand their symptoms and others viewed a PTSD diagnosis negatively.
4. Symptoms of PTSD were not always immediately apparent and emerged at various times in the post-amputation life-course, especially during major life transitions such as a divorce or retirement.
5. Almost half of the veterans report that they currently suffer from PTSD.

b. Research Implications

1. More research is needed to verify the high incidence of self-reported PTSD through standard clinical assessment and to understand the occurrences, long-term effects, and experiences of living with PTSD, especially during major life transitions such as divorce or retirement.
2. More research is needed to identify both structural (e.g., limited availability of mental health care) and individual level barriers (e.g., negative perceptions of PTSD held by the veterans themselves) to mental health care among combat amputees.
3. More research is needed to compare the level of reported mental health care received by amputee veterans of past and current conflicts to assess if mental health care has improved.
4. More research is needed to learn about current veterans' perceptions of mental health afflictions such as PTSD and whether they hold less negative views of mental illness than veterans of past wars.
5. More research is needed to examine how the lack of mental health care in the early years, among those who report PTSD, affects the veteran's quality of life.

c. Policy Implications

1. Screening for mental health illness, and the provision of appropriate treatment, should be part of routine health care from the very beginning of their post-amputation period to their later years.
2. More funding should cover the provision of interventions that successfully reduce barriers to mental health care among combat amputees, especially later on life. Will geographic disparities play a role in whether veterans will receive follow-up care in their futures?

d. Practice Implications

1. Providing information about PTSD, and referrals for mental health care, should become standard procedure in the amputee veterans' program of care.
2. Some of the veterans viewed PTSD negatively. Such perceptions may hinder them from being open about their mental health state or from seeking help if it is needed. Education should focus on PTSD and interventions to reduce the stigma around PTSD.
3. Similarly, education around the different kinds of mental health services now available for veterans should increase use of such services.

5. Prosthetic Devices

a. Key Findings

1. Nearly all the veterans used prosthetic devices, but with mixed results. For many, these devices helped them gain independence and provide a degree of normal movement, thus having a positive effect on their self-image. However, learning to use prostheses was not always easy, and some veterans described difficulties with pain, and skin problems because of using such devices.
2. Some amputees did not take advantage of newer technologies now available to OIF and OEF veterans. Others had to replace their devices several times over the life-course due to wear and tear, while others had to resort to using other assistive devices such as wheelchairs as they aged.

b. Research

1. More research is needed to understand what is necessary to facilitate effective prosthetic use as well as the long-term effect on the body from using a prosthetic device.
2. Research is needed on reasons why aging veterans may move away from a prosthetic device later in life (e.g., obesity, other co-morbidities, impact of joints, too much hassle, and/or lack of support from the VA and other health systems related to communicating new technologies that might make it easier to handle a prosthetic device). What is the impact of the aging process on the ability or willingness to use a prosthesis?

c. Policy

1. Policies that provide for assistance to replace prosthetic devices or compensate for such devices, as well as other assistive devices, need to take into account that prosthetic use is a life-long experience and that as the veterans age, they may increasingly rely on additional assistive devices. Therefore, resources need to be allocated to ensure that veterans of past wars have access to current state of the art technology later on in life.

d. Practice Implications

1. Interventions to assist veterans with combat related limb-loss to maximize positive outcomes over the life span should take into account that use of prosthetic devices is an on-going process. As technologies improve and the veterans age, they may benefit from interventions late in life to encourage their use and assist them with the better technologies or different kinds of assistive devices.

6. Family and Spousal Support

a. Key Findings

1. Families are critical sources of support for the veterans. Spouses especially played a pivotal role in facilitating the emotional and physical healing of the veterans. Many veterans in this study noted that spousal support is what made the healing process a positive one.
2. What begins as supportive roles often transitions into care-giving roles as the veterans age.
3. Several of the amputee veterans went to great lengths to underplay their injury, seemingly resentful of any special assistance they received even

though they still need (and in fact desire) substantial support, especially from their personal (e.g., family) care givers.

4. Some veterans noted the immense strain that being a spouse of someone with combat related limb-loss caused in the marriage; in a few cases it led to divorce (though perhaps in conjunction with other factors).

b. Research Implications

1. More research is needed to investigate issues regarding the nature of family social support from the perspective of the veterans and their primary support providers, especially how supportive roles may take on a greater responsibility and shift into a care-giving role over the life-course.
2. More research is needed to better understand the nature of strain in veteran intimate relationships and ways identified to better support the primary support person.
3. More research could explore contradictory messages that veterans with combat related limb loss may exhibit and how best to manage them, from both the perspective of the veterans and their support/care providers.

c. Policy Implications

1. Some services for the veterans with limb-loss should be extended to key significant others, such as the spouses or other main informal caregivers of the afflicted. Such provisions might include educative services focused on limb-loss issues and, in many cases, some degree of counseling and mental health services. Resources devoted to such caregivers continue to be an investment in the veteran, and one that may save money in the long run.
2. Policies should be examined to ensure they emphasize both the need for independence as well as the need for support among combat amputees.

d. Practice Implications

1. The provision of information about the substantial difficulties that families of amputee veterans face should also become standard fare for both the veterans and their families. The physical and emotional challenges these families will confront are enormous and every effort expended to prepare them should help enormously. Creative ways to support families should be explored (such as amputee veteran caregiver support groups).
2. Significant care providers, whether professional (e.g., medical personnel) or personal (e.g., spouses), need to be aware of, and find ways to accommodate, the contradictory impulses that the veteran amputees will often exhibit. In short, a 'best practice' would be a balance of providing support while allowing for independence.

7. Peer Support

a. Key Findings

1. The veterans were virtually unanimous in extolling the virtues of peer companionship in their recovery and responding positively to limb-loss.
2. Further, many of the veterans spoke forcefully of their desire to stay connected over the life course with those who participated in, or befriended them during, their war/healing experiences.

b. Research Implications

1. More research should examine the vital role of peer social support, both from the perspectives of the veterans and their peers (during the recovery process, integration into the community, and quality of life over the life span).

c. Policy Implications

1. Policies should be developed to support different ways to stay connected with military peers such as through volunteer opportunities, military organizations, as well as to support the veterans to develop skills and the means to do so -- if military service is not an option or not pursued. Digital technology such as the virtual world environments via the internet might be particularly resourceful in developing different options to stay connected.

d. Practice Implications

1. The rehabilitation and care efforts will often be significantly enhanced if the exposure to “peers” (other veteran amputees) can be incorporated into other pre- or post- treatment experiences. For example, the veterans in this sample experienced the following:
 - a. Peers can serve as a comparison group – thereby sensitizing the veteran to the very realistic perspective that their injuries could have been worse.
 - b. Peers can help reduce stigma associated with limb-loss by showing the veteran that he/she is not alone in having to sustain such injuries and their associated life changes.
 - c. Peers can provide guidance and support to encourage the veterans to access needed services (especially mental health care).
 - d. Veteran peers from past wars can serve as role models or counselors for veterans from current wars. This can provide the past war veteran with a chance to share their experiences while it provides the new veteran with the benefits of being helped by someone who is (or has been) in their situation.
2. Facilitating contacts between the amputee veterans under treatment and specific ‘peers’ and other non amputee veterans that the amputee came to know during the initial phases of their ordeal may also provide additional recovery benefits.

8. Educational and Career Paths

a. Key Findings

1. All of the veterans had their envisioned career paths abruptly interrupted. Such paths included those of some veterans who had planned to make a military career when they joined the military. As a result, such veterans were devastated when they were forced to retire due to their limb-loss. That said, all the veterans in this sample reported gainful employment for much of their civilian life.
2. Importantly, several veterans mentioned that their limb-loss was one of the main motivating factors for them to return to school and obtain a college degree.

b. Research Implications

1. More research is needed to explore how veterans with combat related limb-loss positively adjust to the realization that their career goals may be dramatically altered due to limb-loss.
2. More research could also explore how career goals of veterans are impacted by a variety of kinds of traumatic injuries (e.g., limb-loss, traumatic brain injury, major burns).

c. Policy Implications

1. Policies should continue to allow for accommodations such that amputee veterans can continue to serve in the military if they so desire. Having the option to stay in the military may aid in the recovery of those veterans who wish to remain in the military.
2. Policy makers should explore whether policies that provide financial support for combat veterans to pursue higher degrees might provide additional financial educational support for those who sustain traumatic injuries such as limb-loss because of the effect of traumatic loss on career options (e.g., special scholarships for veterans with traumatic injuries).

d. Practice Implications

1. A greater emphasis might be given to providing information about higher education options, as well as appropriate advising (e.g., how to apply, degree choice, financial options) in the rehabilitation plan of those veterans with combat related limb-loss who lack a college degree.

9. Work and Insurance Related Discrimination

a. Key Findings

1. Some veterans reported experiencing both work and insurance related discrimination when they were denied work or insurance due to their limb-loss.

b. Research Implications

1. Discrimination today is more likely to occur in the area of health disparities and more research should explore this issue among current veterans (e.g., access to care). We should not simply assume work or insurance related discrimination does not exist because we now have legal remedies. More research can be done to explore whether work or insurance related discrimination continues to persist among combat amputees, perhaps in less obvious ways.

c. Policy Implications

1. The 1990 American with Disabilities Act would make the experiences described in this report illegal today and less likely to occur. However, more subtle forms of discrimination may continue to exist.

d. Practice Implications

1. Programs geared towards helping military personnel with combat related limb-loss should include assessing whether they experience any form of discrimination as well as interventions that could help veterans manage and address such unequal treatment if it does occur.

10. Life Passages

a. Key Findings

1. Despite experiencing the traumatic effects of combat related limb-loss, all of the men in the interview sample made the passage through important life-transitions, including finding meaningful long-term intimate relationships (19 had married at some time, 15 were currently married at the time of the interview, 19 became fathers, and all 20 had found gainful employment).

b. Research Implications

1. More research is needed to explore what factors are important predictors of success in major life-transition experiences (e.g., marriage, parenthood, and career) for veterans with combat-related limb loss). Our cohort was mostly well educated. More research should explore whether other amputee veterans of lower social-economic level fare as well.

c. Practice Implications

1. Significant care providers, whether professional (e.g., medical personnel) or personal (e.g., spouses), need to be aware that despite experiencing combat-related limb loss, most such veterans will go on to experience the major life transitions such as marriage, parenthood, and steady employment. Losing a limb during combat does not necessarily mean such transitions will not occur.
2. Exposure of newly injured veterans to veterans who have been living with combat-related limb loss for some time and who have experienced some of life's major transitions, may serve as inspirational role-models in modeling that life can go on despite traumatic injuries (e.g., importance of peer support).

11. Life-Long Challenges of Combat Related Limb Loss

a. Key Findings

1. Most of the veterans in this study indicated that certain experiences that they believed were associated with their combat-related limb-loss were life-long challenges such as PTSD, managing physical disability that progressively gets worse as the veterans age, and traumatic amputation related pain.

b. Research Implications

1. More research is needed to better understand how these issues are manifested as veterans age (e.g., Do they have to retire early? Are they spending more time in the health care system?).
2. It is unclear how this finding compares with non-military individuals with traumatic limb loss injury or with military veterans who sustain other kinds of traumatic injury such as major burns or traumatic brain injury. As a result, more studies are needed which,
 - a. Compare the experiences revealed in this report with those of male (and female) amputees whose limb-loss occurred in civilian life.
 - b. Compare the experiences revealed in this report with those of other veterans who sustain different kinds of traumatic injury.
3. All of the issues explored in this study, as well as relevant issues not addressed with this sample, should be probed further with veterans with combat related limb-loss of more recent conflicts.

c. Policy Implications

1. Policies that provide services and assistance for the combat amputee veteran need to take into account that specific issues related to the effect of experiencing both combat and major limb-loss (such as PTSD, physical disability, and phantom pain) may persist over the life-course.

d. Practice Implications

1. Healthcare professionals may have education around caring for the elderly but may lack information about the disabled elderly. Professional and support networks need to be educated to understand and assist with life-long problems associated with traumatic limb loss.

A3. Organization of the Report

This report presents the findings of the interviews by organizing them into seven broad categories (Sections D-J of the report), with two preliminary sections (methods and sample.) labeled B & C, and a concluding section (K) that articulates the implications of this phase of the study. The first three categories (D, E, & F) that derive from the findings are labeled 'Military Experiences,' 'The Injury Experience,' and 'Receiving Care.' The subsequent three sections (G, H, & I) are labeled 'Living with Injury' I, II, and III, with the divisions therein reflecting distinctions by type of impact on the veterans' lives. Section (J), 'Outcomes,' conveys the affects of the injury on life outcomes. Each section begins with a summary overview of the findings, which are then followed by numerous supporting quotes from the veterans.

In addition, Section L titled 'Veteran Profiles', provides profiles of the veterans' lives taken one at a time. These profiles present a rich understanding of the veterans' individual experiences, and the impact these experiences had on them because they follow each veterans' story in one overall narrative rather than parceling out their experiences by specific themes as is done in sections D-J of this report. This report presents the profiles in chronological order from the time the interviews were conducted. Each profile begins with the participant's pseudo name, followed by the original number of pages of the final interview transcript. It then provides a brief description of select socio-demographic characteristics of the veterans such as their military division, nature of their limb-loss, when they enlisted and whether they have experienced certain health issues such as diabetes, phantom pain, or depression. Then the profile is presented.

Finally, three appendices are included. Appendix 1 includes a brief socio-demographic description of the participants, including their military division, age, nature of their amputation, other injuries or co-morbidities, general health status, and martial and parenthood status. Appendix 2 includes a copy of the interview guide and Appendix 3 includes a copy of the informed consent form.

A4. Brief Overview Of Sample and Findings Sections C-J

Section C. Sample Overview: This section describes the socio-demographic and health related characteristics of the sample.

1. Random sample of 20 Vietnam Veterans with combat related limb-loss were interviewed.
2. All male, average age 62.
3. Sixteen (80%) were White, three (15%) were Black and one (5%) was Hispanic.

4. Fifteen (75%) were currently married and nineteen (95%) had children.
5. Twelve (60%) served in the Army, seven (35%) in the Marines, and one (5%) served in the Navy.
6. Eleven (55%) had a single amputation (of which only two were upper-extremity amputations), eight (40%) had sustained double amputations (of which five were lower limb amputations), and one (5%) lived with a triple amputation.
7. Nearly all currently used (80%) a prosthesis of some kind and the average age at which they experienced their amputations was 21 years.
8. At the time of their injuries, eight (35%) experienced head injuries (35%), two (10%) had spinal cord injuries, five (25%) had broken bones, and five (25%) had major burns.
9. The men self-rated their health in near similar proportions as fair (30%), good (30%) or very good/excellent (40%).
10. Fourteen (70%) reported currently experiencing both stump pain and phantom pain; just over half reported phantom sensation (55%).
11. Eight (40%) reported currently suffering from depression and nine (45%) reported currently suffering from Post Traumatic Stress Disorder (PTSD).
12. Currently, one (5%) has cancer, two (10%) have diabetes, six (30%) have heart disease, eight (40%) have back pain, eight (40%) have arthritis, and six (30%) are clinical diagnosed as overweight or obese.
13. Five (25%) currently smoked cigarettes and three (15%) reported current alcohol or drug abuse.

Section D. Military Experiences: This section covers several areas that relate to the veterans' military experiences. It starts by describing their motivations for entering the military, how they described themselves prior to entering the military, and ends with general experiences of being in the military. The major sections and findings are listed below.

1. **Reasons For Entering The Military**
 - a. Enlisting To Avoid Home Life or Wanting Something Different
 - b. Wanting Military Career/Wanting To Serve
 - c. Enlisting To Avoid Being Drafted
 - d. Being Drafted
 - e. Enlisting For Multiple Reasons
2. **Pre-military Self**
 - a. Working And Going To School
 - b. Shy/Introverted/Quiet
 - c. Rebellious/Wild
 - d. Overlap – Shy And Wild
 - e. Easy Going And Happy
3. **General Military Experiences**
 - a. Receiving Training
 - b. Being Sent To Vietnam
 - c. Volunteering To Go Back To Vietnam
 - d. Receiving Medals
 - e. Being Unhappy with Discharge – Being Labeled As 'Unfit'

Section E. The Injury Experience: This section provides descriptions of the veterans' injuries, ranging from hearing loss to major burns, and their amputations, as well as what happened just before their injuries and what happened immediately following their injuries. The vast majority sustained direct combat blast injuries. This section includes the following subsections:

- 1. Describing Amputation Levels And Other Injuries**
 - a. Arm Amputations
 - b. Leg Amputations
 - c. Double Leg Amputations
 - d. Combination Amputations – Upper And Lower Limb Loss
 - e. Experiencing Other Injuries
- 2. Immediate Experiences Pre-Injury**
 - a. Direct Combat (Blast Injuries)
 - b. Direct Combat (Non-Blast Injury)
 - c. Non-Combat (Blast Injury)
 - d. Unsure Of Direct Combat Versus Non-Combat Injury (Both Are Blast Injuries)
 - e. Unsure Of Combat Versus Non-Combat Or Blast Vs. Non-Blast
- 3. Immediate Experiences Post-Injury**
 - a. Not Realizing Extent Of Injury
 - b. Knowing What Had Happened
 - c. General Descriptions
- 4. Amputation Experiences**
 - a. Brief Descriptions
 - b. Appreciating Care
 - c. Justification For Amputation
 - d. Deciding Whether Or Not To Amputate
 - e. Describing Surgery
 - f. Being Told Of Amputation
 - g. Realization Amputation Has Occurred
 - h. Vaguely Remembering

Section F. Receiving Care: This section describes the veterans care experiences during the first 12 months following their injuries. Overall, the veterans described the care, especially overseas care, they received as excellent and superior. Their only complaints centered on US care experiences and included the lack of adequate drug detoxification care, limited mental health care, some negative interactions with physicians, and negative experiences with care received from the VA such as inadequate facilities for amputees and encountering bureaucratic problems. The following section is divided into three subsections to illustrate experiences with overseas care, U.S. care, and VA hospital care. Specific descriptions of physical therapy and mental health care experiences are addressed in their own sections later in this report.

- 1. Experiencing Overseas Care**
 - a. Immediate Care In The Field
 - b. Being Transported From Field To Field Hospital
 - c. Receiving Care In Field Hospitals
 - d. General Experiences Receiving Care In Japan And The Philippines
 - e. Not Remembering Care
 - f. Having Positive Experiences And Being Satisfied With Overseas Care

2. Experiencing US Care

- a. General Procedures And Treatment
- b. Treatment For Medical Problems Other Than Primary Injuries
- c. Negative Experiences With Medical Personnel
- d. Having Positive Experiences With Medical Personnel

3. Experiences With The VA

- a. Negative Experiences
 - 1. Being Upset With VA Physicians
 - 2. Deal With Bureaucracy
 - 3. Perceiving The VA As Lacking Technology And Being Unprepared For Limb Loss Injuries
 - 4. Being Miserable In VA's Care
 - 5. No Life Counseling Provided
- b. Positive Experiences
 - 1. Having Friends In The System
 - 2. Being Happy With VA Physicians
 - 3. Seeing VA As Changing

Section G. Living With Injury I: To understand how the veterans lived with their injuries, they were asked to report on how becoming an amputee affected their relationships, educational achievements, careers, mental health and other important facets of life. This section describes the veterans initial responses to their injuries, the different coping mechanisms that the veterans utilized to adjust to living with limb-loss, as well as their experiences with assistive devices, physical therapy, specific nature of their physical disabilities, as well as experiences with racism and discrimination. This section has the following seven subsections:

1. Responding To The Amputation

- a. Feeling Survivor's Guilt
- b. Feeling Angry And Hating Himself
- c. Blaming Self
- d. Initially Blaming Commanding Officers And Not Blaming Anyone
- e. Expectable In Combat

2. Coping Mechanisms

- a. Avoiding Interaction With Others, Alcohol And Drug Use
- b. Comparing Self To Others – Putting Injuries In Perspective Of Worse Outcomes
- c. Positive Attitude
- d. Striving To Remain Independent
- e. Catholic Discipline
- f. Sports
- g. Humor And Peer Support

3. Experiences With Prostheses And Other Assistive Devices

- a. General Early Experiences Using Prosthesis
- b. Experiencing Pain Or Discomfort Early On
- c. Rejecting Prosthetic Devices And Newer Technologies
- d. Improvements And Changes In Prosthetic Devices
- e. Concealing Limb-Loss
- f. Reassuring Others That They Were Ok And Proving Ability

- g. Being Independent Through Use Of Assistive Devices
- h. Becoming A Role Model For Other Veterans
- 4. Experiences With Physical Therapy**
 - a. Limited Physical Therapy
 - b. Not Wanting To Go To Physical Therapy
 - c. Progressing Because Of Physical Therapy
 - d. Benefiting Psychologically From Physical Therapy
 - e. Not Needing Physical Therapy
 - f. Contrasting Physical Therapy Of Today And Vietnam War Era
- 5. Experiencing Disability**
 - a. Experiences Being Rated
 - b. Experiencing Physical Difficulties
 - c. Receiving Negative Attention
 - d. Responding And Adjusting To Disability
 - e. Rejecting The Disabled Identity
- 6. Experiences With Race And Masculinity**
 - a. Experiencing Racism
 - b. Interactions Between Amputee, Race And Masculine Status
- 7. Experiencing Discrimination**
 - a. Experiencing Insurance Related Discrimination
 - b. Experiencing Work Related Discrimination
 - c. Experiencing Hostility Due To Veteran Status

Section H. Living With Injury II: This section describes the veterans' experiences with pain, mental health issues, addiction to pain medications, and alcohol and substance abuse. The findings illustrate that the veterans experienced an immense amount of pain upon receiving their initial injuries and continue to deal with phantom pain and phantom sensation to this day. A major lack of adequate mental health care and lack of adequate pain medication detoxification care was also common. Some veterans also developed challenges with drug and alcohol use and in some cases addiction. This section is divided into the following three major sections:

- 1. Experiencing Pain**
 - a. Experiencing Pain Due To Initial Injury
 - b. Experiencing Pain From Care
 - c. Experiencing Current Pain
 - d. Experiencing Phantom Pain
- 2. Experiencing PTSD And Mental Health Care**
 - a. Experiencing PTSD
 - b. Experiences Lacking Mental Health Care
 - c. Barriers To Care I - Being Told PTSD Doesn't Exist
 - d. Barriers To Care II - Negative Perceptions Of PTSD
 - e. Realizing They Suffer From PTSD
 - f. Helping Other Veterans Cope With PTSD
- 3. Experiences With Medication Addiction, Alcohol And Substance Abuse**
 - a. Experiencing Addiction To Prescription Pain Medication
 - b. Ending Addiction To Pain Medication And Experiencing Withdrawals
 - c. Abusing Alcohol And/Or Drugs
 - d. Ending Alcohol Or Drug Abuse

Section I. Living With Injury III: This section describes the veterans experiences with their families, other patients during the first 12 months, and other veterans, upon returning from Vietnam. It was common for them to mention their wives and girlfriends as the individuals who helped them the most throughout their lives. For the most part families appeared to be supportive. However, in some instances the support provided by family members sometimes upset some veterans as their families tried to help them too much. In addition to family members playing a vital role in their recovery, veterans also talked about their interactions with other patients and veterans that helped them adapt to or accept their injuries. This included interactions ranging from living with other wounded veterans on hospital wards to currently counseling veterans of the current wars. The themes in these three sections are listed below.

1. Experiences With Family

- a. Being Supported By Wives And Fiancés
- b. General Experiences With Family
- c. Experiences With Mothers
- d. Experiences With Fathers
- e. Seeing Family For First Time
- f. Being Treated Differently By Family

2. Interactions With Patients

- a. Comparing Self To Other Patients
- b. Not Connecting With Other Patients
- c. Connecting With Other Patients

3. Interactions With Other Veterans

- a. Not Knowing What Happened To Other Veterans
- b. Keeping In Touch With Other Veterans
- c. Not Wanting To Associate With Veterans
- d. Counseling Veterans

Section J. Outcomes: All of the veterans were asked to describe both negative and positive changes in their life that they attribute to their injuries. They also described the biggest challenges they faced living with amputation. This section describes these changes and challenges and include:

1. Negative Life Outcomes

- a. Being Disabled
- b. Experiencing Negative Health Outcomes Later In Life
- c. Experiencing Hopelessness
- d. Personality Changes
- e. Experiencing PTSD
- f. Wanting To Stay In The Military But Not Being Able To Stay

2. Positive Life Outcomes

- a. Being Closer To People
- b. Becoming Mentally Stronger
- c. Seeing Self As A Better Person
- d. Staying Healthy
- e. Getting An Education
- f. Leaving Vietnam Early

3. The Biggest Challenge

- a. Adjusting To A Prosthetic Device
- b. Being Limited In Physical Activities
- c. Learning To Walk Again
- d. Not Being Able To Have Children
- e. Dealing With The Pain
- f. Needing Patience
- g. Wanting To Fit In And Be "Normal"
- h. Using And Staying Away From Drugs And Alcohol
- i. Fearing Falling
- j. Losing Motivation
- k. Wanting To Stay In The Service But Not Being Able To Stay

B. METHODS

This report provides descriptive findings from phase two of the Amputee Veterans Research Project. The specific aims of phase two were: 1) to describe the first 12 months following the injury that led to the amputation, including the circumstances surrounding the injury and the care and recovery experiences of the veterans during this time span; and 2) to describe the period between that point and the present, focusing on the impact of the injury on the course of the veterans' lives. In addition to their physical and mental health, concern was directed toward their work and family lives.

Twenty Vietnam veterans who had a combat related amputation were interviewed from October 2008 to October 2009. The interviews were conducted over the telephone by two members of the team who were trained in oral history research. The interviews were audio-recorded and lasted two hours. Questions were structured but open-ended. That is, every veteran was asked the same set of questions but questions were open-ended to allow the veterans to share their own experiences from their perspective.

The first section of the interview guide centered on their experiences during the first twelve months of injury. Topics included describing the circumstances of the injury, the post-evacuation care and recovery experience, and a number of more sensitive, psychologically oriented questions, probing how they saw themselves, and how they felt about what they saw, because of the physical realities of their post-injury selves. The second section focused on the period 12 months after the injury and beyond. Questions there were designed to elicit rich descriptions about the affect of the injury on the course of the veteran's life, much like the earlier questions, but for the long haul. We pre-tested the interview guide with a member of the advisory board who is a Vietnam Veteran with combat related limb-loss and made changes to the guide accordingly. The complete interview guide is available in Appendix 2.

Analyses were completed by one member of the team with substantial experience in qualitative research on illness and disability from a sociological perspective, along with several of her graduate student research assistants (including one whom is the coauthor of this report). Interviews were transcribed verbatim by a professional transcriber and the resulting transcripts were imported into NVivo 8 qualitative software to facilitate managing the data.

These interview data are shared in two ways. First, a thematic analysis was used to make sense of the data. This involves the line-by-line coding of the text of the data and the organizing of its salient excerpts into descriptive categories. Patterns among the categories were then developed into major themes to present the findings. Second, we developed profiles of individual participants. These profiles present a rich understanding of the veterans' individual experiences, and the impact on them of these experiences, because they follow each man's story in one overall narrative rather than parceling out their experiences by specific themes as is done in the first half of the report (sections D-J). The profiles are created by first reading the transcript and then removing all references to the interviewers questioning and probes. Then the remaining words of the participant are edited to remove passages that are not important to the topic or repetitive. What results is a short narrative presented in the first person in the words of the participants.

The study received Institutional Review Board (IRB) approval from the IUPUI-Clarian IRB board (Study EX0804-74B). The informed consent form is in Appendix 3.

All quotes appear nearly verbatim. Quotes were edited solely for such reasons as removing inaudible words and redundancies, correcting spelling errors, and clarifying idiosyncratic speech. In addition, it was necessary to include words at times to make the dialogue understandable. Following standard procedures, such insertions appear in brackets. The occasional sizable deletions are indicated by ellipses. Care was taken to ensure that at no time did any edits change the substantive meaning of the veterans' experiences or the authentic voices (manners of speech) of the quoted veterans. Finally, to minimize breaches in confidentiality, all veteran names in the report are pseudonyms.

The significance of the verbatim quotes cannot be overemphasized, as they constitute the heart of this report. In order to provide as much context as possible to their interpretation by the reader, each passage of direct quotation is followed by the first name of the veteran, his military division, race (or Hispanic origin), and amputation level. This latter item, however, necessitated the use of concocted abbreviations to save space and to minimize distracting clutter around the quoted material. A guide to the meaning of these abbreviations and a listing of each instance in which they are used are provided in Table 1a and Table 1b below.

Table 1a: Acronyms Used in Distinguishing Amputation Types of Sample Veterans

Acronym	Amputation Type	Number in Sample
AE	Above the elbow	(2)
AK	Above the knee	(4)
AEAK	Above the elbow/Above the knee	(1)
BK	Below the knee	(5)
BBKA*	Double below the knee	(4)
AAKA	Double above the knee	(1)
FAK	Fingers, above the knee	(2)
AKBEHD	Above the knee, below the elbow, hip disarticulation	(1)

Table 1b: List of Quotation Cites by Veteran Characteristics and Amputation Acronyms

Veteran	Branch of Service	Race or Hispanic Origin	Amputation
Mark	Marines	Black	AK
Pete	Marines	White	AE
Shawn	Army	White	BK
Willy	Army	White	AKBEHD
Owen*	Marines	Black	BBKA
Roberto	Army	Hispanic	BK
Ian	Army	White	BBKA
Bob	Army	White	AK
David	Marines	White	AAKA
Gary	Army	White	BBKA
Frank	Army	White	BK
Jason	Army	White	BBKA
Keith	Marines	White	FAK
Chris	Marines	White	BK
Liam	Army	White	BK
Troy	Army	White	FAK
Adam	Navy	Black	AE
Nick	Army	White	AK
Greg	Marines	Black	AK
Eddie	Army	White	AEAK

*There was one discrepancy between the registry data base data and the qualitative data. In the data base, Owen (Miller) is listed as an AK/BK but he self identifies in the interviews as a BBKA. For this report, I used his self identified amputation level.

C. SAMPLE OVERVIEW

A random sample of twenty persons was drawn from the veteran registry database of 453 veterans. Only 18 were contacted and accepted the invitation to be interviewed, so the final two sample inductees were “purposive” additions. Table 2 and Table 3 below provide comparisons of the demographic characteristics of the sample with that of the overall study registry population (see Appendix 1 for brief descriptions of each veteran).

As shown in Table 2 and Table 3, the demographic and injury characteristics of the study’s total population and those of the sample are quite similar to one another. The 20 interview participants were all male and had a mean age of 62 years. The overall study population’s corresponding figures are nearly identical (100% male and 63 years of age). Likewise, the percentages of the sample that were designated as White (80%), Black (15%), or Hispanic (5%) came fairly close to the corresponding percentages among the veterans of the full study population (89%, 4%, & 4%, respectively). The only significant exception concerned the relatively lower proportion of Black men in the whole study population.

Table 2 also shows that most of the sample’s interviewees were married at the time of the interview (75%), at least some of them had no children, and their overall average number of children was 2.5. Because these particular data were not derived from the registry files, but were gained via the in-depth interviews, we do not yet have corresponding indicators for the overall study population. Other comparisons, however, are possible and they show substantial proportional parity across the two groupings. For example, whereas some 60 percent of the sample veterans came from the army and 35 percent had been marines, 57 percent of the registry population and 39 percent of the same group were veterans of the army, and of the marines, respectively. The remaining branches of the service (Air Force, Navy) provided less than 5 percent of the veterans in either grouping. Finally, whereas nearly half (45%) of the sample men were draftees, only about a third (37%) of the registry group were so inducted. Still, the gap on the item is less than ten percentage points.

Table 3 provides data on the health and amputation status of the sample men and their counterparts with the exception of the interviewees’ self-ratings on their overall health, which was shown in Table 2. On that measure, Table 2 showed that none of the interviewees rated their overall health as poor. Rather, they rated their health, in similar proportions, as fair (30%), good (30%), very good (35%) or excellent. Nevertheless, as Table 3 shows, they reported a variety of health problems and injuries. Pain related to the amputation injury, for example, was common. Fully 70 percent of the interviewees reported stump pain, another 70 percent reported phantom pain, and 55 percent reported phantom sensation. The corresponding proportions among the veterans of the registry differed little. The steepest gap separating the groups on any of these items (stump pain) amounted to a mere 15 percentage points, favoring the sample men.

Numerous additional ailments, including some significant mental health problems, were also reported. As Table 3 shows, a hefty 40 percent of the interviewees suffered from depression, as did 28 percent of the registry veterans. An additional 45 percent of the sample group suffered from PTSD, as did 42 percent of the veterans in the larger grouping. Small proportions of each group suffered from neurologic disorders. The sample group also reported significant proportions who experienced head injury (35%), spinal cord injury (10%), broken bones (25%), major burns (25%), cancer (5%), diabetes (10%), heart disease (30%), back pain (40%), arthritis

(40%), smoking (25%), alcohol or drug abuse (15%), and being overweight or obese (30%). Similar proportions are shown in Table 3 for the registry veterans.

**Table 2: Demographic Characteristics of Amputee Veteran Registry Population
And those of the Interviewed Sample**

Characteristic		Registry Percentage (N=453)	Sample Percentage (N=20)
Male		100	100
Age	Mean	63 Years*	62 Years*
Race	White	89	80
	Black	4	15
	Hispanic/Other	4/2	5/0
Service	Army	57	60
	Marines	39	35
	Navy/Air Force	3/1	5/0
Entered	Drafted	37	45
	Enlisted	62	55
Mean Amputation Age		23 Years*	21 Years*
Health	Excellent	8	5
	Very Good	28	35
	Good	36	30
	Fair/Poor	22/6	30/0
Marital	Married	N/A	75
	Divorced/Single		20/5
Children	(Range) Mean	N/A	(0-4) 2.5*

*These figures are not percentages but rather refer to years or number

**Table 3: Health and Injury Characteristics of Amputee Veteran Registry Population
And those of the Interviewed Sample**

Characteristic	Registry (%)	Sample (%)	Characteristic	Registry (%)	Sample (%)
Head Injury	17	35	Phantom Pain	56	70
Spinal Cord Injury	3	10	Phantom Sensation	53	55
Broken Bones	39	25	Depression	28	40
Major Burns	10	25	PTSD	42	45
Smoking	18	25	Neurologic disorder	3	5
Alcohol/Drug Abuse	7	15	Use Prosthesis	81	80
Cancer	6	5	Single Amputee	69	55
Diabetes	17	10	Double Amputee	25	40
Heart Disease	20	30	Triple Amputee	3	5
Overweight/Obese	25	30	Quad Amputee	1	0
Back Pain	48	40	U Extremity	12	10
Arthritis	52	40	L Extremity	76	70
Stump Pain	55	70	UL Extremity	10	20

On the major injuries underlying their loss of limbs, the distribution of types is only provided here for the sample veterans (see also Table 1a). Roughly half of that group had only a single amputation (55%), but nearly half had sustained double amputations (40%) and one of the twenty (5%) lived with a triple amputation. The vast majority of the men were lower limb amputees, but arms and fingers were also lost by some. The types of amputations sustained by these men included above the elbow (AE) (n=2); above the knee (AK) (n=4); above the elbow and above the knee (AEAK) (n=1); below the knee (BK) (n=5); both limbs below the knee (BBKA) (n=4); both limbs above the knee (AAKA) (n=1); fingers and above the knee (FAK) (n=2); and above the knee, below the elbow, and hip disarticulation (AKBEHD) (n=1). Finally, some 80 percent of the interviewees use prosthesis of some kind and the average age at which they experienced their amputations was 21 years.

D. MILITARY EXPERIENCES

Part of understanding the veterans' experiences with combat related limb-loss entails describing the context of their military experiences. This section covers several areas that relate to the veterans' military experiences. It starts by describing their motivations for entering the military, how they described themselves prior to entering the military, and ends with general experiences of being in the military.

D1. Reasons For Entering The Military

The most common reasons given for entering the military were to get away from a troubled home life, having a strong desire to serve one's country and wanting to have a military career. Veterans also frequently joined under the perception that the draft was inevitable so it was better to join so as to avoid being drafted (especially as being drafted meant lacking some degree of choice in terms of military placement). Finally, some of the veterans were drafted. Only two in this sample were graduated from a military college (one specified he was a graduate of West Point). The veterans' various reasons for entering the military are illustrated below.

Enlisting To Avoid Home Life or Wanting Something Different

- It was the summer of '65 [when] I joined the service. [I joined] to get away from a lot of different things. The home life, just it was pretty bad. I just wanted to get away. I checked out some of the services. I went into the service, into the Army. I felt that was better for me (Shawn, Army, White, BK).
- I dropped out of high school to [enlist and] it was a definite decision. I was in the eleventh grade at that time [and my] primary concern was some family issues that were going on as far as a relatively dysfunctional family environment and my being in trouble every once in awhile (Owen, Marines, Black, BBKA).
- I [just] didn't really have a focus on life [and] Mississippi wasn't exactly the greatest environment to be in. I was looking for something different and so I said [I will] take a shot at the military [and I joined the Marine Corps] (Greg, Marines, Black, AK)

Wanting Military Career/Wanting To Serve

- My ambition at the time was to go in the service and either have a career in the military or perhaps a military-related career afterwards, like the FBI - that kind of work is what I was interested in. [I chose the Marine Corps because] it's a family tradition. Navy is a family tradition in my family. So it was either the Navy or the Marines. The Navy wouldn't take me because at the time they would only take you at 18. The Marine Corps however would take you at 17 with your parents' permission. So I went in the Corps....My dad was Marine. My mom was Navy. I had a bunch of uncles who were, well they were spread around - Navy, Air Force, Army - but many of them were Navy people (Keith, Marines, White, FAK).
- I had intended to make the military a career so I was in a military college. A military college is essentially a military college just like being in the military although being somewhat analogous to being at a military academy. So, the last six months prior to my enlisting in the service was my last six months in college. I graduated and was commissioned in 1966 and entered the military within two weeks of my graduation. That was my intention, so it was just

the culmination of a process that had been set in motion some four years prior to that time (Willy, Army, White, AKBHD).

- [I enlisted and] I guess I thought about being in the military from my earliest memory, maybe in the early elementary grades - first and second grade. My father was a World War II veteran and I used to wear his uniforms and so forth when they would hang off me like, you know, when I was six, seven years old. He came back from World War II in '46 so I was close to five years old. So I thought about it for a long time. I turned 14 years old when I went to Fork Union and into high school and of course I ate it up. I loved the discipline and the military lifestyle that I had even though I was still just a teenager in high school (Chris, Marines, White, BK).
- My attraction to the Marine Corps was my dad was in the Marine Corps and our neighbor was in the Marine Corps and I'd known all my life I was going to go in the Marine Corps when I was in the sixth and seventh grade. [So] this wasn't something I just decided to do. This is what I wanted to do my whole adolescent and teenage years (David, Marines, White, AAKA).

Enlisting To Avoid Being Drafted

- I had volunteered for the draft. My four years as a student had expired. It was when they were going to take me next month, next month. You were blackballed. You couldn't get a loan for a house. You're scared to have children. We decided to volunteer for the draft and probably make use of what I had in skill sets. I'd co-oped and worked at the power company and had all kinds of communication skills from the phone company. But I think where I screwed up was I told them I was from Kentucky and I liked to hunt [but I was] not drafted. [I] volunteered for the draft. Draft number didn't mean much. You were pretty well going to go at that period in time. We were just frozen in time and we couldn't move on and we wanted to move on with our life and it was one way to get past the bubble (Frank, Army, White, BK).
- When I got out of high school I ended up just hanging out for about a year and not wanting to be drafted into the Army. I said to myself I'm going to go and join the Navy and that's how I ended up in the Navy. [I joined the Navy because] I didn't want to get drafted into the Army. So I figured well go in the Navy and that way you join up. You won't get drafted into the Army so that's what I did. But I didn't want to be a so-called grunt in the field but as it turned out, as luck would have it, that's where I ended up at (Adam, Navy, Black, AE).
- I enlisted [because] I didn't want to put two years in and not come out learning anything. I thought it was a good time to - with the draft hanging over my head - had to do one or the other so I went in to learn something (Troy, Army, White, FAK).
- It [the draft] was something that I knew was coming so I guess it was more of a, I know I'm going to have to do it so let's get in and get it over with and get out, you know....[So] I was asked to serve and I went and did it (Liam, Army, White, BK).
- I was going to get drafted. So I volunteered (Eddie, Army, White, AEAK).

Being Drafted

- I thought I would be working for AT&T Long Lines as a career but then I was drafted in 1966. I sort of expected it sooner or later (Bob, Army, White, AK).
- I was doing so well with my apprenticeship and I was making around \$500 a month and I decided to get married and really didn't even think about, I was actually thinking about joining the Navy and going that route and not going as an infantryman in the Army. Then I ended up getting drafted before it got all done. So I was married exactly 30 days and then went into the Army (Gary, Army, White, BBKA).
- [I was expecting to be drafted because] my friends who had gotten drafted who had birthdays around my area. This was before they had the lottery, by the way. So, it wasn't a matter of getting a high number. So I knew that my turn was eventually coming up. I had friends who were, you know, maybe a year older than me or so who got their—they actually sent you tokens to get to the fort that you were going to be inducted at. So I knew my turn was coming (Nick, Army, White, AK).
- At the time I was working for a construction company—Chicago Bridge and Iron. They build water towers, hydroelectric plants, oil storage tanks and I was working on a hydroelectric plant in one, Pennsylvania and then I got transferred to a storage tank project in Bethlehem, Pennsylvania. While I was working in Bethlehem, Pennsylvania, when I received my draft notice, I actually took my pre-military physical at Philadelphia. About one month before I knew I was going in I took a military leave of absence and came back to Illinois. I went into the military on March 13th, 1968 (Ian, Army, White, BBKA).

Enlisting For Multiple Reasons

- I graduated in June of '67 and I enlisted in March of '68. March 15th is when I actually enlisted. Between that time I was just, I even had a girlfriend and I was kind of looking for jobs and stuff. My neighbor had a great job I wanted - repossessing cars but he asked my mom for permission to hire me. She didn't want me to do it because I might get shot at and it backfired in her face (laughter). After listening to that I was just mad and the Pueblo had been captured and I figured I would have been drafted anyhow. I think I was 165 and they were going up to 300 or something and a friend I had gone to school with. I, both decided that if we have to go we might as well go with the best. So we joined the Marines. I thought about [the naval academy] but then I thought no, I want to be a Marine and I figure if I go to Annapolis that's four years there. War could be over and plus you've got another six years after you graduate. [So I wanted to serve in Vietnam]. That was my goal. I grew up watching combat. *The Longest Day*, I read that book twice when I was 13 or 14 years old. Totally hooked on a war, Guadalcanal Diary, and it was especially Marines. My brother was a paratrooper, 82nd Airborne, well 11th Airborne, then 82nd. He was in the army for ten years but I wasn't interested in it (Pete, Marines, White, AE).
- The six months prior to me going to the military, we had the draft. When they drew up your number or your number was up or what have you, you were drafted. So I was kind of just going between jobs just waiting for that to happen and so one day I just ventured to the draft office and I inquired about when my number was coming up. They couldn't tell me but they

say it's coming up pretty quick. Which was really kind of strange because there's a young man they're pleading with them for more time to stay home because his mom was going to get surgery. So I just told the draft people, how about if I take his place. He takes my place. I go now, because I don't have a job and just waiting to be drafted, and he can stay home and be with his mom for the surgery. And that's the way that whole thing started. I don't even know why I did it. I was ready to start looking for something better for myself....It was just that I wanted something, I've always been kind of like the guy that wants to live away from home and to start living my life, develop my own life of sorts. I would say I was very introverted, very shy, very, didn't have any plans for the future. I was kind of just bouncing around and that was pretty well it. Didn't have any direction and I thought the military might give me that, the direction that I needed...[and] I had two uncles. One was a Marine Corp or is a Marine Corp even though he's deceased now and my favorite uncle was in the U. S. Army. He was in artillery. So I looked at both and especially my uncle from the Army and he looked so good in his uniform. He was the nicest person that I could have ever met (Roberto, Army, Hispanic, BK).

- I graduated in ah, let's see, June of 1967 and I remember telling my dad that I was kind of tired of school because I had gone all my life and I think that was like 19 years. Other people only go from like eight years grammar school, four years of high school but I went nine years of grammar school and four years of high school and I did get a scholarship to play football but like I said I wanted to do something else right then and there. Anyway, my dad told me that son, you live under my roof and you got to do something. I said but...you're either going to have to work or go in the service. And while I was in high school I saw these guys that came to the school and these was marines, well dressed, and I remember that and I said, I looked in the phone book to see where I can find the nearest recruiter. I got on the bus one day and told my sister don't tell nobody where I was going and I went to the recruiter and I enlisted (Mark, Marines, Black, AK).

D2. Pre-military Self

The men were asked to describe the kind of person they were and what was going on in their lives prior to entering the military. Only two were working on a military career by attending a military academy or college. Several had completed high school and were working mostly in hard labor jobs like construction, etc. Most were still living at home and some had girlfriends while nearly all dated. There was nothing remarkable about their lives that made them any different from other young men their age. Some were introverted and shy, others more outgoing and rebellious. Below are some of the themes that emerged in response to the question of what they were like prior to entering the military.

Working And Going To School

- [Prior to entering the military] I was working for a construction company—Chicago Bridge and Iron. They build water towers, hydroelectric plants, oil storage tanks and I was working on a hydroelectric plant in one, Pennsylvania and then I got transferred to a storage tank project in Bethlehem, Pennsylvania. While I was working in Bethlehem, Pennsylvania, when I received my draft notice, I actually took my pre-military physical at Philadelphia. About one month before I knew I was going in I took a military leave of absence and came back to Illinois. I was actually, went into the military on March 13th, 1968 (Ian, Army, White, BBKA).
- [Prior to entering the military] I had intended to make the military a career so I was in a military college. A military college is essentially a military college just like being in the military although being somewhat analogous to being at a military academy. So, the last six months prior to my enlisting in the service was my last six months in college. I graduated and was commissioned in 1966 and entered the military within two weeks of my graduation. That was my intention, so it was just the culmination of a process that had been set in motion some four years prior to that time (Willy, Army, White, AKBEHD).
- I was a good student. I was a good ROTC cadet because I was promoted rapidly and fit that type of lifestyle. I liked to observe other people and the people that I looked up to were those that were clean cut, neat, military type people and achievers (Chris, Marines, White, BK).

Shy/Introverted/Quiet

- [Prior to entering the military I had] enrolled in college at Jackson State University in Mississippi. I had completed one year of college and then I was off for the summer. I entered the military during that summer. [At the time] I was 19. I wasn't very well focused. I was very athletic [though and] everything I did revolved around sports. And I was shy. I didn't speak very much and I really didn't know what I wanted to do [at that point in my life]. I [just] didn't really have a focus on life [and] Mississippi wasn't exactly the greatest environment to be in. I was looking for something different and so I said [I will] take a shot at the military [and I joined the Marine Corps] (Greg, Marines, Black, AK).
- Trying to find something to do that was, let's see I graduated in June of '67 and I enlisted in March of '68—March 15th is when I actually enlisted. Between that time I had a girlfriend and I was kind of looking for jobs and stuff. My neighbor had a great job I wanted—repossessing cars but he asked my mom for permission to hire me. She didn't want me to do

it because I might get shot at and it backfired in her face [and] after listening to that I was just mad and the Pueblo had been captured and I figured I would have been drafted anyhow. I think I was 165 and they were going up to 300 or something and a friend I had gone to school with. I, both decided that if we have to go we might as well go with the best. So we joined the Marines....I was a little shy. I loved to play the guitar and played it since I was ten. So I goofed around on that, played with my football with my friends, and just been just nothing, just a regular 18 year old kid, I guess. Didn't have a job. Just had a girlfriend and a guitar. That kept me going for awhile. [But before] I went to Marines I was very shy, introverted. I didn't think much of myself. But after I got out of the Marine Corps I could do anything I wanted to do (Pete, Marines, White, AE).

- I was a quiet young man. I tell people that I was only in two gangs in my life. One was the Boy Scouts and the other one was the Marine Corps. My father was a very strict man. We had to be home at dusk and he, I was just a quiet person. Outside of going out to taking the young ladies to dances and movies [I didn't do much], that was about it (Mark, Marines, Black, AK).
- [Prior to the military] I worked at the night shift at the aircraft company and then daytime you just slept and stuff. I was never much of an extrovert. I didn't go out and party or stuff like that. I would say I was very introverted, very shy, very, didn't have any plans for the future. I was kind of just bouncing around and that was pretty well it. Didn't have any, like I said didn't have any direction and I thought the military might give me that, the direction that I needed (Roberto, Army, Hispanic, BK).
- I had gone to a couple of years of junior college and was probably sort of young and stupid. Probably didn't apply myself. I started working for this construction company one summer between semesters...I was probably, I would say as far as, I was happy go lucky but I would describe myself as maybe introverted. [But] I had a lot of close friends. As far as my college years, that was probably my biggest downfall (Ian, Army, White, BBKA).

Rebellious/Wild

- I was pretty much a hell raiser when I was in seventh and eighth grades and again my freshman year. When we moved to Fargo we tried one year or we did one year in Fargo at Central High School here in Fargo. And then I liked Shattuck so much that I asked to go back so I spent my junior and senior year back at Shattuck and that's where I graduated from high school. [Before entering the military I would describe myself as] pretty much the same as I am now. Pretty reserved but hard-working I guess. You really didn't get much chance to do anything else but I got a, you know, got good friends there. I was in a lot of activities. I was in both the Glee Club and the Choir at school which was very nice because that let us get off post quite a bit. Intramurals. Didn't do anything at the college level as far as sports was concerned but very active at the intramural level (Jason, Army, White, BBKA).
- [Prior to entering the military] I was probably very angry, aggravated with the world, upset, my home environment was not the greatest in the world. It wasn't the worst in the world either but it wasn't the greatest. Rebellious, obnoxious, belligerent, things in that category (Owen, Marines, Black, BBKA).

Overlap – Shy And Wild

- Before I went into the Army I was shy and backwards and couldn't even talk in class because I was shy. Didn't want to talk. I guess it comes down to okay everybody's staring at me and the only way to face it is to be outgoing towards it. [But I was also] wild and reckless...[And] we were dirt poor when I grew up [so] I just learned a work ethic and just being hard (Gary, Army, White, BBKA).

Easy Going And Happy

- [I was] outgoing, in with my friends, aggressive, enjoyed life, did not take life overly seriously. I was a fun-loving kind of guy. I was serious about my career choice to the degree that I wouldn't let anything interfere with that. My academic studies and military studies were directed toward getting into the military for a career. I wasn't serious about a whole lot other than that (Willy, Army, White, AKBEHD).
- We had a small group of guys we hung out with and did certain things with. Did juvenile delinquent things with....[And] I was easy going. Just, I guess I ought to explain I had kind of a rough life as a youngster. My dad was an alcoholic and stuff so life was really different for me than a lot of other kids. I went to school to get away from home and tried to stay away from home as much as possible (Shawn, Army, White, BK).
- Looking at my son who's 19 now, it sort of brings back what I could remember I was like. It was typical I would spend money. I had a job that wasn't a great job. I earned a paycheck. Didn't save money. Spent a lot of money. Went out drinking, you know, bars in Manhattan and stuff like that. Sporting, going to sporting events and stuff. Just, not a long-term plan at that point when you're 19 (Nick, Army, White, AK).
- [Before entering the service I was] just a normal I guess. Work and party on the weekends I guess and nothing out of the ordinary (Troy, Army, White, FAK).
- [Prior to entering the military I was] just a regular guy. I went to parties. Hung out with the guys and girls and did my studying and work and everything...[And] I had no problem making friends. I had a lot of friends....I thought I would be working for AT&T Long Lines as a career but then of course I was drafted in 1966 (Bob, Army, White, AK).
- [Before joining the service] I was easygoing, easy to get along with. Still am. [And] I'd say [I was] a little average [as a student], a little below average probably. I didn't graduate at the top of my class but I graduated. Usually just when I wasn't working I was hanging with a girlfriend and that was about it until I left for boot camp (David, Marines, White, AAKA).
- [Before entering the service] I was probably a typical 17 year old. Yeah, high school student. My academics weren't the greatest (laughing) but that's because my interests were becoming other than what I had been used to as a young kid. So, you know, I was growing up, turning into a man and that kind of thing. [And] I wanted to go to college and at the time—I came from a family of five kids so my parents, there was not a lot of money left over for us to go to college. So my ambition at the time was to go in the service and either have a career in the

military or perhaps a military-related career afterwards, like the FBI—that kind of work is what I was interested in (Keith, Marines, White, FAK).

- I was living at home simply because I guess most of the kids my age just running around and leading the wild life part of the kids that I ran at that time...I guess I was intent with what I was doing. Being a little bit bored maybe in the wait. Kept thinking that I would get drafted sooner than what I did. But other than that I was leading about the same life as my friends there that I graduated with (Liam, Army, White, BK).

D3. General Military Experiences

The veterans also went into great lengths to describe their general experiences in the military. Their experiences receiving training, being sent to Vietnam, wanting to go back to Vietnam on additional tours, and receiving military medals such as purple hearts and bronze stars. These descriptions follow below.

Receiving Training

- [I went to basic training in] Fort Bliss, Texas. I got a bad luck of draw there because I actually did enter the military in St. Louis. I was back in the Illinois area and that was my permanent. But most people from this area go to Fort Leonard Wood, Missouri for their basic training and it just happened to be the day before I went in we had over a foot of snow and they couldn't fly anybody out to Fort Bliss that day so the following day when I went in, everybody went to Fort Bliss to make up the difference. [I completed my AIT in] Fort Polk, Louisiana. That's where most of the people were going. It was, the training area was called Tiger Land and that was a miserable place. That was the closest place I can imagine that they had to Vietnam in the United States (Ian, Army, White, BBKA).
- I reported for Airborne school at Fort Benning and went through that and then stayed at Fort Benning and went through ranger school. Then in the first week in December of 1970 reported to Fort Sill, Oklahoma for the officer basic course and I stayed there until April of '71. [I really liked Ranger School]. I enjoyed it very much. It, like I say, I was in with a bunch of other classmates from school, from West Point, and in both airborne and ranger school so it was, it was tough but it wasn't as tough as I'm sure some of the other guys got because we basically had four years of the same stuff. So, it was a very good time. Very enjoyable. Tough but you know like I say, it was a good kind of tough I guess (Jason, Army, White, BBKA).
- [I went through basic training] in Fort Jackson, North Carolina. [My AIT training] was also at Fort Jackson. I was Infantry and I knew that the unit I was going to or the class that I was going to at Fort Jackson, each succeeding class, or each class ahead of me had, you know, like I would say 80% of the folks got shipped to Vietnam. So I knew where I was going [but] we took some tests and I actually qualified for, they had something called NCO school, similar to Officers' candidate school, so I went to that. That was a longer course. That was at Fort Benning, Georgia. [But] what happened was I went through about, I think it was either a 14 or a 16 weeks course, I quit in about the 14th week because I didn't want to go over as NCO, a Sergeant E5 and start telling people what to do. So I came out of the school with a Spec 4 rank, Specialist Fourth Class (Nick, Army, White, AK).
- I graduated as the honor man of my platoon and got a stripe for that achievement. From Paris Island I went to Camp Geiger which is a portion of Camp Lejeune, North Carolina for what is called Infantry Training Regiment. There I spent six weeks and I was one of two out of the 200 of us in that particular company that were awarded a meritorious mast which is a commendation for being a great trainee for the lack of better words. In other words, I showed leadership and initiative and all that kind of thing. Gung ho we called it in the Marine Corps. Then I went over to the Second Marine Division as a member of the Fleet Marine Force, the regular Marine Corps and within about four weeks of that we went on what we call a

Caribbean cruise. That's just Marine Corps terminology for maneuvers in the area of Puerto Rico and Cuba. As you recall, that's about the time Castro was overthrowing Batista in Cuba. We were there for training but also as a presence while that was taking place. We went to the island of Vieques, Puerto Rico for live fire training from the ships so that the naval gun fire could train and we could make amphibious landings with live fire ammunition (Chris, Marines, White, BK).

- I mean all of a sudden in your life you're thrown in with all these other people and you're saying well I'm going to do my thing. Well, the guy next to you screws up and now the whole platoon's on a five-mile run because he screwed up. There are ways to solve or help solve some of those problems. I mean we had some, we had some soap parties... Well, we called them soap parties. You wrapped a bar of soap up in a towel and kind of tried to beat a little bit of sense into the guy at night. And we had some shower parties, we had some guys that I think they were from the south that didn't think that bathing was a requirement and so those big old heavy, stiff wire brushes with about six to eight guys scrubbing them down. They got the hint pretty quick but it was easier to go take a shower every day than to have us scrub him down. So I mean you learn to deal with other different kinds of people. You really need to come around to the group's way of thinking (Liam, Army, White, BK).
- On my 17th birthday I arrived at Paris Island, South Carolina for boot camp. I, of course, went through boot camp. I went to Camp Lejeune for Advanced Infantry Training then I went home on leave for 30 days. They sent me down to Albany, Georgia to the Marine Corps Supply Depot down in Albany and I was there until September 30th of 1967 when I was transported to Vietnam (Owen, Marines, Black, BBKA).
- No, that's when I found out that I was smarter than what I thought I was. I graduated from school and I graduated in my lower third of my class and was never, I never thought of myself as being smart but part of that was because I was, I worked four to midnight all the way through high school. So, but anyway I never thought about being educated and then I took that ASVAB test and I scored at least 30 points higher than anyone else in the class. [So] I got called into the CO's office and the CO told me that I qualified to go to West Point. I kind of took a swallow and laughed at the same time. He kind of wondered why I laughed and I said, you know, I graduated in the lower third of my class. I would need so much help at West Point as far as getting caught up and stuff and then I told him I just don't want to be an officer going to Vietnam. So, that's where it got left. Then I went through basic training. I came out as a private E2 from basic training. Then after that we flew to Ft. Polk, Louisiana and I got called out of the crowd and they put me into what was called leadership preparation course and I came out of that course. That course was like three weeks and I came out of it as a PFC and then they sent me to my AIT class and then I was made the acting platoon sergeant for one of the platoons then after I got out of AIT, that's when I got the orders to go to Ft. Benning, Georgia for NCO school [which] was cool. I learned that it's a lot easier giving orders than it is taking orders sometimes. And it keeps you out of KP duty and it keeps you from not having to do some of the work that other people do (Gary, Army, White, BBKA).

- Basically they wanted me to be an officer. I says—no, no you don't understand—married, two years and out. AIT, they want me to be a helicopter pilot. They said you are qualified for that. I says—no, no, you don't understand, two years and out. So at the end of that they turned around and sent me back to Fort Benning to the NCOC school which was combat training, purely combat training, for NCO's. I was a private out of basic, corporal in three months after that and sergeant in three months after that and then I came back to go through another AIT entered as a sergeant (Frank, Army, White, BK).

Being Sent To Vietnam

- I was scared, I hope this don't offend anybody but I was scared shitless. Yep, and I had to, in my head I had to do some readjustments and the only thing that really saved me when I got there was the Marines that I got assigned to they, for some reason whatsoever they just kind of took me under their wing and they taught me the ropes and I paid attention to whatever they told me and whenever we went out on a sweep, we went out on an ambush or whatever, I was, I made myself invisible by, I became one of them. Instead of being a corpsman, I became a Marine and in that sense I mean that when I went out I dressed like them, I looked like them, and I carried weapons like they did. The medical [pack] that I had, I would put it behind me on my belt. I would put it in my back, right on my hips so that anyone who was looking for a medic, they wouldn't see it (Adam, Navy, Black, AE).
- [I] was [sent to Vietnam in] the middle of September '68, I believe by the Fourth Division that was in Pleiku, I don't know if you remember but Pleiku was the reason Johnson sent in all the troops. The 101st got wiped out and then the 173rd got wiped out and it didn't get any better after that. Then the Fourth Division came in. Airborne companies can go and start a hell of a fight but it is the Fourth Division, First Division, Big Red One—those are the people that actually can go in and hold ground and that's the harder part of the job...I was an infantry sergeant. My job was to go out, seek out the enemy, and kill him (Frank, Army, White, BK).
- The 101st Airborne Division had three brigades at that time. One brigade was in Vietnam. The other two brigades rotated to Vietnam in late 1968 en masse. So, I went over with the men I had trained with. And our unit was kept intact. It was a tremendous assist for anyone going to Vietnam to go with people you already knew—and, personalities, and all the little issues you had already dealt with, as opposed to being a replacement when you knew no one or virtually no one. We were; our base camp was Phouc Vihn. The entire 3rd Brigade of the 101st was based in Phouc Vihn. And, we operated initially since we were new in country, for about two months, was acclimation and training in and around our fire base. We didn't get out—we didn't get out very far afield during the first couple of months until we were somewhat acclimated (Willy, Army, White, AKBEHD).
- I was a squad leader and when I first got there we were assigned to LZ which was overlooking Highway 1 which was mainly the main road around along the coast. I don't remember exactly. I was there probably a week or two and then we were rotated off and we went out in this area which, what our name for it anyhow was Rocket Pocket and we patrolled in that area looking for rocket sites set up by the Viet Cong which were, they were firing rockets into Chu Lai. So that was our area. We were probably out, trying to think how

long, a month patrolling like this but it wasn't as bad as it seems because we were very fortunate. Once a day a helicopter came in and brought us a hot meal. You mainly would spend most of the time during the day back in your camp area and then at night you would go out and set up ambush areas (Ian, Army, White, BBKA).

Volunteering To Go Back To Vietnam

- I was at Paris Island for a few months and then I went back because I didn't like being on stateside duty and I really didn't feel I had done enough over there since I had a short tour and they were looking for volunteers so I went back. [Because] the Marine Corps is real petty on stateside duty. That's basically it. They were on you for, you had to have spit shine shoes and your hair short and everything neat and everything right and over in Vietnam they didn't care. Actually my hair was longish over there. I had long hair before I went in and I got kicked out of school twice my senior year. I was pretty proud of that...But anyhow, I guess I just wanted to go back. I wanted to see my buddies and I honestly didn't feel like I finished the job (Pete, Marines, White, AE).
- Yep, I was ready to move on. I had been accepted for presidential guard duty if I of course survived Vietnam and that was where I was headed. I knew that from the time I got out of boot camp because they investigate your background and you pretty much know where you're going to go if of course like I said I would have made it through the combat thing (Keith, Marines, White, FAK).

Receiving Medals

- When I was in Japan they were cleaning up the fellow's floor, who had been alongside me. They said—who's Purple Heart is this? I heard them and I said—it must be the other fellow's. They said—is your name Frank? I says—yeah. He says—well this is yours. That's how I found out I was awarded a Purple Heart. That Purple Heart was probably awarded, I don't know where, it was issued the day after I got hit. [So] I don't remember where I got the Purple Heart [from] (Frank, Army, White, BK).
- I don't remember for sure [if there was a Purple Heart ceremony]. I know there was a problem with it because I didn't get it for a long time and that got me right back to what did I do, what did I do, how come I didn't get a Purple Heart. Then I think I figured that out years later. I got the Purple Heart orders here and my name spelled wrong on it. Then finally it got corrected and it come back with my right name and I got the Purple Heart. General Westmoreland was there once but I think I just met him. But I don't think he awarded it or anything (Troy, Army, White, FAK).
- I was proud that I got a Purple Heart. They gave me a Bronze Star with a V [for valor]. And I thought I did pretty good. Actually I had a lot more medals. The guys told me I should ask the VA, or the government, to send me all the medals I deserve because there was only a few on my 214. They sent me like a box of 11 medals. [But] my Purple Heart ceremony consisted of...they just gave me the Purple Heart I think. The Bronze Star was something I can really remember because when the General came in he had his aide and there was also a photographer with a Polaroid. The photographer looked at me and then he sort of walked away. He didn't take a picture of me. [That was when] I was in emergency room at 1st Med

in Da Nang. It was like my third day after I was wounded or fourth day but I still had tons of tubes in me and that little nick at the top of my eye closed my eye and it was all swollen up and I was purple and everything. I wish they would have taken a picture of me but he didn't. [And I don't remember receiving the Purple Heart]. I don't honestly remember when they gave it to me. I remember they sent me some documentation when I was at Bethesda. But I couldn't even find that now. Maybe the Heart came with it then. I don't know. I don't remember. That's just one thing that didn't register with me, surprisingly (Pete, Marines, White, AE).

- The Purple Heart I think was sent to me or something like that. I still have it. It's hanging here on my office wall. I [also] got the Combat Infantry Badge. Of course every military man's dream is a Combat Infantry Badge and I've got those two. Those two, I guess those were two of my highest, I feel that the most pride of those two are those two—the Purple Heart and the Combat Infantry Badge of my, the highest awards I got but they mean the most to me. But then it was just the Vietnam service ribbons and just the little stuff you get for being here and there and everywhere (Roberto, Army, Hispanic, BK).
- [I received a Purple Heart but] I didn't get that while I was in Vietnam. I got it when I was, I'd probably been, I'm trying to think—I think it was probably in—I'm getting my dates—it was probably seven or eight months later when I was actually out of the Army by that time. It was just sent through the mail. I remember they both came together. It was Purple Heart and the Bronze Star. The Bronze Star was for meritorious service rather than valor. [I received other awards for my service in Vietnam too] and it—this is really strange. Being in the infantry and being in combat, I should have received the Combat Infantryman's Badge and you know, I always knew it was out there and while I was working and everything I didn't really follow up on it and last year—I'm trying to think—probably what happened after I got in touch with my platoon leader and my son who is sort of interested in the military--mainly because of me. He himself hasn't joined but he's interested in it because me and his grandfather who was in World War II. He found out where I could write for my Combat Infantryman's Badge and I did write for it and it took another six months from the time I wrote to one day it showed up in the mail here. I probably would never have received it if I hadn't followed up on it on my own and that part of it sort of has irked me because if you're an infantryman and you're in combat that's sort of your badge of honor and you know for me to have to get it about let's see, 38 years later, that's not saying a whole lot (Ian, Army, White, BBKA).
- I remember waking up and I remember somebody bringing and pinning my First Lieutenant's bar, Purple Heart, and the Bronze Star on my pillow and that was it (Jason, Army, White, BBKA).
- You know, I do remember, my Brigade Commander, Colonel Mowery, pinning a Purple Heart and a Silver Star on my pillow in the hospital in Vietnam. He came by to see me several times...I didn't care that the ceremony wasn't with my family because] you know, I'm not all that big on stuff like that. It would probably be meaningful for them. I don't know if it'd float my boat. I'm very, very comfortable with the type of soldier I was, what happened to me, and the recognition I got from my peers. I'm much more comfortable with what the men that

served under me say about me, and how I conducted myself than the fact that a full Colonel pinned some medals on my pillow. Or, that we would have some ceremony and go through that exercise again. Part of me, I'm very proud of what I've done but I also don't like to give any blow by blow about it. Not that part of it -- but as for example the medal I most cherish is the Combat Infantry Badge, not the Silver Star or the Purple Heart. That one you earn. You set out with it, with something in mind, and that was accomplished. That's much more meaningful to me than the others (Willy, Army, White, AKBHD).

- I received the Purple Heart after I got back to the United States. [I also] got awarded the Red Star from Vietnam which is a wound star. I got the Vietnam Campaign, Vietnam Service, National Defense and I got a, oh boy what is it called now. I don't know. I forget what it was. There was another medal that was awarded to the battalion. It was a unit medal. [But I received the Purple Heart when I] was at Valley Forge, yes. That's just before I was getting discharged. They came in and gave me a Purple Heart. [There was no ceremony]. Colonel come in and handed it to me, pinned it on me, and they took a picture and that was it (Bob, Army, White, AK).
- My Purple Heart got pinned on me when I was in the hospital in Da Nang. Some general come over and give it to me but the certificate I didn't get until I'd say late eighties/early nineties because you have to send away for it and I was going through some of my paperwork and I got the order that says if you want the certificate you got to send back the headquarters of the Marine Corps. So I filled it out or I actually wrote a letter and they sent me my certificate then. Now with my Bronze Star, they mailed it to me in the mail. I didn't know I was entitled to it until it came in the mail. I [also] got a Bronze Star with a combat V for valor. But I didn't know I had it until 20 years after I got home. They mailed it to me in the mail and I'm reading it and I says well this is nice. I wish that when I was 19 or so instead of 30 they would have said something (David, Marines, White, AAKA).
- [I received a purple heart]. They sent a general up there to the hospital one day and he pinned it on me and we talked a little bit. He apparently had served pretty much in the same area that I was as a more junior officer at the time. I guess he would have been a full blown colonel at the time he was there. But yeah, there was no formal ceremony. I was on my hospital bed and he came over and pinned it on and we took a picture and that was it. [I received other awards for my service in Vietnam] but the Purple Heart would be considered to be the highest ranking medal that I received. There was other things that were awarded—Presidential Unit Citation, there was something from the Republic of Vietnam. It was both military and civil action that I received from them which had to do with, like I said we were, we started what they called Pipestone Canyon operation at the time and a lot of that was given to me years after I got out of Vietnam. I didn't even know I was eligible for some of this stuff. A friend of mine, he had been there, reminded me to ask for a corrected DD214 so that's what we did. But not even a Silver Star or a Bronze Star or anything like that (Keith, Marines, White, FAK).
- The next day I woke up to a two-star general walking away after they presented me the Purple Heart. They didn't bother waking me up. That upset me because I figure if I'm going to get a medal I should be awake for it (Gary, Army, White, BBKA).

- [I received a purple heart but there was no ceremony]. It's just the commander came into the field hospital and gave us our Purple Hearts. I remember waking up. They woke me up to give me a Purple Heart. [But they refused to give me a Combat Infantryman's Badge.] I said well wait a minute. I said, you're giving it to medics. You're giving it to supply clerk but you can't give it to me? We're still fighting over it. We've got people from organizations. They're trying to get us our Combat Infantryman's Badge. We were there. We fought. I mean, how come we didn't get it (Shawn, Army, White, BK).
- [I received a purple heart but] there was definitely not a ceremony. I'm not sure if I got it presented from an officer and I think it might have been when I was still in Vietnam that they gave me the Purple Heart. I think an officer may have come by and given it to me. I had it before I think I got to the States (Nick, Army, White, AK).
- While I was at the hospital, Da Nang hospital. They gave me my Purple Heart. They did promote me to Corporal. [I] vaguely [remember that]. I remember the general standing there and giving me my Purple Heart and I vaguely remember them giving me my corporal stripes and I remember two things that, first of all, I said well wait a minute. This guy next to me, he's got a gunshot wound or whatever his injury is. He got a Purple Heart. I have two legs missing, I should get two Purple Hearts. But of course I didn't pursue it. It was just a thought that ran through my mind. And the other thing was, well it's too late to promote me to corporal now. I'm going to be getting out here any minute (Owen, Marines, Black, BBKA).
- They had to fill the hole in my back with gauze and they kept checking the dressing of my leg and I remember in Japan that they gave me a Purple Heart and so they took a picture of me. I was skinny. The Secretary of State, whoever he was at that time in '68, he came in, a captain or another officer pinned the Purple Heart on my pajamas (Mark, Marines, Black, AK).

Being Unhappy with Discharge – Being Labeled As 'Unfit'

- I [was] separated in November of '69. [It] was fine [that I was discharged,] the only part that tok me aback a little was not the separation but that [I was discharged as "unfit" for military service.] Just that statement, you know, was a challenge. They could have used different words. I didn't like the words unfit. It was so cold and to the point. Not that I wanted to stay in the military, but being told that I was unfit was [upsetting?]. The part that sticks with me [is how I was] called up in front of some officer and [he told] me that I would be discharged because [I was] unfit (Greg, Marines, Black, AK).

E. THE INJURY EXPERIENCE

All of the veterans gave descriptions of the nature of their injuries which included amputations and other injuries ranging from hearing loss to major burns. The veterans also provided descriptions of their experiences immediately prior to suffering their injuries. Their injuries are also categorized as direct combat (blast injuries), direct combat (non-blast injuries), non-combat (blast injuries) and those whose could not be categorized in the later. Immediate post injury experiences, including their amputation experiences are described in the last section.

E1. Describing Amputation Levels And Other Injuries

All of the veterans were asked to describe the nature of their amputations. Their descriptions are categorized below by single arm amputations, single leg amputations, double leg amputations (one of these is a leg and partial foot amputee), and combinations of leg and arm amputations. In addition, their description of other injuries sustained are also listed and include major burns, shrapnel wounds, and hearing loss.

Arm Amputations

- I lost my right arm and the initial injury, it was below the elbow but in order to fit me for a prosthesis the surgeons decided that, you know, if you can picture on the end of your upper arm there's like a nub and in order to fit me for a prosthesis they had to take that little part off. So in the hospital I had that operation. They took that off and once I got healed up I got fitted for a prosthesis and oh, I guess the rest is history so to speak (Adam, Navy, Black, AE).
- Most of my left arm is gone. I've got about maybe four inches from my shoulder left. I was hit with an RPG, if you're familiar with those...But anyhow, that caused a lot of shrapnel...The shrapnel pretty much tore off my left side. That's, got a sucking chest wound out of it. They took out a little bit of my intestines. I think like a foot or so. I carry a lot of shrapnel around. They removed some muscle on my side so it's sort of sloppy. You know, I can never have one of those bodies that muscle builders have but still all in all I was pretty lucky. I counted my shrapnel in me. That was like 200, I've still got 220, I think 229 pieces of shrapnel still. Range in size from pin head to biggest one is about the size of my thumb now (Pete, Marines, White, AE).

Leg Amputations

- I'm a BK. I have a below the knee amputation of the left leg (Shawn, Army, White, BK).
- I'm an above the knee amputation—the right leg and I also had some other wounds to the chest, some shrapnel to the chest and to the rest of the stuff but the major wound was the leg (Nick, Army, White, AK).
- [My amputation is a] high AK, left leg. [It is] just a couple inches from the hip (Troy, Army, White, FAK).
- I've got a left leg amputation, I would say boot high and then I got more damage to the right leg and scar tissue to the left arm and left side (Liam, Army, White, BK).

- I have an amputated left leg. I've got my kneecap and three and a half inches below the kneecap. Also, got some serious injuries to my back. I have a piece of shrapnel real close to my spinal cord and that's still there. They didn't want to take it out because it might paralyze me. So I'm living with that and then I have, like I said, multiple wounds to my pelvis area (Roberto, Army, Hispanic, BK).
- [My amputation is] six inches below the knee. Burns were the major problem of the first two weeks of my injury or so but that subsided and other pains came in. Pain kind of comes in ripples. Whatever hurts the most you pay attention to the most and then it just progresses to the next one after you get rid of that one (Frank, Army, White, BK).
- I lost my right leg below the knee. I have about a two and a half inch stump below the knee. My left leg was mostly blast injury. All the muscles on my, and all muscles from basically about an inch above the knee all the way down to, well my boot protected the bottom part of my foot but all the muscles were blown right off my leg. I had about six or seven inches of tibia showing. No broken bones although it did take my forefoot from the mid-metatarsals forward. And so, it, and it disrupted the knee quite extensively. Although I still have my whole leg because the surgeons did an amazing, what has turned out to be an amazing job. I didn't appreciate it much at the time but they were able to, despite all the injuries to the left leg, they saved it and had continued to be saved all the way through the process and so on....[So I am] basically a right knee, or a right BK amputee and then what's called a left show part (Jason, Army, White, BBKA).
- I'm a right AK about mid-thigh and loss of the use of the left leg. I still have the major bone in [my left leg] and it functions but not real well. I lost part of, the small bone in it and most of the calf muscle (Bob, Army, White, AK).
- I have what's called a left AK. My left leg, above knee, I have a three inch long stump which is, when I stepped on a land mine it basically removed my leg at the knee and there was nothing but bare femur part of the way up and then they managed to save about three inches of my femur and create a stump for me (Keith, Marines, White, FAK).
- I am an AK which is above the knee amputation [on my left leg]. I have, well I was also wounded in my lower back with a 122 rocket with, which as a result I have severe arthritis in my back and with the cause of my amputation, my right leg is, I have arthritis in my right knee and I can't raise it higher than 90 degrees (Mark, Marines, Black, AK).
- I've just got one left BK amputation, three inches below the knee (Chris, Marines, White, BK).
- I have one amputation - my right leg above the knee (Greg, Marines, Black, AK).

Double Leg Amputations

- I am a double amputee below the knees and I was pretty fortunate that they made a real effort to save both knees which is very important if you have lost your legs (Ian, Army, White, BBKA).
- [I lost] both legs above the knee (David, Marines, White, BAKA).
- When I got hit I lost my right leg immediately. I have three inches of bone left on that leg. And that was immediate. There was no change. Now on my left leg it was still kind of together and then the amputation was taken off right about where the knee was, just above the knee and then there was a blood clot and so they took off about another four inches or so (Gary, Army, White, BAKA).
- My right leg is amputated approximately seven inches below the knee and my left leg is amputated about nine inches below the knee. My left arm, there was some muscle damage. They had to remove part of my bicep and some nerve damage in my left arm (Owen, Marines, Black, BBKA).

Combination Amputations – Upper And Lower Limb Loss

- I have a right, above knee, amputation. My right leg is about eleven inches long. I have a left hip disarticulation. I have no femur at all in my hip joint. I have a right-below—excuse me—a left below-elbow amputation. My lower arm on my left side is about six inches long (Willy, Army, White, AK/BE/HD).
- It's my left arm right above the elbow and my left leg right above the knee (Eddie, Army, White, AEAK).

Experiencing Other Injuries

- I'm deaf in both ears. So I use hearing aids. [And my deafness is the result of the same incident that caused me to lose my leg] (Roberto, Army, Hispanic, BK).
- [Besides my main injury my other wounds were] mostly shrapnel [wounds]. I have multiple shrapnel wounds to my left thigh and also two pretty good shrapnel wounds to my left forearm.... [The explosion also] blew out my left eardrum that they patched. The hearing in my left ear was, is not as good as it is in the right so it was somewhat affected by the blast (Jason, Army, White, BBKA).
- I had my left ear drum blown up to the point they had to cut my left ear off and sew that ear drum in. That's resulted in—just recently they discovered traumatic brain injury and I have a recent discovery within the last ten years, I'd say, of a syringomyelia in my spine...[But I also suffered injuries] to my groin area. That's when I was on the table. They had to remove both of my testicles and I told him you can't do that and he said—I'll see what I can do. He said—one's got a quarter-inch whole through it. It's dead. I say—see what you. He was nice enough to me after the operation to let me come to enough to say—what was left of the other one I debrided and put it back in. Hopefully it will serve its purpose (Frank, Army, White, BK).

- I tore up my ribs, couple busted ribs. That's really all other than my arm was broken off. (Laughter). [I have problems with my hearing because] M16s are pretty loud (Pete, Marines, White, AE).
- [I had other injuries besides my amputations]. I, my left hand, some lacerations and the lacerations or fragments went up my left arm--sort of the forearm mainly. I did have a few spots on the upper left arm. I also got some facial, I used to, it used to sort of bother me. It was like a black spot and I think it's lightened up over the years. Right on the tip of my nose and also on my right eyebrow there is a laceration with some black in it but the eyebrow pretty much covers it up. And as far as the part on the nose I don't even notice it. It seemed like early on people were sort of comment to me, you've got something on your nose and I'd just say it's permanent... [And] I did have a perforated eardrum. Glad you brought that up. That was a, I believe, I couldn't find anything in the medical records about it but I know I had a surgery for a perforated eardrum. I believe it was the right ear. The reason I'm guessing that is it's my hearing is not as good in the right ear as the left ear (Ian, Army, White, BBKA).
- The only significant injury, other than the amputations, [was] damage to both ears. Both ear drums were perforated and I have had on-again, off-again problems with them over the last thirty-one years. Fortunately I had no internal damage. I had no abdominal injuries or anything like that. That's one reason I had that somewhat accelerated rehabilitation (Willy, Army, White, AK/BE/HD).
- I had a shrapnel wound in my left hip—my upper leg on my left hip I got almost like a one inch scar. It's a piece of shrapnel that hit me there and it killed a nerve in my leg (Adam, Navy, Black, AE).
- I had tinnitus for a long time but it seems to have cleared up over time...[I also had] shrapnel wounds [in my] left leg and my buttocks (Bob, Army, White, AK).
- My left hand and arm were also full of shrapnel and they had to do a lot of debridement. I had like 300 stitches in my arm and hand. Came pretty close to losing a couple of fingers. Pretty close to losing my arm actually. And then shrapnel in my right eye. And shrapnel in my lower body and around my, mostly in my buttocks. On that side of my body, on the left side of my body, because that's where I stepped on a land mine....There were some burns associated on the arm but most of it was where the skin and the muscle tissue was torn apart from fragmentation...[Also] I sustained tinnitus in my left ear. So I have a constant ringing in that ear which was a result of the land mine explosion (Keith, Marines, White, FAK).
- I'm just loaded with shrapnel. (laughter) As a matter of fact I cannot have an MRI because I have shrapnel in my eyes and they're afraid I'll go blind if I have an MRI. I had 140 stitches. Part of my nose – my nose was broken and it was shattered I guess. Anyway there's 140 stitches that went down my face, kind of around my cheek bone and then probably ten stitches upper lip. Probably ten stitches lower lip. Then I don't know how many on top of my head. There was three lines going across the top of my head with stitches. [I didn't have any

fracture injury, it was] just lacerations. Just, when I was hit I was bleeding just pretty much out of every orifice in my head (Gary, Army, White, BAKA).

- [Besides losing my leg I sustained] major injuries to the leg and injuries to the back. [The other injuries were mostly shrapnel and burns]. [I had] shrapnel in the legs, both legs [and I had] burns...[And today] I have problems hearing with my right ear. I can't even listen to the phone with my right ear. I have to listen to everything on my left [and that's] basically from my job. I mean I worked with artillery. I was an RTO for artillery and the explosions and gunfire and everything from, you know, didn't help it at all (Shawn, Army, White, BK).
- [Because] I hit a mine [I sustained] a lot of different [injuries]. [I have] a lot of different scars. Part of my right arm is gone I guess. I don't even know how they describe that I guess...[I suffered] burns all the way up [my] right side. [I also suffered a] broken eardrum [and I] lost a tooth and lost a finger (Troy, Army, White, FAK).
- [My other injuries were] just burns and then nerve damage and there wasn't anything they could do. Other than treating the burns they didn't do any treatment (Liam, Army, White, BK).
- Every now and then I have tendinitis--ringing in my ears. [I also suffered shrapnel wounds] (Mark, Marines, Black, AK).
- My left leg received injuries also to my left leg across the knee and along the side and so forth. I had partial loss in, an ear drum damage to one of my, my right ear and the most serious injury I had was to my right hand and arm. I lost the part of the support bone structure behind my small finger on my right hand and I had a pretty substantial scarring up my right arm (Greg, Marines, Black, AK).
- I have a little nerve damage in my right hand but not significant and I have tattooing, you know the blast was, the device was buried so I have what's called traumatic tattooing on my right hand and my right leg is burnt and has, you know, it's just for a long time pieces of sand would pop out, work out of my skin and under my chin and my eyelids and eyebrows are kind of bluish looking. It did get one cornea pretty bad and I got a cornea transplant later on (Eddie, Army, White, AEAK).

E2. Immediate Experiences Pre-Injury

Nearly all of the veterans experienced blast injuries through direct combat. These injuries were caused when the veterans stepped on land mines and booby traps including devices such as unexploded artillery shells. Blast injuries also occurred in direct combat when the veterans were hit with mortar rounds and RPGs. Only one veteran sustained a non-blast injury in direct combat which was the result of a round from an AK-47. There was only one confirmed non-combat blast injury and three of the veterans' experiences remain uncategorized as to whether or not they were direct combat versus non-combat.

Direct Combat (Blast Injuries).

- I don't remember any of [the events preceding my injury] and I just found out two years ago at a reunion exactly what happened. From Bearcat we'd go out and set up another camp out in the middle of nowhere and just us and infantry for protection. we'd go out on the trace during the day and come back to this second base camp at night. Well I was a mechanic and they'd always send a couple of us mechanics out with the dozers. We had 30 dozers they'd send us out to make repairs. I was one of those mechanics following them around. The day it happened is we were out early in the morning. I guess that these booby traps are set up overnight. But it started out one dozer hit a booby trap and there seems to be some disagreement. Like I said, they were just talking about this two years ago. This is the first I had known of this. And another dozer hit another booby trap. Of course as mechanics we were coming up there and I just happened to get off first and head up toward the second dozer that hit a booby trap and I hit a mine (Troy, Army, White, FAK).
- We were out and we had a prisoner. We had a captain that liked to do night patrols and we caught this lieutenant from the MVA and I babysat him throughout the night. Then in the morning he brought us down off this hill into this complex and he was watching, interrogating at the same time, finding things, and during the process the guys had spread out and they found something and they came back to tell us and the prisoner kept watching—and his eyes kept going up and down every time somebody walked over it like he was expecting something. It just didn't dawn on me. When they came back and said they found something and they told us to come see. I started to take a couple of steps and with that prisoner on a rope, and he made me step back and I stepped on a land mine (Shawn, Army, White, BK).
- When I was injured we were setting up a night ambush and the lieutenant asked me to shift the machine gun. I went over to shift the machine gun and the whole world blew up. I had walked across and then I took the same path back and I hadn't taken five steps from the lieutenant when a command detonated 155 round went off...It was probably six o'clock at night and we were going to set up there and then we would move on into the ambush site when it was dark (Gary, Army, White, BAKA).
- It was intense. We were in field. I think we came back and resupplied. We would do that every ten days we would come back to the 1st Battalion area to resupply and then go back out into the field....[And] I was on what they considered a react team. We were either on foot or we were being dropped into hot zones by a helicopter...[The day I was injured] we were on a search and destroy mission. We'd been in the field for about four days and it was morning time. We started to move out to do,—I didn't know this at the time—but we were

starting a major offensive against a well entrenched North Vietnamese position and that was the beginning of what they called Pipestone Canyon. We were moving towards this position that we were going to attack across a river and we were walking down a hill and that's when I stepped into what they called a box mine which is an artillery shell that was unexploded. One of our own pieces of ordnance that was unexploded. It was actually set to be tripped by a tank but I had the misfortune of stepping on top of it (Keith, Marines, White, FAK).

- [The day I was injured] we were on a search and clear mission to find a VC bunker and with 3rd Platoon coming around as a sweeping force, 2nd Squad and 1st Squad of 2nd Platoon went around as a blocking force and I was walking point like I did all the time I was there anyway. I just misplaced or mis-pointed to. I spotted three booby traps. I missed the fourth one. So, that's the one I pushed and then went the wrong way. [And in doing that I set off the booby trap] (David, Marines, White, BAKA).
- My turn was to lay down and try to get some rest. I no more did that and I woke up to a large explosion. I heard somebody yell attack. I don't know if that was our people or the enemy and I believe it was the enemy from the direction it came from. You could hear mortar rounds dropping down. I rolled into a bunker and got down slow and you could feel and hear the shrapnel whistling around. Some hit the back of the bunker...It sounded like they were dropping a click on a mortar tube and walking a mortar down the hill. All of a sudden, we took a direct hit. The NVA had come off out of a draw in front of us and they took three bunkers and hit them with RPG's. After action report will tell you they hit three, but only two were occupied. Sergeant Board, my E-6, and a new fellow and FNG—Friendly New Guy—were killed. We were in the third bunker and took a direct hit. That'll make your ears ring...I'm feeling around for wet spots—remember, no light, no moon—and trying to feel if I'm bleeding...And...then I heard some footsteps go by and I heard something come in and hit the bottom of the bunker thud and I hear a fuse burning...It detonated (Frank, Army, White, BK).
- We used a grave to dig our machine gun position in--our foxhole so to speak--because they were mounds. In Vietnam, their graves are little mounds and they're a great field to fire...It was extremely boring over there if you weren't getting shot at and there was this gook inside there. I fished through there and I got the fucker's head. I had the skull and I was out a little bit from the company perimeter. I think this might have been one reason why I got shot at before anybody else. But I had set up a fire and I was using C4 and trying to dry the skull out. And [I was] maybe 20 feet from [my company's perimeter] and we hadn't really had any activity that we were worried about...But I always to this day wonder if those gooks had me in their sights, because their first round was right at that gun position...[But another soldier] had wanted me to give him a Marlboro which were like gold over there. We had just gotten supplied that day and he had Marlboros, this is the irony to it. I said go back to your own place and get your Marlboros. If he would have he wouldn't have been hurt. But, I decided okay here you can have one. He's going to have to get down below the foxhole so nobody can see the light. I was reaching for it with my left hand and I had gotten it into my pocket. We had this baggy pockets on the side and that's when there was that white flash [and we were attacked] (Pete, Marines, White, AE).

- [When I was injured] I was leading a reinforced infantry platoon. When I say reinforced, we had a section of 60 millimeter mortars with us and an 81 millimeter mortar forward observer and an aerial forward observer...I was reluctant about that patrol but of course my job as a Marine leader was to follow orders. [On that patrol we were ambushed], they cut down on us with automatic weapons fire, rifle fire and grenades and rocket propelled grenades and I was behind the point element near the front which is where you lead from in the Marines Corps. Of course old dummy here, as soon as we start drawing fire, I run up and move up further to guide—had a machine gunner on the right flank and I called him up and had him put down fire and moved an automatic rifleman and an M-79 grenade launcher man over to the left to start trying to beat them off which seemed to be successful. We did beat them back to a degree and I got hit in the upper left leg and that hurt but I was able to keep moving and keep going. Then I got hit in the right hip and that slowed me down some more but I was still able to negotiate move and issues orders and then I got hit the third time in the left lower leg and that shattered the tibia and the fibula (Chris, Marines, White, BK).
- [On the day I was injured] by the time we got to Con Then, we were getting set up and we went out on a sweep and that evening all I remember is that we were getting ourselves situated for the night digging foxholes and all of a sudden the whole sky started raining mortar rounds and I got hit by shrapnel, piece of shrapnel in my left hip and there was injured guys all around. There was guys who had got hit and they were dead and there was a young guy we called Georgia boy, and he was 17 when he joined the Marine Corps. He had blonde hair and he had got hit with a piece of shrapnel in the side of his skull and it made a clean wound. Just went right through his skull and it didn't even bleed and I remember seeing that little hole in the side of his head right before the hairline above his eyebrow. He had got hit and that's where he died at on the 6th. No I think that was on the 5th of September and that was in Con Then and that was the same day that I got hit in my hip and I remember that we couldn't get out. They tried to bring helicopters in to evacuate the wounded but the enemy firepower was so strong that the helicopters couldn't land. So they had to leave us out there all night and the next morning, I believe the next morning was the 6th of September and the Army was somewhere in the area and they was coordinating this particular mission with us. So the Army had tanks came out to evacuate the wounded and I got on a tank. I remember the tanks were taking out all the wounded. They were taking us to the nearby highway, and to put us on the military trucks that was going to take us to the hospital (Adam, Navy, Black, AE).
- The month was September and we were on the search and destroy mission. A couple of guys didn't want to go because we were supposed to go up in the mountains again and a couple of the guys shot themselves in the foot so they didn't have to go and so the day operation was called off but at night time we had to go on a listening post which is four guys, they go out and be in front of the company and listen to see if enemy is coming. I volunteered and told them that I wouldn't mind being on the radio. So it was four of us. Normally we used to go out early, it would be just getting dark and what happened was the Viet Cong, or they would have incoming in and soon they would have stopped we were going out. Well this time they were late and the skipper said that it must have been around nine o'clock. [By then] it was definitely dark but we had to have the incoming so if they were, by the time they get started we would be in our positions. So you were just crossing at the bridge when the next round

landed three feet on an angle and caught me in my back of my left leg. Hit my square in the radio, my leg was hanging on by the meat. The shrapnel went through the radio, my flak jacket and me and missed my heart about a half an inch, my spine about an inch. The guy behind me, the blast hit him square in the face, killed him. So, I fell to the ground and I remember screaming like mad and one in front of me came back. I remember him smacking me in the face. I was screaming very loud and I remember him telling me to be quiet but then I remembered that I was starting having a pain in my face and I was forgetting about the pain that I had elsewhere (Mark, Marines, Black, AK).

- On the day that I was injured we had actually come in from the Rocket Pocket, and we came in on a stand down which, it's a rest and relaxation in Chu Lai where you get three hot meals, showers, and everything and then after that our entire company was lifted out to LZ Minute Man which was on the Batangan Peninsula. I was probably too stupid to know more because I wasn't aware of it. I hadn't been there that long. But most of the guys who had been there awhile when they heard we were going out to that area they just really cringed because it was known as an area that was just loaded with mines and booby traps. The day I was injured I was out with my squad. The day before, we had a captured Viet Cong. It was a Company-size operation and we had taken him to find tunnels and so that maybe we could find where some of the Viet Cong were hiding. He actually escaped (laughing) and I was glad I wasn't in charge of the operation but the next day the tunnels that we had found, my squad was going out to blow up the tunnels and I was carrying an explosive charge with me when I was injured and it probably helped me more than it hurt me because it took a lot of the shrapnel, it blocked the shrapnel from doing more damage to my left hand. I can still look and see the way I was holding that because that's exactly where the scars are [because] I had it in my hand. It was a charge that had a strap on it and then you put explosive charge to it once you got to the point where you were going to set off the charge...I can't remember for sure if I was walking second in line behind the point man and I'm thinking I went back to use the radio to contact someone back in our base camp and when I walked back I hit the mine (Ian, Army, White, BBKA).
- I was the artillery observer with an infantry company—101st Airborne. Our company and three other U.S. companies and a couple of ARVN companies were airlifted down around a suspected NVA base camp and our company was chosen to go in and search the base camp. We started stepping on booby traps just left and right. I got mine on the third day of that operation. It was really early in the morning. We were just packing up to go and I stepped on a booby trap that turned out to be a head off a B40 rocket or an RPG round and set up with a blasting cap and an old battery and just contacts to step on...[On the day I was injured] we were sweeping a suspected NBA base camp and trying to get down to take a look. It looked like a helicopter flying supplies in and it looked like to be a bunch of bunkers and it was in a valley in-between two ridge lines and they put five infantry companies down there..the company commanders drew straws and we got the short straw and got picked to go down into the base camp. We started down into the valley to sweep the area and we started stepping on bobby traps right and left. I'm not really sure how many kids got hurt but I think there were three or four the first day, five or six the second, day and I was the first one the third day but there were eight or 10, 12 kids that got hurt before I did and there were more afterwards but they finally pulled us out of there and sent an engineer platoon in there to

clear the other stuff out...[But I stepped on] the head off a B40 rocket which is as a RPG round, a self propelled rocket designed for penetrating armor and that's probably what saved my life. If it had been an anti-personnel mine I'm sure I wouldn't be around because it was all blast and big chunks of metal rather than blast and a lot of little bits of shrapnel. So I'm sure I stepped on the device with my right leg and then the blast took all the muscles and skin off my left leg and I'm not sure what took my left forefoot—but there was chunks in my thigh and forearm were nice and big. It wasn't an anti-personnel type of deal. It was just designed to blast. Fortunately there wasn't anybody else hurt with me. There was one guy that suffered from the concussion, just the blast, but he didn't have any physical wounds from shrapnel (Jason, Army, White, BBKA).

Direct Combat (Non-Blast Injury)

- [I remember the day I was wounded.] We had actually been out. We had a new captain in charge of our—I think we changed captains and lieutenants like every three months—and we had a brand new captain. We had been choppered to an area that was hot when we landed and we were there about one full day and we had been going up and down mountainsides and we got into a rather large fire fight and that's when I got wounded....We were out and our platoon, I was in the machine gun unit which meant one person carried the machine gun and we carried cans of ammo. So we were usually at the rear of lines. So it's really like no plan. You just hear a lot of shooting going on in every which direction. There's not really a front line or a rear line and I got wounded. I actually took a round from an AK-47 in the leg. It was going on all day, this action, and they tried to bring in choppers to get us out—the wounded and those who had been killed. We had a few people killed. And they couldn't bring in the choppers at night time so I spent the entire night out in the field and that's what caused the wound became infected. So, it wasn't like an explosion or anything like that. It was basically a round from an AK-47 (Nick, Army, White, AK).

Non-Combat (Blast Injury).

- [When I was injured] I was going down to pick up a booby trap that I had set up the night before but where I hit the booby trap was not where I had mine....We were in a night time defensive position and Camp Eagle had been hit with mortars and we were being pulled out to go over and be dropped in by Camp Eagle to try to find the people that had mortared Eagle the night before....All I remember is a big explosion. I was laying on the ground and I yelled for my partner and from what I recall they said he just had a cut on his face or something. So he wasn't really injured and then the medics showed up...[But] they never really know what happened that I know of (Liam, Army, White, BK).
- [When I was injured] I was squad leader and we had a major operation going on that we had a sweep. It was a battalion sized sweep and it just so happens that my platoon was up front and my squad was in front of the platoon so I got the opportunity to be up front. We were setting up a patrol base...[and] I hit a mine. [The enemy] had booby trapped [the] area that my squad had gone into and I hit [the] mine. It blew up and that was basically it. [So after I stepped on the mine,] I basically handed my material over to the...assistant squad leader (Greg, Marines, Black, AK).

- [The day I was injured] we were pulling security. Booby-traps were a big thing there. I mean somebody would step on one or hit a trip wire at least once a day. [So] it was raining and we were beginning to set up the perimeter and there was kind of a hedge row with a path through it so I walked through there and I turned around and came back. It's always a good idea when you're walking on a path [to] walk in your footprints coming back. Well, that's what I was doing and apparently I loosened this booby-trap when I stepped on it the first time. Then the second time [I stepped on it] it went off. Luckily we had just gotten resupplied at the company perimeter when I stepped on it, because I remember [the last thing I heard was the] helicopter taking off. It was just a resupply chopper, [but] it sat down and the guys picked me up in a poncho and put me on the chopper to take me to the aid station (Eddie, Army, White, AEAK).

Unsure Of Direct Combat Versus Non-Combat Injury (Both Are Blast Injuries).

- There was evidence that [the area our platoon was in] had been an area that had been active before because we could see evidence of explosions and US Army material that had been damaged a bit. We found the stock off an M16 rifle and stuff like that. So, we knew activity had taken place in this area, which certainly makes you want to be as careful as you possibly can. Of course, I'm talking to my boss who's in the helicopter flying around. He's anxious for us to get in position. You want to get this over with so we can get out of Dodge before sundown. I had a rifle platoon in front of me, in the two columns. In front of me I probably had sixteen or eighteen men. Behind the Second Platoon, which was the first one in the column, was my headquarters element. In the headquarters element, I had my artillery observer, his radio man, my two radios, my medic, and the artillery observer for the 4.2 mortar platoon. I had about eight men -- nine men -- in my group... I'm fighting the bush... When I got to this hedgerow, my first sensation was very quiet, eerily quiet. What had happened was I had stepped on a 105 mm howitzer round. Both of my radio operators, the one in front and behind me were injured to a degree from shrapnel wounds. Both of them were evacuated in a helicopter with me, but they returned to duty in a short period of time. They were not seriously enough injured to be evacuated out of country or stay out of the field (Willy, Army, White, AK/BE/HD).
- [The day I was injured] we were on a sweep to the east of our perimeter at Dau Tieng and they had information that there was an enemy force about to attack the east perimeter so we moved out the north gate and moved out to the east and then south and we were going to be catching them in a crossfire from our perimeter and then we would be the blocking force behind them and as we were going through the Michelin Rubber plantation that's when I stepped on a land mine and ended my Vietnam experience (Bob, Army, White, AK).

Unsure Of Combat Versus Non-Combat Or Blast Vs. Non-Blast

- [When I was injured it was] about 15 minutes to midnight and we were a semi search and destroy security patrol and so there was a burning, an armored personnel carrier had gone over a land mine and broke down. It was loaded with ammunition and they sent us out there to secure it because the ammunition was going off and they didn't want the enemy to come in and salvage any of it. So our job was to secure the armor, that armored personnel carrier and that's where some of the other would end up getting ambushed there.... So we were working around that area. We were just laying on top of the ground or moving. We didn't make any

foxholes or anything else. [But then we were ambushed]...[And] I don't [remember what happened]. I talked to my psychiatrist, psychologist, say its better if you don't remember that (Roberto, Army, Hispanic, BK).

E3. Immediate Experiences Post-Injury

The veterans' descriptions of the events of their experiences immediately post injury includes their actions and the actions of others leading up to their medical treatment by corpsmen or medics on the field. Their experiences are diverse and their stories range from descriptions of their immediate injuries to the care they received by medical personnel in the field. Some of them did not realize the extent of their injuries or did not fully grasp what was happening to them while others were aware of what they were going through. They usually were able to provide detailed descriptions of what took place during their immediate experiences post-injury.

Not Realizing Extent Of Injury

- [After the explosion] I went into an immediate white space. I could remember my mother canning cherries out of cherry tree in the side yard... My dad playing football with me and me squealing like a pig and my dog putting my dad's head in his mouth... Playing baseball and things in the cemetery... It was the end of our street. Then I got to my wife and I could remember what we—the good times we had had and what we had planned. She said come back no matter what. I was given a clear distinct decision. I was either going to die or not die. Instantly I was back in my body and I tried to breathe. I couldn't breathe. So I thought to myself in a very clear common sense methodical thought, I have no lungs and I'm going to die. Somehow I coughed. What had happened; debris had been blown into my mouth and into my nose and blocked the airway. Then I could breathe. Then I realized I probably ought to get a medic. So I attempted to step out of the bunker toward the back. We were in an old mountain yard village. Mountain yard's were very good people. They hadn't been out there for years and years and years. And there was a path from behind my bunker that went up toward the top of the hill to where the command post bunker was. That was the captain, the medic, the radio man, the lieutenant, and the first sergeant. I was crawling up there I heard footsteps go by and I knew they were not our footsteps—we'd been over-run. I would lay still when anybody went by and there was explosions going off all around. About halfway up the hill or this pathway I noticed my right leg wasn't pushing like my left and felt down and all I felt was a stump. Actually my leg was there but it was just hanging on by meat. It took about six inches of my bone and turned into powder basically from the concussion. I thought, well, I need to get a tourniquet. I called to the top of the hill. I yelled for the medic and the first sergeant came out...I've never found him to this date but I've looked for him. He came out and he laid with me through that time—told me to keep quiet. And again, I wasn't feeling a lot of pain. Your adrenaline is up and that's one of the reasons that allows you to live like this because your arteries/veins shuts down defensively the blood extracted into the trunk of your body during combat. As time went on lights started to come up. I couldn't see because my eyes had hemorrhaged and it was dark so that made it twice as difficult. The medic came out—or came by; I don't know where he was. They didn't last very long, surprising we had one....But, he came out, or he came by, and attempted to straighten my leg. It was just excruciating pain at that point. I said leave it alone and he realized he couldn't do anything with it (Frank, Army, White, BK).
- [After being injured the] next thing I knew I was in the foxhole with the other two guys. I heard them both start to moan and I remember saying shut up. I didn't want the gooks to know that we were hit and I didn't know I was hit. That's what's so weird. Gives me the feeling that people who get blown up don't know what happened to them because I hadn't, the only thing I found out my left arm was numb and I was sort of reaching for it and trying

to find it. It was still attached. Then blood started running down my face because I had taken a piece of shrapnel just above my left eye and that was kind of lucky too. That's when the blood started coming down and that's when I said ooh, I've been hit. It's just sort of a shock, you know, when this all happens. The next thing after that is I remember them yanking me out of the hole, dragging me back, and working on me and my, one of my good friends was the corpsman. He was talking to the captain, telling him I had a sucking chest wounds and I should be in emergency medevac (Pete, Marines, White, AE).

- I don't really remember the explosion or anything. I just remember being on my back and [I] just couldn't breathe because I had a lot of dirt and everything blew up in my nose but I was conscious the whole time and I can remember one of the things that happened. They called it in immediately back to our base camp, that they needed a Medevac and as it turned out it wasn't really a Medevac that came in. It was probably lucky on my part [that] a battalion commander had come in to visit our base camp and his helicopter was on the landing zone and they sent his helicopter out to pick me up and I can remember this. As you always did when you had a helicopter coming in you had to pop smoke and I could remember people yelling I can't find any smoke. And I can either thinking it or yelled it, well please find some smoke. And they did and they picked me up and I was on my way. I told you I was able to, through my platoon leader, obtain the records from that day and they called it in at 9:36 and by 9:44 I was on my way to the hospital....[But] I probably didn't realize [how badly I was injured because] I couldn't really see there because like I said, the dirt must have just all came up because I could almost taste dirt and I probably had dirt in my eyes. I really couldn't see anything (Ian, Army, White, BBKA).
- As soon as we got up on the road we got hit again and the last thing I remember was I stood up on the tank and I was trying to jump off. When I jumped off the next thing I knew is when I hit the ground I looked around and I was so scared that I didn't know at that time that my arm had been hit. My arm had been blown off and I didn't realize it until I looked at it. When I looked at it I saw my arm was hanging off by a piece of skin. That's when I saw it and that's when it started hurting. Other than that, I didn't even know that I had lost my arm. A corpsman from somewhere came and at the time that I was trying to get off that tank there was a corpsman there who was trying to help me or something. But like I said the next thing I remember I was on the ground and I was trying to crawl back underneath the tank. I remember that there was a sergeant who was in charge of that particular tank, an Army sergeant, and when that round hit that tank he got hit. When I saw him again, I think it was a couple of days later, I was in a hospital bed and this guy was in the bed next to me. Yep, and I never got to talk to him or anything like that because he was in so much pain and all I can remember was his moans and groans and the next time I heard about him they told me that he had passed away (Adam, Navy, Black, AE).

Knowing What Had Happened

- We had been stepping on [mines] for the last two days so I knew immediately what had happened. My legs were twisted around underneath me and my left arm was laying across my chest and of course there were the two big pieces of shrapnel in it with a lot of blood on my chest...I could look up and see what I was missing and it hurt like hell (Jason, Army, White, BBKA).

- What had happened was I had stepped on a 105 mm howitzer round...So I'm aware it's really, really quiet and all of this debris is raining down on me. And, it was a strange sensation. It was real bright and sunny and now it's cloudy because of all the dust. And all the stuff was plopping down on me and it was certainly confusing. I was trying to stand up [but] the concussion was so overwhelming that I was not able to perceive that. I had so much input -- my senses had so much input that they were overloaded, and I didn't know what had happened. My first conscious thought was—it's dark and what's all this stuff plopping down on me? Of course, with that much concussion, I am sure your mind is occluded...I kept trying to get up; I could not get up. And then, to try and see, why I was unable to get up -- I had fallen in the cone made by this explosion. I went straight up in the air and came right back down in the hole. When I looked down in this hole, I saw that both of my legs were gone at the knee. The lower part of my legs were just totally gone. My right leg was cut off cleanly at the knee. My left leg was gone at the knee but the thigh bone was exposed from the knee all the way to the hip. And it was -- the most startling thing was how glistening white the thigh bone is surrounded by all this red flesh. And, I'm looking and seeing that blood is pooling in the very cone. I think it was a perfect cone. I am seeing my blood down in the bottom of that cone. And with that, I just, you know -- when I saw that I just kind of laid back. I stopped trying to struggle to get up, because I was coming to grips with the reality of what I'd just seen. My first reaction, my first thought, was I was extremely angry. I was angry because I had -- my first thought was, how could you do something this stupid? How did you let this happen? I mean, you're a company commander! You're in charge of all these guys! If any idiot had to do something like this, why is it you? I was very angry, that anger was self-directed. Somehow I had done something wrong; made a mistake. It seemed like I had all the time to really flesh that out, to really get as angry and as spiteful as I could. And, then, my next thought was I wanted to die. I thought, I had been married six weeks from the day I left for Vietnam. I was supposed to have been -- we were supposed to be married about a year but the division decided everybody was going to go at once and that skewed our plans. So, the idea of going back to a new bride like this was something I was just not prepared to do. It was going to be terribly unfair for all of us. I guess I was thinking more about myself at that time. I did not want to go back like this. It seemed like I had all the time to be resigned to that decision. It felt appropriate. I resigned to it. I was ok with it. I was just gonna to die. And, my third reaction was that I wanted to live, and I wanted to live so badly...I don't even know that it would take; what it would mean; how difficult it would be. But, I want to live so badly I'm going to accept all that -- in order to live. Now, those three thoughts and impressions...I needed to have gone through that progression. It's kind of like Doctor Kubler-Ross's *The Transition on Death and Dying* and those elements.[Note: The title he uses is not an exact match for any of Kubler-Ross's books, but it is very close.] [And] all of this happened before the first man laid a hand on me. Now, I know this is difficult to comprehend, but -- and, in talking to the men that actually attended to me -- the first man approached me within probably fifteen seconds, but it was somewhat, a little longer than that before they actually began to do anything medically. But, it was a very rapid type of thing. When something like that goes off, your first reaction in the field is to take cover. You don't know if that's the first round of an attack. So, the first thing you do is fall to the ground, secure your position, get your weapon ready to fight because generally that's what happened. That's the opening salvo of a skirmish...[And] once they determined that it was a mine and not something else, they felt safe to move about. So there was some short delay (Willy, Army, White, AK/BE/HD).

- [We were in an ambush fire-fight and] somewhere along in there--these things happen in minutes so I don't know how much time lapsed at this point--but we did beat them back to a degree and I got hit in the upper left leg and that hurt but I was able to keep moving and keep going. Then I got hit in the right hip and that slowed me down some more but I was still able to negotiate move and issues orders and that kind of thing and then I got hit the third time in the left lower leg and that shattered the tibia and the what is it, the fibula...[But] I did not lose consciousness. Wish I had because it, you can't even describe how it hurt. The other two hurt but nothing like that. The other two gun shots hurt but nothing like that one...[I saw a Viet Cong and] I had I think probably one or two rounds left in my .45 and I was able to roll over to my left side and I held that .45 and I blew him away...[I eventually ran out of ammunition so] I said well by god I'm going to lay here and die. So I had the strength to pull out my Ka-Bar which is a Marine fighting knife. Now this sounds a little John Wayne but I'm telling you how it went down. So I pulled it out and I said well they're going to come over here and get me but I'm going to rake as hard as I can with this knife before I go out. And of course I started praying and I said good Lord I know I'm going to die here. I know they're going to kill me but if there's any way that you will let me get out of here and let me get home to die. That was my prayer and of course here I am so that prayer was answered. But anyway we managed to beat them back and by that time I'd been on the radio [and] I called for a Medevac because I'd already seen one of my men dead and another one of them I went in there and pulled him back before I got shot down to where I couldn't move. He was badly wounded. So I needed Med evacuation and we got a Medevac helicopter in there and by god they shot it out of the air--the enemy. You know, big red cross on the bottom of it, red crosses on the side. Geneva says, convention says, you don't shoot those but that's not how the Vietnamese and North Vietnamese play ball as I told you (Chris, Marines, White, BK).
- [I was aware of what had happened when I was injured]. Yeah, I mean it seems like the whole jungle blew apart. I mean all I saw was this big orange-black flash coming up all around and I was going into the air. I thought trees were falling on me but I was being thrown up into the trees. And I come down and I landed on my back and knocked the wind out of me and I was gasping for air for several minutes I guess and was finally able to call for a medic. They got there and I'd pushed up on my elbows, looked down at my legs and I thought both of them were gone because my kneecap on my right leg was sticking up through my thigh and the bottom part was gone. My other leg, it was actually laying up underneath me and I thought it was gone too but they saved it (Bob, Army, White, AK).

General Descriptions

- [I set off a booby trap that] was off a trail because I walked through some bushes and it set it off. It was on a pole type device...After I turned over and the smoke cleared away and tried to get up, yeah. I never passed out if you want to call it that or went unconscious until I went into surgery. I stayed awake through the whole thing. [But I knew how seriously I was hurt] because I turned over and the left arm was bleeding, the left leg was gone completely and the right leg was mangled up from the knee down (David, Marines, White, BAKA).

- I stepped into a box mine which [is] an artillery shell that was unexploded. It was actually set to be tripped by a tank but I had the misfortune of stepping on top of it...[And I realized what happened] right away. When I stepped in it I told the guy behind me to get down. It had about a two to three second delay before it went off. I knew right away what I had stepped on...[And I didn't try to get away from it when I realized what I had stepped on] because I was in a hole down to practically my waist. It was meant to explode straight up and take a tank out is what it was set for and it blew me through the air probably about 20 or 30 yards. I landed on my back. I knew my leg was gone. I never lost consciousness throughout. From the time I stepped on the land mine until the time they Medevaced me out I never lost consciousness (Keith, Marines, White, FAK).
- When I got hit half the platoon got wiped out in that episode and there were four of us that were amputees that got shipped off to the 12th Evac hospital...[When] I came to, my eyes were burning, I couldn't hear nothing. My ears were ringing like a giant firecracker went off. I looked down and I could see my right stump, the blood shooting out of it, and so I put my fingers on the carotid, or not the carotid but the femur vein and tried to stop the bleeding as much as I could. And I noticed that my other leg was turned around backwards so I knew I was in trouble and then everybody thought I'd been hit by an RPG because we didn't get ambushed. So everybody hesitated. So it took a little while for people to get to me. Then Blue, the medic, he came and patched me up as best he could and I was in and out from that point (Gary, Army, White, BAKA).
- [I stepped on a land mine and] my physical body just became very heavy. Or my leg became very, very heavy and I was watching the guy in front of me. His eye got it but his face turned black from the gun powder and I was watching him and [I] just grabbed a hold of my leg and threw it out in front of me and there was nothing there at all. Shot to shit. Excuse my French. [Then] two men just hit me with medication and then I was Medevaced out (Shawn, Army, White, BK).
- I was in the machine gun unit which meant one person carried the machine gun and we carried cans of ammo. So we were usually at the rear of lines. So it's really like no plan. You just hear a lot of shooting going on in every which direction. There's not really a front line or a rear line and I got wounded. I actually took a round from an AK-47 in the leg. It was going on all day, this action, and they tried to bring in choppers to get us out—the wounded and those who had been killed. We had a few people killed. And they couldn't bring in the choppers at night time so I spent the entire night out in the field and that's what caused me to mostly get—the wound became infected. So, it wasn't like an explosion or anything like that. It was basically a round from an AK-47.... I think I was hit towards the evening as it was getting dark and we had a medic. Everybody calls their medic doc and he gave me a couple shots of morphine and I had some water and that was about it. To tell you the truth I didn't feel a whole lot of pain. When I got shot I didn't feel pain either. It was just a very intense feeling of heat and you really don't know you're wounded. You look down and you see you're bleeding. But I guess the adrenalin flow takes away a little bit of the fact that you've actually been hurt. But I did get, I think that evening just to get me through the night—then the Medevaced me the next day—I think I had a couple shots of morphine and that was it (Nick, Army, White, AK).

- All I remember is a big explosion. I was laying on the ground and I yelled for my partner and he was, I think from what I recall they said he just had a cut on his face or something. So he wasn't really injured and then the medics showed up....[I didn't really know how badly I was hurt,] I mean I guess I knew I was hurt and listening to the medics, it didn't sound real good. I gave them my knife to cut my boots off and they were bandaging on my legs and then bandaged my side and my arm where I had large burns and I think I had three shots of morphine out there in the field and then waited for about an hour and a half for medical to come in by helicopter. They were tied up because they couldn't get any Cobras to do cover for them while they hovering to raise me out of the jungle (Liam, Army, White, BK).

E4. Amputation Experiences

Some veterans gave brief descriptions of their amputation experiences beginning with what happened when they arrived at the field hospitals. Most of these descriptions pertained to cleaning the wounds they had received and stabilizing the veterans. Some veterans also made note of their appreciating the care they received. One also made note of the justifications for the amputation while others described the events leading up to their amputations, such as what happened before their surgeries. It was not uncommon, however, for veterans to not be able to remember the treatment they received. Intense pain and medications may have played a role in their inability to recall the treatment they received.

Brief Descriptions

- [At the field hospital] they took the right leg off and cleaned up the rest of the wounds and stuff and left it open until I left (David, Marines, White, AAKA).
- I arrived [at the hospital in Long Binh] with no blood pressure, no pulse and what they did, they cleaned wounds and finished the amputation of the leg and took some shrapnel out of the eyes and what else, I just, and said I had 51 units of blood during that period I guess. Fifty units in one day there--24 hours (Troy, Army, White, FAK).
- [At the field hospital] they removed the leg. What was left of it. It was a little piece of muscle holding it down to the rest of my body. And of course they went in and took shrapnel off of my pelvis area and sutured everything back up (Roberto, Army, Hispanic, BK).

Appreciating Care

- I stepped on a booby trap that turned out to be a head off a B40 rocket or an RPG round and set up with a blasting cap and an old battery and just contacts to step on. I lost my right leg below the knee. I have about a two and a half inch stump below the knee. My left leg was mostly blast injury. All the muscles on my, and all muscles from basically about an inch above the knee all the way down to, well my boot protected the bottom part of my foot but all the muscles were blown right off my leg. I had about six or seven inches of tibia showing. No broken bones although it did take my forefoot from the mid-metatarsals forward. And so, it disrupted the knee quite extensively. Although I still have my whole leg because the surgeons did an amazing job. I didn't appreciate it much at the time but they were able to, despite all the injuries to the left leg, they saved it....as far as I'm concerned [the medical care I received] was superior. It kept me alive and gave me the opportunity to build on what they left me. Like I say, I can't say enough for the guys in Vietnam for not, or at least for giving the guys in Japan something to work with. You know, for not just out of hand taking my left leg above the knee which would certainly have been justified with all the damage that had happened and then for the guys in Japan that decided that there was enough to save and decided to, rather than doing the amputation above the knee, to saving what was there and going through the skin graft process and stuff like that (Jason, Army, White, BBKA).

Justification For Amputation

- I lost my right arm and the initial injury, it was below the elbow but in order to fit me for a prosthesis, the surgeons decided that, you know, if you can picture on the end of your upper arm there's like a nub like and in order to fit me for a prosthesis they had to take that little

part off. So in the hospital I had that operation. They took that off and once I got healed up I got fitted for a prosthesis and I guess the rest is history so to speak (Adam, Navy, Black, AE).

Deciding Whether Or Not To Amputate

- I remember being flown there and they took me off the chopper. A corpsman asked me did it hurt and as I was in so much pain and then I remember they asked me could I stand and take an X-ray and I passed out. Next thing I know these two doctors was leaning over me and one was a very great doctor because he was saying, son, I know you're hurt kind of bad but we think we can try to save your leg. I remember he was moving his finger up and down my foot there and he asked me, did I feel it, and I was just, no I don't feel anything. He said some kind of medical term and the other doctor he said oh, just cut his leg off and let's be done with it and that dude was scaring me. So eventually the doc, the nice doctor, he was an admiral and he said well, I'm sorry son but we're going to have to amputate. Then I remember, the last thing I remember saying, will it hurt or will I be awake or something to that effect (Mark, Marines, Black, AK).
- They immediately got me into some sort of surgery, intensive care, whatever down there and they debrided the bone and flesh that had the disease in it, the gangrene. That was culled and I think, so that was about the fifth of February or something and I remember coming out of it. They beat the fever and stopped the spread of infection and all that and I started feeling better. I had a fine orthopedic doctor there, getting back to treatment. He was a Navy doctor, a lieutenant commander and I had another doctor that I guess was his assistant or whatever. Both orthopedic surgeons. Both of them, one more serious than the other, but both of them fine guys and I believe fine surgeons. So about the time I get to feeling better, you know, and feeling like a human again he takes me down to this operating room. I was too weak to stand, sit up or to turn around. But he gets this big round mirror and puts it in front of me laying on a gurney and showed me my leg. Well there was bone coming out of the top part of it and bone coming out of my foot at the heel down there. Of course that was the femur, the big bone. The section from oh, I'd say 24 inch section of the femur was gone. And the, what's the other one, the tibia? That was intact but it was chipped and whatever. He said well I wanted you to see this because I want to tell you what I think and tell you what your options are. He said we may be able to go back and re-fabricate this bone and do this leg and do this and that and the other he said, but you'll be in and out of the hospital for years and then I don't know whether it will work or not. He said, the other option is to amputate your leg just below the knee and we'll have you walking on a prosthesis in four or five months. I took another look at it and I said let's get rid of it [because] after seeing what I saw there I, and you know, always being in a hurry, I didn't want to envision playing around with surgery for several years and all this sort of thing. The idea of getting the prosthesis, which I didn't even understand that fully, but I said well that'll put me back to walking, you know, in my mind. I said let's do it. So I made the decision right there in the operating room with the Doctor that day. So a couple of days later, I think on the 25th of February, I went into surgery and they took the leg off (Chris, Marines, White, BK).

Describing Surgery

- [At Fitzsimmons] I was put on a ward, Five West, as I remember with about 85 other amputees. From there, they chopped more of my leg off and did a closed revision on it that

they always told me was the first closed revision they ever did as an experimental thing. Then I went through therapy and then I think it was like around September, some part of September they moved me. I was healed up and they moved me to a, like a barracks off beside the hospital and that's where I stayed for the rest of my time there. During that time I was fit for a leg and given a leg and did therapy sessions....[And] from what I remember of the doctors talking, part of [why they did a closed revision procedure on my leg] was because the rest of my leg was in good shape and they, I spent more time, as I recall at the time the procedure was to do a closure in like three surgeries to check for infection and stuff as it healed. And my first and only surgery was prolonged, from what I understood they had me on a lot of antibiotics to make sure that there could be no infection. But a lot of it had to do with the rest of my leg was in fairly good shape with not a lot of scar or torn up or anything so they felt they had a pretty good chance of closing it up in one surgery (Liam, Army, White, BK).

- We got to the evacuation hospital, and I looked and here is a wall of about five or six people, a surgical team wearing the green surgical garb, they've got masks on, they are gloved, all standing there with. They set me in the receiving area...cut the rest of my clothing off and began life-saving procedures. Some of that, again, I remember quite vividly. For example, I remember looking down watching them work and one of these doctors is cutting right in my groin. Right where the top of your leg meets your pelvis. Now I'm looking down, and I am seeing another good set of flesh I've got down there. And, I'm thinking, hey dude, why don't you go down and cut on the end of that thing. Don't cut me way up here. Of course, what he was doing was cutting into a vein to start a much larger IV, and I had no appreciation for it. During this time, while we were in this receiving area, I can remember a doctor asking for the blood pressure. He called, blood pressure, give me pressure, and the nurse said, I can't find a pulse. I can't find a pulse. And, there was a lot of noise and it was bright. And, I remember about this time after hearing that, things started getting dark, darker and darker, and a little while later got brighter. And, I could hear, and all of this riot of noise going on around me. And, after they stabilized me in some period of time, I was moved into the operating theater. It was air conditioned in there. Boy that was a relief. In fact, it was quite cool it seemed to me. Of course, I'm stark naked, and I'm looking up and they had a surgical light. I don't know if you've ever noticed them before, but actually it's a series of lights. I'm looking at these little spheres making a circular pattern. It was nice and reflective and I could see where I was gone, where I was missing, where I was bandaged. And, I was looking at my privates all decked out there for the whole world to see...Now, although I was not beyond registering any pain, I asked them later why they didn't put me asleep because I could remember what was going on, at least all around. And, they were afraid to use any general anesthesia for fear once I went down I'd not come back. In order to keep me part of the process, they sent back to my unit and had one of my friends, another lieutenant, come into the operating room, and he and I would carry on a conversation. They would encourage him to engage me, to keep me occupied. Of course he was a combatant, he wasn't accustomed to seeing surgery, so they'd hit him with ammonia and stick him back up, and he'd come back into the breach. He said that was the most difficult afternoon that he ever spent in Vietnam. I went through the surgery alright and came out, and so the next three days I was on the intensive care unit. On two of those evenings after the normal course of the day's activity in the evacuation hospital, one of the physicians slept in a cot beside my bed. I was unaware of that until years later when he talked about his fear for even retiring to his own quarters some

two-hundred yards away. So, it was a miraculous set of circumstances that enabled me to survive those injuries. Even with the substantial blood loss, I did not have any lasting brain impairment, oxygen deprivation, or anything like paralysis or anything... [But] my hand was removed the first day. If that had been my only injury, they would have handled it differently, but they were so concerned about just saving my life. Now, as a result of the debris and filth and all that was thrown back and contaminated my body, I did get an infection which kept me in the hospital, in this evacuation hospital in Vietnam, for three and a half weeks (Willy, Army, White, AKBEHD).

Being Told Of Amputation

- They wheeled me in and stripped my clothes off me. I still had a St. Christopher medal on and I remember them telling me later that they thought it was really cool as I was being wheeled into the operating room I was given a peace sign while I had that Christopher medal in my hand. They said that was cool. Because they were, you know, squids, what do they know. When I got into the operating room I can remember one doctor touching my left arm. I can still see my left arm, my hand. My left hand looked fine. It had a little bitty scratch on the knuckle of my thumb and that was it and for part of the way up it looked okay. But then the rest was all covered and everything. But he kept touching my hand asking me if I could feel anything and I told him no and then they, you know, gave me that shot. I just blinked out. That kind of bothers me too but that's what happens. The next morning when I woke up the corpsman was doing something to me and I asked him what happened. I looked at my arm, I said what happened. He said the corpsman, the corpsman said that the doctor found it medically necessary to amputate my arm and the doctor who did it—he's a nice guy—he came in and he said they were just so busy that night they didn't have time to work on it and try to save it even, you know, if I would have said it was, I could feel something, they would have tried to save it...[When he told me what had happened I just thought] well, shit happens (Pete, Marines, White, AE).
- [I remember coming out of surgery and waking up and] a big corpsman [was] standing above me and he said, you know we had to take your leg off and I said I kind of figured that. I thought both of them were gone. And he said you want to take a look? He lifted the sheet up and all I could see was a catheter and I just checked out to see if I was all there and I was and I says huh, I'm okay, and went back to sleep (Bob, Army, White, AK).

Realization Amputation Has Occurred

- They moved me out to intensive care and then I remember moving out there but I must have passed out and went to sleep immediately while I was out there. And then this is when I, I was not as groggy as what I was before and I came to and this is the weird part. I was looking at the guy that was laying next to me and I saw that he didn't have any legs and then I followed him on up and I realized he didn't have any arms and that's when I turned over and I realized both my legs were gone and you know, you're coming to your senses and then I'm thinking to myself, damn I'm lucky, because this guy he was in really bad shape. So I've always carried that attitude that I've been lucky. Then after coming to, nurse comes over and tells me I can have anything I want to drink and the first thing I had was a Coke. Then a little Jewish doctor that had operated on me came over to me. And he was a trip. He was only like five foot tall and he was apologizing for all the stitches around my nose because he's a leg

man, he's not a nose man and then he was telling me my family jewels were alright. Then he took off and that was about it (Gary, Army, White, BBKA).

Vaguely Remembering

- The leg was all bandaged up and there was a big cast and different things. One thing I do know, when I got to the operating room just before they're knocking me out, I asked them to save what they could and they said they would. And they did do that for me but I eventually lost the leg anyway. [So at first they tried to save my leg.] Yeah, they put it back together as best they could but the damage was pretty severe. I lived with it for awhile. I had many surgeries...[But I was at the field hospital for quite a bit of time]. When I say quite a bit of time, I'm guessing more than seven or eight days. That's why I think Quin Yon was the place I was at and I think it was the first place I went to because I do remember when they put me in for the surgery and I think I was there about seven or eight, nine days. And I guess conditions being they were getting worse and stuff because they had mentioned to me about the infection and would give me a lot of antibiotics and treatment and stuff and then I think it was probably four or five days when they decided to actually do the surgery [to remove my leg] above the knee....[And at the time] I think probably I wasn't totally aware of exactly everything that was going on. I have memories of them telling me what they were going to do and I went in for another surgery and I'm pretty sure they told me ahead of time what they were going to do. And I think I was mostly out of it. I wasn't totally aware maybe of what was going on unless I've just suppressed those memories. That's the other possibility (Nick, Army, White, AK).
- I was taken to the Da Nang hospital. The amputation on my right leg occurred, or my right foot I should say, occurred at Da Nang. My left leg and my arm were all bandaged up and they were trying to save both my arm and my leg. They ultimately saved my left arm but they were not able to save my left foot. But I had that amputated at the 249th General Hospital in Yokohama....I remember bits and pieces of it as far as being carried out of the office, waiting for the ambulance, part of the ambulance ride to the hospital. I remember a chaplain coming over to me and talking to me and I couldn't hear anything because my ear drums had been perforated. So they wrote things down and what he wrote down was, they asked me what my address was and I remember either thinking or saying, I'm not going to give it to you because I don't want you to tell my parents what happened. That's the last thing I remember about Da Nang. They were taking me into the operating room at the time. Then the next thing I remember is being on a board on the outside of a helicopter flying somewhere and I don't know whether that helicopter took me all the way up to Japan or whether it took me to a hospital plane or what but the next thing I know, I'm waking up at the hospital in Japan (Owen, Marines, Black, BBKA).
- [I don't really remember the treatment I received in the field hospital]. No, all I pretty much remember is waking up. My arm was completely wrapped. They had what looked like a softball on my left hand. All you could see was the tips of my fingers. I wasn't sure whether I'd lost my arm or my hands or anything. I couldn't really see it. And of course they had me in a, almost a knee length like cast on my left leg. That was because they had pretty much done as much as they could do for me there. They sent me to Japan to have what they called debridement which was, basically trying to save as much tissue on my leg as they could. So I

don't really remember—Da Nang is a blur. I remember being received at the hospital and I remember waking up a couple days later and being told that they were sending me to Japan. That's about it. [But] they did do surgery on my arm and hand. In fact, I was told later on that whoever sewed me up in Da Nang probably saved my arm and hand because of what, well I didn't get infection in it so whatever they did, whatever debridement they did there probably saved my arm and hand because I had a severe pseudomonas infection in my leg for the four months of the six months that I ended up being at Bethesda Naval Hospital. They were fighting infection in my leg there (Keith, Marines, White, FAK).

F. RECEIVING CARE

Despite having large memory gaps around care during the first 12 months of injury, nearly all of the veterans provided rich descriptions of their care experiences. Overall, the veterans described the care they received as excellent and superior. There was near uniform consensus that the overseas care was exceptional. Their only complaints centered on US care experiences and included the lack of adequate drug detoxification care, limited mental health care, some negative interactions with physicians, and negative experiences with care received from the VA such as inadequate facilities for amputees and encountering bureaucratic problems. The following section is divided into three subsections to illustrate experiences with overseas care, U.S. care, and care received from VA hospitals. Note that specific detailed descriptions surrounding amputation experiences were discussed in the previous section. In addition, detailed descriptions of physical therapy and mental health care experiences are addressed in their own sections later in this report.

F1. Experiencing Overseas Care

This sections discusses various aspects of the veterans' overseas care experiences. It covers experiences in the field, transport care overseas, and experiences with care at hospitals in Vietnam, Japan and the Philippines. When talking about the initial medical treatment they received on the battle field, the vast majority of the veterans seemed to greatly appreciate the care they received from the medics and corpsmen. A couple of them even credited the care they received from the medics in the field as saving their lives. Several of the veterans recalled the use of tourniquets and morphine during their field treatment. Most of their descriptions of transport care from the field to the field hospitals involved giving brief descriptions of helicopter flights. While at the field hospitals the veterans received care that stabilized their conditions. The veterans' overseas care experiences also frequently involved their mentioning of procedures and surgeries that were performed, the pain they suffered through and their perceptions of the medical personnel they interacted with and the medical care they received. All the veterans received some care in Japan before returning to the U.S. and one also received care in the Philippines. Finally, several veterans had difficulty recalling what type of treatment or care they received. This was mostly due to losing consciousness and/or receiving pain medication that interfered with their memories of what happened. These findings are illustrated below.

Immediate Care In The Field

- It took a little while for people to get to me [but] the medic, he came and patched me up as best he could and I was in and out from that point. There was a chopper that saw the explosion, called up and said he would come in and pick us up and he picked us up. I was in the hospital in 15 minutes. And that's the only reason that I'm alive (Gary, Army, White, BAKA).
- Many things conspired to enable me to survive [my injury]. One of them was the fact that we had—I had the battalion reconnaissance platoon attached to my company that day. The senior field medic—this was his second tour in Vietnam as a medic—the senior field medic in the battalion was the medic for the recon platoon...and [he] was able to begin to coordinate the three or four medics who were all able to attend to me]....So that is one of the reasons that I was able to survive because we had such an accomplished team (Willy, Army, White, AK/BE/HD).

- [After I was injured the corpsman] stopped the bleeding as best he could and shot some morphine in me...The corpsman looked at me and said, “Just try to breath as deeply as you can.”...The corpsman was like a friend and he did a good job of taking care of me after I got wounded as best as he could for the hour or so he had me before the chopper got there (Pete, Marines, White, AE)
- [I remember being treated on the battlefield]. Actually I never lost consciousness. It was actually lucky for us that nearby was a battalion operation. So we got Medivaced out within 15 minutes or so....[And before I was put in the medevac helicopter] I got tourniquet on the leg and two shots of morphine (Keith, Marines, White, FAK).
- [When I was injured] I knew I was hurt and listening to the medics, it didn’t sound real good. I gave them my knife to cut my boots off and they were bandaging on my legs and then bandaged my side and my arm where I had large burns and I think I had three shots of morphine out there in the field...[And when I think of the medics that treated me that day] I felt they were giving me the best care that they were trained how to do. I mean I know we didn’t have, they had a bag that they carried so it was like I knew they couldn’t do a whole hell of a lot. They were just carrying a little foot square, four inch thick bag. So how much stuff could you have in there to do a whole lot with? No, I was okay with all the care I got all the way through (Liam, Army, White, BK).
- [I remember some of the treatment I received on the ground after I was injured]. I think I was hit towards the evening as it was getting dark and we had a medic. Everybody calls their medic doc and he gave me a couple shots of morphine and I had some water and that was about it....Then they medevaced me the next day—I think I had a couple shots of morphine and that was it....But the doc came by and treated the wounds as best he could and gave me some shots of morphine. [So I spent the night on the ground and] I think I was awake the whole night but I really don’t remember a lot of what went on that night (Nick, Army, White, AK).
- [I stepped on a landmine and then] my physical body just became very heavy...[I] just grabbed a hold of my leg and threw it out in front of me and there was nothing there at all. Shot to shit. Excuse my French. And two men hit me with [morphine] and then I was Medevaced out (Shawn, Army, White, BK).
- [After I was injured] they put a belt around my leg right in my groin area—of course to stop the bleeding--and gave me a couple of syrettes of morphine and pretty much that was all they could do for me....[But I was conscious and aware of the fact that I was seriously injured and I remember thinking] that I was going home. That’s pretty much all I was thinking at the time. It, you know, they give me a couple of syrettes of morphine...[I received medical care immediately after being injured]. I had a corpsman instantly come up with three tourniquets on and a shot of morphine...[And once that happened I was] instantly [medevaced out]. I wouldn’t say [I was there] more than 30 minutes [before the medevac came in]. It was almost like instantly. As soon as they called them they were there (David, Marines, White, BAKA).

- [After my initial injury I was treated by the medics.] Basically they tourniquet everything off. Gave me some morphine. I asked for water and they said forget it. I was very fortunate in that the chopper that picked me up was coming out to get me anyway to go back and get promoted to First Lieutenant (Jason, Army, White, BBKA).
- [The] corpsman had come up and he put a tourniquet on my leg but he put it between the gun shot wound and the upper leg and the lower leg and I said doc you're going to finish killing me. He said what's the matter? I said I got a wound here and you're putting the damn tourniquet between the upper leg and the lower leg. I'll bleed to death. Anyway, he moved it up, got the tourniquet up. Well, he'd already popped me two or three times with morphine by then but I still my faculties and the morphine, if it helped any I don't, I was hurting so bad I don't know. But he did the best he could (Chris, Marines, White, BK).
- [After I was injured the] medics got to me within minutes. There was a lot of confusion. Some were lifting my head up and others were putting a helmet under it to hold my head up and others were taking the helmet out saying they'd keep his head down. Finally get tourniquets on me and it was just kind of confusion for awhile. Then they finally made a litter and carried me out into a clearing that they'd prepared for a helicopter to come in (Bob, Army, White AK).

Being Transported From Field To Field Hospital

- They put my leg together and they wrapped it up and they gave me morphine and I'm not sure if they did anything to my back because when the chopper came and I asked them for some water because I was, for some reason I was dry. Never ask for water in an open chopper because I got water everyplace but in my mouth (Mark, Marines, Black, AK).
- I was very fortunate in that the chopper that picked me up was coming out to get me anyway to go back and get promoted to First Lieutenant. The next day was going to be my year since I'd been commissioned and at that time we were getting promoted to First Lieutenant in a year so I got picked up within 15 or 20 minutes after getting hurt. And it wasn't a Medevac chopper (laughing) but they had me on a poncho and they just slid me onto the floor and flew me back to the MASH unit [which] was at Camp Eagle but I really don't, the only really thing that I remember vividly about it, I remember landing--I don't remember the flight at all—but I remember it landing. I remember being lifted out of the chopper and put on a gurney and I remember a nurse looking over me and I said can you give me anything to put me to sleep. She said, if we do that you'll die. So that shut me up right then and there (Jason, Army, White, BBKA).
- I remember when the helicopter finally got there, and they took out the stretcher and pushed—medical stretchers are rigid but they are bowed in the middle. They are not perfectly flat. So they put the first two, my radio operators in the helicopter, and they were lifting my—I had been laying there for awhile while they got in position in this litter. Lifted up, and as they were lowering me into the sling on the floor of the helicopter; I noticed a rivulet of my blood running right down the center of this litter, hit the aluminum floor and rolled and spread all the way under the co-pilot's seat on this helicopter. I thought, geez, this cannot be good. You know, that's a lot of blood. And, it's amazing how humorous that seemed to me.

This is not good...I remember the sweet smell jet fuel on the helicopter and how warm it still was. It got cool when we were flying in the helicopter and got warm again. [And then] we got to the evacuation hospital (Willy, Army, White, AK/BE/HD).

Receiving Care In Field Hospitals

- I was taken to the Da Nang hospital [which was a field hospital]. The amputation on my right leg occurred, or my right foot I should say, occurred at Da Nang. My left leg and my arm were all bandaged up and they were trying to save both my arm and my leg. They ultimately saved my left arm but they were not able to save my left foot. But I had that amputated at the 249th General Hospital in Yokohama....[And] I have no idea [how long I was at Da Nang before I was shipped out]. I remember bits and pieces of it as far as being carried out of the office, waiting for the ambulance, part of the ambulance ride to the hospital. I remember a chaplain coming over to me and talking to me and I couldn't hear anything because my ear drums had been perforated. So they wrote things down and what he wrote down was, they asked me what my address was and I remember either thinking or saying, I'm not going to give it to you because I don't want you to tell my parents what happened. That's the last thing I remember about Da Nang. They were taking me into the operating room at the time. Then the next thing I remember is being on a board on the outside of a helicopter flying somewhere and I don't know whether that helicopter took me all the way up to Japan or whether it took me to a hospital plane or what but the next thing I know, I'm waking up at the hospital in Japan (Owen, Marines, Black, BBKA).
- [At the field hospital] I do remember...every day I would go back into the operating room where they would change my dressings....on the third trip back, on the third day, is when they finally did the hip disarticulation....[I was in the field hospital for three and a half weeks and I would assess the care I received as] excellent, 'cause I'm here. Naturally, they were very, very attuned (Willy, Army, White, AK/BE/HD).
- [By the time] I had probably been into my first or second morphine shot I can remember the light of day start[ing] to come up...[When they were transporting me for medical care] I would lapse in and out and [when I got to the field hospital] I can remember telling the doc, he came around and I said—get the other guys they're worse than me. I didn't know [if they actually were] but that was my demeanor and thought at the time. He came back and he looked at me and he said—well I'm going to have to take the leg. I said—I know that, it doesn't bother me. But he says he's going to take both testicles that upset me quite a bit....[At one point] I can remember waking up and coming about eighteen inches off of the table because the only thing I had left on me of my clothing was my zipper and my pants pockets and my belt. The rest had been melted or injected into my skin...They were trying to literally rip my pants out of me and take what debris and scrub me down and prepare me for surgery and that was excruciating pain. They must have hit me with a little more morphine and knocked me out (Frank, Army, White, BK).
- [They took me to Da Nang field hospital] and I was out of it then for a while. Then I remember waking up some time during surgery and it felt like my leg was on fire. I could see the surgical team. I didn't recognize anybody of course but I saw them and I said what in the H are you guys doing with my leg? Are you trying to burn me alive or some remark like that.

That was all I remember until the next day sometime...[But basically in] the field hospital in Da Nang, I don't remember a great deal other than grumbling with them about twisting and burning my leg it felt like during the surgery (Chris, Marines, White, BK).

- The demo guys blew a bunch of trees out and got it cleared so they could bring in a chopper. It took about maybe a half hour that I was waiting on the chopper. Finally it came and took me out to the Dau Tieng aid station and they took me in and they said we can't do anything for him, he's too bad. So then they put me back on the helicopter and flew me into Cu Chi which is a 12 Evac hospital and then they started giving me blood and saving my life. I remember they were asking the next of kin and all this here. I heard a pop and I looked back over my head and all this blood come flying all over me. The guy was squeezing the bag so hard it burst it. My veins had collapsed so they opened my arm up, cut it open, and found an artery and then ran an IV into the artery and started the blood. [And he was squeezing the bag to try to force the blood into my system] and it burst and he says don't worry and I mean just split second he had another bag on there squeezing it in. They said I took 35 units the initial transfusion [because] it was I guess going out nearly as fast as it was going in....[And when the medics treated me] they gave me morphine...[And then at Cu Chi] they started taking me over to an x-ray table and putting me on that to take x-rays and the pain just became so great and I was screaming and I heard the doctor say go ahead and knock him out and I guess they hit me with sodium pentothal because I went out like a light. I guess that's when they took me into surgery and all that. [So] they cleaned up [my leg] and removed the knee and the shattered bones and everything. They removed it at mid-thigh and debrided my other wounds and sutured me up...[Then] I was [at Cu Chi] for seven days [where] they debrided my wounds on a daily basis, kept me pumped up with penicillin and morphine and demerol, and made me comfortable...[With my treatment the medical staff] did a great job. Very good. They were excellent (Bob, Army, White, AK).
- I went to 1st Marine Medical Battalion in Da Nang. [And I was there] I would say about two weeks maybe? A week? I don't know. Because the only thing I know I got hit in June and I left in July, probably early part of July. I got good care there to my knowledge. I don't have any recollections of being treated badly no. [And while I was there] they took the right leg off and cleaned up the rest of the wounds and stuff and left it open until I left...[And] the people that were, that I remember talking to and the nurses, they're always polite and courteous and stuff. Then the doctors seemed okay. I don't remember having them a lot come over and talk to you a lot because they had a lot of people to work on but I can't complain. I mean I'm here so they did their job (David, Marines, White, BAKA).
- I think [the field hospital was Dong Ha and I was there] about a week...[And it was there that] the doctor told me they had to amputate my leg below the knee. I remember him telling me that it didn't register until I tried to get up and naturally I fell out of bed and I remember feeling my knee but nothing further down and. . .I don't [remember anything else about the treatment I received there].... [The only other memories that I have of the field hospital are that] I remember being flown there and they took me off the chopper. A corpsman asked me did it hurt and I was in so much pain...I hurt and then I remember they asked me could I stand and take an X-ray and I passed out. So I don't know if I did or didn't. Ah, next thing I know these two doctors was leaning over me and one was a very great doctor because he was

saying, son, I know you're hurt kind of bad but we think we can try to save your leg. I remember he was moving his finger up and down my foot there and he asked me, did I feel it, and I was just, no I don't feel anything. He said some kind of medical term and the other doctor he said oh, just cut his leg off and let's be done with it and that dude was scaring me. So eventually the doc, the nice doctor, he was an admiral and he said well, I'm sorry son but we're going to have to amputate. Then I remember, the last thing I remember saying, will it hurt or will I be awake or something to that effect (Mark, Marines, Black, AK).

- [I don't know where the Medevac helicopter took me.] I know it was one of those field hospitals but I wouldn't know where it's at....[But at this hospital eventually] I passed out and I didn't come back around for I don't know how long. I don't have the slightest idea [as to whether I passed out for hours or days]. I don't remember. [But] I was there for awhile to get stabilized and I was there probably, maybe about seven or eight days. Yes sir. [I don't remember specifically what they did but] they took very good care of us. Very good care of us. They looked after us like we were, I don't know, we were kings I guess. Anything we needed it was like 24 hour care. It was wonderful. I mean you couldn't find better service or better care anywhere else. [I had surgery there]. They removed the leg. What was left of it. It was a little piece of muscle holding it down to the rest of my body (Roberto, Army, Hispanic, BK).

General Experiences Receiving Care In Japan And The Philippines

- From the notes I've got when I got to Japan, they actually had to open up the right stump to let it drain. The other thing I remember is this doctor. I had quite a bit of scabbing on the left arm and (laughing) he just went ahead and ripped those scabs off. So he said that'll keep you from picking at them and getting infection (Ian, Army, White, BBKA).
- [I was] in Japan [for] about a month. They started doing skin grafts on my lower left leg and they closed my stump. [There was] skin traction for a long time and then they had to take all the sutures out on my backside and everything. That was rather painful. [So] they did that and they finally got it stretched out and they did close the stump up then (Bob, Army, White, AK).
- [I received treatment in Japan]. Mostly debridement is all they did. I had one major operation there and they put maggots on me there on my leg [because I had a serious infection.] [But eventually] they basically were trying to get as much garbage out of my leg as possible to see if they could save anything that would be a stump. It was actually bad enough that when I got to Bethesda Naval hospital they wanted to do a hip disarticulation and I refused that. I wanted to save as much of my stump as possible (Keith, Marines, White, FAK).
- [I was in Japan for about a month]. Yeah I guess, from what I remember is I woke up, it had been ten days after everything and I was awake for good then I guess. I remember patients that were there. Some hurt pretty bad and some whining pretty bad and whirlpools and changing dressings. It really hurt pulling that gauze off the burns and stuff....[They were] just getting me on my, well not on my feet. I guess I was on my feet before I got out of there because I'd hop back to the treatment room anyway on one leg. I think I was the only one

that did that. [And] the quality of care had to be good because I had no infections (Troy, Army, White, FAK).

- I was shipped to Japan and I was on the emergency ward for three or four days because I remember this Marine Corp [women] because she was writing letters home for me because I couldn't write. They took out a big hunk of shrapnel out of my back. They broke it in half and I was going to keep one for my daddy and unfortunately I lost it. Then I understand that they had to cut my leg 22 inches above my knee (Mark, Marines, Black, AK).
- [I was at Camp Zama in Japan] probably about two and a half weeks....and every day twice a day they sent me to a little stainless steal tank and put me in PhisoHex and water and hot tub and flushed your wounds to try to keep from getting infected...So about two and a half weeks they figure you'd live long enough to get back to the states and they put me on a plane. Twenty-three hour flight back to Andrews Air Force Base. We stopped in Alaska and refueled over Hawaii. We only lost one man on the way back (Frank, Army, White, BK).
- I went to a hospital in Yokohama, Japan and spent about three weeks there—three and a half weeks. Then I think I had three or four surgeries while I was there (Jason, Army, White, BBKA).
- After I left Vietnam they dropped me off on the way, supposed to go to Guam, Okinawa and one other place but they had to put in the Philippines because I was bleeding so bad. So they dropped me off a week at Clark Air Force Base and they had to clean the wounds up because of infection and gangrene setting in. [And that was in] both legs. [And we were] put on a C-130 transport to go to Guam because it's a better hospital facility but my infection and blood, losing blood too much, they dropped me off in the Philippines to be taken care of there because I needed urgent care. I was there for about a week, two weeks, because I had to have 10 units of blood when I first got off the aircraft. [And they treated me there]. They cleaned out [my wound]. Give me a spinal. Cleaned the wounds out and you know cleaned them all up because they were still open and bleeding and real bad and stuff like that. [I was in a lot pain]. Thank God for morphine (David, Marines, White, BAKA)

Not Remembering Care

- [I think they took me to the field hospital] Quin Yon in I Corps...I think I was in and out of consciousness for a while. And I'm thinking that that took place still at Quin Yon. I think that was the only place that I was at in Vietnam [and] they treated the wounds [there]....[And I was at this hospital for] I'm guessing more than seven or eight days....[I did have surgery but] I think probably I wasn't totally aware of exactly everything that was going on....I mean I have memories of being there...[but] I wasn't totally aware maybe of what was going on unless I've just suppressed those memories...But I don't remember an awful lot of the details except that I do believe they told me they were going to do [the surgery] and they did (Nick, Army, White, AK).
- I don't remember the flight at all—but I remember it landing. I remember being lifted out of the chopper and put on a gurney and I remember a nurse looking over me and I said can you give me anything to put me to sleep. She said, if we do that you'll die. So that shut me up

right then and there. The only other thing I remember was being wheeled in and knocking through some doors...and I don't remember anything until the next day when I woke up in the recovery room...[I was] pretty well bandaged up, casted up, and I don't know how long it was but they [put] me on a C141 to Japan. To me it was within a couple of days but whether it was or not I really don't have a clue. [I don't really remember any of the treatment I received there.] Like I say, except for that initial contact with the nurse who basically [told me] to shut up, wheeling through the bid double doors and waking up [I don't remember much]....[but I do think they performed surgery when I was there] just, I think just debriding surgery from what I remember (Jason, Army, White, BBKA).

- And that's probably the first time I knew how bad [it was]....[They put tourniquets on in the field hospital and] that's the first time I remember anybody doing anything. That was the 312 evacuation hospital in Chu Lai. I was actually transferred to Yokohama, Japan on May 8th. I can't remember much because at that time I was pretty much doped up most of the time...The only thing I really remember [them doing at the field hospital was], they had put, of course there was bandages and everything and my arm was pretty well bandaged up. The one that had the shrapnel in it. But it was mainly, I would just say they just tried to make you comfortable...I [did] have surgery on both legs (Ian, Army, White, BBKA).
- [I don't really remember if I received treatment in the field because] as far as I know, after I looked at my arm, to be frank and honest, I think I passed out because when I woke up I was in a hospital ward somewhere. [And] I do not [know where that was. It was just a field hospital somewhere]...[I also don't remember much about being hospitalized in Vietnam because] I was in and out. I was drugged and there was, the clear memory that I have, that I, when I woke up, like I said, the sergeant who was in the tank that I was riding on and he was standing up in the chair and he was exposed. You know, his upper torso was exposed. And I remember seeing him when we got hit. After that the next time I saw him he was in the hospital bed next to me. Now as far as my, what they did to me medically, I have no knowledge of that whatsoever (Adam, Navy, Black, AE).
- I was sitting up in the helicopter on the way back to the Naval Air Station. Morphine has a wonderful way of dealing with reality. It wasn't until probably a couple of days later—they didn't even wake me up for a day or so after they got me into the hospital. And I would say I probably went into shock then and I was there I guess, Naval Air Station, two days from what I'd been told and then they Medevaced me out to the 101st Army Hospital in Yokohama, Japan. [I don't remember most of the treatment that I received in the hospital near Da Nang.] No, all I pretty much remember is waking up. My arm was completely wrapped (Keith, Marines, White, FAK)
- I went to a field hospital in Quang Tri. I was there over a week...before I went to Japan. [I don't] actually [remember] too much of [my treatment there] because of the drugs. They kept me out a lot...When I got to the operating room just before they're knocking me out, I asked them to save what they could and they said they would. And they did do that for me but I eventually lost the leg anyway (Shawn, Army, White, BK).

- [I don't have any memory of my injury]. The first time I woke up it was three days later I guess. [I] was [in] the evacuation hospital in Long Binh. Again, I'm reading the thing here [but I] was [there] four days. But I did wake up in that third day and there was a few of my friends just happened to be there. I don't know if they woke me or what happened but I asked them if anybody else got hurt. Then I asked them, I looked down and I seen I was missing a leg and I said it looks like I'm getting out of here before you guys. And that's about all I remember of that. [But I was at a field hospital in Long Binh for about four days.] I arrived with no blood pressure, no pulse and what they did, they cleaned wounds and finished the amputation of the leg and took some shrapnel out of the eyes and what else, I just, and said I had 51 units of blood during that period I guess. Fifty units in one day there--24 hours (Troy, Army, White, FAK).
- [My medics came and treated me as best they could. Then we waited for the Huey to pick us and from there we went to] some hospital in Vietnam. I have no idea where that was. I would guess back at Phu Bai. I remember talking to the doctors there briefly and to me the next time I woke up I was in Japan but I'm not even sure where the heck I was. [But as far as the treatment in Vietnam, there is] not really [much that I remember]. I can't distinguish Vietnam from Japan. I mean they were, I think I was probably drugged up so much and I just don't remember a lot about it (Liam, Army, White, BK).
- [As far as the treatment I received in Japan] I only remember two things--three things--three things about Japan. One was that I woke up screaming one night and a nurse came over and next thing I know I fell asleep. I remember one of the days I asked if I could go outside and of course my thought was I'm going to jump in a wheelchair and go outside. Their thought was a little bit different. (laughing) But I remember them taking me out in my bed and I got outside and my recollection is that I lasted about five or ten minutes before I broke down crying and whatever and they took me back in. The other incident or the third incident was somebody walking by the bed and they had a clipboard and they threw the clipboard on the foot of the bed and it hit my left leg, my left stump, and I remember being very angry about that but I remember being, it lasting maybe five minutes. And as far as, you know, but as far as the doctors and the nurses I don't remember any of them. I'm sure I saw some. (laughter) But I don't remember them and I don't remember—those are the three things that I distinctly remember about Yokohama and that's it (Owen, Marines, Black, BBKA).
- I don't remember anything. I just remember bright lights and I got cold and on the helicopter ride in it was the old don't go to sleep thing and then when I got to aid, or wherever it was. I think it was an aid station or somewhere in the rear anyway, I got cold and the lights were on me and I could hear the chatter of the doctors and nurses and I knew I was going to be okay because I didn't know what was wrong with me. I knew my left arm was really bad because ...when I stepped on the thing it knocked me back and I looked over at my left hand and it was kind of different. You know, it wasn't laying normal and when I grabbed it and put it on my stomach, I couldn't feel it. So, I kind of, of course you're in a daze and I was burnt all over from the blast and screaming and yelling and so it was, but after the aid station, all I can remember is I woke up in Japan and because I was severely injured I spent about 30 days in Japan (Eddie, Army, White, AEAK).

Having Positive Experiences And Being Satisfied With Overseas Care

- [The medical personnel that I encountered in Da Nang and Japan] were okay. I didn't see anything bad about them. I mean my main doctor from Vietnam was pretty cool. He went with me from Da Nang to Japan and saw that I got settled in the hospital there before he left (Pete, Marines, White, AE).
- [In Japan, the treatment I received was] mainly, again it was, there was not any revisions or anything...But everybody was nice. They sort of, everybody's, they're trying to act like there's nothing seriously wrong with you. You know, they don't want to make you concerned (Ian, Army, White, BBKA).
- [In Japan the medical staff was] a lot of fun. I mean they were just good people. They were lighthearted and got along with everybody. It was an enjoyable stay there (Bob, Army, White, AK).
- [At the 12 Evac...] after coming to, nurse comes over and tells me I can have anything I want to drink and the first thing I had was a Coke. Then a little Jewish doctor that had operated on me came over to me. And he was a trip. He was only like five foot tall and he was apologizing for all the stitches around my nose because he's a leg man, he's not a nose man and then he was telling me my family jewels were alright. Then he took off and that was about it (Gary, Army, White, BAKA).
- [In Japan I remember that] there was one nurse that was actually outstanding. She got us to cope a lot better than what we were doing. She was very fantastic. Now she was from Illinois or Indiana. Very, very, very fine woman. [She] just talked to us and it was just the way she treated us. It was just something, just her personality was phenomenal and she was good at her job. You know, to get us to realize, you know, hey, it's not the end of the world. It's, you know, things like that and started to wean us off of the drugs. [But Japan was] not really a bad facility. As I said, the one nurse made it okay. You know, just get our head together. I would say the care in Japan [was the most helpful at that time in my treatment] (Shawn, Army, White, BK).
- As far as I'm concerned [the medical care I received there] was superior. It kept me alive and gave me the opportunity to build on what they left me. Like I say I can't say enough for the guys in Vietnam for not, or at least for giving the guys in Japan something to work with. You know, for not just out of hand taking my left leg above the knee which would certainly have been justified with all the damage that had happened and then for the guys in Japan that decided that there was enough to save and decided to, rather than doing the amputation above the knee, to saving what was there and going through the skin graft process and stuff like that (Jason, Army, White, BBKA).
- [I didn't have any negative experiences with my overseas care]. I really don't think I did. I saw the doctor of course. He came in, as they always do, before I had the surgery. In the Philippines now. This is not at the field hospital. I saw the doctor the next day you know. He came in and checked on me, wanted to know how I was and all this sort of thing and I said I'm doing good and whatever. I don't remember what he looked like or his name or anything

like that because they were getting me ready to go to a place that they could do more surgery than they were capable of there (Chris, Marines, White, BK).

- [As far as overseas medical care went]—all of it was great. All of it was fantastically well....The only thing that I would have loved to have had was somebody to talk to. Somebody in the psychologist/psychiatric/social worker. Somebody besides a military guy, besides soldiers. And that to me would really have been helpful in the field hospital, in Japan, and at Brooke Army Medical Center (Roberto, Army, Hispanic, BK).
- So that is one of the reasons that I was able to survive because we had such an accomplished team...[I was in the field hospital for three and a half weeks and I would assess the care I received as] excellent, 'cause I'm here. Naturally, they were very, very attuned (Willy, Army, White, AK/BE/HD).

F2. Experiencing US Care

When discussing treatment received in the US, most of the veterans talked about general procedures and surgeries that were performed on them during their time in care. The most common procedures included skin grafts, surgeries (stump revisions) and basic wound care such as cleansings. A few specifically spoke of the use of whirlpools and Betadine solution to help aid their recovery. During their time in care it was also not uncommon for the veterans to be treated for medical problems other than their primary injuries. Many of the veterans spoke of developing infections and other problems that stemmed from their initial injuries and environmental exposures faced in Vietnam, such as gangrene and malaria. The treatment that they received appears to have been standardized care at the time they received it, as there was not much variance when it came to the descriptions of care that the veterans gave (in terms of procedures, etc.)

While the veterans faced similar medical problems upon returning to the US, their experiences with the medical personnel that they encountered ranged from positive to negative and mediocre, or as one veteran referred to it as simply “okay.” Although more veterans expressed appreciation for the medical personnel who attended to them, there were a few who were clearly unhappy with the treatment and bedside manners of their physicians. For example, one veteran described the nurses he encountered as “real nice” but referred to his doctor as “sadistic.” Another stated, “I was not happy with that doctor,” referring to a physician that he described as “hard-nosed.” Others however, described the medical personnel they encountered during their treatment in positive terms ranging from “good” to “marvelous.” These findings are illustrated below.

General Procedures And Treatment

- [I was treated at Fort Gordon in Georgia when I returned from Japan.] As [the] whirlpools went on and they thought that they could sew you up, they would take a skin graft off part of your other leg and sew the skin graft over the stump... They cut off another inch of bone and two inches of the tibia and somebody got down there with a brass file and beveled it off so it didn't cut through the flesh. They took the back of the muscle and pulled it up over the top of the front of the bone in front of it and sewed it together. I was lucky in a way because my ear had been damaged so bad that they had to put a new ear drum in. The normal procedure for that was you would sit on a normal examination table and they would have a bucket along side of you for you to puke in and they would cut your ear off and you would get nauseous and puke in the bucket. They would then go in and take a snippet of muscle tissue covering your muscle and sew it in place of your ear drum. In my case they decided to do that all at once. [But] I was spared the bucket (Frank, Army, White, BK).
- I finally make it to Camp Lejeune to the Naval hospital in Camp Lejeune. They immediately got me into some sort of surgery, intensive care... and they debrided the bone and flesh that had the disease [gangrene] in it... They beat the fever and stopped the spread of infection and all that and I started feeling better. I had a fine orthopedic doctor there... [and] about the time I get to feeling better he takes me down to this operating room. I was too weak to stand but he gets this big round mirror and puts it in front of me and showed me my leg. Well there was bone coming out of the top part of it and bone coming out of my foot at the heel down there. Of course that was the femur, the big bone. I'd say 24 inch section of the femur was gone. That [the tibia] was intact but it was chipped and he said well I wanted you to see this because I want to tell you what I think and tell you what your options are. He said we may be

able to go back and re-fabricate this bone and do this leg and do this and that and then he said, but you'll be in and out of the hospital for years and I don't know whether it will work or not. He said, the other option is to amputate your leg just below the knee and we'll have you walking on prosthesis in four or five months. I took another look at it and I said let's get rid of it (Chris, Marines, White, BK).

- [I arrived at Walter Reed] the 20th of August I think it said in that thing I read today. [And I was there] till Christmas [and] I can remember quite a bit from there. [My treatment there included] the skin grafts on the arm and then on the stump to close [it]...they were in no hurry to close the stump so they put a skin graft on it and then a skin graft on my arm and tried to fix my ear but it didn't work and [they] pulled the rest of my tooth by the root....I don't think [I had any surgeries] (Troy, Army, White, FAK)

Treatment For Medical Problems Other Than Primary Injuries

- [At the end of July I arrived at Fitzsimons and the treatment] couldn't have been better...I remember getting woozy and [my] temperature spiked and all this kind of other stuff. So they took me back to surgery. They didn't put me to sleep. It was really kind of weird. I was sitting on the operating table because I was up on my elbows watching what he was doing and he just took his fingers and spread the wound open and it ran from about four or five inches above the knee to about four or five inches below the knee. It was just a great big open wound. So he just took his fingers and spread the wound and then took his finger and started scooping out what appeared to be tapioca pudding. I guess it was the infection and cleaned it out as much as they could (Jason, Army, White, BBKA).
- I was on a ward with three other guys. We all had bad infections. I was on that ward until I didn't have a bad infection which took about four months. During that time they just performed more debridement operations on my stump. I think I went through four of those. And they basically made me work with my arm and my hand to try to bring that back. I'd lost a lot of feeling in it and there was atrophy from not using it. When I finally got to the point where I had little infection left, they started putting me in a whirlpool with betadine solution to help clean out the wounds and everything. The therapy I had for my arm was the best when I was in the whirlpool because it was hot—well it was heated water with air blowing through and betadine and it seemed like every day I went through that--and that was about three weeks of that—my hand and arm improved dramatically during that period of time. With my leg there wasn't much they could do about it except wait for it to heal and that took a long time (Keith, Marines, White, FAK).
- [I was treated at Valley Forge Military Hospital and I arrived] somewhere around the first of October...I'm not sure...The only thing I do know is I was there a week and then I got jungle fever or Malaria and my temperature shot up to 105 immediately. They put me on an ice chest and I was shivering and shaking and that lasted for about a week....And it was the bad kind of Malaria because I've had bouts with Malaria since then...[and] the major part of my healing was being put in traction and the whole time I'm shivering and shaking while I'm in traction (Gary, Army, White, BAKA).

- Any surgery that they were doing at BAMC, Brooke Army Medical Center, was just tending to the gangrene [in the stump of my leg]. It was this ongoing thing from Japan to Brooke Army Medical Center. And finally Brooke Army Medical Center got it under control (Roberto, Army, Hispanic, BK).

Negative Experiences With Medical Personnel

- When I was in Bethesda it was real nice. [The basic medical treatment I received was just to help my injuries heal.] They closed up my colostomy. Then they put my, sewed my arm back up and that was the extent of it....[But the US care I received was...] I don't know, the treatment was always okay. I'd never had any problems. There was one sadistic doctor I had at Bethesda but there were a lot of nice ones there too. Real nice nurses. Really nice and they had such a sweet sense of humor, God bless them. Because I know when I got my intestines sewed back together and they had me right across from the nurse to watch me. You know, shooting spitballs at her. One went right down her top you know and she was just taking it all in good spirits...So I didn't have any problem with them and the doctors or the nurses except that one sadistic doctor...he stuck his finger in my colostomy before we sewed up and he was moving it all around and I was hurting so bad and I didn't let the mother fucker see it but he probably noticed and he just had a little smile on his face. I just think, why did he have to do all that? I couldn't see any kind of reason for it. He didn't apologize or nothing (Pete, Marines, White, AE).
- [I was at Walter Reed] until the end of July. They did do the stump revisions then and that's also where I had the ear surgery for the perforated eardrum. I had only been like a day or two and the doctor in charge came around, was looking at all the new arrivals and she came around and unwrapped the bandages and that's the first time I could see that that bone was sticking out and I'll never forget this. I mean she was just, I don't know, hard-nosed or something. She had something that I would compare to a lopper and tried to cut that off right then with me watching and I was just like you've got to be kidding me...I was not happy with that doctor [who was going to go after the bone with me watching]. I mean I had just gotten there and [I was] pretty much worn out from the trip and the first thing she looks at me and she gets [this instrument that looks] like a lobber that you chop off branches with...[But the nursing staff] was nice as could be. They were busy but they treated us with respect and were very helpful. [But when I look back and weigh all the pros and cons of the medical care I received at Walter Reed] I would say [it was] average at best (Ian, Army, White, BBKA).
- [At Valley Forge the] medical care was really good. Everybody in the Army hospital has to have some sort of job and I took pictures for the Dr. and he was a surgeon and he put hands back together and I took pictures for a medical book of him putting hands back together again. I had no problems with any of the care. The nurses were wonderful. The only problem we had was one lady and she was a nice lady. She just happened to be a little older and a little grumpier than most and she couldn't give a shot. We all used to hate it when we have to get shots around the clock because she would be the one that end up giving the shots and we'd always have black and blue marks from her shots. (laughing) But other than that we had wonderful care. [But] me and the Dr. got into it once. I almost hit him over the head with a urinal. But that's because his bedside manners really sucked (laughing) and he didn't tell you anything. And my femur vein lays real close to the top of my skin and you had to put

sterilized water onto the gauze to take it off. Well, I told him that and he went ahead just ripped it off and the blood just started flying and I was ready to crown him and the closest thing I could grab was a steel urinal. So I was going to clang him and I got the nurse going, now sergeant, now sergeant. That was probably the only problem I had at all (Gary, Army, White, BAKA).

- So that's the way I felt [about the medical care]. I have nothing bad to say about any of it [except they made me go cold turkey to break my morphine addiction] (Keith, Marines, White, FAK).

Having Positive Experiences With Medical Personnel

- Care was just great at Lejeune. At Philadelphia Naval hospital it was excellent (Chris, Marines, White, BK).
- [I remember BAMC as] very nice and quiet. It was squeaky clean. Then the nurses were marvelous—I remember one old doctor was a major...He was wonderful. He was a very nice gentleman...All of [the treatment I received during my recovery] was great. All of it was fantastically well. Even BAMC with the medical and then the prosthetics place at the Brooke Army Medical Center ...[And] they just kept [the other wounds] clean until they healed up...Everything went really well (Roberto, Army, Hispanic, BK).
- [When I arrived in the United States I was taken to] Philadelphia Naval Hospital. [And] the people that took care of me, I have the greatest respect for them. Especially the physical therapist[s] (Adam, Navy, Black, AE).
- [The medical staff was] very good. We had a team of doctors that would come once a week and have us all together and check us all out and talk to us and say how's things going and how's the socket and how's the leg and how are you doing and all that. The nursing staff was good. I mean they kept us with our pain medication and what have you and any antibiotics that we needed (Bob, Army, White, AK).
- I have no problems at all with no Navy personnel. They treated everybody well. They're just, good nice people. I mean the nurses and the officers were there. We had a nurse commander come over and talk to all us kids. She says, when you leave the hospital you have to realize that when you're in here you ring a bell or push a button, someone comes and waits on you and helps you. When you get out in the life, no one's going to be around to do that because they're going to shy away from you because you're different, your body is different and that's the best advice I ever got because [it] was true....[The most helpful part of the medical care I received was just] the care that the people shows you—the nurses and the corpsmen, and the Air Force personnel nurses...they all were concerned about the wounded personnel. I mean they did their job 100% of the time and I didn't see anybody really being mistreated (David, Marines, White, BAKA).
- [And the medical care I received at Bethesda] was the best. I mean other than the psychological part of it. The medical part of it [was] probably the best. I never felt like I wasn't getting the best treatment that was available....[So the medical care that I received

during the first 12 months] was great except for the fact that they didn't find the eye problem right away. The rest of it was great. The doctors, the nurses, the corpsmen, I can't say enough good things about them. Like I said, maybe it is because I accepted them because they accepted me. So that's the way I felt. I have nothing bad to say about any of it [except they made me go cold turkey to break my morphine addiction] (Keith, Marines, White, FAK).

- [I was at Walter Reed and] I do remember spending the whole summer there before they shipped me to the VA hospital in Brooklyn. So I would think I came back toward the end of the summer then I got shipped to Fort Hamilton. There's a veteran's administration hospital at Fort Hamilton in Brooklyn....[And] I'm not sure if I remember seeing doctors very often but I know that we saw the nurses at least two or three times a day and they were very good and very caring, very interested in your welfare and stuff. [But nothing in particular stands out about the medical care I received] other than that the nurses really seemed to try and talk to you a little bit when they came by to make you feel a little bit better. They were pretty compassionate folks they had working down there then. And they give you pretty good treatment and care there. [And] I would rate [the medical care I received as] excellent. I know Walter Reed [has] had some problems with the veterans from Iraq coming back to Walter Reed and I know that we had more personnel wounded in our war than in this war, but it was like class A. It was a class A place to go and the people was excellent....[After Walter Reed I went to Fort Hamilton in Brooklyn and I had] a minor surgery to direct the stump to make it more appropriate for the type of leg that they were going to give me...[And at the VA] the doctors were great. I did get to talk to the surgeon quite a few times. He was a very experienced and older guy and he also had a younger surgeon there. The nurses were fantastic. They could be tough on you when you wanted your pain medication but the service was excellent and we had quite a few older veterans there too who were not from Vietnam (Nick, Army, White, AK).
- [I do remember the medical staff there and] one nurse anyway was really good. They were all good but the one I can recollect though is a colored lady and she was exceptional. She's just friendly and she cared for you I guess. And [what] I remember the most is when I was leaving and she [was] there to say goodbye and everything and she was just a really nice lady...I'm appreciative [of all the medical care I received in the first 12 months of my recovery]. They got me back on my feet or going again anyway, [they] saved my life. I'd say [the care was] excellent actually....[But there were] disappointments I guess when the skin grafts don't take and you got to go do them again. I guess I should have mentioned that. I think we did skin grafts probably three times before they took (Troy, Army, White, FAK).
- I think it [the care received in the first 12 months of being injured] was the best that was available and I was 19 and naïve and I mean you look at the results, you look at what they had to work with and the results that they got, I think that they did a pretty good job (Eddie, Army, White, AEAK).

F3. Experiences With The VA

Several veterans talked about their experiences with the VA both before they were discharged from the military and afterwards. Their views of the system were mixed and included both positive and negative experiences. A few spoke of their experiences in the VA as somewhat neutral, simply describing what happened while they were being treated and not making any statements regarding whether or not they thought of it as a negative or positive experience.

Some of the veterans' negative experiences revolved around the issue of the VA's rating system for their disabilities. Others were upset with the system in general because of the bureaucratic nature of the VA health care system. The veterans expressed being upset over things such as missing paper work, lost records and having to wait long periods of time for new prosthetics. The most common theme among the veterans' negative experiences of the VA does tend to be the difficulty they initially had getting into the system and the difficulties they continue to have today getting treatment and new prosthetics. Also, some mentioned the lack of technology and seeing the VA as unprepared to treat someone with injuries like theirs. One was disappointed to not have received any life counseling. A few of the veterans, however, did have negative experiences with actual personnel, including VA physicians. These experiences ranged from a physician's unwillingness to treat the patient to physicians' competency to diagnose and effectively treat both physical and mental health concerns.

There were less descriptions of positive experiences than there were negative ones throughout the interviews when it came to the veterans' experiences with the VA. Within the realm of positive experiences, the two themes that seemed to come up the most were being happy with the medical personnel of the VA and liking the changes that the veterans perceived are taking place at the VA with the way they treat veterans from Iraq and Afghanistan today. Lastly, having a friend in the system seemed to help create a positive perception of the VA as the veterans were able to work around the system to get what they really needed because of their connections.

A couple of the veterans seemed pleased with their VA experiences and did not have any negative criticism directed towards the system or anyone within the system. Unlike the several other veterans who seemed to be criticizing the bureaucracy and system in general, these two veterans were unique specifically because they appeared to only be happy with the VA because of their relationships with other veterans who worked at the VA and helped them navigate the system. Lastly, some of the veterans also commented on how they believe the VA system is changing for the better in terms of the care it now provides. These findings are illustrated below.

Negative Experiences

Being Upset With VA Physicians

- If you lost two limbs they sent you to the VA. The VA was just over run with people at that time. They were killing about five hundred and fifty of us a month at that time. Keep in mind the VA system had gone down hill since WWII...[And] I can tell you the VA was a negative experience. I went in and everybody had the same appointments—7:00 in the morning. I didn't know that at the time. If you got out by three o'clock you were happy. I finally got in to see a doctor because I wasn't assigned a doctor. An out-patient clinic. I finally got into see a doctor...I said I need to get some ankle balm which was kinda like a Noxzema that you would put on your leg to keep it from rubbing holes through your skin because I had pressure

points from the breakage. And I said—to be able to be able to wear this leg. And he looked at it, took it off and everything, put it back on. He says—I can't treat you here. He says—you're going to have to go to Fort Knox or Fort—Wright-Patterson Air Force Base. I said—but you have my retirement folders. And he says—I can't treat you here, sorry. And I can remember thinking; I've killed people for less than this...[And looking back at the medical personnel I encountered my first year after being injured everyone] treated me with respect with the exception of the VA...[So I found a prosthetic company in Cincinnati and] I went in and I saw a fellow and this fellow is an old-time prosthesis and he says—were you injured in Vietnam? I said yeah. He says—well why didn't you go to the VA? I said I did. I says—this is what happened. He says just a moment. He went in and he called a guy and he comes back and he says—I want you to go to the VA and I want you to see this man at one o'clock tomorrow. So I went to into see him and this guy was not a doctor. He was head of the prosthetics area. Now, the doctor had to give him dispensation, I'm sure, but he asked the doctor afterwards, I'm sure of that. Fifteen minutes after I saw this man I walked out of his office with an order to get a new leg made. I learned right then that the system is generally not the problem...it's individuals within the system (Frank, Army, White, BK).

- My problem with the VA is more with appliances. Trying to order a wheelchair...I find out that they forgot to order it and that becomes a pain. [But] I used [the VA in Indianapolis] for several years and then when I moved over this way I started using Danville, Illinois. But then I switched back to Indianapolis because I got unhappy with Danville. I went for, I had water in my ear and trying to get the popping and cracking straightened up and this older doctor decided to give me Dimetapp and he kept giving me Dimetapp and I kept going back and seeing him about every three months and he kept on giving it to me for about a year and a half. And I started getting dizzy and I started urinating all the time and I knew something wasn't right so I decided I'd go to my own ear specialist in Lafayette. I went to three different ones there until I finally got an answer and that's because I happened to tell him I was taking Dimetapp and he said that's your problem. What it was doing was taking water off my inner ear and that's why I was dizzy. I happened to talk to my doctor about taking Dimetapp and he told me to stop taking it because it was swelling up my prostate and that's why I was urinating all the time. So, I just stopped going there (Gary, Army, White, BAKA).
- I talked to a shrink there. I told them I felt like a burning inside me sometimes. It was just like if anybody talked to me about Vietnam and wanted to know, I would talk to them about it but it was just like really upsetting to me. He prescribed Valium with two refills and that was it. After that I didn't see them again (Pete, Marines, White, AE).
- I called the VA here in Columbus and asked about getting a replacement arm and they were very open about it. They said well, I guess it's about time you got one and they made an appointment for me to go there and everything and when it came time for it I just froze up and I called them and said I can't go. I don't like the VA. I do not like the VA at all. They so turned me off when I was at Brown Hospital. The way they treated the veterans. Especially, there was a lot of World War II guys there and probably World War I guys too at that time and it was just, doctors, they didn't have any American doctors there. Anybody that spoke good English. It was all just give them a pill. Shut them up. Or give them a shot, whatever,

and that was it. There was nothing there (Pete, Marines, White, AE).

Bureaucracy

- When I retired, quit from SBC it was, the DAV got me my 100% back and I haven't dealt with anything military about my PTSD. I was 100% because of unemployability. I was just the same as 100%. So I was satisfied with it. I didn't want to go through the hassle filling out the forms and going through all this bullshit with those guys (Pete, Marines, White, AE).
- I think the care was excellent at the Brooklyn VA [but] dealing with the VA the last few times has been a little bit more difficult when I've needed stuff done. Back in March I had a, the prosthetic device breaking down. I don't go back as often as I should and I had to go to a clinic, this hospital in East Orange about an hour's drive from where I live. They did some paperwork and then I had to go and get it approved, they had to approve it from the office of prosthetics in Manhattan and there was a foul up with some of the paperwork so I had to play phone tag with like four different people and I think it's just the bureaucracy that's got me involved. I've spoken to the people who actually make my prosthetic device. They're about 20 minutes away and we've finally gotten the paperwork straightened out. Used to have it a little bit easy because the fellow who was in charge of the prosthetic area up in East Orange was a veteran, a Vietnam veteran like me...so he gave me his direct phone number. Whenever I had a problem I would call him. He retired about three years ago and since then, three or four years ago now. Since then it's like you go up there, you get an evaluation, you get the paperwork done then the paperwork doesn't come out right. You know, you end up calling four or five different people. I mean they're all pretty good but I can understand it's a big system but so this time it's been a little bit more difficult to have to make me a new prosthetic device. The one I have is shot. I was kind of lucky. I actually had a person who I could call directly. Now you have to go through what everybody else goes through and it's been a little bit of a challenge this last time (Nick, Army, White, AK).
- The only thing I did was I just joined the Disabled American Veterans very early and probably within the first year. I probably joined it more than anything because they helped me with some of the problems I'd had with getting into the VA to act on things. The biggest problem I had, was I was fitted in November of '69—for my permanent prosthetics and by January I still did not have them. I wound up writing a letter to my US senator about it and the next thing you know I've got my prosthetics...I really don't have a lot of good memories of the VA system other than those two doctors. My experience with the VA system since then it's just I avoid it until I absolutely have to deal with them because you have a bunch of people there that don't care about the veterans. They're just putting in their time. They just move in slow motion. I mean, every five years and that's about how long I go before I need a new prosthetic and every time I apply for new prosthetics it's a hassle to get them. (Ian, Army, White, BBKA).
- [I had a difficult time getting into the VA system]. It was six months before I got anything out of them. My records were lost. The whole thing was a major screw up from start to finish. It was at least six months...I guess if there was something that really should have been done before I got out of the service was to have all that in place before I was discharged because I can't really describe in words the difficulties and how I felt about all that. Here I

was disabled, clearly disabled, and applying for VA benefits and was being told things like your records from Bethesda Naval hospital have been lost or they never got here or we don't know what happened to them. I feel like that's one thing the military could have done better for me before they even discharged me is make sure all that stuff was in place and happening. Because technically I was living at home off my parents and unable to even pay them rent money which didn't help my self esteem very much (Keith, Marines, White, FAK).

- [The VA is] a tough system to get into. I mean they promise you, and it took almost a year before I received my first check. You know, we kept questioning, why it is, and it's just fighting the bureaucracy was unreal. We, I have letters that we wrote. They're called letters to the editor or something like that and there was these guys that help you where you write and have you got a problem and they get in touch, and I wrote to congressman, I wrote, I write...when that happened in '68 and '69 to what are you going through trying, you know, trying to survive is unreal. [So] we got in touch with my local congressman. We went to the newspapers. It took more than that to get it to where, and then it started to kind of settle in (Shawn, Army, White, BK).
- When they [Iraq Veterans] come home I tell these guys from Iraq, the system. They're still fighting the system. They're still fighting to get in. They're still fighting to get recognized. To get their things recognized. They're still fighting for it. I tell them it's going to be a continuous fight. Don't give up (Shawn, Army, White, BK).

Perceiving The VA As Lacking Technology And Being Unprepared For Limb Loss Injuries

- I get a feeling that the VA really just doesn't want me to mess with them. Sometimes I'm bitter. You know, I remember watching a show a few weeks ago how they were working on this rove or this lander for Mars, rover or whatever it was, and they were developing a hand on it that would be just like a human hand and it could pick up little things and stuff like that and how many millions of dollars it cost. I thought gee, wouldn't that have been nice if they would have developed a hand that worked for me (Pete, Marines, White, AE).
- Well, again I didn't have that support and didn't have others on a similar travail, it was difficult. Also being at the VA at that time, 1968, they were ill prepared for someone like me...not at that time and certainly not to the degree of my injuries and the skill level it took in a physical therapist to really maximize my abilities was beyond anything that they'd ever done...Now, that doesn't mean that the other VAs that were absolutely capable as anyone in the country for conducting rehab. That was not the case then. That's just the luck of the draw. Of course I could have at Brooke Army. Had I had a clue I would have stayed at Brooke Army. I didn't know any better (Willy, Army, White, AK/BE/HD).

Being Miserable In VA's Care

- They came in and said, how would you like to go to a VA hospital near your home? I thought, cool. My family was traveling back and forth to see me every couple weeks. I'd be closer to home...So, I went from that nurturing environment to the VA hospital in Fayetteville, Arkansas, that did not even have air conditioning. I was the only Vietnam veteran that I saw the whole time I was there. I was certainly the only amputee. And, I was miserable. So miserable that they let me go to my home [early]...Finally, they decided that it

would be best for me to go to the VA hospital in Little Rock, Arkansas. And I was transferred on Veterans' Day, November 11, 1968. That was a holiday at the hospital, like all federal facilities. And, the most available bed for me at the VA hospital in Fayetteville [Little Rock], Arkansas, was in the geriatric ward. I was in the ward with seven other men. I was the only one—it was a subdued, dark room, shades pulled. I was the only man in that room that was not diapered and fed through the nose. You talk about a reality check. I stayed in that room two days and was finally moved to a four-man room, still in the geriatric ward. It was just an overflow room across from the nurses' station. And, that's where I spent the balance of my time. So by December the 15th or 16th, I was an outpatient. I was living outside the hospital (Willy, Army, White, AK/BE/HD).

No Life Counseling Provided

- [Looking back] the one complaint that I had about the military or naval hospitals was [that] no life counseling [was made available] when I left the military. There was never any counseling or discussions. I always considered myself to be pretty strong and able to work my way through things but I knew that was a challenge for a lot of guys. [It just would have been nice to discuss things like how] to move forward and what the challenges are. [It would have helped to have] some preparation for moving forward. I see the same sort of things now with the guys. Folks come into the military, they do the service, and then the [military] basically [says] well, we're done with you now. Let's bring in a new set and send them out and then discard them too (Greg, Marines, Black, AK).

Positive Experiences

Having Friends In The System

- [I didn't run into any challenges getting myself into the VA system because] it turned out that the guy that was, that had the job before me as Chief of Prosthetics, a guy...who lost his arm above the elbow in World War II. He and I got along really well. So if I needed anything I would go see him and he would just get it for me. [So] I had a friend on the inside. And to be honest with you that's the way I treated my service here at the VA. I wanted guys to have a friend on the inside. So if they needed something they had somebody to go to, to work around the system if they needed to (Jason, Army, White, BBKA).
- Every now and then, whenever I need to I go back to the VA and they will make me another one. Whenever I wear it out, you know, I beat up on it or whatever, they're right there for me. They give me a new one with no questions asked...The VA has always been right there for me. I never had any problems with the Veteran's Administration [because] I had a guy that was my liaison. He was involved with prosthetics and me and [we] stayed in touch with each other for like 20 years until he retired. So the VA, I've never had any trouble with them at all (Adam, Navy, Black, AE).

Being Happy With VA Physicians

- The doctors were great [at the VA]. I did get to talk to the surgeon quite a few times. He was a very experienced and older guy and he also had a younger surgeon there. The nurses were fantastic. They could be tough on you when you wanted your pain medication but the service

was excellent and we had quite a few older veterans there too who were not from Vietnam (Nick, Army, White, AK).

- [I remember the medical staff at the VA...my Doctor] was a man of few words but he was good and he was you know, once I got to know him he was good. He's just a little rough at the edges I guess you'd say maybe but definitely a good surgeon...I was treated good. There's no problems (Troy, Army, White, FAK).

Seeing VA As Changing

- [It's] only been in the last few years [that the VA has helped with my psychological problems.]. You know, before then the VA was terrible. In fact my dad he's a World War II [veteran] so he's eligible [to go to the VA] but I told him stay away. Don't even get involved with them up there at the VA because it was bad. But the last few years now it's really changed and they ask you now and if you even give a hint of, you know, you've got a problem. You want me to schedule this? You want me to do that? You know, they'll come right out and ask you. So it's, a 100 degree turn or 180 degree turn or something here...I think, I always got the feeling that when I was up here that they treated you like you were getting something for nothing so don't expect too much is my way of looking at it. You had people that are indifferent and downright rude. Doctors that's, I had one doctor, I got, it ain't cancerous but some skin whatever they are, skin marks or whatever and he says oh, don't come back until you need me or something like that. So you remember them kind and then you got the other ones that are real helpful. But the real helpful, they weren't there a few years ago. [But I do think they've changed]. It's got an awful lot to do with this Iraq...before Walter Reed became an issue out there with the treatment, I think it was actually changing already then. But I'd say it's been since Iraq though that things are really a lot better up there. It's different because they're helpful, they unless I just happen to be running into some good people now or something, I don't know, but they're, they take an interest. You know, you want to see a dietician? Do you want to do this? I went down to, I had a infection in my stump and I ended up, I was saying that for a month I was off my leg and I went down to PT after that and they say do you want a new leg. Just like that. Years ago you'd have to go up and wrestle for it. [But in the past] I told Dad stay away. I told different people that, stay away. You think you're getting such a great thing up there for treatment. There was a time there it got so bad that I was actually going to look into what would it cost me to buy insurance (Troy, Army, White, FAK).
- I've always believed both at the military hospital level—the medical care that I got when I was first hurt and even within the VA itself—I've always felt that the care that I received was top notch. I've never had any difficulty or problem with the care that I received. At the VA I did and still do periodically have trouble with the administrative aspects of it as far as having to wait two, three, four hours at a time and then canceling appointments at the last minute and taking three and a half months to get an appointment. These things, the administrative aspects of all these bother me a little bit but once you get to see the doctor and particularly when I was first injured, I mean and maybe it's not an exceptional thing but I got hit on June 13th and within four months I was home, walking. So they had to have done something right. So like I said, I've always been satisfied with all the medical treatment that I've ever gotten and anticipate getting good medical treatment in the future. [There are things that could be

improved upon]. Well, certainly at the VA level, and I haven't been involved with the military medical system for 40 years but at the VA level certainly they could use the money to get more doctors, more nurses, more physical therapists, occupational therapists, kineticists, the whole nine yards. One of the difficulties with the OEF veterans that are coming back now is some of these guys have to wait two, three, four, five months to get an appointment to see a doctor. Now to me this is ludicrous. This is almost as bad as it was when, you know, right after Vietnam. But there have been other changes within the VA system as far as their attitude. I think they are a lot more friendly and courteous and understanding of the veteran and his plight now than they were 40 years ago. And the treatment that you get once you get to the doctor, I think is fabulous. And I know guys that complain a lot. Oh, he's a VA doctor. Well that VA doctor probably has a private practice out there in the world somewhere too. So if you're willing to see him at a private hospital why aren't you willing to see him at a VA hospital too? (Owen, Marines, Black, BBKA).

- [I don't think the VA was paying enough attention to the psychological needs of wounded soldiers.] I don't think so and I don't think it was an intentional thing. I just don't think that we, we never been through this before. So I think the Vietnam veterans coming back were a catalyst to having all these programs now. So it's still good. Still good. I think they're doing a wonderful job now. And that's what I tell the veterans, the Vietnam veterans like myself that we went through a lot of stuff but it wasn't wasted. You look at the new guys coming out, they're getting help and we are benefitting from their help too because we're getting help. It might be later but we're getting help. So our pain wasn't lost. It's for a reason (Roberto, Army, Hispanic, BK).

G. LIVING WITH INJURY I

All of the veterans reported the ways in which they have lived with their injury in response to questions asked during interviews. For some, the ways they have lived with their amputations has changed dramatically because of things such as improvement in prosthetic devices that increased or allowed mobility. These veterans became amputees during a time in the United States when the Americans with Disabilities Act had not been passed and now common accessibility features such as sidewalk wheel chair ramps were non-existent, prosthetics were rudimentary and medical procedures were somewhat less advanced. A few of the veterans even reported experiencing discrimination because of their status as amputees and being disabled. Further, continued changes in the veterans' physical health, which includes additional surgeries to the amputation location or further amputation, also affected how they lived with their injuries.

To understand how the veterans lived with their injuries, they were asked to report on how becoming an amputee affected their relationships, educational achievements, careers, mental health and other important facets of life. The tremendous changes associated with the loss of a limb or limbs, often accompanied by other injuries, generated both difficult life experiences and manners of living. In response to these difficulties, the veterans discussed different coping mechanisms that they utilized to adjust to living with limb-loss.

Seven subsections of *Living with Injury I* were identified and include: 1) Responding to the Amputations, 2) Coping Mechanisms, 3) Experiences with Prostheses and Other Assistive Devices, 4) Experiences with Physical Therapy, 5) Experiencing Disability, 6) Experiences with Race and Masculinity, and 7) Experiencing Discrimination. All of these subsections are aspects of the veterans' experiences of living with limb-loss. The report summarizes each of these subsections below and supports the findings with quotations from interviews.

G1. Responding To The Amputation

The interviewers asked the veterans to describe how they initially responded to losing a limb(s), and whether they blamed anyone for their injuries. Responses to these questions provide insight into how the veterans made sense of their limb-loss during the first 12 months of their injuries and to a lesser degree later on in life. Most of the veterans found no blame with anyone or anything, including the enemy. Further, several of these veterans attributed their reasons for not blaming anyone to the belief that injuries are an inevitable part of war. In other words, injuries, including limb-loss, all are normal outcomes of combat. Such veterans who responded in these ways also responded positively to losing a limb in terms of accepting their limb-loss and finding ways to go on with their lives.

In contrast, some blamed themselves for their injuries, questioning, for example, how he could "do something so stupid" as a company commander. At least one experienced survivor's guilt, i.e., the feeling that one should not be alive because others have died. Both of these responses were common among those veterans who were commanding officers. Only one veteran was really angry and hated himself initially because of the nature of his limb-loss – an above the knee amputation. He was angry that he had to be the one who sustained a more traumatic limb-loss. The veterans who blamed themselves and whom experienced survivor's guilt and anger may have had a more difficult time adjusting to limb-loss. In one case, a veteran described wanting to die rather than having to go back home as an amputee. In another case, the officer fell into a deep depression due to the guilt of losing men under his command. Importantly, there was one

veteran who expressed great concern throughout the interview about the circumstances of his injuries because he had no clear memory of what actually happened at the time of his injury and thus lived in fear for years that he might have been responsible and made a mistake that led to his and others' injuries. After reuniting with the men he served several years later, he discovered that he had done nothing that led to the circumstances of his injury and had not made a mistake as he feared. Finally, two of the veterans initially blamed other military personnel for their injuries but later deflected such blame as being expectable in war.

These initial experiences are grouped into five response themes. These include, Feeling Survivor's Guilt; Feeling Angry and Hating Himself; Blaming Oneself; Initially Blaming Commanding Officers and Not Blaming Anyone; and Expectable in Combat. These themes are illustrated below. Importantly, several of the veterans who initially responded in a self-defeating manner, later reversed their responses, and took a more positive response to their injuries. As such some veterans experiences appear in more than one theme.

Feeling Survivor's Guilt

- I felt guilty about living. I was the only one out of my squad that made it. I lost two E-6's above me and two lieutenants above me [during my time in Vietnam] (Frank, Army, White, BK).

Feeling Angry And Hating Himself

- [I was mad] at the world and myself. I was a very unhappy camper. I got kind of aggressive because I said to myself why did I have to lose the, well, I think I could have dealt with the below the knee because most amputees I have met who were casualties of leg amputations, they are below the knees and I wanted to know why I was the one that had to be above the knee and I just hated me. I hated the world. I couldn't run no more. I couldn't ride a bike. I wanted to know how the girls would take me. I'd had a dream that I'd be sitting on State and Madison with a cup begging for, selling pencils, begging for money and a lot of things going through my head (Mark, Marines, Black, AK).

Blaming Self

- I consider it [my injury] my fault because [it was a] dumbass thing [because] I should have moved my machine gun position but I just kept it at the same spot... This was what was kind of cool too because when he, the corpsman told me that I've got to work on this other guy, I thought, you know, I tried to breathe and it was still really hard to do. I thought well I guess I'm going to die. [So I] was there just thinking I guess I'm going to die and I said well what do I do when I die, when you die. You stop breathing. So, it's going to be hard but I tried to stop breathing. I held my breath. It started to hurt really bad and hell with this I'm going to live. I started breathing and I've had that feeling ever since—I'm going to live....[But] I've got a bumper sticker, although I don't have it on my bumper, but it says shit happens. That's how I think about it as one of those things... Combat. Take your chances. At least I lived so I consider myself very lucky (Pete, Marines, White, AE).
- [After the explosion I was] seeing my blood down in the bottom of [a] cone. And with that, I just, you know -- when I saw that I just kind of laid back. I stopped trying to struggle to get up, because I was coming to grips with the reality of what I'd just seen. My first reaction, my

first thought, was I was extremely angry. I was angry because I had -- my first thought was, how could you do something this stupid? How did you let this happen? I mean, you're a company commander! You're in charge of all these guys! If any idiot had to do something like this, why is it you? I was very angry, that anger was self-directed. Somehow I had done something wrong; made a mistake. It seemed like I had all the time to really flesh that out, to really get as angry and as spiteful as I could. And, then, my next thought was I wanted to die. I had been married six weeks from the day I left for Vietnam. So, the idea of going back to a new bride like this was something I was just not prepared to do. It was going to be terribly unfair for all of us. I guess I was thinking more about myself at that time. I did not want to go back like this. It seemed like I had all the time to be resigned to that decision. It felt appropriate. I resigned to it. I was ok with it. I was just gonna die...I did not want to die. But I realized that there was a tremendous possibility that I could die (Willy, Army, White, AK/BE/HD).

- I just found out a couple of years ago what really happened and I know all those years that I didn't know, instead of being angry I was more worried that I did something and screwed up. Because I didn't know. It was an unknown to me that I worried more about that someday I'm going to run into somebody and they're going to say that we tried to keep you out of there or something. See that's never happened. These guys have told me what happened. So I kind of eased my mind on that. I was more worried along that line than anything that I did something stupid. But I guess I didn't (Troy, Army, White, FAK).
- I sort of look at it [the situation of my injury] that maybe I should have been more careful. I remember one of the things and it was our company commander that came and talked to me in the hospital. The point man really was upset about it because he felt like he should have pointed it out and it didn't have anything to do with it but that's, you know, he sort of put that burden on himself. I just look at, you think about it, you know I had only been in country two months. If I had seen that, something like that happen to someone else maybe I would have been a little more careful. It wasn't in my mind at all that I would even be stepping on a mine (Ian, Army, White, BBKA).
- I think when I got wounded I went to a real deep, deep depression. I just went into a deep hole and I was just surviving from day to day. I think the depression might have come in because I was trained as a squad leader and I took it all on my shoulders, "What did I do wrong?" because I lost three guys in this situation (Roberto, Army, Hispanic, BK).

Initially Blaming Commanding Officers And Not Blaming Anyone

- I've always look at it as I have never blamed any person, government, or enemy for my injury because injuries happen in war. You've got to learn to accept that to be able to move on with your life. And this is the way I've always thought. I don't blame anybody. You went into a war, you got hurt, you come back, you adapt and you move on (David, Marines, White, BAKA).
- I didn't blame anybody for my injury. I mean I just, you know, hell, life goes on. I mean things happen in life and this is one of the things that happened to me that I don't, you know, I don't blame it on my upbringing where I feel oh my god my upbringing was so terrible that

I felt it necessary to leave home and join the service and go to Vietnam. None of that. It was just, this is just one of those life's things. This, it happens. There's not much I can do about it at this particular point. I don't even blame the person that put the bomb in the damn office.... He was doing what he thought was right just like I thought what I was doing what I thought was right at that time (Owen, Marines, Black, BBKA).

- Ah, I guess initially I felt there was blame. We were actually supposed to come out of the field that day to go back and resupply and our commanding officer, our company commander, decided to keep us in the field. So initially my thought was that he was to blame. But in retrospect, this is part of what combat is. So no, I don't really, I don't blame anybody including whoever set the bomb up there (Keith, Marines, White, FAK).
- Well at the time I was rather angry at my commanding officer. We had a bit of an argument of where he wanted me to go and where he wanted me to go was a place that really looked like bad juju and I says, no sir, I says I'm not going through there, I'll come around it and we bantered back and forth a little bit and he finally gave me a direct order to go through. I went through and I got about 15 meters from him when I hit the mine. [And] for a long time [I remained angry at him]. And I don't know eight or ten years ago I got to thinking about it and you know, hey, he was just doing his job too. He was doing what he thought was right and so I, you know, just it's okay with it...I had no problem accepting what had happened. I was okay with that. I was just glad to be alive and I just said hey, life is here—live it. And I tried to live it as best I could (Bob, Army, White, AK).
- I don't think about it a lot but I can still picture in my mind when I actually got shot, when I actually got hit, and it was very much, we hadn't, we'd seen some combat prior to this but this was a very, rather large firefight and I don't think it was decisions that led us to get trapped or in an ambush. So I don't really feel, I think it was just the first time you get in such a hot fight it's like mass confusion. Gun fire all the time. You're not quite sure. Like I said we were in the gun crew so we were not at the very front. Had no idea how far the actual front and the real firing was going on—how far away that was. You could hear it. But I don't believe it was anybody's decision that got us into this...I don't think there were any decisions that led us to something that was a mistake of any kind...[but] I think I still had my doubts and why me and you know how could this happen and stuff like that (Nick, Army, White, AK).
- I say to myself would you rather be dead in Vietnam or would you rather be alive here back in the States, you know, with the loss of an arm, with an injury on your leg. I think that I put it in that perspective so that's the way I can handle it. That's the way it helps me to get through the next day. I don't, you know, I don't say to myself, you know, somebody did you wrong, somebody steered you wrong or whatever like that. I look at myself as being lucky to be alive and I think that's what, you know, what's helped me to get through the rest of my life after Vietnam (Adam, Navy, Black, AE).
- [No, I didn't blame anyone] To be honest with you, I think it was a godsend. It just, I don't know, I just thought it was a godsend. It got me out of the war, it got me, and it got me to

where, actually yeah, I thought, I don't know, I just feel it was a godsend (Shawn, Army, White, BK).

- I didn't feel bitter about the fact that I was injured. It was kind of like well I could have been home and got in a car wreck. So I guess I just felt about it, it was shit happens and that's what happened and I was still alive and I'm going to get on with the rest of my life (Liam, Army, White, BK).
- [Looking back upon the circumstances of my injury, I feel as though] it's just one of those random things. I mean somebody planted a booby trap and I just happened to be the one that encountered it. I never blamed anybody. I didn't blame myself for not seeing it. I mean it just happened. It's kind of like if you're driving down the freeway and somebody goes to sleep and veers across the median and slams into you head on (Eddie, Army, White, AEAK).

Expectable In Combat

- You went into a war, you got hurt, you come back, you adapt and you move on. You don't let it bother you. It's part of what happens in war. You've got to be positive because something good will come out of it. You can't be bitter...It's just part of what happens in war. I was a casualty of a war. I came back and I adjusted quite well the way I looked at it because I went on to function...[because] if you don't move on and accept what happened you're going to feel sorry for yourself and end up being a drug addict or an alcoholic or anything like that. You got to learn that you can't change what happened so you got to accept it and move on with it (David, Marines, White, BAKA).
- [I see the situation that led to my injury as an] expectable outcome of combat. It was our job. I remember consciously taking that attitude from the time that I actually chose to go to Vietnam...We'd learn in school in combat the best attitude to take is you're a dead man before you go in. If you make it out you're just lucky but there's no sense planning beyond the next 15, 20 minutes or a day or something like that (Jason, Army, White, BBKA).
- I myself volunteered for the military and then that to me that's part of the hazards of duty. And to me everything was planned accordingly and everything was done right. It was just, I guess wrong place, wrong time. Basically it's combat. It's just nothing is assured (Roberto, Army, Hispanic, BK).
- [But when I look back on the circumstances of my injury I just think that] the possibility of getting injured in Vietnam was a reality. And, you are in an infantry unit and you spend your time in the boondocks and you have seen it in your men in your company and in your sister units and you lift people up in body bags; believe me you understand the reality, that shit like that happens...[And] you know Satchel Paige, the black baseball player, had a great expression—don't never look back son, might be gaining on ya. I never wanted to look back. I never wanted to play. It's so negative, and it's so draining to play those games. So, I just refused to do that (Willy, Army, White, AK/BE/HD).

- I've got a bumper sticker, although I don't have it on my bumper, but it says shit happens. That's how I think about it as one of those things...Combat. Take your chances. At least I lived so I consider myself very lucky (Pete, Marines, White, AE).
- You know, this is what happens in war. This is what people, they ought to realize, I think that they don't realize the effect it has emotionally on people afterwards and for many years. For me the war is not over. Every day I have a reminder. Leaning up against the wall when I go to put my leg on that this is the result of combat and when you're 18 like I was when it happened, there's a more fatal feeling about it. I pretty much thought my life was over and considered suicide many times afterwards because I didn't think that I would want to live that way. Since then of course, I was one of the lucky ones I guess. I managed to find reasons to live and fortunately had a lot of help from friends when I initially came home that helped me to change my mind about whether I was going to be able to live with this or not. But yeah I guess in any situation you can blame being in the wrong place at the wrong time or the company commander who decided we were going to stay in the field and all that. But the bottom line is that this is what combat's all about (Keith, Marines, White, FAK).
- [Looking back on it I don't see my injury as the result of a mistake]. [Injuries happen in combat]. You have an enemy who's trying to injure you and you're trying to do the same to them. Although when you're in combat you assume that you're going to be okay [and that a serious injury won't be afflicted upon you] but occasionally [one is]. [It is just] one of the risks that you take and [happens to be] the situation that [I found myself in]. I don't assign any blame to anyone [for my injury]. [But it was a] challenge to move forward (Greg, Marines, Black, AK).

G2. Coping Mechanisms

All of the veterans were asked to describe how they handled their injuries during the first 12 months following their injuries and beyond. That is, we aimed to understand how they coped with losing a limb(s). In addition to responding to this question, most of the veterans also talked about how they coped with their injuries at other points during the interviews. Nearly all the veterans mentioned the importance of social support from family, especially parents and wives both early on and over the life-course. Others mentioned the importance of peer support from fellow veterans with Limb-Loss. These findings are described later in the report in the section on 'Responding to Illness III – The Role of Social Relationships'. Here we provide illustrations of other ways the veterans coped with their injuries.

First, a few veterans mentioned avoiding interacting with others and isolating themselves, which was often accompanied by alcohol or drug use. Several continued to interact with others but also used drugs and alcohol to deal with their injuries and mental health issues. Second, several veterans mentioned putting their injuries in perspective of the fact that it could have turned out much worse for them. They were able to take this more positive attitude by comparing themselves to other Vietnam veterans who had sustained worse injuries. Finally several were determined to not let their injuries limit them and strived to remain independent. Others held a very positive attitudes towards their injuries. Less common ways of coping with their injuries were using sports – one veteran joined a wheelchair basketball team, using humor, and the Catholic discipline (explaining how it was the Catholic idea that you are supposed to go on and not dwell on things that helped him). These themes are illustrated below.

Avoiding Interaction With Others, Alcohol And Drug Use

- [But after my injury] I stayed out of public a lot, just in the small town where I live. I had problems going into restaurants or anywhere. You know, you're a 20 year old with a, 21, with a bad limp, you know, a real bad limp and you're noticeable and I guess I'm a little bit on the shy side anyway which didn't help any.... [I also drank and] I don't know if I can [attribute my drinking to PTSD] or not. Ah, there's a frustration there sure. I don't know that. Like I say there's a frustration and you just get started on it I guess and then you drinking more. Whether I would have the same problem without Vietnam? Probably. Maybe. I don't know (Troy, Army, White, FAK).
- At one time I did [have a drinking problem]. I drank from dusk till dawn and I was a heavy drinker and again I felt that it was killing me and I decided to get it under control. When my daughters were about to go to college I figured out hey, I was going to need money to send them to the best schools. So where can I get that? Stop spending it on booze. So I quit for I think about ten years until they got through high school and through college and when they both graduated I took them to Ireland and we had a pint of Guinness...[And] I think [the drinking] might have been [related to PTSD]. At the time, I mean I was hanging out with some veterans and we were all just back from Vietnam and we gathered together and talked about our experiences and sort of worked it out....[But] I was drinking before I went to Vietnam. But not like I did after I came back (Bob, Army, White, AK).
- I was never really mentally settled....so I delayed that reaction to what would be commonly referred to as PTSD. I dealt with it. I drank. I took drugs. Whatever was there to make me

forget about it, that's what I did. Never really dealt with it in the open until my first marriage went down the drain and then the reality of it was that I had a bigger problem I needed to deal with and that's where the PTSD thing really kind of came out for me...[But I was] smoking pot [and] drinking. If I smoked a joint or got drunk I was happy (Keith, Marines, White, FAK).

- I got into acid. The first pills they gave me were something, it was called a synthetic mescaline. It's called Screaming Yellow Zonkers just like I guess the candy, the candy corn or whatever. You can get it at stores. It was about the size of a sweet tart and it was knock you on your butt mescaline. Took that and that opened my eyes somehow. I maintained a connection with the guys that sold the pills, probably for about two years maybe. I took over a hundred trips. Usually I got into LSD. As we called it, window panes was the main thing. I never had a bad trip. Not once. It was just like, it was medicating...[And] I think it had everything to do with [the fact that I was wounded and what I had experienced in Vietnam], especially the acid. I mean it really helped me put off my PTSD (Pete, Marines, White, AE).
- The main thing I was doing when I got out of the hospital, well I started drinking so I was burying all my sorrows and concerns and everything in the bottle. I think gradually over time I think that my injuries gave me the realization that everything isn't perfect in this world. That even though you run into difficulties or run into problems or however severe or catastrophic they may be, that as long as you are alive you can continue to function and you can continue to produce and you can continue to accomplish things for the betterment of yourself, for the betterment of your family, you know, your children, your wife, the whole nine yards. I don't think it was ever a, I woke up one day and said ooh, this is the type of person I want to be and this is the type of person I'm going to work towards. It was a more gradual over a 10 or 12 year period that I finally started to, as my wife and mom used to say, get your shit together. And it took me awhile. It took me quite awhile and of course at the time I was not blaming my injury. I was just, ooh, I'd go out and party and I'd go out and drink because I enjoy drinking and I enjoy partying. In hindsight, you know, 30 years later, I said well you know what, a real good possibility that if you didn't have these injuries and you didn't have these problems that you wouldn't have drank as much as you did and you wouldn't have been as anti-social as you were as far as being arrogant and belligerent and cocky and you know things of this category (Owen, Marines, Black, BBKA).
- I wanted to play sports again and I knew that that wasn't going to happen, especially football, because I had a scholarship. I was a halfback and I know that wasn't going to happen. I tried to play softball with my prosthesis and I did pretty good as a bat catcher but naturally when I hit the ball I couldn't run so I was out real quick and [so then] they had somebody to run for me [and] I lost interest in that. I started being a loner. I would stay home and drink and I wouldn't go out nowhere. So my interest was zero when I came back home to the States.... [I drank after being injured]. That's what happened to my first marriage because I almost, and with the nightmares and the drinking problem almost killed my first wife and she had to let me go in a heartbeat she told me...[Eventually I was drinking and using cocaine] (Mark, Marines, Black, AK).

- But after Vietnam] I drank. I wouldn't do it in a bar. I do it in the home. I drank by myself. Killed time and the memories [of being in combat]...[Eventually] I ended up moving to West Virginia. Up there. 160 acre farm out in West Virginia. I lived out there in the woods for eight years trying to hide (Shawn, Army, White, BK).
- I guess I would say it was just a determination that I wasn't going to get the loss of the leg bother me and so it was when I got it I just learned to use it...[But] after I got back and couldn't find a job, yeah, I did a lot of drinking. I was pretty much a 3 o'clock in the afternoon 'till 2 o'clock in the morning at the bar...[But] I got started drinking heavy in high school so I guess I just never grew up and learned to quit and then I guess part of it was out of boredom. I didn't have a job. Nothing else to do and so that was a way to go interact with people and do something every day. I mean I had, most people looked forward I guess, well I don't know if you'd say look forward but maybe had to get up every day and go to work. I had to get up every day to be at the bar at 3 o'clock. So I guess I kind of treated it like my time away from home that the normal person was away from home at a job and I was away from home at the bar (Liam, Army, White, BK).

Comparing Self To Others – Putting Injuries In Perspective Of Worse Outcomes

- [At Walter Reed I became friends with] another wounded vet. He was a double amputee but his difference was he had one above and one below the knee. We just tried to live a life as normal as we could. Like I said I saw a lot of sights there that I thought, it just made me feel like I'm in pretty good shape [because others were] paralyzed or missing both legs and an arm and [had] facial injuries. You know when you've got both your arms it, I always felt like I was not going to just sit around in a wheelchair and I think being in that situation looking at other people just made me look at like I'm in pretty good shape....[and] even when I was in Vietnam I just felt like that I'm alive and I'm going to make the best of it. I'm just not going to feel sorry for myself (Ian, Army, White, BBKA).
- [And in the hospital] you looked around and what I saw there, my injury was minor to some of the others that was there. Even though I was hurting there were guys there—one guy in particular was just a body. There was no legs, no arms, you know, all hooked up. There was a few of them actually that were worse than me...[So] it could have been a lot worse, that's for sure...We all started, oh, we're not so bad because there's guys worse than us, you know. And it was just the way she approached us and we approached the whole situation. We started changing....Everyone was different. Everyone had a different wound. Everyone had, you know, you said well mine's not so bad. Guys were worse off. You learned to accept your damage and go on (Shawn, Army, White, BK).
- [I met a soldier] and he had lost both of his legs and had been blinded...So I don't know how you look at someone under those circumstances and complain about your circumstances. I just didn't know how to say that I've got a right to complain (Adam, Navy, Black, AE).
- I'm just real fortunate and real lucky to be alive and I try to appreciate everything because I'm seeing guys my age right now dying left and right. Vietnam vets are being hit really hard right now with heart attacks and diabetes. I may have lost my legs but I'm in a hell of a lot better shape than 90% of them (Gary, Army, White, BAKA).

- One of the most motivating things that kept me going was. . . I might have mentioned the story that I mentioned about this soldier that I met and he was in the hospital in Philly and he had lost both of his legs and he had been blinded and this was the guy who wrote this letter, typed this letter on this typewriter and it was a business form letter and dear sir and all this stuff. I remember reading this letter and I could find no mistakes on this letter at all and it was typed by a blind man. So, I don't know how you look at someone under those circumstances and you look around and complain about your circumstances. You know, and you say that, I just didn't know how to say that I've got a right to complain. It was things like that that kept me going (Adam, Navy, Black, AE).
- [Some of the other soldiers on my ward in the hospital,] well, they were, that's what makes you gets you going I guess because there were so many a lot worse off than I was. Once you see that you don't feel sorry for yourself anymore. We had guys with no legs and, well the worst one I guess no legs and two broken arms and then he's blind too. Then his mind I think went too and he'd end up screaming at night. So compared to some of them I was in pretty good shape...[So] I never did get down or I never had a problem with what am I going to do or why me or anything like that. I suppose I had those episodes but I didn't dwell on it. I wanted to, just wanted to get out and get going (Troy, Army, White, FAK).

Positive Attitude

- I should tell you, one of the things that really helped me through this whole process, especially initially, was that probably a year before I went to Vietnam I had read a book about Douglas Bader--B a d e r. He was a World War II pilot with the Royal Air Force who had lost his legs, both of them above the knee, in a flying accident in the thirties but had still gone on to be an ace in the RAF during World War II. So not only did it help me realize that there's life beyond losing your legs, although I remember the day before I got hurt thinking that with all the other kids that were getting injured I said I'd just soon be dead as messed up. as soon as I got hurt my attitude changed 180 degrees. But like I say, reading that book really, I think, gave me a good attitude. Letting me know there was something beyond losing your legs....[I think I came out of this so well because] like I say, partly I blame it on that book just because I knew that there was something on the other side of losing your legs and then the other part of it was my family--like my Mom and Dad and my brothers. I have three brothers and got fantastic support from them and so on. Then like I say the people at Fitzsimons. It was really fantastic...and maybe I mentioned this a couple of times or actually just once when I think about it and it's what I tell everybody else is that having a disability like this is, the physical part of it is really pretty easy. It's having the right attitude to do the things you want to do that really make the difference. That's why, you know I told you it's 95% attitude and the rest is just physical type stuff. To me that's the biggest thing. I think I've always had a real good attitude about it and it's not something I've really gotten down on or down about. But I think, you know, the things that I leave with guys or maybe that I want to leave with you that I feel that having the right attitude or having a good attitude or a positive attitude about the situation that you're in will get you out of or help you a hell a lot more than other people helping you. That's why this Americans with Disability Act I think was a good idea but it's other people trying to help you when you really need to be doing the work yourself. Sure you need some help along the way in certain areas and I certainly have

gotten that and appreciated all the help that I've got but I've still mostly done it, I feel like I've done it on my own although like I say, I get a lot of help from [my wife]. I get a lot of help from the kids. I get a lot of help from my mom and dad but I don't think I would get as much help from them if I didn't have the attitude that I've got (Jason, Army, White, BBKA).

- Just [having] will power and knowing that you have to move on and accept what happened [helped me from falling into self pity]. If you don't you're going to feel sorry for yourself and end up being a drug addict or an alcoholic. You got to learn that you can't change what happened so you got to accept it and move on with it...[and my injuries] made me think of myself different. It makes yourself grow as a human being and makes you more positive that you have to prove yourself and I had no problem doing that and that comes back to what you learn in the Marine Corps about what you can do with your life...[What I learned from the Corp helped me deal with my injuries because it made me realize that you could overcome it. You can adapt. You improvise to make your body work and that's how you do that. If there's a way that you need to do something you'll find a way to do it...[And] I realized [that my life opportunities had] been altered dramatically but change, I think you know, you make it for the better so you try to improve yourself so it's on a positive level. I came out, got a job, then I got a better job, then I got a better job than that. So I kept improving myself because I wanted to do better with my disability....I knew I had the future I wanted to make for myself. It was there. I mean you've got every opportunity in the world to succeed or fail and it depends on how you looked at it. I looked at it on a positive light that everything I'd done is a learning experience and if you take what you learn and make it better every time you'll succeed...[And] just being accepted [was a challenge] I guess if you want to put it that way. [I feel I had to work at that] because a lot of people look at disabled people differently so you have to prove them wrong. You got to prove them that you can do it just as well as anybody else. [And I did that by] just being who I am. Just being a positive attitude (David, Marines, White, BAKA).
- I chose not to consider those things that were going to be shut out of my life. I considered all the things that I was going to get to attempt and had a potential for accomplishing and mastering. I didn't think about what I couldn't do. Not that it wasn't a real part of my everyday life but I'm a glass-half-full not a glass-half-empty kind of guy, and so I didn't -- once I left, had to get out of the army, hell, anything else I had to give up--dancing or all those sorts of things that was small potatoes compared to the big one I felt I had already dealt with. So I just thought how much of this you can do...[I became involved in veteran's organizations and] the big part of it was just the recognition of what I was doing. I was getting on with life. I had sustained substantial injuries. I had gone through the rehabilitation process. I was not bitter about what had happened to me. I was not disrespectful of our government or the VA. I was capable and earning my way over and beyond compensation. I was willing to share what I had learned. When I tell my story, I tell the boo boos and the failures and the difficult times. I've let people have a realistic idea of what it's like. [My wife] and I give a seminar to couples who are young in the rehab process. You know, any period of time—four, five years or less. Because we lived through some great trials and we've learned and we've got a great story to tell (Willy, Army, White, AK/BE/HD).

- I guess in some ways I might have looked at my amputation a lot different than some people. I looked at it as an adventure. I mean I came to the conclusion that I was going to be this way for the rest of my life and I had to face it. So, it just kind of became an adventure and I probably did a lot of things that a lot of other amputees probably wouldn't have done.... When I came back home and I finally started getting money and stuff straightened around. I had a car that was really hot and I went on the racing circuit for four years and I drag raced four years without legs. Freaked out a lot of the people but it was fun....[and I learned from my upbringing how to make a negative a positive.] I mean we were dirt poor when I grew up. We were sharecroppers. We had an 80 acre farm that wasn't ours. We farmed it and the money Dad made from the crops, part of it went for the year's rent and the other part came to us. I don't know, I just learned a work ethic and just being hard. I mean it wasn't, I never had a TV until I was 11 years old and I didn't know what a TV was. Or an indoor bathroom. And then I look back at the things that I'd done in Vietnam and can't believe I did them. I guess part of that just made me stronger too...[And] people ask me while I smile all the time and I tell them it's just I'm on this side of the grass and I wasn't supposed to be. A centimeter more and I would have lost my eye. If that chopper hadn't been overhead when I got blasted away, I'd be dead. I mean there are just so many things that it was just literally a miracle....I'm just real fortunate and real lucky to be alive (Gary, Army, White, BAKA).
- I say to myself would you rather be dead in Vietnam or would you rather be alive here back in the States, you know, with the loss of an arm, with an injury on your leg. I think that I put it in that perspective so that that's the way I can handle it. That's the way it helps me to get through the next day. I don't say to myself, somebody did you wrong, somebody steered you wrong or whatever like that. I look at myself as being lucky to be alive and I think that's what's helped me to get through the rest of my life after Vietnam...I've ran into people who I felt they was worst off that in was. I was in the VA hospital one day and I'm talking to my doctor and she's asking me, how are you doing, blah, blah, blah, and I'm trying to tell her I'm fine, I'm fine. And she was trying to tell me I had high blood pressure. So, I'm trying to tell her I don't know what you're talking about because us black people, we have high blood pressure...So, at the end of the day I'm telling my doctor, I says doc—she's a lady too—I says doc, you see that guy over there on that wheelchair. It looks like he's about to fall off the chair. I says to me, that guy has got a problem. Me, personally, you know, it's like I'm good to go. I'm trying to put a positive spin on my life and I'm trying to deal with the positive side of life and not trying to deal with the negative side...the only thing that I remember about my circumstances was I had this thought in my mind way back from the beginning and it stayed with me all of my life since then and that thought was this, as I've mentioned before, the thought always came to me, it said to me, would you rather be dead in Vietnam or would you rather be alive dealing with these so-called problems that you have here now. And that was, that thought always made my mind flip and it always made me turn the page and I go on. I can't spell it out any simpler than that (Adam, Navy, Black, AE).
- I think I handled [being injured] quite well. Now we always used to talk back and forth and say hey, if you're looking for sympathy you'll find it in the dictionary right between shit and syphilis...You know, a lot of people ask me how do you adjust to it. I always think, you know, how did I adjust? Other than, I think I was a strong person before it happened and I was so glad to survived Vietnam that I just went on with my life and worked at it. Difficulty?

I mean every day is difficult just getting up and getting the leg on and getting around. I've had to adapt to many different situations. I'm disappointed I can't run or jump. I'm disappointed that I can't go out and hunt like I used to--trudging through the woods and stalking deer. I have to sit and wait for them to come to me now. Those are probably some of the things that are difficult for me to really—like I don't like it but I'll live with it (Bob, Army, White, AK).

Striving To Remain Independent

- The best advice I got was from a lady commander, in the Navy that told me, says, you got to learn to take care of yourself. Because in here we do it, when you get out in the world people don't care about you. So learn to take care of yourself and I took her words to heart. I know there's guys that did not because they still feel sorry for themselves and they still want people to wait on them and give them things and you can't do that. I mean psychologically and physically you deteriorate if you got to depend on somebody else (David, Marines, White, BAKA)
- My first lower arm prosthesis was a god-send. Also, that was the first time that I got a wheelchair that was capable of carrying me around. So, that was a big deal. I mean, any time before when I wanted to go somewhere somebody had to push me. And I am now and always been fiercely independent, and having to have somebody to push me around—I had no place to go. I mean where am I going to go? But, you want to roam around or do a lap around or whatever, I couldn't do that. So, I got a prosthesis and trained for that, and it was so essential for me because it was a great assist getting out of the bed to bear weight on that lower extremity by putting my prosthesis and my hand on the floor to raise myself up in and out of bed. It was a great assist and an essential part of my ability to move around. The wheel chair, it was just fun, because I could take a lap around the ward if I wanted to. Those were huge self esteem-building assets (Willy, Army, White, AK/BE/HD).
- Family and friends, they sort of tried to protect me, coddle me, and everything and I didn't go for that. I know I would get into some arguments about let me do it myself. You know, they were always trying to help me do this, do that and I'd, no, I can do it myself. They finally understood. He'll do it himself. I mean I adapted to doing different things. Walking, getting up and down stairs and everything. You know, I had to adapt. When they tried to help me I'd say no, I'll figure it out myself and I've been real independent ever since...[My injury] made me much stronger as far as my will power to do things (Bob, Army, White, AK).

Catholic Discipline

- I'm thinking it was my background [that allowed me to cope with my injury so well]. I'm a Catholic. I don't practice anymore but I went to parochial school, a Catholic high school, and I think the fact that it was driven into you, this is what you're supposed to do. You don't do a whole lot of questioning and I knew that at some point in time I had to get a job, get a career, and do the right things. I didn't really question that I was going to fail at that. I knew that that's what I had to do and I think the support of my brother and my family really helped an awful lot as far as knowing that I'm not going to question what I do. I'm just going to do this. I mean we all have our doubts and this could have been different and that could have been different but when got drafted I wasn't pro-war. I was probably more anti-war. But I went

because I knew that that's what we were supposed to do. You did what you were supposed to do. Years later you can say that, you didn't always have to do what you're supposed to do. You can question stuff. But I think that the background that I had growing up between the parochial Catholic school, I mean parochial school and the Catholic high school just do the right thing and I think that's what got me through most of the stuff. I would [not] say [faith actually had a] whole lot [to do with it]. I think it was more the training and the reinforcement and the things that you do by rote. You just do this on Sundays, you do this on Fridays, and whatever. The faith, not so much a big part I don't think. Definitely not a big part anymore (Nick, Army, White, AK).

Sports

- [I joined chair basketball.] We started Lafayette Spinners in 1974, him and I together, basketball team in Lafayette. There was just five of us at the very beginning and then it just grew. Since then, I mean basketball has always been kind of my outlet. Because shortly thereafter, about '76 is about when I quit drag racing and that's when I really started getting into it and that's always been my outlet for frustrations and everything else. I played with the Indianapolis Pacers in Indianapolis. I played with actually the first basketball team in the United States, the Black Knights, over in Champaign, Illinois and I played with them for awhile. I played with a couple of other teams too. It's good times. It's National Wheelchair Basketball Association. I've probably played basketball in about every state in the nation. The only place I haven't played is California. As far as west, is Las Vegas, played at Las Vegas quite a bit. Orlando, Florida. And the crazy thing is I've played against guys that I was in the hospital with (Gary, Army, White, BAKA).

Humor And Peer Support

- We went to King of Prussia Mall and there was three of us and we're all getting shoes for pylons but people just stared. They'd never seen handicapped people before and it was a trip [and] we're real protective of each other so we just laughed it off in jokes and freaked out the straights. That's basically what we did. I mean you got two guys that got the same size foot off and they got opposite legs off and they're buying a pair of shoes for each other. And then you got me and this poor shoe salesman, you got two guys that are arguing over what kind of shoe to buy and he didn't know how to take it and we were being kind of vulgar and then I told him I wanted a pair of shoes and he had other customers that he wanted to wait on and this is where he was heading and he looked at me and went in disgust what size and I told him I'd make the feet to fit. And then anyway, I told him what size and I got the shoes and he was waiting on this older couple and as I went out the door I thought of something and I turned around and I says if these shoes hurt my feet I'm bringing them back. So that was the one nice thing about, there was 104 of us, all amputees, all under the age of 25 pretty much. I mean there was a few a little older but they were officers and they didn't hang with us very much and so we got rowdy and we were pretty much protective of each other and we made each other stronger because of it I think. That just happens to be one of those things I don't see happening with this war (Gary, Army, White, BAKA).

G3. Experiences With Prostheses And Other Assistive Devices

All of the veterans discussed their experiences using assistive devices which ranged from canes, crutches, and wheelchairs, to the more commonly used prosthetic devices – artificial extensions that replace missing body parts. Their discussions included describing their initial experiences of getting a prosthesis and learning how to use one to explaining that they continually had to replace their prosthesis over their life course, sometimes up to “6 or 7 times” due to wear and tear or in order to take advantage of newer technologies. Although a few veterans easily adjusted to using their prosthesis with few complaints, most described the experience of using prostheses as very painful or uncomfortable. This was especially early on in the veterans’ life living with limb-loss. Some explicitly stated that the prosthetic “hurts” them while others described it as being “cumbersome” and “uncomfortable.” Importantly only one mentioned continuing to feel pain from their prosthesis use today.

Some of the veterans also talked about developing blisters and other stump issues and seemed to consider the process of learning to walk again as painful. For some, the experience was so unpleasant that they rejected use of prostheses altogether and, even today, do not take advantage of the newer technologies. Most of these were those who have upper extremity amputations. Only one veteran who had only lower extremity amputations rejected using prosthesis. Only one veteran also described never learning how to use his prosthesis.

However, as time passed, and prosthetic technologies improved, some of the veterans made comparisons between their early prosthetic devices and the ones they used today. They used words such as “primitive” and “crude” to describe the devices they used after their injuries and referred to the changes in technology as “fantastic” and “marvelous”. While one called himself “old school” meaning, he doesn’t use current prosthetics, he nonetheless acknowledged that it appears that the new technology is beneficial to soldiers today. Also, a couple of the veterans mentioned that the new prosthetics are better for physical reasons, not just in that they might be easier to use, but because they do not cause tissue break down or sores, which they apparently experienced while using older prosthetic devices.

Finally, the veterans discussed the meaning of their prosthetic devices for their everyday lives. Several of the veterans with lower limb loss talked about using a prosthesis because it helped them to conceal their identities as amputees. One specifically spoke of wanting to “fit in” and appear as “as normal person” (which in his mind was not possible if others knew he were an amputee). Several of these veterans worked very hard to learn how to walk again in an effort to conceal their limb-loss status. None of these veterans discussed why having others know their amputee status was undesirable.

In addition to using prostheses to conceal their limb-loss, some veterans also discussed how the devices helped them to try to reassure others that they had not changed and were capable of performing at the same level as prior to their limb-loss. Several others discussed the importance of prostheses in helping them to be more independent. Using such devices could help build self-esteem by reducing reliance on others. Finally, one veteran was so successful with adjusting to his prosthesis and being able to walk that he often engaged in military rehabilitation workshops to help demonstrate to other amputee veterans what they could physically do with their new prosthetics. These themes are illustrated below.

General Early Experiences Using Prosthesis

- I think I probably wore my leg maybe a week before they were ready to cut me loose and send me home [from Bethesda]. So I had very little time walking with my prosthesis and of course I had to use crutches to do that. In fact, it was months after I was actually discharged that I walked with a cane for the longest time. But I kind of progressed from the wheelchair to crutches to sometimes wearing a prosthesis using the crutches and then to walking with the assistance of a cane and then eventually without a cane. But they had to make a locking knee for my leg in order for me to do that (Keith, Marines, Black, FAK).
- The normal thing was after you got your prosthesis from the limb shop, you took it back to the physical therapy and then you had a minimum of three days there to go down and do therapy with it before you could keep it. I spent extra time at the limb shop getting fit and basically learning to walk at the limb shop and then made sure that the day I did pick it up I was too late to drop it off at the physical therapy. So I wore my prosthesis to physical therapy the next morning and my prosthesis was never left in the therapy room. I wore it over that day and got to wear it out of there when I left like two hours later. [The therapists] were somewhat surprised [when I showed up wearing my leg]. I was probably one of the quicker ones I guess you'd say to get used to it and be able to walk on it. I guess I would say it was just a determination that I wasn't going to get the loss of the leg bothered me and so it was when I got it, I just learned to use it...The army took good care of me. They supplied me with a new prosthesis whenever I needed one. At times it's been a hassle to get them. You go down and say this one don't fit an you know, I can't hardly walk on it anymore and it's like, well, come back in six months and we'll reevaluate it and see whether you really need a new one or not. But I guess I've eventually got one and I've never had to resort to going to crutches (Liam, Army, White, BK).
- I put my first set of prosthesis on I believe it was like the 17th or 18th of September, 1968 and by the first of October I was walking without crutches and I was walking without canes. I was able to put them on and they fit, they were like a glove and it was the most natural thing in the world for me. I was walking up and down steps without crutches or canes within a week, of course, holding onto the handlebar. Within three weeks I was walking up and down the steps without hanging onto the handles. It was nothing I worked towards...it was the most natural thing in the world (Owen, Marines, Black, BBKA).
- [I received a prosthetic device for my arm and] it took about a month to get it and get everything set up and adjust it and all that stuff and then that was it. I didn't do any training on how to use it other than him telling me some basic things. That's why when somebody asked about the training and physical therapy I just laughed. I didn't get shit from those bastards (Pete, Marines, White, AE).
- We didn't have anybody physically working with you [except when we learned how to actually walk on the prosthesis.] We had one of the orderlies, he told us how to put them on and showed us how to put them on and helped you out of the wheel chair and put you on the parallel bars and kick a leg out, lock the knee, kick a leg out, lock the knee and that's how you learn how to walk. And that's all we had to do until you learn how to do it (David, Marines, White, BAKA).

- [They fitted me for a prosthesis in Philadelphia]. They put you through a few paces, whatnot. Once you get fitted and you know, you get your arm on, you get your prosthesis on, and then they'll show you how to-I remember one day this lady had me picking up eggs. You know, you pick up the eggs. Don't crush the eggs. Pick up the eggs and put it from this spot into that spot. But you can't crush the egg. So that means you have to exercise some kind of control over your prosthetic device. So I went through learning how to use it (Adam, Navy, Black, AE).
- They gave me my final revision of my leg from the military, it didn't fit very well because of the end, I broke my leg and they said--well, now look, when you get out go to the VA and they'll make you a new one and go from there...I finally got into see a doctor [at the Cincinnati VA Hospital] and he says, "I can't treat you here, sorry." I don't understand why [he didn't treat me.] [But] that afternoon after I left there I had got my leg made by Hanger and I looked up Hanger in the phone book. [Hanger is a large prosthetic company] (Frank, Army, White, BK).
- [Learning to walk on the prosthetic leg presented a challenge]. Absolutely, yeah it did. [And there were other challenges to adjusting to the prosthetic too]. I think it was mentally the adjustment of once I left, you know, the practicing and whatever just to be out on the streets and taking, walking up steps, getting on trains, and just getting around. That was the biggest challenge. To be out in public when there's crowds and there's people, you know, even if you learn how to walk it still takes a certain amount of concentration and when you're out in public and stuff like that it can get a little bit scary sometimes the first couple times you're really out on your own...You don't want to fall down. You don't want to embarrass yourself (Nick, Army, White, AK).
- I generally have got one [a new prosthesis] every six, seven years. So it's almost 40 years right? So I've probably been through what six or seven (Eddie, Army, White, AEAK).

Experiencing Pain Or Discomfort Early On

- [With learning to walk on the prosthesis] mostly there were good days but I guess [it] was the hot days. The stump sock which you wore would sweat and then it would stick to the leg instead of sliding inside the leg and if you didn't go change it you finally wore a blister and then the blister popped and then you had an open sore on your leg. Well, then that made it a little bit tough for the next few days until that kind of toughened up but see we're still on it for the next two days, even after that (Liam, Army, White, BK).
- The limitations became overbearing. You know, you try oh, I'm going to go do--you can't because it hurts. I'm going to try this...can't do it because it hurts. I tried, you know, [but] the limitations just stopped me. I still [have pain]. It hurts to walk. [Even with a prosthesis...] It's not part of you. It's not meant to be part of you. Well, it's meant to be part but it's not part of you. [I had trouble learning to walk with the prosthesis]. There are adjustment periods. Even now, the leg don't feel right--you got to walk so far. I've got one buddy he says, oh it must be really bothering you because it shows. It does show (Shawn, Army, White, BK).

- [I remember my first prosthesis]. It was carved out of wood and had a real hard plastic foot and of course the socket was made to mold [inaudible] to my stump. It was really actually made out of wood and it was very crude and held on by a little belt around right by the kneecap and it was very, it was crude. You got a lot of blisters and it was just painful and you had to drag the thing around (Roberto, Army, Hispanic, BK).
- As soon as I healed up they took me over to a rehab facility also associated with Northwestern and fitted me with temporary prosthetics and it was plastic--I can remember--they were plastic tubes that they heated up and poured over the stumps trimmed it, put the on it and the metal pipe for the legs, and because these were temporaries they had to, they were attached with a belt strap and they were sort of cumbersome and uncomfortable but that's what I learned to walk with (Ian, Army, White, BBKA).
- The day I got there [to the hospital] the very next day was the 24th of November and the next day was going to be Thanksgiving and they were cutting a lot of us loose that could get out. And at that time I asked for some convalescent leave and the doctor says well, if you can get up on crutches I'll let you go. And it was hard. It was hard. It was very painful but I grinned and bore it and told [him], "Yes, sir. I'm fine." So they gave me a special orthopedic boot to put on my foot and then I went home after that...[I had] a lot of physical therapy- a tremendous amount of physical therapy [at Valley Forge]. I mean they worked us a couple of times a day for about an hour or so each morning and each afternoon. [They were] getting us ready to get a prosthesis. I think it was May of '68 I got my first prosthesis [and] it was a total contact suction socket that I had a lot of problems with but I continued, I'd wear it all the time anyway even though it was painful. [Learning to walk on the prosthesis] was painful but I got through it...Then I started having problems with the stump [from wearing the prosthesis] and I had to go in and they did a stump revision-a scar tissue revision. I had what they called a dog's ear on the side of it where they'd drawn the skin together and so they cut that open and re-did it, reformed the stump. That certainly helped a lot with the problems I was having with infections and everything (Bob, Army, White, AK).
- The process of getting a leg that fit and learning how to use it was and still be challenging getting one that fits right so you can be on your feet for eight, nine hours a day and not hurt yourself. So I think that, just the physical part of rehab and getting the prosthesis built was probably the second biggest thing (Eddie, Army, White, AEAK).
- [Even with physical therapy] there wasn't learning how to use it. You put it on and it hurt like hell and they'd adjust the file out somewhere, you'd put it back on and it felt pretty good and then it would hurt some more and then they'd file it out some more and relieve the pressure until you got all your pressure under your patella tendon right underneath your knee cap below the amputation. In the back part was a bar that pushed you forward on that knee, on that patella tendon, and held you there. That was a matter of bearing the pain and walking. I learned how to walk within five minutes when I could withstand the pain. They would send me in and try and get my left foot to work and we would try to pick up marbles which I was never able to do with my left foot to get better to get my toes working (Frank, Army, White, BK)

Rejecting Prosthetic Devices And Newer Technologies

- They gave me a prosthetic arm. It wasn't worth shit so I gave up trying to use it so now I don't use anything. [I tried using it for] about two years. Yeah, but it was a piece of crap. It just kept locking but there's not much there anyhow for it to hold onto. It straps around me and everything and it just wasn't [working]. I got so mad at the damn thing once I took [it] and threw it against the wall in the bedroom. I cracked its elbow and it still worked as little as it did. [So I quit using the arm because] it didn't work. It was just, it was uncomfortable. It would lock up which really would piss me off because, you know, it was supposed to move freely and then you tighten up or something to get it to lock and this dis-lock. Willy-nilly, you know, whenever it felt like it. It was just more of an inconvenience (Pete, Marines, White, AE).
- I had a shrapnel wound in my left hip-my upper leg on my left hip I got almost like a one inch scar. It's a piece of shrapnel that hit me there and it killed a nerve in my leg and for six months to a year after I got out I was wearing what they call oh, I guess it was a shoe with kind of a strap on it with a spring-loaded something that when you stood up if you lift your foot up it would lift your toe up. I wore that for six months to a year after I got discharged from the hospital. And it got to be so aggravating that I just got disgusted with it one day and I took the thing off my leg and I threw it in the garbage...As a matter of fact, my prosthetic device [for my arm], I have never really liked, you know, you've got the little thing that looks like a hook and then you've got the one that looks like a hand-looks like a human hand. I have never liked the human hand because I could never do nothing with it. It was just an extra weight that was too bothersome for me...The new technology, I really haven't taken advantage at all. My prosthesis, my right arm prosthesis, it's like old school. It's like from 20, 30 years ago. [But] every now and then, whenever I need to I go back to the VA and they will make me another one. Whenever I wear it out, you know, I beat up on it or whatever, they're right there for me. They give me a new one with no questions asked (Adam, Navy, Black, AE).
- I use a wheelchair. I used to [use prostheses but] I haven't had a set since '85 because they just got too cumbersome. I took them off because they just got too hard to walk with anymore and I wasn't working. And then the last set I had they didn't make correctly and they just bothered me a lot so I quit wearing them (David, Marines, White, BAKA).
- I was long ready to be gone [after having been in rehabilitation treatment for 11 months]. Eleven months was a long time for me, but when I became an outpatient some seven months, eight months after my injury, I was ready to be done with the whole bit of it. And I would have had it not been for the opportunity to go to Georgia Warm Springs Foundation, because there they challenged me. They truly did. They brought me to a level, a skill level on those prosthesis that I didn't think I'd ever accomplish...[but still] once I started selling real estate there was no way in hell I was going to wear the prosthesis. It was too cumbersome, too time consuming (Willy, Army, White, AK/BE/HD).

Improvements And Changes In Prosthetic Devices

- I got a prosthetic. At first they were rather primitive. They were--you wore a wool sock on your raw skin. The foot was basically a mannequin's foot. It had no dexterity or flexibility to it at all. It gave you a lot of back problems. Now they're progressed to the point where I have a sheath I pull on, it's anywhere from an eighth-inch to a little over a quarter-inch maybe three-eighths inch flesh feeling plastic, well, it's not plastic, it's actually mineral oil so it doesn't irritate your skin. You don't have skin break down, tissue break down like you used to if you walked a lot (Frank, Army, White, BK).
- [The prosthetic technology has changed in the past 30 years]. It has, I mean the technology that they have right now, I can see from what I've seen on television, it's very beneficial for the soldiers who are out there right now and there's a whole lot of advances that I've seen taking place but none that's really affected me because I can say I just call myself old school. [So] the new technology, I really haven't taken advantage of at all (Adam, Navy, Black, AE).
- [I remember my first prosthesis]. It was carved out of wood and had a real hard plastic foot and of course the socket was made to mold to my stump. It was really actually made out of wood and it was very crude and held on by a little belt right by the kneecap and it was very crude. You got a lot of blisters and it was just painful and you had to drag the thing around. [But in the past 30 years the prosthetic technology has improved]. It's fantastic now. This one I'm using now works on suction. So there's no straps to contend with. A strap, it's kind of like if you had a belt around your waist that didn't fit snug and then you had a piece of weight hanging on it when you're trying to walk and that would always just pull on you. So it's really complicated, but this one works on suction and it's got what you call a flex foot, a carbon foot. It energizes. When you take a step your toe energizes and it kind of makes you go forward a little bit. It's just marvelous (Roberto, Army, Hispanic, BK).
- The problem is, if I could have the prosthesis that they have today I probably would use them, walk with them, but the prosthesis back then were so doggone heavy they were worthless. Too much, it was too hard work. I can go in my wheelchair and I can wheel slowly twice as fast as a person walking so why should I go through all that discomfort? That's the decision I came to (Gary, Army, White, BAKA).
- They did stump, well, because they were going to do some more stump revisions they had to put me in traction again and I wasn't too thrilled about that because you're just, you know, totally confined when that happens but I was in traction for a couple months—I mean couple weeks—and then they did this stump revision. So that was probably middle of August and after, as soon as I healed up they took me over to a rehab facility also associated with Northwestern and fitted me with temporary prosthetics and it was plastic—I can remember—they were plastic tubes that they heated up and poured over the stumps and that's what they made the mold from and then they trimmed it and put the feet on it and the metal pipe for the legs, and because these were temporaries they were attached with a belt strap and they were sort of cumbersome and uncomfortable but that's what I learned to walk with. Yeah, yeah, it was, it just seemed like it was something new and I thank God that I was sent there with these two doctors. They made me a project and I received excellent care from them...The first prosthetics I got were what they called patella tendon bearing and they probably chose those

based on the type of work I was going to be doing. They are not made for real strenuous activity. I've heard of and seen people running with prosthetics. Well, you couldn't run with these but they were excellent for what I was doing because there's no straps to them. They're real easy to take on and off and then over the years they've even improved. I've still got the patella tendon bearing but they're much better now than they were back then (Ian, Army, White, BBKA).

- The first legs I got were, it was called a total contact suction socket that was a rigid socket and it caused a lot of sores and problems with my groin area and the upper part of the socket. I was constantly having problems with that and to get a good fit if you lost weight or gained weight, this changed everything. Then I had a problem controlling my weight. It was up and down and up and down and it just caused more problems with the prostheses. It was, at first I had what was called a lock safety knee where when you had weight on it locked and as you released the weight then it would swing freely. Then they come out with a new type of socket which was a soft polyurethane socket into a rigid exo suspension system--exoskeleton suspension system and it's very comfortable. I have a latex sleeve that goes over my stump that has a suspension pin in the end of it and it locks into the exoskeleton part of the leg. [So there is really quite a difference in the technology and the fit and everything]. Very much so. I no longer have a problem with all the sores and everything (Bob, Army, White, AK).
- They've gotten more colorful and the socket has been the biggest thing. The materials that they, the improvements now instead of whittling on wood they take a cast of your leg or your residual limb and then they put a flexible socket that comes in contact with your leg inside a hard socket. And the hard socket's made of carbon fiber and the materials has been the biggest thing I think. And I talk about they're more colorful. Right after I was discharged in the seventies I went to the VA hospital in Denver to get evaluated for a new leg and the head of prosthetics had a green metal flake leg that matched his Corvette. So, since that time I've had flowers, you know, designs on my leg and arm so that's why they've gotten more colorful. People think I have tattoos from a distance (Eddie, Army Black, AEAK).

Concealing Limb-Loss

- [The new prosthetics of today are much better than the first ones I had. It would have been easier to adjust if I had these prosthetics when I was first injured...] You know, it would give you some kind of a good feeling about yourself instead of going out and dragging that big old peg leg around at least you could walk normal. Because I've worked over the years with my prosthesis and most people don't know that I have one when I walk. But that's an effort that I've done over the years because I wanted to fit in. I wanted people to see me as a normal person. [It's important to fit in and appear to be normal to me]. Of course [it is]. Because you don't want to be, you know, you don't want people to know that you're handicapped. And that was my thing. I didn't want people to know I was handicapped and I busted my butt practicing over the years walking, walking, and walking and I'd look in the mirror to make sure my walk is good and it's, but that's the weird thing about me is that I don't want people to know that I'm disabled (Roberto, Army, Hispanic, BK).
- My kids never seen me without a leg until I had some surgery here maybe three, four years ago. Well, in fact I was home for a month too I guess without the leg on so they had actually

never seen me without it before. [I wore the prosthesis all the time when I was around them]. Now I do the same thing [because] I don't want my grandkids to see me without it but they only see the odd shape and they, in fact, my grandson here yesterday seen all that and wanted to know what's going on there (Troy, Army, White, FAK).

- I've gone to great lengths to, you know, I'd say probably 80% of the people I know don't know that I'm missing my legs. There's no reason for me to tell them that I'm missing them. So I just, you know, I do my job and I limp a little bit and so people know that there's something wrong with the way I walk but they don't realize that I'm missing both my legs (Jason, Army, White, BBKA).
- [I wanted a prosthesis because] I didn't want to be a one-legged person anymore which was so obvious when I wasn't wearing my artificial leg. Once I learned how to walk with my artificial leg most of the people that met me it was like, "Oh, you hurt your leg or you broke your leg..." you know. But most of them didn't guess that I had a prosthesis. So I want to say that I guess maybe the physical part of it, I was ready to get going and probably not to my benefit (Keith, Marines, White, FAK).
- I still use crutches now when I don't have the prosthesis on because I refuse to hop around. I use the crutches. I refuse to take the leg off when I don't have to. I won't wear shorts. You know, I'm self conscious about it (Shawn, Army, White, BK).
- I stayed out of public a lot, just in the small town where I live. I had problems going into restaurants or anywhere. You know, you're a 20 year old with a bad limp, a real bad limp and [it's] noticeable and I guess I'm a little bit on the shy side anyway which didn't help any. [And I continued to limp after I got my prosthesis.] I got a pretty noticeable limp, yeah (Troy, Army, White, FAK).

Reassuring Others That They Were Ok And Proving Ability

- When I got out of the service I went down and got me a job pumping gas for a summer and I pumped gas the whole summer. And they offered me, the people that knew I had an artificial [leg] at the store offered me a job inside the store because it's there with a service station on the outside, you know. They offered me a job inside. I says no, I want to pump gas and I pumped gas I guess for about six or eight weeks and blisters on the stump, you know, just limping around and one day I slipped and busted my butt and I got up and kept going. So it was a challenge for me just to prove them wrong (Roberto, Army, Hispanic, BK).
- The first time I came home [after treatment] and I had these prosthetics already and I sort of wanted to put [my mother's] mind at ease. So I put these prosthetics on. I walked a few steps with [them on] my crutches and I'm standing there talking to her. I'm trying to act like, see, this is going to be okay and I put my crutches against the wall and I fell over straight backwards (laughing). I always remember that part. I'm trying to put her mind at ease and I fall over (Ian, Army, White, BBKA).

Being Independent Through Use Of Assistive Devices

- I got my first prosthesis at [Brooke Army Hospital]. My first lower arm prosthesis, and it was a god-send. Also, that was the first time that I got a wheelchair that was capable of carrying me around. So that was a big deal. I mean, any time before when I wanted to go somewhere somebody had to push me. And I am, I am now and always been fiercely independent, and having to have somebody push me around...So I got a prosthesis and trained for that, and it was so essential for me because it was a great assist getting out of the bed to bear weight on that lower extremity by putting my prosthesis and my hand on the floor to raise myself up in and out of bed. It was a great assist and an essential part of my ability to move around. The wheel chair, it was just fun, because I could take a lap around the ward if I wanted to. Those were huge self esteem building assets....[They fit my legs for prosthesis later at] the VA Hospital in Little Rock, Arkansas. The practicality of lower limb prosthesis, particularly in technology that 40 years ago was not all that good. But it was essential to me for my sense of self esteem just to stand up again (Willy, Army, White, AK/BE/HD).
- [Being fitted for a prosthetic was exciting because] in a sense that it gave us, and has to do with mobility and ability to move around and independence. Again, one of the worst things for, I guess for any young person is, anyone that has always been healthy and so forth of course is to be logged down with injuries and not being able to move around. So the exciting part was that okay, this gave me some flexibility and gave us some options for independence. And the challenge was to be as good as I could possibly be at using the unit which was also a challenge in itself. There was a lot of pain associated with it. There was discomfort. Learning to deal with the pain and discomfort. Walking on the prosthesis, especially above the knee where you have no padding. It's just, you know, it's how well the unit is fitted and your weight is in relationship to the unit. There's a lot of things going to making that work right for you. So that was a challenge. So part of the goal was it actually at the time it was another challenge. And so the process was to understand it as good as I could, okay, and try to advance as best I can. So those sort of things kept me busy and that was the focus. The focus wasn't at that time, looking back, it was looking forward to how do I take the next step and improve (Greg, Marines, Black, AK).

Becoming A Role Model For Other Veterans

- I guess it was after I got my leg. It was healed up and I had my artificial leg and was walking on it. I used to go to seminars with the major and he would use me as his walking demonstration board, whatever, and talk about the closed revision and how I could walk and stuff and I remember I talked to him about the fact that when I got there we knew nothing what kind of life we were going to lead with a prosthetic or what we could do with a prosthetic. So they got myself and then an above the knee amputee and did videos and stuff so that as the new amputees came into the hospital they would at least be able to show them videos of what they might expect to do with the prosthesis after they got it (Liam, Army, White, BK).

G4. Experiences With Physical Therapy

Just over half of the veterans discussed experiences with physical therapy. Of those who did, they had a wide range of experiences. A couple mentioned not wanting or receiving inadequate physical therapy. For example one veteran's physical therapist gave up providing care when the veteran had difficulties with the physical therapy exercises. Another said he did not want any physical therapy because he did not want someone telling him what to do, stating he had a "problem with authority". Most veterans, however, spoke of positive aspects of physical therapy. These aspects included the progression that they made during such therapy as they learned to walk, became physically stronger, gained more independence, and even benefited psychologically from attending therapy sessions (i.e., saw the outcomes just mentioned as big esteem builders and helping to keep a positive attitude that there were no limits to what one could do). Only one veteran noted that he did not necessarily need physical therapy and referred to it as a "waste of time." Lastly, one veteran described the differences between the physical therapy he received and the physical therapy veterans of the Iraq and Afghanistan war receive, stating that the therapy and care is much better today. These findings are illustrated below.

Limited Physical Therapy

- [I didn't get my prosthetic arm from the VA, I got it from] a place in Dayton. [The man who gave it to me] was a nice guy. Very helpful. [But] I didn't do any training on how to use it other than him telling me, you know, some basic things. [There was no physical therapy involved in the process]. That's why when somebody said, you know, he asked you about the training and physical therapy you had and I just laughed. I didn't get shit from those bastards. [And even] when I was at the service hospitals there was no rehab or nothing. [Not even at Bethesda]. They [just] sent me to the VA hospital in Dayton [and] they had me go to physical therapy one time where he tried to put a weight on my left arm so I could practice raising it and building up the strength in it and it would just keep falling off. So he just got tired of messing with it and he just let me go back to my room. That was the entire extent of my physical therapy (Pete, Marines, White, AE).
- Yes [I received physical therapy]. Yes I did. It wasn't much but it was something. It was just the walking bars and then they exercise your work lift of your leg and that's about it. But it wasn't intensive. It was very short (Roberto, Army, Hispanic, BK).

Not Wanting To Go To Physical Therapy

- I have very few recollections of [physical therapy] other than they weren't overly happy with me because I wasn't going as often as they wanted me to and that's about it. I mean I don't even remember my physical therapist's name. To be honest with you [physical therapy wasn't important to me and] I don't know [why]. I didn't stand there and say well I don't want to go to physical therapy because it hurts or anything like this. I did have--which sounds funny for a Marine--I did have an authority problem. I didn't, and for a long, long, long time and even to this day I don't like people telling me what to do. I think it was more amplified back then. You know, the doctor and the physical therapist would say well you have to go to physical therapy and you have to. . .no I don't. No. I don't have to do anything and maybe I could prove it to you by not going. Because at that particular point I'm thinking what are you going to do to me? You know, are you going to send me to Vietnam and get me blown up? Too late. And I think that was some of, in fact a whole lot of, my pre-military

attitude of being rebellious and being obnoxious and belligerent and stuff like that (Owen, Marines, Black, BBKA).

Progressing Because Of Physical Therapy

- I was given physical therapy both for with and without the prosthetics on. The big thing I had to do was get my leg muscles firmed up again plus I can remember using a medicine ball a lot as far as the therapist throwing it to me for, you know, balance purposes. Then I started, you know, learned to walk with these on the handrails and I actually was discharged as an inpatient with crutches. I had full crutches and that's what I got married with—on crutches. But we got married in a Catholic church and we met with the priest and he knew us. We were both from small towns so everybody knows everybody else and I told him I said I just, I can't stand very long at a time. Can you make it as quick as possible? He married us and as soon as he got done he said 15 minutes flat (laughter) (Ian, Army, White, BBKA).
- [My wife was a physical therapist and she] called [Georgia Warm Springs Foundation,] which was a rehab center and she said, how about I come back and work for you and you treat my husband. You let him go through your PT program for a month. They said, that sounds like a wonderful idea and so we went to the Georgia Warm Springs Foundation and they worked my butt off. They didn't want me to get anywhere near parallel bars. They wanted to be walking all over uneven terrain, grass, hiking, getting up off the one arm and make sure I'll fall. They had me swinging a golf club and all this other fun stuff. The first and only time I fell the whole time I was at Warm Springs Foundation on my prosthesis was in a sand trap on the fifth hole at Cy Young Golf Course – which, if you're going to fall is a very pleasant fall. It's a whole lot better than hitting the floor. [So I received physical therapy at Georgia Warm Springs Institute] and as a result of that I became as proficient as you can (Willy, Army, White, AK/BE/HD).
- [I was at military hospital Valley Forge and I had] a lot of physical therapy—a tremendous amount of physical therapy. I mean they worked us a couple of times a day for about an hour or so each morning and each afternoon. [They were] getting us ready to get a prostheses... [And learning to walk again] was painful but I got through it...They had good physical therapists down there. He worked us real hard and I think he did a good job getting us strengthened up, especially our abductor muscles and our lower back muscles and everything and worked on our upper body strength (Bob, Army, White, AK).
- I started out with physical therapy in Japan. And the only thing I could lift when I was in Japan was five pounds. And then I got physical therapy in Valley Forge and I greatly improved. See I started out on a gurney because I was on bed rest so I had to go on a gurney and the gurney's got wheelchair wheels on the front. So you wheel down to physical therapy which was on the same floor and you go in there and you work out. They work with balance. With me, because of me being so short they really worked hard on balance. So I got the medicine ball thrown at me quite a bit on a matt and it really helped. I have terrific balance now and I think it's all because of all that training. Then they trained me to go from the floor, to do a lot of things on the floor like go from the floor to the top of the toilet, hopping up and down stairs, doing a lot of things without the chair. It made me a lot more mobile and I don't know, I think that really helped because I worked with several guys trying to get them

to do it but they just felt like it was so degrading but to me this is how we're going to live and if you want to get around and you want to do things you're going to have to learn to do some things that you might not normally want to do (Gary, Army, White, BBKA).

Benefiting Psychologically From Physical Therapy

- I can remember when we used to do the physical therapy and you would have somebody with you for about 45 minutes helping you out, they were very helpful. They'd try to reinforce that you were going to be okay and they knew what they were doing. It was as much for the spirit as the body. It was a very good experience with them (Nick, Army, White, AK).
- I had an experience with a physical therapist in the hospital. I reported to the physical therapy unit and the lady told me right off the bat, she says tie your sneaker. And here I am a guy with one arm and I'm, you know, I'm trying to figure out what she's taking about. And she said do it just like I'm telling you to, you know, light a cigarette or whatever. She said it just like it was, you know, it was automatic and it was no problem. I'm trying to figure out how in the world am I supposed to tie my sneaker with one hand. The lady said, did you ever try it? I said no. She said, well try it. So I tried to tie my sneaker with one hand and I ended up tying my sneaker, a double bow with one hand, I ended up doing it and I was totally shocked. That was the beginning of the end of physical therapy for me. Yep. That was it for me. After that, you know, it was like the sky is the limit. You know, I did it and I shocked myself and after that it was no looking back. You know, I just felt that wow, I had learned something that I never would have thought was possible in a thousand years....physical therapy, they point you in the right direction, they show you that hill. There's the hill. You go take it. They point you in the right direction and that's it. That's what physical therapy did to me. They showed me, they pointed me in the right direction and after that the rest was up to me and to me that's the basis of what rehabilitation is all about. They can't do it for you. They can tell you or show you or point you in the right direction but after that if, you know, if you haven't got it within yourself to go out and do it, you're a lost cause (Adam, Navy, Black, AE).

Not Needing Physical Therapy

- My therapy consisted of going over to physical therapy, I think it was like two hours a day and my therapy sessions, since I was already walking, is all I did was walked from one end of the therapy room and back between two mirrors and watched myself walk that I didn't limp or tilt or whatever and that it looked the front and stuff was laying down right to try to reflect a natural looking gait to my walk. [Eventually I] went to therapy for two hours a day and basically all I did in therapy was walk between the mirrors or helped other patients. I felt like it was a waste of time for me there. I was out doing things the other, what, 14 hours a day and so why did I need therapy for two hours to do the stuff that I was already doing the other 14. I felt it was a waste of time. I thought the therapy should have went long enough for me to learn how to use my leg and then I'm done with it. [I just wanted to] get the heck out of [there] (Liam, Army, White, BK).

Contrasting Physical Therapy Of Today And Vietnam War Era

- [The physical therapy we had back then was not the same as] what the kids have today. [We] just did a lot of stretching exercises and sit ups and we walked with our prosthesis on parallel bars is about it. They didn't have gyms back in those days. [Today] the facilities are better and they have better equipment and they have probably better trained physical therapists. We didn't have actually physical therapists work with individual patients. You were put into a room and told to do stretching exercises and sit ups and stuff. That's it. We didn't have anybody physically working with you. [Even when we learned how to walk on the prosthetic we didn't have physical therapists but instead worked with] one of the orderlies. He told us how to put them on and showed us how to put them on and helped you out of the wheel chair and put you on the parallel bars and kick a leg out, lock the knee, kick a leg out, lock the knee and that's how you learn how to walk. And that's all [the physical therapy] we had to do until you learn how to do it (David, Marines, White, BAKA).

G5. Experiencing Disability

Several of the veterans discussed aspects of experiencing disability which can refer to either one's ability to function physically or emotionally in the world, as well as social or structural discrimination based on physical or emotional difference. Given this understanding of disability, nearly half of the veterans discussed at least some aspect of their disability rating given to them from the VA. While a few briefly described what they were rated at, others went into greater detail as to how their body parts and injuries were broken down by the VA system in order to determine what amount of disability pay they deserved. Essentially the veterans go through the process of breaking down the self from whole to part (numerically) in order to obtain a disability rating. A couple of the veterans' expressed anger over their ratings. It seems that they greatly disagreed with the rating system and the amount they were rated for leading one to join the Disabled American Veterans (DAV) and one to go so far as to appeal the ruling of his disability.

Some of the veterans rejected a disabled identity in that they seemed to not consider themselves as needing assistance or in some cases, even if they did need assistance, they did not want it. It seems that these particular veterans did not see being disabled as a part of who they were. A couple of them wanted to prove to others that they could still be independent. The veterans also talked about how they adapted to being disabled. The veterans also more generally mentioned that they adapted to their particular limitations through various ways without specifying how. They instead referred to adapting to their disabilities as "mostly a trial and error process" and "learning to do things in a different way than what you were accustomed to."

Negative attention was also sometimes received by the veterans due to their injuries and disabilities that ranged from strangers staring at them to one veteran's future mother-in-law trying to persuade her daughter to not marry him because she saw his disability in a negative light. It seems that some of the veterans' experiences of receiving negative attention had to do with the fact that some people, including their family and friends, simply did not know how to handle interacting with a person who is physically disabled.

The veterans often spoke of what it was like to be a disabled American before the Americans with Disabilities Act and also more broadly they spoke of what it was like to be disabled after suffering their injuries. A common problem the veterans faced was the basic limitation of simply not being able to do physical activities that they had once done before or not being able to try new things because of their disabilities. All of these experiences are illustrated below in several sections: experiences being rated, experiencing physical difficulties, receiving negative attention, responding and adjusting to disability, and rejecting the disabled identity.

Experiences Being Rated

- I was rated under the VA rating as was the law. But the VA rating...the guy said we got an atrophy of my right testicle. Believe me, in four days, you do not have atrophy of your right testicle after somebody took it out and hit it with a tennis racket at four thousand miles at four thousand feet a second. Okay. It swells. (laughing) It does everything but shrink. He wrote atrophy and that was because it was debrided. The fellow that did the surgery on me probably had so much overwhelming - and I have never seen records from the surgery. I only saw a critique of about three or four days after my being ready to ship out. Maybe six years back I found that. That stopped them from rating me as loss of both testicles. The law was that if you lost one testicle and the other was damaged, partially removed, you would be

rated at thirty percent. But they rated me at forty percent for my leg. They didn't rate me for my ear at all. They rated me at I think I was down to fifteen DB there was some low limits. They rated me at twenty percent for my wounds because of that medical writing and the law and the VA. That made me very angry...[When my total disability was added up] well, at that time it came out to... it was forty percent and twenty percent. But, it comes out to fifty percent because if you if I get forty percent then you have sixty percent left okay? And if you got fifty percent of sixty percent well that's five times six is thirty percent. So I had sixty percent left, twenty percent. Two times six is twelve percent. That's rounded down to ten and there's ten. So I was rated fifty and I disagreed with that and I appealed it. You know, it's held over and placed on medic hold. In the appeal they ruled in my favor. However, they couldn't rate me under the VA range. They had some type of administrative rating from the army and I was retired at sixty percent...When I got out the VA immediately rated me at fifty-percent, took me from sixty to fifty. They said because it said atrophy. I guess about ten years ago there was a law passed that said if it was atrophy it would be recognized as loss of both testicles. [So] that brought it to sixty at that time. And then, with the wreck and stuff, I had problems with my leg continuing and went and the doctor applied for that. He said that I had perennial nerve damage and he rated me for that and that brought me up to something and then I think seventy percent and then things went on and got worse and I applied for unemployability and that brought me up to one hundred percent. Ten years ago or so they discovered syringomyelia. I never applied for that. Oh, I did, and they turned me down twice for that so far (Frank, Army, White, BK).

- Anything [disability rating] over one hundred percent disabled is ludicrous but it was, you know, by the time you added, all it said was, it was over three hundred percent (Willy, Army, White, AK/BE/HD).
- [While I was at Valley Forge they assessed me for my percent of disability and] they rated me at 100%. I just recently in 2004 filed another claim. I found out that my other leg was giving me so much problems and I went in for a re-evaluation and then they determined that I had lost use of that leg and so now I get, I don't know, three or four hundred dollars extra a month. [So it's actually more than 100% so to speak]. I have what's called an M award (Bob, Army, White, AK).
- [I was rated at,] well, it was an automatic 100%. Anybody who was a double amputee back then was automatic 100%. So it was basically just filling out the paperwork and getting it done and sending it in (Gary, Army, White, BAKA).
- They give me 100% [disability pay]. I had the loss of the use of [my leg] and stuff like that. It's a combination of about four or five disabilities (Shawn, Army, White, BK).
- I was rated 60% disabled right from the beginning and I receive disability for that. They changed, they changed my disability while I was going to college as I remember to 100% rating or something. I got a thousand dollars a month while I was in college plus they paid all my college expenses, my books and tuition. And then once I got out of college they took me back to the 60% and then I think that was like \$580 (Liam, Army, White, BK)

- [What upset me about the VA was,] well, their rating system. You know, the way they don't want to give you any money. I was rated 100% total and permanent or not total and permanent. 100%, they give you for the first year and then it's reviewed and whatever and so they send me this freakin' letter after a year and they said vet, my disability had been knocked down to 90% permanent and that pissed me off. Because the difference between 100% and 90% in compensation was like 40% of the money. It was a huge difference. And it was like example, \$1000 for 100%; 90% would be like \$600, then 80% would be like 540; 70% would be like 480. You know those were all apart but it's such a huge, what's the fuckin' difference is there between 90 and 100% because it needs to be that much a difference? The thing also that pissed me off is they showed me my injuries that they had and the percentage for them and the first one was my left arm being amputated, that was 80% disability. Now I had 20% for back and another 20% for another back thing and another 20% for something and 10% for something else and it added up to like 140% or something like that. I'm thinking why am I only getting 90%. I lost my arm so that's 80% of me is gone which leaves me 20%. Take 20% out of that, 20%. That drops it down to 16. Take 20% out of that, 16. That's 3.2 that's coming out and so it gets to a point, I was like 94% disabled. But you have to have 95 I guess and 96 to be made 100. So that's where I stood at. I bitched. Went to the DAV and that's why I joined them (Pete, Marines, White, AE).

Experiencing Physical Difficulties

- [In the beginning] I fell out of my wheelchair a lot, particularly when I would be getting out of my wheelchair and I would be trying to transfer to the bathtub or into the shower because I didn't want to take my wheelchair into the shower because I'd get it all wet. So I would get down, since I had my knees, and I would just crawl into the shower. But a couple times as I was getting back into my shower, either my seat was wet or I did it wrong or whatever and I would fall out of my wheelchair. That happened two or three times. So then I kind of re-arranged my wheelchair a little bit and I'd try something different and that didn't work and I fell out and I hit my head on the radiator (Owen, Marines, Black, BBKA).
- One time I got on the bus in Philadelphia [and] when I got on the bus I had a cane, I was walking, I was struggling, and I remember once I paid my fare I was trying to find a seat and the bus driver took off and almost threw me down to the floor. I remember saying to myself, welcome to the world. The guy looked at me like hey, it's like he didn't know I had one and a half legs [not an amputation...but limited use of one leg] and I was walking with a cane. I had an arm and a half but he didn't know that. But he just took off just like I was a normal person that got on the bus and I said to myself, welcome to the world. But I didn't feel discriminated against or nothing like that. I just, you know, I said to myself hey, get yourself together man. Get ready for the real world (Adam, Navy, Black, AE).
- I wasn't in a wheelchair so that made a big difference. The biggest obstacle I had was doors. Steps weren't that big of a deal but doors, especially the heavy glass doors--getting in and out of buildings-- was probably the biggest pain. But I guess it wasn't their responsibility to make it easy for me. It was my responsibility to just get it done. You know, I didn't feel like they really owed me anything to make it easier for me because, you know, even now with the automatic doors there I don't use it (laughter). You know, I just pull on the door handle and open the door (Jason, Army, White, BBKA).

- [Today I'm physically limited.] [I] can't do what I want to do. I'm limited to what I can do. You can't, you know, even entertainment. You can't even get in a movie theater unless you get the pick of the seats so you can get that leg out of the road or whatever. Anything where there's any activity involved. Of course I can golf and stuff like that. But there's a lot of limitations...[I don't generally go to my grandchildren's ballgames]. My wife used to get mad at me because I wouldn't go to them because I can't get up into the bleachers or, then if you go to a football game you stand for the whole thing. So when she started raising hell I guess then I started going to the kids' ball games. It was hard for me (Troy, Army, White, FAK).
- I couldn't do what I wanted to do. Which, even though I didn't know what I wanted to do, I still couldn't do it. The limitations became overbearing. You know, you try oh, I'm going to go do -- you can't do it because it hurts. I'm going to try this, carpentry, can't do it because it hurts. I tried ah, you know, the limitations as you go through, and it became, just it stopped me. Every time I turned around I have to try something else (Shawn, Army, White, BK).
- [Being a disabled veteran before the Americans with Disabilities Act] was a challenge at times but I learned to adapt to it because at that time I was on my prosthesis. Now with the wheelchair and being in it since '85, and with the new Disabilities Act, it's a little harder. Depends on where we're at in the United States, we find some obstacles still today but I learned to get around them. I don't let it bother me. If I want to get someplace bad enough I'll get into it (David, Marines, White, BAKA).
- I have often said that I have a blue collar mentality in a white collar body. Some of the things that I've often thought and I think I touched on a little bit before. You know, mountain climbing, hiking, skiing, snow skiing, boat skating, water skiing, whatever. I think if I was able bodied I would do all those things because I look at some of these sporting things now and I, ooh, I don't think I would mind trying that and of course I can't try that. My wife and I were in New Zealand not too long ago and they have a, you probably know bungee jumping originated in New Zealand and they had the original bridge and they had the original company that does the bungee jumping and they still do it. I would have loved to have done that. Of course I couldn't. You know, I wouldn't dare give it a try. I can see the rope having my ankles all wrapped up and my body being smashed on the rocks. So from that perspective, yeah there's an awful lot of things that I look at and say if I hadn't gotten blown up I would have been able to do this and I would have been able to do that and being able to do that. Now I don't know, maybe, if I was able bodied, maybe I would look at that mountain climbing and say, oh my, who the hell wants to do that. But because I can't, the thought is ooh, maybe I would like to try that. Do you see what I'm saying? (Owen, Marines, Black, BBKA).
- I wanted to play sports again and I knew that that wasn't going to happen, especially football, because I had a scholarship. I was a halfback and I know that that wasn't going to happen. I tried to play softball with my prosthesis and I did pretty good as a bat catcher but naturally when I hit the ball I couldn't run so I was out real quick and [so then] they had somebody to run for me [and] I lost interest in that. I started being a loner (Mark, Marines, Black, AK).

- I've always been a very physical person and the physical limitation of having one leg was extremely difficult for me to accept. I've always been an outdoor person. I was always active. I think that hurt me the worst was the fact that I couldn't physically get out and do a lot of the things that I really wanted to do. Now some of that changed as time went on and I got better physically (Keith, Marines, White, FAK).
- I haven't used crutches until '94 but if we would go down to Valley Fair, you know, like Six Flags or something like that, I would take a chair or a scooter for distance because well, number one, it got me to the front of the line. One time we were going up the ramp, they were letting us in the front and my oldest son was helping push me up the ramp and he leaned over and said Dad aren't you glad you're handicapped. Because we got into the front of the line at Disneyworld and all these places. But now with this gel socket I can go quite a ways without, well there's little or no pain on a regular basis and then of course the longer I go the more painful it gets. Actually, I'm better if I'm moving than if I'm standing still (Jason, Army, White, BBKA).
- [Of course my injury has affected different parts of my life.] I mean I'm a little slower. I can't run but I can ride a bicycle. I can't pick up my grandkids with two hands like some people can and throw them in the air. [But] I pick them up by one arm and throw them in the air. So I still have great interaction with them. [But my injury has] slowed me down in some sense, and who knows what might have been [had I not been injured]. But I've had a very fulfilling life and I've got to do pretty much everything I wanted to (Eddie, Army, White, AEAK).

Receiving Negative Attention

- You know, people are going to look at them [Veterans of Iraq/Afghanistan] just like they did me. [Referring to being viewed negatively]. My mother would get a call from people that knew us and [they would say,] "We saw [him] and I think he was drunk" and it wasn't that. It was that the leg didn't fit good so I'd go around, you know, wobbly. But I've never touched alcohol [and] it was kind of like, I don't know, I felt it disrespectful...[My wife and I] eloped because her mother didn't want nothing to do with me. It was just, it was like, one of her aunts told her says, why would you want to marry him? You've got to take care of him the rest of his life. You know, you've got to take care of him forever and her mother was like absolutely against it (Roberto, Army, Hispanic, BK).
- [My family and friends didn't know how to respond to my injury]. I know that one thing that was kind of shocking and one of the things that I can still see today. Driving with a friend that I had known for years, since like the third or fourth grade out to his parents' folks. They had a little farm. I was riding with him and we were talking about it and I said you know, I don't think I've changed. He goes, you've really changed and I didn't know how I had changed but I did apparently and it was, you know, I would get stared at all the time by people. I got laughed at. Somebody told me I should be dead. Things like that. That all happened within the first year or so (Pete, Marines, White, AE).
- I still liked who I was. Still felt okay with myself. Still the same reserved guy. But in a wheelchair people read all kinds of facts into it. And they would look at me and I'd see

these big sad eyes like oh, dear. Tsk, tsk, tsk, tsk [He makes kind of a “clicking” sound.] He doesn’t look very happy. He’s probably this, he’s probably that. I pity the life he’s got. And I would sense some of that. Now it wasn’t always vocal, rarely ever was it vocalized. But I sensed that. It just pissed me off. I was not that person. I didn’t need to be pitied. I was okay with me (Willy, Army, White, AK/BE/HD)

- We went to King of Prussia Mall and there was three of us and we're all getting shoes for pylons but people just stared. They'd never seen handicapped people before and it was a trip. [And] we're real protective of each other so we just laughed it off in jokes and freaked out the straights (Gary, Army, White, BAKA).

Responding And Adjusting To Disability

- You know, a lot of people ask me how do you adjust to it. I always think, you know, how did I adjust? Other than, I think I was a strong person before it happened and I was so glad to survived Vietnam that I just went on with my life and worked at it. Difficulty? I mean every day is difficult just getting up and getting the leg on and getting around. I’ve had to adapt to many different situations. I’m disappointed I can’t run or jump. I’m disappointed that I can’t go out and hunt like I used to--trudging through the woods and stalking deer. I have to sit and wait for them to come to me now. Those are probably some of the things that are difficult for me to really—like I don’t like it but I’ll live with it (Bob, Army, White, AK).
- Brushing my teeth I just have to sit the toothbrush down and put the toothpaste on it. My latest wife who I’ve been married to for 23 some years came up with a good solution for my toothbrush. I use an electric one and we get a thing that holds tacos and I can sit it in there and it won’t roll or anything and I put the toothbrush or toothpaste on it. Because that was kind of a problem. The toothbrushes would sometimes flip over and stuff like that while I’m trying to put the toothpaste on it because it kind of sticks to it. Getting dressed, I didn’t find any particular problems. Tying a tie was something I had to learn to do again and I guess that was about it you know. I didn’t have any problem eating. You’d be surprised, when a lot of kids see me they always ask how do you eat. With a fork. Do you use two hands when you eat? (Pete, Marines, White, AE).
- The most aggravating were tasks which required the use of two hands. Dexterity that was generally beyond what you could afford by a prosthesis. For example, taking the link out of a watch band which caused -- you know those teeny tiny little pins that hold the band in. Well, that’s not that big a deal for most folks. It was a huge tedious thing. . . So I worked and worked at that until I finally found a way to get the damn thing done. Well, there are many other things like that and those were the things that frustrated me most. Something that, it used to be without even any consideration, all of a sudden now requiring care, planning, frustration, many trials to do something. Those things were aggravating. It used to result in me blowing a fuse and being very vocal in my displeasure with myself and life and everything at that point. It was generally short lived but it’s that kind of thing that probably caused me more aggravation than anything else. The big issues like having to go through the kitchen of a restaurant because they had five steps up the front or, you know, having to pee in a parking lot because the bathroom door was eighteen inches wide. You know, those things weren’t that big a deal. Because -- hell, there wasn’t anything I couldn’t do about that...I

think [adapting to being injured] was mostly a trial and error process and I'm willing to get in and willing to do it even though it took five times as much effort as it would take somebody else to just do it for you, ah, a determination to do everything that I possibly myself. I was, as I said I was fiercely independent, if I was rolling up a doorway and someone inside was two paces away and I was five paces away and I could see them hurrying to open the door, I'd race him (Willy, Army, White, AK/BE/HD).

- [During the first 12 months of my recovery] the biggest challenge was getting well enough to go home. Other than that I guess just the challenge of just learning to walk and climb stairs and learning to do things in a different way than what you were accustomed to (Liam, Army, White, BK).
- Now some of that [physical limitations, especially doing things in the outdoors] changed as time went on and I got better physically, that I did learn, yeah I could still go. I went canoeing. I went fishing. I waded in the Potomac River fishing before with an artificial leg on. Not a lot of people would even try that. I remember going hiking with friends of mine up in western Maryland and they helped me climb up these rocks and everything. Those were the kind of things probably that were most healing to me was that I had friends that bore with me even though I had physical restrictions. I think they helped me get over a lot of that and start saying hey, maybe I can do this stuff and I'm not restricted. That's why I started working construction, believe it or not. That was the last job I had before I retired pretty much is construction and people were always amazed when I'd tell them I did that. You climb ladders and do all, yeah, I do all that. I finally had gotten to the point where I took all that for granted. If I'd have been able to learn that the first year I was out of the service—wow—it would have been quite beneficial (Keith, Marines, White, FAK).
- [My injury didn't stop me from doing physical activities.] Actually if I put my mind to it I'd just do about anything I want to do. About '85 I bought this old farmhouse and three acres of land and the house itself was crap and I remodeled the whole thing by myself and built scaffolding and put ceilings in and the whole nine yards. I can do it if I just sit down and figure it out (Gary, Army, White, BAKA).
- In 2000, some friends and I climbed the Continental Divide in Steamboat Springs, Colorado. We actually backpacked all the way to the top and we stayed there for three days (Roberto, Army, Hispanic, BK).

Rejecting The Disabled Identity

- I do remember this...One of the things the doctor was saying, well, when he gets fitted with prosthetics he will be able to do a lot of things. Probably one of the things he won't be able to be doing is climbing a ladder. As my wife would tell you many times and I think of it every time I do it—I do climb a ladder. I mean not a, well I have even climbed a regular step, not a step ladder but the lean to ladder. But mainly a stepladder, I do climb it all the time. I have to be careful but I do it and every time I do it I think of those words (Ian, Army, White, BBKA).

- [During the first 12 months of my recovery there were some challenges]. One, I had to tie my shoes. I had to learn how to tie my shoes again with one hand which I can do. I still do it and people are still amazed whenever they really see me. Oh, it's so wonderful that you can do that. Well, what the hell am I supposed to do, you know (Pete, Marines, White, AE).
- I never looked at myself as being handicapped. I never really considered myself as handicapped. I always considered my leg was a little bit of an inconvenience but not really per se a handicap. I know the loss of the leg changed the course of my life but I guess I made the best of it and re-defined my goals to things that I knew I could accomplish even with the loss of a leg (Liam, Army, White, BK).
- [I would have wheelchair races with the other veterans and winning those races was important to me.] It was, I don't know why it became so important for me to do that. Now, it would have been much easier I guess to go on and let people push me around. I didn't want someone pushing me...If I was tired or it was uphill or across grass, then, yeah, I'll take some help. But if I'm mowing the lawn, talking to someone, on a sidewalk or in the mall or in the hospital corridor, I didn't want somebody pushing me. One, I needed the exercise and so part of it -- how did I learn? I just learned by doing it, unwilling to take the easy way out and not doing something or not doing something even though I looked awkward or crazy. I'd learn a way to get it done. It was important to me and I'd do it (Willy, Army, White, AK/BE/HD).
- I just know that I wanted to walk. I was tired of being in the bed or in the wheelchair or on crutches and I think that's what drove me to, I just wanted to get out and be able to walk again. To not consider myself a cripple. Do you know what I mean? If you can get up and go out on your own and walk around, the fact that you're handicapped, so you can push in the background a little bit. So that was the biggest drive to be able to get up and walk around on my own (Nick, Army, White, AK).
- I don't think I ever tried to make a case that I was handicapped. I try to hide the fact that I was physically disabled because in my mind I wasn't. I never wanted to consider myself handicapped. I think about three years ago I went and I actually got a handicapped parking permit for my car. So for 35 years I never even went and got a handicapped parking permit. I would park where everybody else parked, walk where everybody else walked. So in my own mind I knew I had limitations but I never had that identity that I'm handicapped. But for 25 years I don't think I ever, you know, I considered myself as normal as you could, having lost a leg (Nick, Army, White, AK).

G6. Experiences With Race And Masculinity

Racial/ethnic minorities interviewed for this study included four African Americans and one Mexican American (Hispanic). The African Americans mentioned a few unique experiences as minorities that shaped their Vietnam experiences. One African American was in Vietnam when Martin Luther King was assassinated. He described how African American soldiers had their rifles taken away from them after this happened and describes tension between African American soldiers and White soldiers. He also talks about returning to the US and not being able to live comfortably in the Southern region of the US because of racism. The second African American veteran spoke of the election of Barack Obama as it seemed to be something that helped him cope with the racism and inequality he may have experienced throughout his life. He also mentioned that other racial minorities are also discriminated against, which prevents him from dwelling on the inequalities that African Americans face.

The Mexican veteran experienced difficulties being accepted by members of his own culture because of his amputee status. He described the negativity he faced from other people of his culture who put him down and considered him to be less of a man, which led him to seek out friends in the Anglo community. The first excerpt somewhat explains the difficult situation he found himself in, as he talks about how the Mexican community believed that the white people were harming the Mexican/Latino community in some a negative way. The white community, however, was apparently the only community in which he could find acceptance as an amputee, creating a difficult situation where his own culture looked down on him twice, once for being an amputee and then again for seeking refuge with the white community as he sought to escape the negative attitude of his own culture. He was clearly affected by the attitude that his culture held towards his amputee status as he described being called a coconut by others and referring to his experience as a lose-lose situation. Dealing with the traumatic loss of a limb in war may be difficult to deal with in and of itself and returning home to a culture that was not supportive of amputees illustrates the unique experiences that some racial/ethnic minorities may live through.

Experiencing Racism

- I was over there the year when Martin King was killed and it was some tension there because for the brothers, they took the rifles from us, in our unit anyway. Then when Kennedy was killed, it wasn't a riot but they kept everybody back in the rear. [They] confined [us] to the barracks [and took our rifle away]. We weren't very happy about that either. [I think they did that because] some of the guys wanted to start, I guess you want to call it like a race war. Me personally, I can say I was basically a quiet person. I didn't like it...I mean what the heck, we are all supposed to be the same over here and after the day was over they gave us back our rifles and everything went on as it was but you know, a lot of guys did it. A lot of brothers did have strained attitudes. Because for them it was one activity. They shot themselves in the foot and they said, hey, back in September that they said they weren't going back out anymore. And then a few others got put in Long Binh in a prison [for] just, ah, not obeying the commanding officer. [So there was some tension between the African American Marines and the white Marines.] (Mark, Marines, Black, AK).
- I believe in the United States and at [one] time I would have did anything for the United States. If they would tell me go jump off a cliff, probably would have done it (laughing) But anyway, I believe in this country real well and they did really have to lie to us to say that

we was going to save communism because well, 20 years later found out that that was the reason why we went over there and they made us or made me look like a donkey, especially since I lost my leg. Like you said it was a turmoil back in that time especially for a black person. Me being a black Vietnam Vet can't go down south to live comfortably. I say now this country is a joke. [So I resented the fact that there were still places in the United States that were not going to be welcoming to African Americans, whether they were veterans or not.] (Mark, Marines, Black, AK).

- I have no regrets. I mean there's been a lot of mistakes I've made but I have no regrets. I've tried to like just get out there and just deal with life and face it straight up every day. I'm not mad. I'm not mad about losing my arm in Vietnam and because of the situation of the black Americans here in this country, honest to God, when Barack Obama was elected president, that's when I finally felt like okay, now I know why I lost my arm. As God as my witness, that's the truth. That's when I finally felt like, okay, now I know why I lost my arm and now I'm good to go with that. But I'm not here crying the blues about being sorry about this, that, or whatever. There's numerous races of people who have went through discrimination and all kinds of being downgraded and being, oh, wow, genocide being committed against them. As a black man here, I can't dwell on that because there are so many other races of people who went through the same thing. But I'm just, really to make a long story short, I'm glad to be talking to you and telling you what I'm telling you (Adam, Navy, Black, AE).

Interactions Between Amputee, Race And Masculine Status

- [There was a cultural gap between the Mexican culture and the Anglo culture]. There was and I think that was a gap that was created, not so much I think by the white people but by the Mexican, Hispanic people. I think that the Mexican people always thought that the white people were always stepping on us and doing things to us that shouldn't be done. But I think a lot of stuff might have been just imagined. You know the old, when you're dealing with people from the back, old days—like my mother. My mother didn't like white people but I think it's just something in the mind that we set ourselves apart from other people. [So we were] Mexican and we lived also in a black neighborhood. But the black people were so nice. They're so sweet....The Mexican thing is that if you've got arm missing or leg missing or these things you're not a whole man anymore. And then if you have a leg missing and stuff and you become married and you have a daughter then well, you're even less of a man because you can't even create boys and so it goes on and I felt like that a lot that people didn't see me as a whole individual anymore. And that kind of threw me to work towards hanging around with what I call the white people, the Anglos. I felt that they accepted you for what you are and that was it. So I became one of those infamous coconuts. You know, brown on the outside but white on the inside and then they let me be as that—as a coconut. It was kind of like well, you know, you're not a man to the Mexicans. So they put you down. So then you go and be with people that accept you as you are, being the Anglos, and then the same people that didn't consider you a man and now they're calling you a coconut. So it's kind of like a lose-lose situation. You can't win (Roberto, Army, Hispanic, BK).

G7. Experiencing Discrimination

The basic definition of discrimination is unequal treatment that is usually based on prejudice about race, ethnicity, disability, gender, age, or nation of origin. While the focus of this project is on how the veterans experiences with their injury and treatment affected the outcome of their lives, the consideration of discrimination remains an important factor. Although not explored in these interviews, it's possible that discrimination may exacerbate the veteran's ability to effectively navigate the recovery process after amputation. Six of the veterans described experiences with discrimination that they attributed to their amputee status, mostly in terms of getting insurance benefits or work. Only one veteran described discriminatory experiences that he perceived was linked to his Vietnam veteran status. The following quotations illustrate these experiences.

Experiencing Insurance Related Discrimination

- [You feel you struggled as a disabled veteran in a time before the Americans with Disabilities Act was passed.] Right. One thing that just strikes me. It would never happen these days but my auto insurance company sent us, and I don't know how they found out. I don't know, maybe I had filled out a questionnaire. As soon as they found out I was driving with hand controls they canceled my insurance. The only thing that saved me was my brother, was the insurance agent so it wasn't long before they reinstated me. It happened to me. Yeah, and that wouldn't happen these days (Ian, Army, White, BBKA).

Experiencing Work Related Discrimination

- There was a guy. We both applied to be air traffic controllers. We went for a physical and we had a doctor who did the exam and he failed both of us by saying that there was no way that we could stand the stress, you know physically be able to perform the jobs and that upset both of us quite a bit. I didn't pursue it but he did and ended up working for the FAA as a flight air traffic controller until he got fired with all the other guys that went out on strike in 1981...I mean we've both since proved that doctor totally wrong. He's back flying helicopters. That's how he got hurt. He took a 51 caliber round through his leg. But he's above knee amputee and still flies helicopters. But that, you were talking about negative things in the first year, that was one of the, I just kind of shrugged it off and went someplace else. It obviously upset Tom more than it upset me...[This happened] while we were at Fitzsimons. That's probably the only time that I can remember right now where that happened to me where I felt I was being discriminated against because I was missing my legs....[There really isn't much that you have to do with your legs as an air traffic controller.] You have to walk from the parking lot to your console or unless you work in a tower and then you have to stand on your legs. You have to be able to stand and move around the tower. But we both weren't interested in that. We both were interested in working the traffic control centers, you know, the main thing where you see on TV where they're sitting in front of the radar screen (Jason, Army, White, BBKA).
- The most challenging thing really was the physical thing. Yeah. I knew I could do things but it's doing them and proving it to yourself you can do it or more importantly to other people. Like I said, the guy that hired me, he came to me one time and said you know my insurance people are really a little, there's a problem with you. And like well what's the problem? Of course, the reality was that I'm a one-legged person, climbing on ladders, working in

construction, doing the things that I had to do and that was kind of tough. I felt like I'd established myself but here he was having to justify working me in a job that I probably shouldn't have been doing...[His insurance company was concerned that he had a man with a disability doing those kinds of activities.] Yes sir. I think he, yeah, eventually he had to let me go as an employee and hired me back as a self-employed sub-contractor. Yes, that affected, I wasn't working for him anymore. That would have been 1989 or 1990, I believe... Well I think what really happened was they were going to jack his rates up and he just said to me look, if you don't mind doing it this way I can still keep you. If not, I have to let you go. So I didn't have any problem being, what they call, fortunately I was working in the state of Maryland and the state of Maryland at the time allowed me to be what they call a captured contractor. So that I could work under his license but that was it. I wasn't an employee. I was self-employed. So it was up to me. Of course I have VA medical benefits and all so I told him that's not a problem for me. If I do get hurt on the job which I, probably the worst thing I ever did was hit my fingers with a hammer or whatever but that's not unusual. I never got severely hurt on the job so that was okay but yeah, his insurance company didn't want me to be carried on their policy so he had to work something out with me and it was successful. It wasn't a big issue (Keith, Marines, White, FAK).

- I tried to get into the postal service. I took the test, passed it, and they offered me a job but they wanted me to walk, walk a lot, and I couldn't do that. They said well you can't have the job. I said well, that's not fair and I'm sure there's something -- it was a big thing. I said no, I couldn't walk. There's just too much pain involved. [The postal service] wanted me to do a walk route and I just couldn't do it...I was angry [about that]. You know, I'm a war veteran and I deserve better. You know, you gave me my ten point preference and you won't give me a job to do something without walking? I said no, no, I have an amputation and I don't have what I need to do the job. Well if you don't, then you can't have the job. And I said, well I was real angry...Once they [potential employers] heard I was disabled, yes. I was definitely [discriminated against because I was disabled]...I started out with the fire department] As fire police. Only in fire police, not as a fire officer. They didn't make me a fire officer. I didn't understand why. They just won't make me an officer in the fire department... Yes, yes. They gave me that [officer ranking in fire police]. They're prejudiced. I have to admit that being disabled has prevented me from being an officer in the fire department. I just can't prove it. I know it [my disability] has [caused this discrimination]. They've almost said it but they can't say it because then I can sue them. But yes, it's put a thing there. That's why they gave me the captainship in the fire police (Shawn, Army, White, BK).
- My goals in life changed I guess. One of my goals before I went was I was going to come back and cut meat but when I got home I couldn't find a job and I was outright told by one of them, well, the last one, that because of my injuries they wouldn't hire me. They felt it was an insurance liability to have me working there and they just outright wouldn't hire me and that's why nobody else would hire me (Liam, Army, White, BK).

Experiencing Hostility Due To Veteran Status

- We went to New York City [as a field trip from the hospital], the World War II amputees have a club or I guess out of White Plains, New York I think it was. And they took us up to New York City for a show at the Waldorf Astoria. Red Buttons, I can remember him and I

can also remember we were out standing on the street right outside the Waldorf Astoria and some hippy come up and spit at us. He was a long hair and we were about a dozen, I don't know if there was a dozen of us or not—10 or 12 amputees there waiting for our bus. So one of the guys, in fact a colored guy, took after this here guy and if he would have caught him he probably would have beat him to death, I don't know. I think we were [in uniform], yeah (Troy, Army, White, FAK).

H. LIVING WITH INJURY II

In this section the experiences that the veterans had with pain, mental health issues, experiences with addiction to pain medications, and alcohol and substance abuse are described. In the excerpts below, it is clearly illustrated that the veterans experienced an immense amount of pain upon receiving their initial injuries and continue to deal with phantom pain and phantom sensation to this day.

Several also discussed their experiences with post traumatic stress disorder (PTSD). At the time of the Vietnam war, care providers and the military were unprepared to care for veterans with symptoms of PTSD, likely because the disorder was not officially recognized until the early 1980s and mental health symptoms were highly stigmatized. Keeping this in mind it is not surprising that some of the veterans spoke of not receiving adequate mental health care upon receiving their injuries and returning from Vietnam. One veteran was even told by his physician at the VA that there was no such thing as PTSD. In addition to the establishments' not recognizing the disorder, veterans also had to confront the negative perceptions held towards PTSD as according to them other service members framed the disorder as being a mental illness which was highly stigmatized or a "cop out." Obviously much has changed since Vietnam concerning the way the military and health providers address the mental health issues of returning soldiers. Some of the veterans in this study even found meaning in helping current veterans of the Iraq and Afghanistan wars understand their experiences of PTSD.

The last section covers the veterans' experiences with medications and alcohol and substance abuse. The veterans were frequently treated with morphine, darvon and demerol and some had problems ending such medication use. Some experienced addiction to prescription medication and others suffered from withdrawals upon ending their medication usage. Some veterans also developed challenges with drug and alcohol use and in some cases addiction. It is highly likely that much of drug and alcohol use was a direct response to managing mental health challenges. These experiences are further illustrated below.

H1. Experiencing Pain

All of the veterans reported pain experiences. These included experiences with pain that occurred at the time of injury and during their recovery. It also included chronic pain conditions that were currently experienced. These included phantom pain, stump pain, back pain, and other nonspecific pains. Many who currently experienced pain, attributed the pain to their injuries. Others were unsure about the exact cause of such pain. It is possible that some of the pain the veterans experience today could be from natural processes such as aging but it is also clear that at least some of the pain can be attributed to their injuries. Of the different kinds of pain mentioned, phantom pain was the most common pain mentioned. While the majority describe it as something that hurts, such as a stabbing or pain that takes their breath away, a couple talked about phantom pain in a different way. These veterans described their phantom pain as a tingling sensation or an itch they could not scratch. For some the phantom pain was fleeting, and for others it was lasting. Other veterans clearly described more painful phantom pain and a few even stated that they have suffered from such pain since the day they were injured. Several viewed phantom pain as something that was a normal part of their life and that some days were good and some days were bad. The quotes below illustrate these pain experiences and are categorized into three major sections: experiencing pain during the initial injury, experiencing current pain in the present day, and experiencing phantom pain.

Experiencing Pain Due To Initial Injury

- Getting through all the pain was probably the biggest challenge (Bob, Army, White, AK).
- [I was in a lot pain]. Thank God for morphine (David, Marines, White, BAKA).
- [I was] pretty much [in] pain. I didn't want any narcotic shots [though]. I got to the point where I could take them, look at a spot on the ceiling and put myself in that spot on the ceiling and look down on myself to avoid the pain or circumvent it. [But] every once in a while that spike would come up through my marrow of my bone--kind of wake me up. [And] the first two weeks the burns were terrible. I can remember waking up in the middle of the night after being knocked out screaming and yelling about 18 inches off the bed [because] my wounds had oozed out, adhered to the sheets and then when I started to awake when I'd move my leg or anything else that was burned from my waist down it would just rip flesh off my body (Frank, Army, White, BK).
- That was one of the pleasures in Vietnam that I'll never forget. I'll put my pain against anybody. Any woman who's giving birth. My arm was being open and they had to stick a cotton swab along, with a long stick cotton swab, in it. Every day they did this to, I guess get out dead skin or I don't know what it was but I have never felt a pain like that. That's the only time in my life I've ever screamed. It was so bad. I dreaded it. So [my arm] was still open. They were still doing that shit although not as frequently. Finally I coaxed two--this is another dumbass military thing—over and while I was feeling numb they would do that to me and then I'd be screaming, agony and stuff, and then they'd give me a shot of morphine. Help me out I said. You know, why don't you do that before you start digging on me? Well, we can't do that because you're not in pain yet. We can't give it to you until you're in pain. Now what a dumbass reason, you know I'm going to be in pain. So you give it to me and then start digging and finally the main doctor I had did that and it was a lot easier. It was stupid policy. Uncaring people. Unthinking (Pete, Marines, White, AE).
- While I was in the hospital, while I was in the evacuation hospital, for three and a half weeks. The pain medication at that time, I found this out later; it was an alcohol drip. They dripped pure grain alcohol into my veins one drip at a time, because it was—evidently they were trying to get—that was a good anesthetic for a long, extended period of time. It had certainly deadened, taken the edge off of my pain and discomfort. I was not receiving any other pain medication. No morphine or anything like that. Once I got to the hospital, in Long Bin, Bin Hua, Tan Son Nhut, whatever. They began giving me demerol. Every four hours, and that's the drug I received every four hours, during the ten days that I was in Japan. Now that drug is highly addictive and it's highly effective. But, you become somewhat accustomed to the basis by which you have to tell time. The reason I mention that is by the time we began the evacuation process on the airplane, I'd been hit with demerol every four hours. Once we got on the airplane and we were about to descend into Brooke Army Hospital, we had hit the four hours and I was calling the nurse. I said, hey, I need my pain shot. She said, well we are in the descent mode we cannot give you any medication till we [land]... Fine, ok. Four or five minutes to get on the ground and then I said, I need my pain shot. I am in discomfort here. This is the first real pain that I have experienced since that first day. And, she said, well now that the plane has landed you are under the control of the military hospital and we can't give

you anything. You are turned over to another team. Even though they are not here, they are responsible. As a result, I went about seven hours before I finally got to the ward where I was going to be kept. And, I'll always remember, the physician when I tell him I'm pretty uncomfortable and I've got family here and all this sort of thing. And, he told me; he said, I'm sorry but that ride's come to an end. We don't have any more pain medication for you. Of course, not only was I discomfited, I was—I was really pissed. Anyone that gets demerol every four hours in the dosage I got it becomes addicted. But, what I'm saying is, I'd not felt any significant pain, and now I had it, big time. I was antsy. I was moving. I was - I couldn't be still. That's the way I met my family. Not only am I a shell of my former self. Not only had I begun to waste away as it related to my upper body definition. But, I was really uncomfortable. That's the way my family saw me. I could, I am just, I am so disappointed that they saw me in such great discomfort. As bad as I looked that first time they saw me; but, you know, what can I do about it? Now, what's the good side? Well, the good side is that I never got addicted to pain medication. I never got another pain—the only other pain medication I got was the day I fell out of my wheel chair and broke the end of my stump open. They did give me some low-grade pain medication. That was it. People knew what they were doing. I didn't get any pills or anything to take. And as it was I got over my discomfort and my pain and was able to tolerate my injury at a pretty rapid pace....I resented a long time the fact that they treated me so abruptly in my mind. But, yet, what a blessing it was that I never had the craving for drugs that other veterans are still struggling with (Willy, Army, White, AKBHD).

- I had one night in my stay in the hospital, this one night it was like, oh man it must have been damn near 24 hours of pain in my leg where my, I think the doctor told me my nerve was healing and it was like a constant toothache for like 24 hours. The only relief that I had during that night at that time the medication—all they was giving me was darvon—and the only relief I had was I went to sleep for one hour. I went to sleep the next morning at five o'clock it seemed like and when I went to sleep at five o'clock I was out of pain and it lasted until I woke up, like six o'clock. Seeing as I woke up at six o'clock and I looked around and found out where I was at, oh my god the pain came back. So it started all over again. But that's as close as I got to, you know, getting hooked on a serious drug. But I never got to anything more powerful than darvon and you know, the pain started to subside the next day and, I don't like drugs anyway. I don't like pills. So I was able to like get through that portion of my rehabilitation and I didn't have to become dependent on taking pills and drugs and stuff (Adam, Navy, Black, AE).
- [In the hospital] I was in so much pain—they gave me pain medication and things like that—so it was, I could lay there and be okay. The guys would come around and talk to me and nonsense and stuff like that. [But we received pain medication and] I think that the biggest thing back then, well I was on morphine. So a lot of the time morphine because I was, the only thing they could actually give me to kill the pain. And then finally they, I think they finally changed me over to oh, I can't even remember what the name of it. I can't even think of it. These little pills they give you (Roberto, Army, Hispanic, BK).

Experiencing Pain From Care

- I went to a hospital in Yokohama, Japan and spent about three weeks there—three and a half weeks. Then I think I had three or four surgeries while I was there...I remember they needed to take all the bandages off that they had put on me in Vietnam. So they starting cutting away all the casts and all that kind of other stuff and that was probably the most painful time that I had during the whole time...since I got hurt the whole 37 years because they, all the bandages had dried onto the wounds and although they used water and Betadine and everything up to try and soak the four by fours and the bandages off the open wounds, it still pulled on all the wounds and it was just absolutely, you know, I had some of the other kids in the ward crying I guess because I was yelling so loud because it was so painful for them to take all those bandages off (Jason, Army, White, BBKA).

Experiencing Current Pain

- I have pain [because] the scar tissue hurts. There's something wrong with the bone. I don't know what it is but the bone hurts. I'm constantly in pain. It hurts to walk [even with a] prosthesis. It never lets you forget. From the time you get up to the time you get back. It just never lets you forget (Shawn, Army, White, BK).
- Some days you could walk good and other days it hurt like hell to walk so I pretty much figured out early in the process there was going to be good days and bad days (Liam, Army, White, BK).
- You know, I have so much pain I don't know where it's coming from. Both shoulders, the neck, and then in both hips and it's getting worse. [But I don't know if it's because of the piece of shrapnel that's still in my back or not] (Roberto, Army, Hispanic, BK).
- My leg hurts most of the time. My back hurts most of the time. Going to the bathroom is a chore because now I can go, like I said, use a wheelchair, stand up and hold onto the bar so I can sit, so I don't fall and pull up (Mark, Marines, Black, AK).

Experiencing Phantom Pain

- [I continue to have pain]. You just get a different pain. Like somebody drives a spike up the marrow of your bone..[the phantom pain] tapered off after a while. After ten years or twelve years it started to get less and less. I never paid attention to it; this was a way of life. You keep it in mind and that didn't bother me (Frank, Army, White, BK).
- Phantom pain's a real bitch...[I have phantom pain]. Ever since I've lost my arm it's never stopped hurting. It's just a matter of what degree. Like I can feel it now. It feels, when it's at its mildest it feels like my left hand is really cold and when you stick it under a water tap, you know, like tap water to warm it up and how it burns it real bad, that's how it feels all the time. Then sometimes it feels like my fingers are being bent back all the way on my left hand or they're being smashed with a hammer. Sometimes it feels [like] I'm being stabbed...I thought this was something that's pretty much routine until I read about it and found out that no it's not. But I guess it has to do with the type of amputation you get and mine being rather traumatic with all the nerves would be on fire (Pete, Marines, White, AE).

- [I've experienced phantom pain] from day one and [I] still [do] today. I mean, well there's certainly phantom sensation. I mean I can still wiggle my toes. I feel like they're scrunched up and I do get shapes of pain every now and then but nothing like I did when I first got hurt but every now and then I do get a real good shipper that sends me through. You bet (Jason, Army, White, BBKA).
- I had phantom pains unbelievable that hurt as bad as real pain. I still have phantom pain. In other words, I feel foot and leg down there and it's not there obviously but those are real. I didn't have to read a book and study to be able to tell you that. But like I say I don't have them day in and day out. Sometimes I won't even notice it for I don't know how long. I might be standing up or I might be sitting down and pain will go into that foot and that lower leg and I mean it will almost take your breath. Even 43 years later. But it's amazing. If people think that's junk then they don't know what they're talking about. I've studied it and read a great deal about it and all of those scientists and physicians agree that it is real. It's not something someone fabricates (Chris, Marines, White, BK).
- [I have phantom pain]. It's weird because these things [the phantom pain] happen any time they want to. I mean they come on like static electricity and then you'd be sitting somewhere and all of a sudden it hit you and you make a face. It happens and it's embarrassing as heck. Because you're sitting there and all of a sudden you jump, you know, you kind of like static electricity kind of makes you jump a little. You make a face and you have to explain it. Oh, well just phantom pains and they get a little bit worse with time actually (Roberto, Army, Hispanic, BK).
- I've had [phantom pain] ever since day one. It's not, they call it phantom pain but I can feel my foot and all that right now. It feels like it's partially asleep. It would cut the circulation off in your leg or your foot, that's what it feels like. Tingles, itches sometimes, but mostly a tingling sensation (Keith, Marines, White, FAK).
- I do have phantom pain but to me it's like an itch-an itch that I can't scratch. And so all I can do is rub but what I do have and we haven't got to the basics on that yet, is I get this stabbing pain. I get this sharp, stabbing pain that lasts about five minutes and sometimes even longer because when it comes, it wakes me out of my sleep. When I'm driving it makes me shake so I have to pull over. It's serious. [And] that's in my leg. [Phantom pain]...That's what the doctors keep calling it. A couple of times I've had an operation on my stump. They won't operate anymore because they said it was a neuroma. They thought that might be the problem so they took a couple of them out. And my leg would be okay for about three or four weeks and then it would come back. I've had shots. I've had whirlpools. I've had heat treatment. I've had ah, well the only thing that seemed to work is pain pills (Mark, Marines, Black, AK).
- There's several different kinds of pain. There is the numbing, rolling pain and then there is this like somebody's hitting you with an electric shock and it's just boom, boom, boom, boom, boom. Those are really a struggle. And it's more or less when the weather is changing and see I just went through all that a couple weeks ago and I think the weather's changed enough now that I won't get any more until spring. When spring gets here, when it

goes from cold to warm, then I'll get them again. Then if I overdo sometimes when I'm playing ball, if I overdo then I'll get them. But everybody gets them. I mean every amputee gets them (Gary, Army, White, BAKA).

- I [had phantom pain] for a period of probably three or four years, with random occurrences is something [that] presents itself to a lesser degree, I don't know, six or eight times a year over the course of a day or two (Willy, Army, White, AKBED).
- [In my right leg] sometimes [the phantom pain] gets very, very severe. I've been going to pain clinic for years that they were treating it and helping out with some injections in my back but then a couple years ago, about three years ago, they stopped working. So now they give me morphine, which I won't take. I don't like the effects of it and I just take some Darvocet whenever it gets really bad and I just keep taking it until the pain stops or I pass out. I don't have as much pain in [my left leg and] it's not as severe as the phantom limb pain (Bob, Army, White, AK).
- Yeah, I still [get phantom pain]. They've sort of been minimized over the course of that time but I still feel those, yeah. Every once in awhile I can still feel the phantom pains. They've gone down quite a bit but every so often I do still get those (Nick, Army, White, AK).
- Yep. [I have phantom pain] Not like it was to begin with but it's still there (Troy, Army, White, FAK).
- The phantom pain to me was more of a normally five, ten minute thing. I mean it may happen multiple times during a day but it was, it was just kind of unexplainable. You were like well I know it hurts down there on the toe but you know the toe ain't there. So it was just you put up with it for awhile and then pretty soon it just kind of went away (Liam, Army, White, BK).
- That's normal. All I can tell you it's there and that's it but it's not something that I dwell on. It's just something that happens and when it happens, hey, it lasts for five, ten seconds like that—boom. Then you're on your way. The most eerie thing about a phantom pain is -- the ones that I used to get, the ones that made me feel like my arm was still there, those are the ones that are most eerie and they're the ones that are most, they're kind of upsetting because you have to adjust your mind to the fact that wait a minute. You feel like your arm's really there. But it's like a dream. Your arm is not really there but when you close your eyes you feel like it's there (Adam, Navy, Black, AE).
- [I have phantom pain] occasionally. It goes in kind of episodes where I'll have some for maybe a day or two and then I won't have it for a long time. If I don't talk about it or get reminded about it, it doesn't bother me too much. No, just kidding (laughing). But no, I haven't had as serious as some guys have. It just, it comes and goes (Eddie, Army, White, AEAK).

H2. Experiencing Post Traumatic Stress Disorder (PTSD) And Mental Health Care

Nearly all of the veterans experienced mental distress at different times in their life that they attributed to their combat experience. They used a wide variety of words to describe their distress such as “being alone, depressed, sad, suicidal, out of control, covering my back, anti-social, nightmares, panic attacks, fearing enclosure, angry, hostile, raging maniac, loss of control, confusion.” Nearly all of them also mostly self diagnosed themselves and characterize their experiences as having Post Traumatic Stress Disorder (PTSD) rather than being officially diagnosed by a care provider. Only a few described PTSD as mild and something that was not debilitating. Most described scenarios that seemed to indicate severe psychological suffering, sometimes lasting for years later and other times, emerging only after a major life changing event such as divorce or retirement. These scenarios ranged from experiencing repeated bad dreams and nightmares to feelings of rage, being paranoid (for example, seeking exits in public places), or resorting to violence against animals, and even in some cases people.

Mental health care during their first 12 months of treatment was non-existent. Some never received care across the life-span. Others received care 5-35 years later. Their experiences receiving care ranged from interacting with doctors and counselors at the VA to being institutionalized in a public mental health facility nearly 30 years later. The reasons for not receiving adequate care were multifaceted. First, there was limited psychological assessment involved in the care of the returning veteran as well as a lack of acknowledgment of mental health issues by providers. Second, the veterans themselves poorly understood their symptoms (i.e., many were unaware that their emotional feelings and behaviors were linked to their combat experiences). Finally, the stigma of war related mental illness also served as a barrier to care as many of the men viewed mental health challenges in a negative light often using negative words such as “something that Hollywood had,” those who had it were “some psycho killer II”, or were a “cop out”, and veterans “don't want to admit they're crazy.”

Many of the men finally sought care because of their peers (fellow veterans). It was often through conversations with other Vietnam Veterans that the men self diagnosed themselves which led some to eventually seek care. A couple of these veterans also talked about helping other veterans cope with PTSD, especially the veterans who are coming back from Iraq and Afghanistan today.

Importantly, PTSD was not officially recognized as a psychiatric disorder until the 1980s. As such, it's not surprising that some of the veterans reported limited psychological assessment or care upon their return from Vietnam. The quotes below illustrate the veterans' mental health experiences, especially as it relates to PTSD, and the barriers that made it difficult to get adequate mental health care after serving in Vietnam and suffering their injuries.

Experiencing PTSD

- I guess the way I dealt with it for so many years was to just put it in the back of my mind. When my first marriage came apart that's when I couldn't hide from it anymore. It was there staring me in the face every day and I had to learn how to do something about it and that might have been, it wasn't until just a few years ago that I got any professional help from the VA and that was because I went there and asked for it. You know, I recognized finally that there were some things that I wasn't dealing very well with and I needed some help [because at one point in my life] I was out of control. I still believed that I probably was trying to kill

myself...I had no one to talk to. I had no one to relate to. I was alone and so alone that I contemplated suicide most of the time. [So] PTSD is probably the worst [thing I've had to deal with]. Depression, feelings that, you know, it would be a better world without me in it (Keith, Marines, White, FAK).

- I always had to have my back against the wall. [Having PTSD] explained to me why I went off on my supervisor when I was with the phone company. I had a corner position and they wanted to move me to a more open position. The reasoning was because I actually went off on her. [So] they were kind of afraid of me at work. I didn't really know why I did it and then when I saw that was one of the things that they do [one of the behaviors of people suffering from PTSD]. You had to have your back covered which I always did. Every time I'd walk out of the house I would look to see what's out. If I'm driving along the road and not driving, just a passenger or something, I would see things. I would look for good gun positions. Where would I put my machine guns, stuff like that. I thought that was pretty normal but apparently it's not. I tried to keep things as normal as possible. I had my old bedroom back at my mom's house and the family was nice to me. But I stopped wanting to socialize with them. Like [in] 1971 it was Christmas at my mom's house and I just stayed upstairs and told them I was sick. I wasn't. I just didn't want to be around anybody (Pete, Marines, White, AE).
- I had nightmares, hypertension. I still when I eat I have to look all around me to make sure nobody's there. If I'm in a restaurant or something I'm always checking out the exits and fields of fire. It's craziness (Bob, Army, White, AK).
- [I was] drinking [and having] panic attacks. I'd wake up in the middle of the night and I'd have to get up and then my wife would come out. I'd just have to settle down and then I can go back to bed. I still have episodes and that's why I'm going up there again now because I started getting them again. I couldn't even get in the barber's chair. As soon as he threw the cloth over me I'd panic. Can't take the enclosure. Couldn't take the church pews. I couldn't take the dentist chair (Troy, Army, White, FAK).
- I was very angry and very hostile and all those things and I don't know why but people just irritated the hell out of me just by doing nothing. They would just light me up and I was a raging maniac. [I do think that was because of PTSD]. I felt like I didn't have any control over myself, over my life. It was just a big old mess of confusion that I didn't know what was going on. [I felt like my life chances were] very bleak. Very, very bleak....I was very sad. I was very, very sad...[and] one incident drove me into the woods. I was pumping gas at a service station and this car pulled behind me and they honked the horn and for some reason when people honk their horn, it just, you know, it throws you into a rage. [And] I reach in the back seat of my car and I had a hatchet and I was going to do some work on that SOB [but] it turns out it was a friend of mine. [And after that,] at that time it just shocked me that I reacted so quick and it just scared the hell out of me [so I] moved out to the country. [And my PTSD still affected me]. I was very angry. One day, we had some guineas [and] one day the guinea hens was piled up on top of my rooster. They were just knocking the hell out of my rooster. So I went and got my shotgun and those guineas never had a chance. [I

went] into a rage and I killed the guineas. I killed all the guineas and I don't know why (Roberto, Army, Hispanic, BK).

Experiences Lacking Mental Health Care

- [At Walter Reed there was no psychological care.] No. No. The only thing they did and it was mainly, he's doing it on his own. You know, as a volunteer. I remember this--a Korean disabled veteran came in. He was a double amputee that came in to talk to us about our prosthetics and what we could expect in life [and that] was helpful (Ian, Army, White, BBKA).
- [There was no such thing as psychological care]. There was nothing for Post Traumatic Stress at all when I was in the hospital. No one ever talked about it. We didn't [use that term in those days]. No, no, they never came over to me or anybody I know and says we want to put you into counseling because of whatever reason. They didn't do that. [But I do think that service would have been useful] to some of the veterans. The ones that could not accept their wounds or they had other reasons for their nightmares or whatever you want to call it. Even when I first got back, I'd wake up in the middle of the night thinking about what happened and dreaming. But that eventually went away because you got other aspects in your life that took it over. But as I tell kids today that come back from Iraq and he says well I'm having problems sleeping or whatever I said then go get some counseling. Go talk about your problems because if not it'll be there the rest of your life and that's what I tell them now. Matter of fact I just told a colonel that came back from Iraq last year the same thing when he retired. I'm having problems. Go talk to somebody. There's help at the VA. Go talk to them (David, Marines, White, BAKA).
- I did not [receive any counseling in Japan. I don't think they recognized my unhealthy state of mind because] I think they were so used to dealing with so many people in the same situation that they didn't have time for that, to be honest. You know, it took me a long time to think about that part of what I didn't get. I didn't have that at all until the time they finally sent me home. I had no counseling. The only counseling I might have been given was by medical personnel there and it was pretty much, you know, if you complained they would kind of tell you look around. There's people in worse shape than you and it was true. So, you know, in that respect I guess they helped me stop feeling sorry for myself a little bit but there was no formalized, they were too busy trying to deal with the infection and all that stuff to have time. I guess maybe a couple of evenings when I was at Bethesda a couple of nurses actually sat down and talked to me but they were young women themselves and I'm not sure they were emotionally equipped to handle that aspect of it. You know, they were so much more involved in the medical part of it. And I know it was tough for a couple of those girls too because I'd see them cry. I knew it was an emotional thing for them (Keith, Marines, White, FAK).
- [Psychological care wasn't available at Walter Reed]. I don't believe, I don't know if some got it but I don't think the topic ever came up. [But I showed symptoms of PTSD]. I'm not sure what kind of care they got or if they actually talked to anybody about it but I know there were a couple of guys who had, with their wounds, were having quite a few more problems dealing with it than I was psychologically. But I don't ever remember any counseling from

that or I was totally unaware if that was going on. I don't think I ever spoke to anybody about it there....[So] when I was in the hospital, no matter which hospital it was, the care that we got like you brought up from a psychological point of view, that was something that was lacking and something that I think was missed in the course of the hospitals I was in. I mean I thought I was in pretty good shape psychologically but I think sometimes that that was never even brought up as a topic...[Even though] I didn't think I was that bad off I think there could have been times when I could have used that kind of help, that kind of counseling (Nick, Army, White, AK).

- I think that the depression might have come in because I was trained as a squad leader. I had gone to Fort Benning, Georgia to be trained and I had intensive training and leadership and when that happened I took it all on my shoulders. What did I do wrong? I didn't do my job well because I lost three guys in this situation. So when I got back to Brooke Army Medical Center where I was discharged a few months later I dwelled on that for the whole time and I actually dwelled on it to 2005. But to go back, Brooke Army Medical Center had an excellent, excellent medical facilities but there was nothing that I could talk to anybody about this. There was no psychologists, no psychiatrists, nobody I could talk to in confidence and stuff like that...I would have loved to have had was somebody to talk to. Somebody in the psychologist/psychiatric/social worker. Somebody besides military guy, besides soldiers. And that to me it would really have been helpful in the field hospital, in Japan, and at Brooke Army Medical Center. [And I think other soldiers probably had similar psychological needs]. I would say all of them [did]. I would say all of them because I was, when I was at Brooke Army Medical Center—we call it BAMC [pronounced as an acronym, Bam Cee] —my ward, my floor was, half the floor was amputees like myself. The other half of the floor was the burn unit and so all these guys could have used something of, you know, some kind of psychiatric, psychological, or anything of those things to help them ease their mind in a way...Immediately after I got out of the hospital I was having these difficulties. My mind wasn't functioning correctly. I could tell it. It wasn't working well and I went back to Brooke Army Medical Center, the psychiatric building and I went in and told them I was having mental problems and I need some help. I need somebody to help me. And they gave me this non-commissioned officer to do the, I guess the intake and the first thing they asked me he says, are dogs talking to you? And that was about, it must have been the time of Son of Sam I guess, I'm not really sure. But he asked me are dogs talking to you and that irritated, it pissed me off like big time. They gave me bottles of pills and I took the pills but it was terrible. I mean you went from being a wonderful fellow to just being like a zombie walking...So I just quit taking the pills. I ended up in a mental hospital in Waco in '05 and I stayed there for almost 20 months and then that's when I started my road to recovery. They let me let out everything that was bothering me. I wasn't responsible for all these things that happened [in combat] and I kind of knew that but I needed somebody else to tell me that besides myself (Roberto, Army, Hispanic, BK).
- [There was no psychological care available to me in the hospital at Japan or in Philadelphia.] In '68 and '69 there was no such thing as Post Traumatic Stress because you had, what did they call it, you had a mental, what did they ah,. . . [Just] something like [a mental breakdown or shell shock] because when I got through to the West Side VA in Chicago, they told me that then they still didn't call it PTSD. They called it like a breakdown. I had a problem with

authority. I had problem with mood change. That's what they called it. I had mood swings and I said okay. I didn't know what that that meant at that time (Mark, Marines, Black, AK).

- I talked to a shrink [at the VA in Dayton]. I told them I felt like a burning inside me sometimes. It was just like if anybody talked to me about Vietnam and wanted to know, I would talk to them about it but it was just like really upsetting to me. He prescribed Valium with two refills and that was it (Pete, Marines, White, AE).
- But the one complaint that I had about the military or the naval hospitals or so forth was no life counseling when I left the military. There was never any counseling or discussions. Not just me but other folks there too. I always considered myself to be pretty strong and able to work my way through things but I knew that was a challenge for a lot of guys and myself too to a certain extent is let's just discuss these things of how we're going to move forward and what the challenges are. I see the same sort of things now with the guys that's going off this lack of, folks come into the military, they do the service, and then they're basically saying well, we're done with you now. Let's bring in a new set and send them out and then we discard them too. And so, and unfortunately I still see that sort of a thing. Again, I know that the military guys make sacrifices especially now it's voluntary. It's voluntary with some coercion to get them there too and stuff. Some need to get them there because a lot of times this is the only opportunity they have available to them to do this sort of thing. But more effort to work with the veterans afterwards and to keep that relationship and sometimes they would need to do more to reach out to the veterans than saying it's up to you to figure out how you're going to deal with this... You don't go into this thing not knowing that this may not happen. You know that it's a possibility that it will happen. And you do think about it although you put it out of your mind. You think then what if it does happen? What do I do next? So, of course the easy part is if you're killed then that solves the problem at least for yourself. But as far as, but the injuries is for their one sort of dreads but then you put it away saying well, I'm sure it won't happen. But part of the process I would think is for the military to have more of a focus on getting psychologically adjusted for moving forward (Greg, Marines, Black, AK).

Barriers To Care 1 - Being Told PTSD Doesn't Exist

- I talked to this one doctor. [I said,] you know, I read something about PTSD. He said no, no, there is no such thing. [And this was the VA doctor]. This was probably about 1975, somewhere in there probably. [He told me PTSD didn't exist]. That's what he told me (Troy, Army, White, FAK).
- [The VA] refused to recognize [PTSD.] [The] VA or any system refused to recognize it... There was no psychological help. Nobody cared, nobody said anything. You know, hey you're going to be feeling certain things and getting back in, with my leg getting back together I couldn't do anything. I started drinking. I drank heavy. Got into drugs. The whole time we were looking for help and we weren't getting it. You know, it was beyond a nightmare. One time I woke up and had my fingers around my wife's neck. You know, what is this shit. You know, we were getting nothing. There was no psychological help... I [eventually] went right to the psych people. I wasn't thinking about suicide, I was just down. Do you know what I mean? Something's got to change and I needed help and I was asking

for help and they put me in touch with this one lady. She is a psychiatrist and I was seeing her three days a week for a long time. Took me a year just to start to talk. I'd just sit there and I would say hey, you know, but she would do some talking and we'd try (Shawn, Army, White, BK).

Barriers To Care II - Negative Perceptions Of PTSD

- When I hooked up [used drugs] I didn't think I had PTSD for one thing. I didn't, no way did I have it. That was something that Hollywood had. You know, with the guys that wore the camouflage uniforms all the time and they had that look and they had their buttons on their bush hats and stuff like that. Horseshit. That was Hollywood's version of it. Some Psycho Killer II and that wasn't me. I still didn't believe it until I got together with my buddies with the Delta Company (Pete, Marines, White, AE).
- I didn't used to think [that I had PTSD] and I thought it was a cop out and I would, you know, this is a personal opinion of course. I would say 90% of the cases it is a cop out and I think the VA has, you know there are a lot of guys drawing disability for Post Traumatic Stress now that don't have a clue as to what it is. But here again this is personal opinion. But of course I've never been real good at making friends or having close friends but I don't know if that's been emphasized since I got hurt or is just the way I was [before going to Vietnam] (Jason, Army, White, BBKA).
- [It took so long for so many of the vets to get help with their PTSD] because they think that it's a mental disease, that you're crazy and they don't want to admit they're crazy (Bob, Army, White, AK).

Realizing They Suffer From PTSD

- I [suffered from PTSD] for years but I didn't really realize it until I had an automobile wreck that I tore a rotor-cuff [rotator cuff] on my right shoulder and I had a lot of pain. And then all of a sudden-and I was retired. Again I was so busy through those-while I was working those years I didn't have time to think about anything else. [But then] all these things of Vietnam and what went on came rushing back in and they didn't go away. They still don't (Frank, Army, White, BK).
- [My friend] was telling me how I am dealing with my PTSD which I refused to admit I had. He was, you got it. He explained it to me and I still refused to do it. Finally he gave me a website to go to-Veteran's website I think it was-and it showed ten signs of PTSD and my mouth fell open looking at it. I counted, I figure I was eight out of ten (Pete, Marines, White, AE).

Helping Other Veterans Cope With PTSD

- I didn't want to be her [my wife's] patient. I was afraid that somehow if she continued to provide the kind of support she was doing, you know, helping me with stuff and this sort of thing, that she would become [my] caregiver. So when I talk to these young couples I tell the guy that. But sometimes you have trouble with your wife and you don't happen to have any idea why and it may well be that she's having to help you and you resent it, because you don't want it to detract from that special, intimate relationship (Willy, Army, White, AK/BE/HD).

- I tell kids today that come back from Iraq and he says well I'm having problems sleeping or whatever I said then go get some counseling. Go talk about your problems because if not it'll be there the rest of your life and that's what I tell them now. Matter of fact I just told a colonel that came back from Iraq last year the same thing when he retired. I'm having problems. Go talk to somebody. There's help at the VA. Go talk to them (David, Marines, White, BAKA).

H3. Experiences With Medication Addiction, Alcohol And Substance Abuse

The veteran's experiences with pain medication frequently began on the battlefield when they were given morphine by the medics. During their time in the field hospitals, hospitals in Japan and transport care they were also frequently medicated with narcotics such as morphine, demerol and darvon. Several veterans described situations in which they were medicated and often became addicted to pain medications. Several also described what it was like when they ended their medication use and this frequently included descriptions of not receiving adequate detoxification care. A handful of the veterans also talked about general substance abuse that may have been directly linked to their limb-loss and/or combat experiences. These findings are presented below.

Experiencing Addiction To Prescription Pain Medication

- The biggest challenge I think I faced was when I came home and after about a month of being home I suddenly realized I was hooked on demerol and I was having shakes and everything and that was a struggle to get off that stuff or to get away from it. I mean it was sweats and everything else. [So] I hooked up with a guy who had psychedelic drugs and every time I went through a tremor I would take a psychedelic which was paoti and that got me over it. Because the paoti don't stay in your system so it just got me over it and it's like I said, I mean back then we were all kind of crazy. It's just part of the nature of the beast I guess at that time (Gary, Army, White, BAKA).
- I became addicted to demerol and when I arrived in the US] I was antsy (Willy, Army, White, AK/BE/HD).
- I was addicted to morphine right away and probably one time I had a negative thing with a nurse who basically came back one day and announced to me that I was a drug addict and that they were going to take me off of morphine. And this is while I was at Bethesda, still in the solarium where I couldn't, I couldn't get out and interact with any other patients other than the three guys who were in the solarium with me and we were all there because we all have infections that kept us segregated from the rest of the people. So anyway she came back and announced to me one night that I was addicted because—well I knew I was—I mean I wasn't denying that but when they said they were going to take me off of morphine and they were going to replace that with darvon (laughter). That stuff, after taking morphine, darvon didn't even touch the pain I had. So, that's the worst medical part of it. I had to go cold turkey from being addicted to morphine. Think about that. That had to be the most negative, physical, medical treatment part of that whole first year that I had to deal with. I was addicted. They helped me get there and then I had to go cold turkey off of morphine. Do you know how difficult that is? Well, I can tell you it would be the same as if you were addicted to heroin on the street. [But] I don't know how they would have handled it any differently. Yeah, I, at the time I definitely felt that way but I'm not sure there was a good way to deal with it. I'm not a medical person so I don't know. They tried to give me some other pain killers that didn't have no effect and I had no mental, I didn't have any support at that particular point in time. It was like I was an outcast. I don't know. I'm not sure that the people then really were tuned in on that. Maybe that's the most negative thing I could say about it is they didn't seem to be tuned into that. They knew I was addicted. They knew I was

going to be addicted. They told me that afterwards. You're hooked on morphine. [Going cold turkey worked] but I went through hell for about two weeks (Keith, Marines, White, FAK).

Ending Addiction To Pain Medication And Experiencing Withdrawals

- Well, shit happens. (laughing) It really didn't, it was like oh, you know, it was just, you know, I'm still high on morphine. They got me really high on that for three weeks. I got hooked on that shit. It was just like, you know, I had too many other things that were bothering me. I had three tubes in my side and just living itself was my main concern. [But] they gave me morphine and then they gave me demerol and that's what, the whole thing went for three weeks. The shots were every four to six hours. At first they were every four hours, then I got it every six hours and then the doctor saw I was hooked on it when I got back to the States, Bethesda Medical Center in Maryland. It was like the day after New Year's, no, it was New Year's eve when I got there but I talked to him on New Year's Day or maybe the day after. He noticed I guess I was hooked and he just stopped me cold turkey which I wasn't too happy about but it didn't really bother me that much. I got, later on I got sicker than shit and I didn't know why. But I was throwing up to the bile and all that stuff and it was like a year later after I was home watching a University of Michigan show that was on at 1:30 at night because they didn't have 24 hour television then and it was about drugs and heroin and morphine and all that stuff and he explained what the withdrawal symptoms were and I had all those. So I figure I must of went through withdrawal. What was really odd is like a week later they had to do another operation on me and they used it then for just like three days (Pete, Marines, White, AE).
- [I was getting] a shot [of morphine] every three hours. [I didn't have any withdrawal problems though]. What they did, they come in and said you're well enough to live without it and they just took you off of it. Just gave you something weaker until you were off of it completely....No more. That's it. Yeah, they took it instantly [and] you wanted it because your body needed it. You know because you're addicted to it and your shoulders are just like, how can I put it, calloused so bad from pinholes stuck into it because you don't even feel needles after awhile, or your butt. But no you get, you look at them and you go why and you figure I need something, you toss and turn and eventually you just adjust and all that goes away (David, Marines, White, BAKA).
- I was laying in the hospital. In what hospital I have no idea. But I distinctly remember one day they would give me one--they were giving me darvon at the time--and I would take one darvon and it did me pretty good. It had to be at Philadelphia. It would do me pretty decent. Oh man, this isn't bad. And I remember when they had given me morphine. Aw, let me tell you. Morphine is a great thing. It just, it, oh, really good. But I took the one darvon and within four or five days I'm up to three or four darvons in order to get the same effect that I was getting from the one darvon and I distinctly remember laying there in bed and thinking, well you know what, you're 18 years old, you've been in this hospital what a week, maybe two weeks, whatever the time period was, and you're already up to four darvons in the evening in order to get to sleep at night. What the hell are you going to do when you're 23? Because I didn't anticipate dying until I was 25. And then right then and there I said that's it. I am not messing with this stuff and the next night they asked me if I wanted my medication. I said no. And the next, it took me a week to get used to the idea. I didn't sleep. I had a

horrible night. The next night I had a less horrible night. The next night I had a less horrible night. Within a week I was back to normal. With as much as I liked, remember liking the morphine and when I've had surgeries since then I've had morphine, and the first thing that crosses, oh, man, this stuff is good. I would have been a drug addict. I would have been a druggie. I would have, only God knows what would have happened because I knew and I don't know how I knew, but I knew that I would not be able to handle the drugs and it would be too easy for me to get them which would really screw up my life more than it was already screwed up. I didn't feel the same way about booze because I always felt that, well I can quit booze any time. Booze to me was a non issue and when the time came for me to quit, it was the easiest thing I've ever done in my life even including quitting smoking cigarettes. I found it ten times, twenty times harder to quit smoking cigarettes than I did quitting drinking. So that's why I didn't take drugs (Owen, Marines, Black, BBKA).

- You know, I told you that a lot of the previous treatment and everything so far I was receiving a lot of morphine. When I got there she just cut all pain medication off and I understand why. You know, they don't want you to become addicted. But it was, just to be cut off cold like that was, it was pretty tough (Ian, Army, White, BBKA).

Abusing Alcohol And/Or Drugs

- At one time I did [have a drinking problem]. I drank from dusk till dawn and I was a heavy drinker and again I felt that it was killing me and I decided to get it under control...I was drinking before I went to Vietnam. But not like I did after I came back (Bob, Army, White, AK).
- When I first got back [from Vietnam] I guess I had [a] relationship with drinkin'. I guess that influenced the rest of my life because after my months of heavy drinking I decided this wasn't the life I wanted and so I've never really had a drink since then (Liam, Army, White, BK).
- The main thing I was doing when I got out of the hospital, well I started drinking so I was burying all my sorrows and concerns and everything in the bottle...I'd go out and party and I'd go out and drink because I enjoy drinking and I enjoy partying. In hindsight, you know, 30 years later, I said well you know what, a real good possibility that if you didn't have these injuries and you didn't have these problems that you wouldn't have drank as much as you did...[At one point I felt as though I wasn't going to live to see the next five years]. I think primarily because of my lifestyle and although I never did drugs but I was a heavy, heavy, heavy drinker. I'd get in fights. I would, drinking and driving was an everyday occurrence. I was going through a bottle of rum a day (Owen, Marines, Black, BBKA).
- But after Vietnam] I drank. I wouldn't do it in a bar. I do it in the home. I drank by myself. Killed time and the memories [of being in combat]...[Eventually] I ended up moving to West Virginia. Up there. 160 acre farm out in West Virginia. I lived out there in the woods for eight years trying to hide...[The VA] refused to recognize [PTSD.] [The] VA or any system refused to recognize it...There was no psychological help...I couldn't do anything. I started drinking. I drank heavy. Got into drugs. The whole time we were looking for help and we weren't getting it (Shawn, Army, White, BK).

- I started being a loner. I would stay home and drink and I wouldn't go out nowhere. So my interest was zero when I came back home to the States.... [I drank after being injured]. That's what happened to my first marriage because I almost, and with the nightmares and the drinking problem almost killed my first wife and she had to let me go in a heartbeat she told me...[I used] marijuana too. At that time it was, what the heck—oh, Tylenol—no it wasn't Tylenol back then it was, I forget the name but I was taking that like crazy but I wouldn't O.D. on it ...At one point I was drinking and using cocaine. Not too much in Washington because I didn't take none with me (laughing) but there was plenty of alcohol (Mark, Marines, Black, AK).
- [We were abusing drugs in the hospital.] We [just] went to the pharmacy [to get them]. How stupid can you be? We said, one for you, two for me. One for you, two for me. (laughing) It was unreal [but] they had to do something with us. They tried here, they tried there. They stuck us in the pharmacy. I said, okay, so you stick a disabled veteran, you stick a guy in the hospital. He's taking drugs and you wean him off of it and you stick him with more drugs. What do you think they're going to do? (Shawn, Army, White, BK).
- I got into acid. The first pills they gave me were something, it was called a synthetic mescaline. It's called Screaming Yellow Zonkers just like I guess the candy, the candy corn or whatever. You can get it at stores. It was about the size of a sweet tart and it was knock you on your butt mescaline. Took that and that opened my eyes somehow. I maintained a connection with the guys that sold the pills, probably for about two years maybe. I took over a hundred trips. Usually I got into LSD. As we called it, window panes was the main thing. I never had a bad trip. Not once. It was just like, it was medicating...[And] I think it had everything to do with [the fact that I was wounded and what I had experienced in Vietnam], especially the acid. I mean it really helped me put off my PTSD (Pete, Marines, White, AE).
- I was never really mentally settled....so I delayed that reaction to what would be commonly referred to as PTSD. I dealt with it. I drank. I took drugs. Whatever was there to make me forget about it, that's what I did. Never really dealt with it in the open until my first marriage went down the drain and then the reality of it was that I had a bigger problem I needed to deal with and that's where the PTSD thing really kind of came out for me...[But I was] smoking pot [and] drinking. If I smoked a joint or got drunk I was happy (Keith, Marines, White, FAK).
- [I also drank and] I don't know if I can [attribute my drinking to PTSD] or not. Ah, there's a frustration there sure. I don't know that. Like I say there's a frustration and you just get started on it I guess and then you drinking more. Whether I would have the same problem without Vietnam? Probably. Maybe. I don't know (Troy, Army, White, FAK).

Ending Alcohol Or Drug Abuse

- I've quit taking speed. I know the last time I took it the next day I'd went into the VA for some shit. I think I was working on getting my ears, seeing if they would give me anything for my ears because I couldn't hear for shit. I remember looking at the floor of the VA—it was tile--and seeing , like it had little ripples through it and they were all moving around. I

thought, I'm going to stop that shit and I didn't take any speed after that (Pete, Marines, White, AE).

- I finally realized that I was actually damaging my body and there was that also that I was being a hypocrite. I was going to the VA and the programs I was in you're not supposed to be drinking and I was just doing it on the weekend even though I would you know, patrol myself pretty good. But I just kind of, I got to thinking and I said well ah, you know, you get tired of feeling tired. (laughing) [But] I'm doing a lot better now. Although I still have bouts of depression. I mean, they tell me that in recovery that it's always, it's going to be a fight for the rest of my life's recovery, because at times I do have my bouts with depression. I don't think of, it's been several years since I thought about suicide or even doing suicide (Mark, Marines, Black, AK).
- I decided to get [my drinking] under control. When my daughters were about to go to college I figured out hey, I was going to need money to send them to the best schools. So where can I get that? Stop spending it on booze. So I quit for I think about ten years until they got through high school and through college and when they both graduated I took them to Ireland and we had a pint of Guinness...[And] I think [the drinking] might have been [related to PTSD]. At the time, I mean I was hanging out with some veterans and we were all just back from Vietnam and we gathered together and talked about our experiences and sort of worked it out (Bob, Army, White, AK).

I. LIVING WITH INJURY III

The veterans spoke of their general experiences with their families, other patients during the first 12 months, and other veterans, upon returning from Vietnam. It was common for them to mention their wives and girlfriends as the individuals who helped them the most throughout their lives. For the most part families appeared to be supportive. However, in some instances the support provided by family members sometimes upset some veterans as their families tried to help them too much. In addition to family members playing a vital role in their recovery, veterans also talked about their interactions with other patients and veterans that helped them adapt to or accept their injuries. This included interactions ranging from living with other wounded veterans on hospital wards to currently counseling veterans of the current wars.

II. Experiences With Family

The experiences that the veterans had with their families after returning from Vietnam played a role in their recovery and ability to adapt to their amputations. A few of the veterans talked about their experiences with their families and for the most part seemed to find great support from their parents, siblings and wives. Several frequently gave more credit to their wives than any other family member. A small number of veterans credited their wives with helping them adapt and live well with their injuries. Though not explicitly stating exactly what their wives did for them to help them adapt in a healthy manner, these veterans clearly benefited from the relationships they had with their wives. For example, one veteran stated his wife was the primary reason he “made it” and another stated he could not have made it without his wife. Two other veterans described their relationships with their wives as loving, devoted and supportive and/or the best thing to ever happen to him. Such statements reflect the positive effect these veterans’ relationships with their wives had on their adapting to living as amputees. In terms of their relationships with parents, it was not uncommon for veterans to talk about wanting to appear to be okay in front of their mothers more so than any other family member.

The veterans also discussed seeing their family for the first time after their injuries. Many of the veterans voiced a common theme; they did not want their families to see them in their injured conditions. Only one veteran could not specifically explain why he did not want to see his family when he was first injured. Other veterans, however, clearly stated that they did not want to be seen “this way” or did not want to worry their family by being seen before more healing could take place. Veterans attributed their discomfort at being seen in this shape to such things as having a low self esteem after being injured and feeling embarrassed by their new physical limitations. Watching the physical and facial responses of family members as they saw the veterans for the first time could be emotionally difficult. These veterans seemed to be almost ashamed of their physical state and differed from the veterans who tried to comfort their family by acting like they were alright in that they did not try to comfort their family members. This could be because the veterans who did not want to be seen in their wounded state desperately needed familial support and had an unvoiced fear that they would be rejected as less than whole men.

Families of veterans, according to the veterans had a variety of responses to their injuries, but the veterans tended to report that family treated them as amputees and felt sorry for them. This included family members trying to do things for the veterans when they usually did not want help. Instead, the veterans mainly expressed a desire to remain independent and all of the veterans who talked about family members “helping” them in this manner all eventually regained

independence as they learned to adapt to their injuries – something that they explicitly focused on achieving. A few of the veterans perceived family members who offered to do everything for them as demonstrating pity. In reaction to this, one simply tried to demonstrate he was capable himself and the other veteran reported that he never took that kind of sympathy very well.

Having the support of a spouse, parents, or other family members is clearly important to adapting to such a traumatic experience like becoming an amputee. Even when veterans did not directly credit their family with being the reason they adapted in a healthy manner, the expressions of being supported further validate this finding. While a handful of veterans talked about not wanting their families to see them in their injured conditions, a couple described how they felt about it and appeared to have somewhat of a different attitude. In these cases, while the veterans may not have wanted their families to see them in their conditions and talked about trying to appear as if they were okay. For instance, one spoke of trying to appear to be strong and tough but then breaking down when not in the presence of family or friends. The attitudes of these veterans are different than the others in that they were okay with seeing their families even though they seemed to make an effort to appear to be okay in front of them. Most of the other veterans who talked about their first interactions with their families after returning from Vietnam simply did not want their families to see them at all.

Two veterans shared a unique set of circumstances with their fathers. One veteran's father had actually served in Vietnam, Korea and World War II and experienced an injury during his service. Having the shared experience of serving in the military and the same war provided this veteran with access to a set of resources (his father's knowledge and networks) that other veterans may not have had. This unique situation appears to have been vital for this veteran's healthy adaptation to becoming an amputee. The other veteran's father was himself an amputee who had lost his arm in a construction accident. The father's ability to cope with the loss of his arm and adapt to his own injury set an example for his son and provide the shared experience of being an amputee for father and son. The shared experience, in addition to witnessing his father's struggles to adapt, provided this veteran with a higher level of support through his relationship with his father.

Some of the veterans reported that when they returned home, and sometimes while still in the hospital, their family members tried to help them do everything, or coddle them. Almost all of the veterans who discussed their families responding in this manner voiced displeasure at this type of response from the family. They preferred to remain independent and all struggled to accomplish things on their own. In general, the veterans did not like receiving sympathy or pity from their families or from anyone else. These diverse experiences with family members are illustrated below.

Being Supported By Wives And Fiancés

- My wife stayed with me for seven months while I was down there...She literally had to come in and eat breakfast, lunch and dinner off of my plate so she had enough money to have an apartment and pay for the gas to get out to see me...[Looking back at the treatment I received starting from on the battlefield to my stay in the hospital the part that was most helpful was] my wife....My wife and I are still together...She is probably the primary reason I made it (Frank, Army, White, BK).

- [When my family came to see me in the hospital] they pretty much didn't show any negative emotion or anything. My brother—I only have one sibling and he's 19 ½ years older than I am—he was with them and they also brought my fiancé. I think it was my fiancé—either that or my mother. One of my favorite desserts was pecan pie and they brought that for me and I said thanks but I have no appetite....[But my fiance was] very supportive. [My fiance's support was very important]...I couldn't have made it without her (Ian, Army, White, BBKA)
- [I attribute family factors to the fact that my life turned out so well.] Well, first of all, anything I chose to do I was going to have support in. I'm a really -- my family would have done anything; they would have spent any amount of money. They would -- anything that I wanted to do that was even possibly, remotely possible, they would have supported. So I knew that. I knew that my wife was not going to leave me. I knew that my wife was with me through thick and thin, and the idea of her bailing on me or finding something else that would compete with the affection she had for me was not something that I need fear. Not that she told me I didn't need to fear it, she demonstrated that totally committed. That is hugely important. There's nothing in my life that was any more important to the accomplishment of what I've done than the fact that I've had a loving, devoted, supportive spouse. She was part of every success I've ever had. I'm the one they put the spotlight on and that spotlight's a terribly small cone of light but she's standing right at my side and she's in the dark most of the time because people just think it's all about me but she has paid and cheered, picked up and gone after all these things that enabled me to be a success in my life. [My wife,] she wasn't a quitter and hung in there until I finally lost some of my rough edges (Willy, Army, White, AK/BE/HD).
- [I'm happily married today and] besides my kids, [my wife is] the best thing that ever happened to me. Yeah, she's had to put up with a lot. Being married to a person that has physical limitations is quite a challenge in itself and that's just dealing with the physical limitations. The mental limitations [of] when my depression kicks in or whatever, she's got to deal with that directly and it hasn't been easy for her. She deserves a lot of recognition. She's helped me a lot (Keith, Marines, White, FAK).

General Experiences With Family

- [Having my mom and wife visit me was nice]. Well, it makes you feel good and you feel good about it. I mean, your loved ones are there with you and going through everything with you and you're trying to make them, you're trying to make them understand that it's not as bad as it looks. At least I'm alive and I'm not crawling in mud anymore. So, I was basically just trying to survive and trying to get them to understand that that's how I felt about it (Gary, Army, White, BAKA).
- I had too many visitors at Camp Lejeune because I was getting well [but] I was [still] weak and people would come in with good will but they would wear me out. Of course I was trying to play John Wayne and entertain them and be strong and tough acting and looking and all this sort of thing. But boy when they'd leave I was broke down. Totally out of energy. Wet with perspiration and whatever and I said I don't need to do this (Chris, Marines, White, BK).

- [Ultimately part of why I adapted to the situation so well] was my family--like my Mom and Dad and my brothers. I have three brothers and got fantastic support from them and so on...Dad was in both World War II and Korea so he had certainly seen injuries like this before and I don't know if he'd prepared. . .well, Mom had, you know, Mom worked for the Red Cross and then worked for JAG in Germany after the war so she'd seen injuries like this before and I don't know whether she'd prepared my brothers or whatever. So they all handled it really well. If I needed help I got it, if I didn't I got left alone....[And] I really didn't get exposed to [any anti-war sentiment], except for my brother Jim who went to Stanford and got a law degree there. I got some grief from him but not much. At least he was very supportive but we would get into conversations about that stuff and he said well why did you do it (Jason, Army, White, BBKA).
- [My] mom and dad were very supportive. [And] it was great [when they came to visit me]. It was one of the best things in the world because as long as you, if you've got a loved one, a family member there, your spirits are higher and they help you go through what you're doing because they can, they're there to comfort you so it makes you feel better...I had a good network of people. [And my parents were very supportive]. Oh, they were. They were because they'd always been there. Especially after you see your sons dramatically hurt and knowing what they're going to have to face, you want to be there for them. I think it was hard and stressful [at times though]. I can put it that way. Because not knowing where you're going to go or do or how they could help make you more independent is hard. Until you realize yourself that you have to be then they have to let go, especially your parents. [So that was hard for them]. I know it was for my mom. Yeah it was (David, Marines, White, BAKA).
- I think my father when he saw me, when I looked at his face, he, there wasn't tears in his eyes but I thought he was crying. Yep. I thought it was really, really, you know, he looked at me like this was the worst thing that he had to ever do in his life and he was there for me and he stood by me and everything but I thought that when he saw me it was really hard on him (Adam, Navy, Black, AE).
- [For the most part] we never sat down and had a serious conversation about [my injury]. To this day we've never sat down and had a serious conversation about it. [So when it comes to my family,] I mean I think I could probably turn around and said well, maybe it would have been nicer if they would have been a little bit more understanding or a little bit more supportive or whatever but that's how my family was. I mean that's, they had more important things to worry about in their lives than how I made out (Owen, Marines, Black, BBKA).
- [After leaving treatment] I tried to keep things as normal as possible. I had my old bedroom back at my mom's house and the family was nice to me. [But] I stopped wanting to socialize with them too and that was, I thought, that was another thing on the PTSD thing list. You dissociate yourself with family members and stuff like that and I did that right away almost. Like 1971 and stuff. It was Christmas at my mom's house and I just stayed upstairs and told them I was sick. I wasn't. I just didn't want to be around anybody (Pete, Marines, White, AE).

- I credit my family. They were all, you know, very supportive—my parents. The community was very supportive. I was very lucky in my wife and I finding each other. I mean to find a soul mate, find a person that is right there. I mean that was very helpful. So, I think it was my family, community, and I lucked out (Eddie, Army, White, AEAK).
- [My injury was also a] challenge for [my family] but they responded well. When I arrived at Oakland my mother flew out and spent time with me. My brothers and sisters came up from Los Angeles [too]. [But] I never talked to them about what happened. I never had any conversation with anybody about what happened. The conversation that I always have [is] about what am I going to do now and what do I need to do to move forward. So my family was there for support and the discussions were always [about] moving forward (Greg, Marines, Black, AK).

Experiences With Mothers

- [My family in general was] very supportive. I was worried about my parents, my mother especially. The first time I came home and I had these prosthetics already and I sort of wanted to put her mind at ease. So I put these prosthetics on. I walked a few steps with these, with my crutches, and I'm standing there talking to her. I'm trying to act like see, this is going to be okay and I had put my crutches against the wall and I fell over straight backwards. (laughing) I said I'm okay. But, I always remember that part. I'm trying to put her mind at ease and I fall over (Ian, Army, White, BBKA)
- They made the connection and [I] called my mother and I was able to get my mother back here at home. Of course I told her I was doing fine. I'd be home in a few days and all this and all that and the other. You know, making it sound not serious (Chris, Marines, White, BK).

Experiences With Fathers

- [I learned from him] just by [watching] his example. I mean he's a three-war soldier. My dad fought in World War II, Korea, and Vietnam. He was also injured in combat and was an infantry officer so we had a lot in common. [And] my father was supportive of me in that he had some idea what I was going through but he also knew I had a pretty good attitude about it. So he was very supportive and enabled me to use any resources that he might have to try some different things. Different career challenges I had that he was able to facilitate (Willy, Army, White, AK/BE/HD).
- [After my injury] I had to adjust but I had a good mentor. My dad had one arm. He was in World War II [but] he [actually] lost his right arm above the elbow back in '53-'54 [in a] civilian construction accident. So I knew, in a way growing up, what he had to go through with his one arm so I looked at it, my dad, I told myself when I was in the Philippines, if my dad could do it with one arm and live the good life I can do it with my legs and prosper and go on and have a good, functional life and I have (David, Marines, White, BAKA).

Seeing Family For First Time

- [I became addicted to demerol and when I arrived in the US] I was antsy. I couldn't be still. [and] that's the way I met my family. Not only am I a shell of my former self. Not only had I begun to waste away as it related to my upper body definition. But, I was really

uncomfortable. That's the way my family saw me. I am so disappointed that they saw me in such great discomfort. As bad as I looked that first time they saw me; but, you know, what can I do about it? I mean I have a very loving, supportive family. I had twenty four members of my family that traveled five hundred miles to come see me that first night. So when you've got that kind of support and they're so thankful your alive under any circumstances. It's not that they were – they were just aggrieved that I was so discomforted. First of all I looked like hell and then I'm antsy as hell. I just wish that initial, first, -- you can't ever re-do that first meeting and I'm afraid for many of them that probably remained a little too vivid in their mind even though I began to make rapid and significant progress after that...[But my] parents, grandparents, aunts and uncles and cousins [all came to visit me] (Willy, Army, White, AK/BE/HD).

- I had family and friends [visit me at Bethesda]. Most of the friends that came in I really didn't want to see because of what I was. I just, I had a low self esteem at that point. I really didn't want to be alive at that point to be honest with you. Didn't want anybody seeing me like that (Keith, Marines, White, FAK).
- [It was hard after I was injured]. Especially when I first got to Walter Reed. I didn't even want my parents, my dad, to visit me. I didn't want him to see me, you know what I mean? [And that was because] I just felt, you know, I didn't want him to see me in the shape I was in. Then after he came down and we talked and we spoke and I had visits from my sister and her husband. At first I didn't want to even see anybody but that was just me personally. You know, it was a difficult thing. I think I didn't want to see them [because] I didn't want them to see me in the state I was in and it was almost like a little bit of embarrassment. Hey Dad, you know, I'm laying in bed. I can't do anything. [And when I saw my father and sister for the first time] they tried not to make me feel uncomfortable. They were just happy that I was home, safe, in one piece (Nick, Army, White, AK).
- [I wouldn't let my family visit me at the hospital]. I didn't allow them to visit me. I would not allow it. I mean one time they came down, my mom and my brother, came down to visit me and I went down and visited for maybe just few minutes and I told them I had to go to my next appointment which was a lie [because] I didn't want to be around them. [And] I don't know [why]. I don't know. I just didn't want to [see them] (Roberto, Army, Hispanic, BK).
- My wife came in looking for me [when I was at the hospital in the US] and I could see her in the doorway but she didn't know who I was. I was messed up because of burns and scrapes on my face and stuff. She tried to tell the nurse—my husband, my husband's here. The nurse kept asking what his name was. She never got to that. Finally she looked over and she recognized me and she says—him! Being so callous and hard from combat I said jokingly let me show you my wound. They were changing my dressing at that time [so] I showed her my leg [which looked as if] it was as if it was cut off by a meat cleaver and I says—here I am, you can have a pound of me: for free. And she almost passed out; went to the floor (Frank, Army, White, BK).

Being Treated Differently By Family

- Family and friends, they sort of tried to protect me, coddle me, and everything and I didn't go for that. I know I would get into some arguments about let me do it myself. You know, they were always trying to help me do this, do that and I'd, no, I can do it myself. They finally understood. He'll do it himself. I mean I adapted to doing different things. Walking, getting up and down stairs and everything. You know, I had to adapt. When they tried to help me I'd say no, I'll figure it out myself and I'll do it myself and I've been real independent ever since (Bob, Army, White, AK).
- [My family was] kind of like everybody else at first [when it came to their response to my injury]. They thought, you know, they would help me do this and help me do that and they soon discovered, I mean after the first few days or a week that it was really, I didn't need anything special. It was, I can pretty much do what I did before (Liam, Army, White, BK).
- [My injury changed me]. Not necessarily from my perspective but from [my family's] perspective. I think they were deathly afraid to say anything to me. I think they didn't know what to say, how to say it, where to say it, when to say it. I mean I could of literally sat in my mother's house and sat in that chair watching TV and never get up again except for going to the bathroom because somebody in the family would have gone to get me my Cokes, get me my water, get my medicine, get my meals, the whole nine yards. It was me that turned around and said this is ridiculous. I can walk. I can get up. I can do for myself. To me it got to the ridiculous. It was, although they never came out and said it, it was Owen is so helpless because of his amputations that he can't get his own glass of water (Owen, Marines, Black, BBKA).
- [When I returned from Vietnam] my family thought I was a hero and at that time my girlfriend thought I was a hero. I wanted, I guess they was feeling sorry for me because I lost my leg and I had to try to convince them that I still can do certain things (Mark, Marines, Black, AK).
- [When I left the hospital and returned home] I think there was many that felt sorry for me. They wanted to do everything for me. They wanted to do everything for you. I didn't want any of that. I used to say don't do it. I'll do it myself. I know one day I jumped around, you know, I hopped around and I just slide on the side of my butt and everybody was going to pick me up. I says, I can get up on my own. I think that's what it was. It was just I guess feeling sorry for me. I don't know. I never took it well. I never took it well (Roberto, Army, Hispanic, BK).

12. Interactions With Patients

Interacting with other patients played an important role in some of the veterans' recoveries. While there were a few who claimed they didn't have much interaction with other veterans others told meaningful stories of what they did with the other patients which showed that they must have had somewhat of a connection with the patients. At the beginning of one description a veteran stated, "We were just brothers stuck in hell." One veteran stated they were all making the best of a bad situation, presenting his relationship with the other patients as something that was built on the common experience of being wounded and being able to relate to others who suffered injuries in war.

One very common theme that seemed to arise when the veterans discussed their experiences and interactions with other patients was their comparison of themselves to other wounded veterans. Though they often did not explicitly state it, seeing other veterans who suffered more severe injuries than they did seemed to help them cope with their own injuries and find the strength to not feel sorry for themselves but instead adapt to their new realities. As one veteran described seeing others more severely wounded than he was, he stated, "Once you see that, you don't feel sorry for yourself anymore." It also seemed to help them realize that they were not alone as they suffered through their traumatic experiences of becoming amputees.

While there were a couple of other veterans who noted limited interactions with the other patients they were in the hospitals with, this seemed to be a result of their bed or room locations and did not reflect a lack of wanting to interact with other veterans on their part. Several veterans gave descriptions of their interactions with other patients that showed the existence of supportive relationships that they found helpful to have during their recovery. They described their relationships with other patients as supportive as they spoke of talking with other patients about their wounds, families, etc. One described it as a "wonderful, supportive, fine environment" and a couple made reference to the patients on the hospital wards as being like "family." It is obvious that the veterans who had such relationships with other patients felt connected to them since they shared similar experiences of being young wounded soldiers. There was one veteran who described isolating himself and not connecting with other patients, but clearly this was not the norm. These findings are illustrated below.

Comparing Self To Other Patients

- I was feeling sorry for myself and [there] was this young Marine who was 21, he stepped on a 500 pounder and he lost both legs above the leg. With this attitude this guy had, he had to be a millionaire now because he left the hospital before I did and after it I was saying I'm feeling sorry for myself losing one leg and this guy lost both legs and he walked out of the hospital. He didn't take a wheelchair, he went on crutches but he walked out of the hospital. I said well, damn Dave, you're feeling sorry for yourself. And so I tried to become a go-between. With the guys that was coming in I would try to talk to them not to give up which was kind of funny because I was telling them not to give up but that's what I was doing (Mark, Marines, Black, AK).
- [When I was with the other patients] we talked about our difficulties and talked about our problems, [but] I kind of isolated [myself] a little bit. I didn't get too heavily involved with anybody but I felt at ease. I almost immediately felt at home. They assigned me to my bed and I remember them talking to me about the regulations as far as light out and this and that

and I almost immediately felt at home. I felt comfortable being around all those guys, being in the same boat. And I think some of that may have been because the last two weeks I had not seen another amputee and I think the thought was in my mind, oh my god, I'm the only one in the damn world that has this problem. Then when I rolled in there and said oh, wait a minute, not only is there my ward but there's six more wards just like it. I think it put me at ease quite a bit (Owen, Marines, Black, BBKA).

- There were so many a lot worse off than I was. Once you see that you don't feel sorry for yourself anymore. We had guys that no legs and, well the worst one I guess [had] no legs and two broken arms and then he's blind too. Then his mind I think went too and he'd end up screaming at night. So compared to some of them I was in pretty good shape (Troy, Army, White, FAK).
- [At the hospital I] looked around and what I saw there, my injury was minor to some of the others that was there. Even though I was hurting there were guys there—one guy in particular was just a body. There was no legs, no arms, you know, all hooked up. There was a few of them actually that were worse than me (Shawn, Army, White, BK).
- On the bed next to me there was a guy there, nice guy, I talked to him all the time. He's paralyzed and all they would do is had him on one of those beds that you just flip over from side to side and you know, I looked at that and I thought well I guess I'm not in too bad a shape (Ian, Army, White, BBKA).
- There were some real bad wounds [in the hospital in Japan]. That's why I felt man am I lucky after seeing some of the more severe injuries. You know, guys who had lost both legs and arms and just torn all to hell. [After seeing them] I was glad to be alive and glad to have all my bodily functions. There was camaraderie [with the other wounded veterans]. We were all in sort of the same sling together and some of the guys were going to be going back to Vietnam. You know, their wounds were healing up pretty good that they were getting sent back. I felt bad for them. I think [interacting with] the other patients [was the most helpful part of my treatment]. Being able to talk things out with them and listen to their problems. They'd listen to your problems. I think that was probably the best part of it (Bob, Army, White, AK).
- There was like close to 40 people on the main ward. It was like family [and interacting with the other wounded soldiers was important and] it was beneficial. Some of it was sad because I saw guys come in there who lasted maybe a week or so before they finally died. That part wasn't very good but again, I guess at that point in time I was toughened to the idea that I was one of the lucky ones that was going to make it and that there's a lot of people they brought in there that were in worse shape than me (Keith, Marines, White, FAK).

Not Connecting With Other Patients

- We were all in the same boat [but] I was just, I was I guess fighting my own battle and I figured I wanted to do this on my own more than anything else (Jason, Army, White, BBKA).

Connecting With Other Patients

- [At the hospital in Bethesda the other patients and I] talked some. [I would say it influenced] my recovery. We were just brothers stuck in hell...So I had friends there. [And when I was in Japan] the corpsman had seen me before and some of the patients I knew. I remember waking up screaming from a nightmare around Christmas time and I apologized. The guy next to me said it's okay man, we all do it. I also remember a guy behind me at the hospital in Japan who had lost both legs and an arm. Just had one arm left. He was moaning, crying all the time and I went over and asked him if I could do anything for him. He just looked at me. Just kept moaning and crying (Pete, Marines, White, AE).
- [At Walter Reed there was] a lot of joking around. We had the run of the hospital. We would go outside and just sit around and talk. I can remember at night they would say lights out and we'd say so what. We're not going to bed and I remember we'd get up around the nurses' station and most of those nurses weren't too much older than us and they were trying to give us orders and they would call the officer in charge and he'd say well tell them lights are out and they said well they don't care (laughing). You know it really wasn't that bad. I seldom saw any veterans that really were down. I mean they were all making the best of a bad situation. [Being in that situation with other veterans was helpful in my recovery] (Ian, Army, White, BBKA).
- [I was in the hospital with] young guys'—one thing about amputees, most of them do not have other lingering medical issues. [So you] see all these guys grab-assing, singing, dancing, jiving, short-sheeting one another. Once the ward shut down in the evening about 4:30, it was like a frat house. Wonderful, supportive, fine environment, where everyone shared your experience to one degree or another. I was having a great time. There was a lot of support. I was one of three triple amputees on that one ward. So, I wasn't alone by any stretch of the imagination (Willy, Army, White, AK/BE/HD).
- [Being with the other patients was beneficial] because...you're there in a holding facility until you're well enough to go home. So you have to communicate and you talk about your experience and you talk about girlfriends and wives and moms and dads. So you become a family (David, Marines, White, BAKA).
- [The other veterans and I] went to King of Prussia Mall and there was three of us and we're all getting shoes for pylons but people just stared. They'd never seen handicapped people before and it was a trip. [And we were] real protective of each other so we just laughed it off in jokes and freaked out the straights. That's basically what we did...We were pretty much protective of each other and we made each other stronger because of it I think (Gary, Army, White, BAKA).
- I think [my interaction with the other patients] was very typical. I mean in the hospital we interacted. You know, we talked to each other. We talked about our wounds, about our treatment, about our doctors, our therapists. I mean we kind of helped each other along I guess you'd say. [And] I think [such interactions led to] a very positive outcome [in terms of my recovery]. Everybody was in different stages I guess. So you could talk to people who were healed farther along than you...[And] we all hung out together and there were ones that

had just got there to ones that were getting ready to leave that area. So, you know, you had people to talk to when you got there as to what to expect later on and how long you might be there and stuff and the treatment and the pain and whatever else you might be going through. Then as you completed that stay in the hospital, you are the one telling the new ones coming in what was going to happen. So, yeah, there was a lot of interaction (Liam, Army, White, BK).

- [There was a lot of camaraderie in the hospital and even with] the guys in the burn unit. You know, and those silly guys called themselves the crispy critters and it was like a family of amputees and bone guys. [And it helped me to be with them]. But most of these guys are in the burn unit. They were handsome young men and then you see them and they're going to go out into the community and they'll be burnt and some won't have ears and stuff like that. You know, people are going to look at them, just like they did me. Just like they did me (Roberto, Army, Hispanic, BK).
- [As far as treatment in the US, interacting with patients was the most beneficial aspect of it]. I mean when I came out, it was more [of a] peer counseling [kind of thing] that I remember as opposed to clinical things. I mean with rehab you go down and do exercises and things like that but the real rehab of dealing with things was more your peers. When I got into Denver I remember it was nice because it was cold and that felt good. [And we were] coming off the elevator on the fifth floor which was the orthopedic ward. There was a guy with one arm, both legs [missing] and he [had] a patch over one eye. He [came over to my gurney and] grabs my blanket and throws it back and he said, "I'm just checking to make sure you've got enough missing or I'll send you back." (Laughing). And he said, "Ah, he's okay. Let him in." So it was that kind of thing that was the most helpful. Everybody had either a limb that was very injured, a high degree of injury or it was missing. You know, it was slow but we're all just talking and it was the peer thing that was the most helpful because we didn't have any psychological counseling or anything like that (Eddie, Army, White, AEAK).

13. Interactions With Other Veterans

Veterans frequently spoke of interacting with other veterans after their experiences in Vietnam. A major theme of their experiences in this study seems to be their working with veterans as counselors at hospitals and other settings or working with various veterans' organizations. When asked about their associations with other veterans, some mentioned calling or visiting the individuals they served with. Yet, the veterans who gave deeper descriptions of their relationships with other veterans were all those who counsel, either formally or informally, veterans of the current wars. These veterans appear to find such work satisfying and rewarding.

On the broader spectrum of their interaction with other veterans, there were only a couple who mentioned keeping in touch with the men they actually served with. Many did however state that they belong to unit associations or veteran's organizations, although their involvement in these organizations, at least in some cases, appears to be limited. While the unit associations and veteran organizations may provide the veterans with the chance to interact with other veterans, there seemed to be little talk of their experiences together. Instead, the veterans that seemed to have the most to say about their experiences with other veterans tended to mainly be the ones who counsel current day veterans.

While some veterans reunite with one another through unit associations or veteran's organizations, it appears that there is no specific system in place that helps veterans to locate one another if they are interested in doing so and frequently relocating fellow soldiers depends on the efforts of the veteran. Lastly, one veteran made a unique claim in that he does not want to associate with veterans his age, but prefers to be around veterans of a more recent era, as according to him older veterans have more physical complaints and he finds this to be "too negative." Their experiences are illustrated below.

Not Knowing What Happened To Other Veterans

- [One of the other soldiers I was wounded with] made it but I don't know what happened to him. He's not on the wall. When he was in the hospital I wrote his parents trying to find out how is he, what's happened, all that stuff and I never did hear from them. I've searched, I've found a couple of Williams in Maine. That's where he's from. But I haven't called because sometimes it's hard to do (Pete, Marines, White, AE).

Keeping In Touch With Other Veterans

- I've just started [keeping in touch with the men from my platoon] recently. The first time I contacted one of them was in oh, maybe '72 or something and I was reading in a Marine magazine and I saw this inquiry about this fellow. It was about a friend in Vietnam. Anyway I got on the phone and located him and he was living in Arizona. So I would call him at least every Christmas.[He was a really] great guy and a good Marine and it just broke my heart when I got [a] letter from the company commander saying that he had stepped on a mine and they had taken both his legs off. So I was inhibited for awhile but I called him and we talk now at least monthly. He's planning to come to see me this fall or this spring...it's good to talk with him and I've talked with a couple of others since then...(Chris, Marines, White, BK).

Not Wanting To Associate With Veterans

- [I didn't join any veteran associations because] I find that sometimes it's too negative...I try to stay away from negative things and sometimes a lot of complaining [about] pains and aches and stuff like that [goes on]. I actually venture to hang out with the younger [veterans] and the reason I do is because they don't suffer so many aches and pains and they don't complain about anything else. They're easier to work with [because] they don't have any gripes yet as we the older guys [do] (Roberto, Army, Hispanic, BK).

Counseling Veterans

- [I work at the VA and I counsel some of the veterans but] not in an overt way. I mostly do it by example. I don't sit at my desk—I mean I do but I get up and I'm walking around a lot. I'm up and down and all over... The guys see how well I do or how I'm able to move around and maybe something for them to work towards. But I haven't ever done any overt counseling [but] people come to me for advice or I notice some guy and his attitude and I tell them what they're going to be getting themselves in for if they have an amputation...I tell them it's 95% attitude and how much work you put into it is what you're going to get out of it (Jason, Army, White, BBKA).
- [Sometimes I go to Walter Reed.] Most of the time it's when someone contacts me about an individual that they think would benefit specifically from having me visit them. A multiple amputee or they just think that life cannot really have any meaning for them—so I get to tell them about all of the stuff I do. How I'm enjoying life. How I cope...I try and encourage them to not rule anything out, don't close any doors. Don't eliminate something before you look at it—first, second, third, fourth, or fifth try before you decide I'm not sure this is going to work for me (Willy, Army, White, AK/BE/HD).
- I was a veterans' counselor at Hagerstown Junior College for six years and I had to help other veterans get their VA bennies and to be honest with you that's when the clouds really started to lift [and] I had self esteem. I would have worth. I had value. I meant something to the people I was helping and in turn that helped me because that was maybe the biggest obstacle of all in looking back on it. It wasn't the physical part as much as the mental part of it (Keith, Marines, White, FAK).
- I've done nothing but work on veterans' problems probably the last 25 years or so. [And that's been a good outlet]. I've been the State Commander for the Purple Heart and the Sergeant in Arms for the DAV. I've been an officer and done a lot of different things. I volunteer now over at the Indiana Veterans' Home. I do one-on-ones for guys who are feeling down (Gary, Army, White, BAKA).
- I've met veterans here in our town that come home from Iraq and I listen to them and I says, you know buddy, you're going through the same thing I went through. I says, just keep on trying. I says, don't give up. It's a long, hard fight but eventually you do win (Shawn, Army, White, BK).
- [Today I'm a counselor at the VA hospital in San Antonio. I counsel] wounded vets or those with Post Traumatic Stress Disorder. [I enjoy working at the VA] immensely. [It's] the best thing that ever happened to me. [And I think I am making a difference]. I got credited with

preventing three suicides by counseling and that to me was kind of holy moly. The doctors asked me how did you...prevent these suicides. I mean what did you do? I said well I don't know. I just sit here and we just talk and talk and I guess something hit somewhere. So I feel very enthused and the staff seems to be very happy with what I do with the veterans (Roberto, Army, Hispanic, BK).

- [I like working with the VA because] --being a disabled veterans' advocate I've often felt that I have been able to relate a whole heck of a lot better to these guys and gals than a nondisabled veteran. And there are veterans out there who work for other organizations and with my organization that do not have catastrophic disabilities. And...It doesn't make them less of a service officer. It doesn't make them less knowledgeable. They have to know the same laws and rules and the regulations as I do. But I think I had a little bit of an edge as far as when these veterans call and they're all aggravated and they're all upset and they're all nervous and they're perturbed and whatever. I think I can relate to them a little bit better than the guy that doesn't have disabilities because I've gone through the same thing. I think that helped me in my career and it feels good to be able to help some of these guys and gals and place them in a position where maybe their lives are going to be as productive and as good as my life turned out because I was able to help them just a little bit. Maybe get them that educational benefit. Maybe get them that vocational rehabilitation. Get them that housing grant. Things in that category. And I can relate to how difficult it is for them to adjust (Owen, Marines, Black, BBKA).

J. OUTCOMES

All of the veterans were asked to describe both negative and positive changes in their life that they attribute to their injuries. Negative outcomes included being disabled, experiencing negative health outcomes later in life, experiencing hopelessness, personality changes perceived as negative, PTSD, and not being able to stay in the military. Positive outcomes included, being closer to people, becoming mentally stronger, seeing the self as a better person, staying healthy, getting an education, and leaving Vietnam early. These experiences are described below.

Not every veteran discussed his life expectations in terms of what he hoped to do after serving in the military. With a couple, however, it did appear that they initially wanted to make a career out of serving in the military which can be seen in the excerpts below that are two of the veterans' answers to what motivated them to enter the military. These veterans are unlike most of the others who were either drafted or joined willingly before the draft because they knew that they would eventually have to serve. Instead, these veterans were clearly motivated prior to the draft to join the military for one reason or another.

For some, their injuries had a major impact on their outlook on life. Two veterans seemed to be in a state of bleak hopelessness as the excerpts below show their inability to have positive thoughts in the months and year following their injuries. One veteran also faced unique challenges as he faced a situation in which his masculinity was questioned by his Hispanic culture because of his injury.

Lastly, the veterans described their experiences of disability and what it was like to adjust to being disabled in addition to health issues that they are facing as they find themselves in the later years of their lives. This includes having to use wheelchairs, railings, etc., and experiencing physical pain. Also, the veterans health appears to be affected by the fact that because of limited mobility they are not as active as they would otherwise be

J1. Negative Life Outcomes

A few of the veterans could not attribute any specific negative changes that had taken place in their lives as a result of being injured and serving in Vietnam. Even when specifically asked, some could not think of any negative life outcomes due to their injuries. For others, however, there were multiple aspects of negative life outcomes that the veterans referred to when discussing the negative changes that have taken place as a result of their injury and war experiences. When explicitly asked what negative changes they attributed to being injured a common answer among the veterans was their referring to being disabled and therefore limited in terms of mobility and ability to do physical activities. The restrictions placed on the veterans by their amputations clearly caused frustration and hopelessness in some of them. A couple talked about negative health outcomes later in life such as heart disease that they attributed to their injuries. Some also described experiencing mental health problems, personality changes that made them less sensitive people, feelings of general hopelessness and PTSD. Another negative outcome for a few of the veterans involved their not being able to remain in the military. These veterans intended to make a career out of being in the military and not being able to do so was obviously something that they struggled with. These findings are illustrated below.

Being Disabled

- I've been disgruntled about it and of course I miss being able to run. I've had the urge to run. I still do. Even at this age, 67 years old. I'd just love to take off and run but I can't do it (Chris, Marines, White, BK).
- I wish I could walk more, run more, or bike more than I've been able to do and that's the worst. The obvious physical limitation is there and that's the worst (Keith, Marines, White, FAK).
- [There are some negative consequences of my being injured]. [I] can't play the guitar. Can't drive a manual stick. I'm a Corvette person...All my Corvettes have had to be automatics and Chevrolet for some reason doesn't always make automatics available with every engine combination (Pete, White, Marines, AE).
- [There are some negative changes that have happened as a result of my being injured]. [There are] a lot of things that I would have liked to do physically with my family, with my friends, to participate in things on a daily basis and stuff like that or when I'm traveling. You know, it's not as easy as just getting up, walking, and maneuvering in the city, just the physical way of getting around. It's not as easy to get around. That's the drawback I think (Nick, Army, White, AK).
- [My life opportunities changed because of my injury]. Oh, [they] changed a lot. I couldn't do what I wanted to do. Even though I didn't know what I wanted to do, I still couldn't do it. The limitations became overbearing (Shawn, Army, White, BK).
- [One] thing that I think about quite often is not being able to do things with [my wife like] hiking through the woods, roller skating, skiing, physical things that I am restricted [from doing] that I know she enjoys doing. I wish I could do those things with her. A nice leisurely walk through the park, you know, just her and me. Can't do it (Owen, Marines, Black, BBKA).
- Now that I'm getting older I'm confined to a wheelchair. I think back to how I used to run around and I could wear all kind of shoes back then but now I have to have a certain shoe. My leg hurts most of the time. My back hurts most of the time. [Even] going to the bathroom is a chore (Mark, Marines, Black, AK).
- I am not nearly as active [as I was prior to the amputation]. When I was at Washington DC and [wanted to I would] walk over [to the city and] Arlington Cemetery all in one day. [It was hard not being able to do those types of things. It was especially hard when my kids were born because I wasn't really] able to carry them around. [So my injury] definitely affected my ability to enjoy certain things (Greg, Marines, Black, AK).

Experiencing Negative Health Outcomes Later In Life

- Well, I had a heart attack in 2003 I think it was and [I've been] reading on the internet about amputees and that sort of thing. It says they're now kind of linking health problems and heart problems to the amputation because of lack of exercise. So I don't know whether to

say that's true or not. I know I don't get as much exercise as guys that have two good legs that can get around good. Yeah, I've really went down health wise. To me now, if you say let's walk up the street here a block to the restaurant, I'll drive. I can't walk a block (Liam, Army, White, BK).

- Ten years ago or so they discovered syringomyelia. [And that's the problem with my] spinal cord. That will kill me or paralyze me. That's the thing that really scares me right now. I've not been frightened of anything more than that in my life. That is--I don't want to go to a vegetable...I won't go to a vegetable let me tell you that. [And this is directly related to my injury]. Yes [it is]. I say yes, they say no (Frank, Army, White, BK)
- [Keeping my] weight down and exercising [are still challenges for me today] (Greg, Marines, Black, AK).

Experiencing Hopelessness

- [The first 12 months after suffering my injury I saw my life chances as] very bleak. Very, very bleak. I didn't see anything positive coming my way. Nothing...[And] I think it was my state of mind [that made me feel like that and not an actual lack of positive opportunities]. I think there was a lot of opportunity but my state of mind wouldn't let me do any of those things (Roberto, Army, Hispanic, BK).
- [After being injured] I didn't look at life as filled with opportunity. I was just going through the motions of living and I don't even know if what you would call what I was doing living. It was just kind of existing. In hindsight I look back and I say wow. One of the biggest mistakes I ever made in my life was not getting an education and not going back to school and getting that education and becoming a, you know, a lawyer or a doctor or a prosthetist or something. I had absolutely no desire whatsoever to do anything. Nothing. I didn't want to be anything. I didn't want to go anywhere as far as a career is concerned (Owen, Marines, Black, BBKA).

Personality Changes

- When I was a youngster I was easy going and very considerate, kind. I wouldn't do anything to hurt people and when I came back [from the war] I was just the opposite. If you lived on the street there and you needed help I'd just walk by and didn't give a shit. [That was my attitude after my experiences in Vietnam]. It [was] just, tough shit, let's go and when my parents died I was like oh shit. Shit happens... [But I've changed since then]. If you sit here my eyes are kind of wet but that's the new me (Roberto, Army, Hispanic, BK).

PTSD

- [Some] negative changes [I've experienced as a result of being injured are] my PTSD, [which] is probably the worst, depression, feelings that, you know, it would be a better world without me in it (Keith, Marines, White, FAK).
- It [negatively] affected my kids and my wife --- and keep in mind my wife was part of this with me. So she's not too far removed with me in her mental attitude (Frank, Army, White, BK).

Wanting To Stay In The Military

- [My life chances were changed by my injury]. I wanted to stay in the Marine Corps. I was gung ho. Thought I was going to stay in the Marine Corps. Even got the opportunity a year later to go visit the chief of staff of the Marine Corps and discuss it with him and the secretary of the Navy was going to change the policy and by then my son was born and I was already working. I was working while I was on convalescent leave. I was an insurance agent. I liked that pretty good and then finally in '67 I got orders that I was going to be medically retired from the Marine Corps. Well I didn't give up the fight because as I say I was called back to the headquarters of the Marine Corps in '68, talked with the chief of staff and we talked and I couldn't make up my mind. He said take your time and think about what we discussed and all that. So I wrote him maybe three or four weeks after I got back in probably in April of '67 and declined the opportunity to go back in (Chris, Marines, White, BK).
- When I was still at Bethesda Naval hospital they sent the Under Secretary of the Navy around for a visit one day and I wanted to stay in the military. He came up to me and asked me if there was anything he could do for me and I said is there any way I could stay in the military. I'd like to make a career of it. And of course at that time if you were an amputee there was practically no way they would even consider it. So I guess that hit me like a ton of bricks because I felt like I still could have, physically I couldn't have done what they expect but mentally I could have with the right education and training I could have still been a successful career military person which was what I had considered. And that was like the last brick. When he told me that there was no way that could be done I guess that maybe that was the worst part for me. It was like, not even the military wants me now. So what good am I? That's the way I felt. That's the way it hit me (Keith, Marines, White, FAK).

J2. Positive Life Outcomes

The veterans who spoke of positive changes that they attributed to their being injured talked of various aspects of their lives, with relatively few experiencing the same positive changes as others. Although differing in terms of whether the changes involve actual action, such as being involved in support groups, or mentality, such as being able to empathize more with others, three of the veterans talked about a positive change which involved their relationships with people and mentioned being able to better empathize with others and becoming members of a disability movement to help other handicapped people and also of becoming friends with other veterans. All three aspects somewhat involve being closer to people or being able to relate to people in a way that they would otherwise have not been able to experience had they not been injured. A couple of the veterans talked about a positive change in believing that their injuries made them stronger in one way or another. This involved the aspect of being mentally strong in terms of coping with the hardships of life. The rest of the veterans held different beliefs as to what positive changes they could attribute to their injuries. Such positive changes ranged from getting an education because they could not work in physical jobs all the way to being thankful for the injury since it limited the time they had to serve in Vietnam. The changes mentioned also included being more aware of health issues. These findings are illustrated below.

Being Closer To People

- I now have empathy for people who only have one arm or one leg or [are] disabled in general. It's given me more of that (Pete, Marines, White, AE).
- [A positive change that I attribute to my being injured would be my] getting involved in the disability movement with a lot of people that have disabilities. I'm pretty involved in that. I started an amputee support group here back in 1988 or so and I've been involved in different organizations like that and opened doors for the handicapped. I think that's probably one of the most positive things that have happened to me because of my injuries. Got me started in working with these people (Bob, Army, White, AK).
- Probably nothing too positive I guess other than I'd say my good vet friends, you know, and [the] reunion thing is a good thing too. But the rest of my life, it's hard to come up with anything positive about it (Troy, Army, White, FAK).

Becoming Mentally Stronger

- [My injury has] just made me stronger. People cry and whine about the rain or little injuries and I just look at them and kind of shake my head. I mean I understand why they're saying it but life goes on and you ain't hurt that bad (Gary, Army, White, BBKA).
- I would say [a positive change I attribute to my injury is that] being injured has forced me to do things more mentally. Rather than being the physical person out there doing the work, I've learned to be more of the one leading. So it's like I don't have to do the physical work now, I do the mental part (Liam, Army, White, BK).
- [My injury ultimately] taught me that I could deal with challenges pretty well. It showed me that I could deal with challenges and extreme challenges and keep moving forward. [Even when] I didn't know exactly which direction I was going [in in life I] always looked to the

next step. Whether it was career wise or whether it was where I'm going to live or what am [I] going to do this weekend. I [just] keep looking forward and I've never had any doubts that I would continue to do fine. I was always positive from that perspective (Greg, Marines, Black, AK).

Seeing Self As A Better Person

- I'd have to say that I am the person I am today because I'm a better person for having to have to learn how to deal with [my injury]. I was one of the lucky ones. I was lucky that I lived and I was lucky that I learned how to live with my disability...[And as far as how I learned to deal with my disability] there's no real quick answer for that other than like I said self esteem, friends who treated me no different than they had when I had two good legs. Probably went a long way in helping me accept what had happened to me and moving on...Whether Vietnam was a good or bad thing, you know, only history can tell. For me I'd say it was good and bad. It made me the person I am today which I probably am a better person that I would have been if I had not gone in the service and had managed to do some other things. I don't think I would be the person that I am (Keith, Marines, White, FAK).

Staying Healthy

- Probably the biggest [positive change that I attribute to my being injured] is just being aware of trying to stay healthy. I wished I'd started a lot sooner and not done some of the things I did. Made me aware of how blessed people are when they're not disabled and then what you have to deal with when you are (Keith, Marines, White, FAK).

Getting An Education

- Positive? I know [my injury is] what drove me to go to school and get an education so that's a major positive. I think that that's what drove me to go to school. I'm not sure that I might have gone to college, you know, had I just had a job and worked my way up that way. But that's a positive (Nick, Army, White, AK).
- You know, I would say that because of the injury, you know I'm not sure if I'd of came back from Vietnam uninjured if I'd have went back to college. With the injury I knew that I had to get a college degree in order to be able to support myself and have a good chance for a regular life or a full life. I'd mentioned this one friend I had and we're still, he lives in West Virginia and I send him a Christmas card every year and he usually calls me about that time—he never got a job. He never went to school. He just lived off his veteran benefits. He was active enough because he did golf but he just never went and worked. I had made a decision early that I was not going to sit around and just draw my veterans' pension (Ian, Army, White, BBKA).
- I'm not sure where my plans were long term. I don't think I had them before I went in but I knew when I came out that I don't think I could just do, I mean certain things, certain jobs, certain things I couldn't do. So I knew basically that if I wanted to try and be a success or successful in life that I had to go to school and have an education and stuff. I didn't think I saw much of a future myself in the job that I was doing. That's why I up and just quit one day. Just walked away from the job (David, Marines, White, BAKA).

Leaving Vietnam Early

- Yes [there are positive changes that occurred in my life that I can attribute to my injury]. I tell people losing the leg was actually the best thing that happened to me because I didn't have to go out and face the world like everybody else did and it's sad to say but I think that's what saved my life because I think if I'd served my 12 months in Vietnam I would have come back just as bad as I did after I lost the leg. Because I lost my three guys and probably lost more and I would probably have suffered worse than what I suffer now (Roberto, Army, Hispanic, BK)
- [But even with the other patients in the hospital in the US,] there were quite a few of us that didn't spend much time in Vietnam. [I do believe that] we were better off getting hurt and coming home than having to spend a year over there. [I feel that way after having seen] what people looked like and what happened to them after a year over there. PTSD and that kind of thing [concerning one's mental health was affected by not having to serve the entire time] (Eddie, Army, White, AEAK).

J3. The Biggest Challenge

One of the final interview questions asked “can you describe the most important challenging thing, if any, you have had to deal with because of your amputation, and what makes it challenging?” In response to this question, the veterans cited several major challenges including, having to adjust to using a prosthesis, learning to walk again, adjusting to limited physical activities, not being able to have children, needing patience, managing pain, learning to fit in, dealing with drug and alcohol problems, overcoming the fear of falling, losing motivation to go on, and dealing with the loss of not being able to stay in the service. Many of these themes were previously elaborated on by several veterans. Below, I cite those quotes of the veterans who identified such themes as the biggest challenge over their life-course that related to their limb-loss.

Adjusting To A Prosthetic

- [The initial challenges that I faced during the first 12 months of my recovery included] finding a prosthesis for my, well for both feet that were, that would give me the stability that I wanted and like I say I didn't do real well on the standard BK prosthesis until I learned that there was such a thing as a thigh lacer. Just getting comfortable on my legs [was a challenge too] (Jason, Army, White, BBKA).
- The most challenging [thing I faced after my amputation was] the aggravation of having to go get new legs. The get ill fitting after awhile and they break. Because if you use them they just don't hold up and I've always been active. That's aggravating. But its a routine thing. That always aggravates me (Chris, Marines, White, BK).
- [Learning to walk with a prosthesis] was the biggest problem and when I went to work at UPS I had to be able to carry packages and move them around and do that kind of thig. The biggest challenge at that point was getting a leg that suited me. I was getting more confident but I had a prosthesis that did not have a locking knee in it and that was probably the biggest challenge (Keith, Marines, White, FAK).
- [The greatest challenge I encountered on my road to recovery during the first 12 months after being injured] would have been the prosthesis. The prosthesis. The prosthesis and I guess no counseling but at the time the prosthesis was the main thing because they were awfully painful (Roberto, Army, Hispanic, BK).

Being Limited In Physical Activities

- [The most challenging thing I've had to deal with since my injury] is not being, you know, the thing I mentioned earlier about the aggravation of not being able to do as much as I want to do and particularly since I've gotten older...The aggravation and the limitations [that such an injury] puts on you [is a challenge to deal with]. Even though I'm thankful that I'm able to go and do what I've been able to do and still am, I still get those days when I wear out quicker and have to sit down, have to slow down, because of that leg. I'm not happy about that and have been right along (Chris, Marines, White, BK).
- The most challenging thing really was the physical thing. Yeah. I knew I could do things but it's doing them and proving it to yourself you can do it or more importantly to other

people...[Another major challenge is just] not being able to do a lot of the things I wish I could still do like run, walk, play golf better. [I occasionally play golf] but there's limitations with the walking if [I] swing, if it's all arm...it's not pretty. But I never took the game so seriously that I didn't get out and having fun just whacking the ball with a couple of friends of mine. But it did bother me. It still does bother me. I wish I could do more of that. I wish I could walk more, run more, or bike more than I've been able to do and that's the worst. The obvious physical limitation is there and that's the worst (Keith, Marines, White, FAK).

- Exercising is a challenge. [When I got out of the Army I weighed about 145 and] since then I've ballooned as high as 230. I've dieted a couple of times where I've gotten down to like 190 but part of the dieting is you have to be able to exercise in order to maintain your weight and that has been a big challenge for me (Jason, Army, White, BBKA).
- [The greatest challenges were aggravating to me.] Well, probably the most aggravating were tasks which required the use of two hands. For example, taking the link out of a watch band which caused--you know those teeny tiny little pins that hold the band in. Well, that's not that big a deal for most folks. [But for me it was difficult,] it was a huge tedious thing (Willy, Army, White, AK/BE/HD).
- [The biggest challenge I had to deal with because of my injury was] probably farming. That is a physically demanding job and I did that for about 11 years and I guess I got tired of it but that was probably the biggest challenge (Troy, Army, White, FAK).
- [The most challenging thing I've had to deal with because of the loss of my leg is,] I guess just getting around some places anymore. I mean, even back when I was doing hunting, you know, when it came to really rough terrain and stuff it took me longer to get around through it (Liam, Army, White, BK).
- [One challenge] that I think about quite often is that not being able to do things with [my wife,] as far as hiking through the woods, roller skating, skiing, physical things that I am restricted to that I know she enjoys doing. And she does. I mean she goes. We'll go to a little ski lodge. I'll sit in the lodge. She'll go skiing and I'll kind of watch with binoculars or whatever and all this. But I wish I could do those things with her. A nice leisurely walk through the park, you know, just her and me. Can't do it. If I do it by the time we get to the other end of the park you're going to have to call the ambulance for me because I'm going to be in so much pain and my legs are going to be so messed up. That is probably, it is one of the top things as far as when I think about the bad things as far as being an amputee is concerned. That's one of the first things I think of. And same with my kids. Being able, when my kids, playing baseball or soccer or baseball with my kids was the same thing. I always felt bad about that. And that certainly, my kids and my family, they realize that I can't do that, whatever, and they've never said anything. It's all been in my thought process as far as, you know, it would have been nice if I would have been able to do that (Owen, Marines, Black, BBKA).
- But during the first [12 months], just getting accustomed, okay, to the limitations that I had. Again, I learned to walk—although it was above the knee—I learned to walk very well for an

amputee and that was a challenge. I took everything on as a challenge of sorts and that was a challenge to do that. Just getting accustomed to the fact that I, you know, had physical limitations (Greg, Marines, Black, AK).

- Ah, well I've always thought of myself as being optimistic and wanting to work through challenges and liking challenges. Challenges are fun to have in a sense and being disabled, I am, if I want to do something like let's say back when I was in agriculture we had a backhoe. So, and it has four levers and I had one and a half, because I could hook my prosthesis on one of the levers and I could work two with my right hand and then I just fixed up a pedal for my right leg to operate the other one. So, I figured out how to run the backhoe. So it's things like that that are a challenge and modifying agricultural equipment so I could use it or buying—do you know about fruit trees and things like that? (Eddie, Army, White, AEAK).
- The biggest challenge I've faced in light of my injury is] probably my weight and being able to exercise. [Also,] the limited mobility [is a challenge]. Again, sports had been a way of life for me. To all of a sudden have that come to an end at 22 years old [is] a big deal. And that was a challenge. [Sports constituted] my social interaction with other men. It was a matter of let's go play some basketball or football. Or let's go jogging or whatever. [And suddenly] that was a thing of the past. Now what's the social interaction and things along those lines? It's got to be something different. [So] the biggest challenge was just how [to] handle [the physical limitations]. [But] it's always been a challenge and still is. The challenge now is how do I move into my older years dealing with this physical disability. And that's always been a challenge and it doesn't get any easier with age (Greg, Marines, Black, AK).

Learning To Walk Again

- [During the first 12 months the greatest challenge that I faced in my recovery was] learning to walk again (Ian, Army, White, BBKA).
- The biggest challenges didn't come until actually I went, I went actually through the actual amputation. Then it became a challenge. [During my first year of recovery,] the biggest thing [was learning] to walk and never getting down (Shawn, Army, White, BK).

Not Being Able To Have Children

- I had to go home and tell my wife after the VA, after the third procedure, that there was no sperm and I can remember her slamming the door in my face. I was standing on crutches with one leg outside the door. [The most challenging thing I had to deal with after returning from Vietnam was] telling my wife we won't have any kids (Frank, Army, White, BK).

Dealing With The Pain

- Getting through all the pain was probably the biggest challenge. I had no problem accepting what had happened. I was okay with that. I was just glad to be alive and I just said hey, life is here--live it. And I tried to live it as best I could (Bob, Army, White, AK).

Needing Patience

- I need patience and I think I have a lot of it. You know, if I'm going to do something it always takes me longer to do it than it does someone else, generally. Like if I am going to the grocery if I'm bringing in things I can't bring in as much as other people and I have to sit it down before I open a door and pick it back up and take it on in and that, you know, you need your patience for that to keep doing that all the time. It just takes more time to do it. As my last, my latest wife, once we had a fight and she says you don't have any patience. I said I use my patience all the fucking time. I have patience (Pete, Marines, White, AE).

Wanting To Fit In And Be "Normal"

- You know the most scary thing is to go out by yourself and you go to a night club where everybody's dancing. The fear factor gets really high at that because you don't know the perception of people, you know, and it took a long time for me to get over that (Gary, Army, White, BAKA).
- I missed out a lot of, while I was away a lot of my friends were getting jobs and living, you know, the out of the high school, we're not in high school attitude anymore lifestyle and I guess I missed out on some of that so I was trying to make up for some lost time there. That was probably the biggest challenge because I was still trying to mend my mind that I could be normal. If there was a normal anymore (Keith, Marines, White, FAK).
- I think the biggest challenge I had was trying to fit in, trying to fit in, trying to get, be normal. Whatever the heck that is (Roberto, Army, Hispanic, BK).

Using And Staying Away From Drugs And Alcohol

- The biggest challenge I think I faced was when I came home and after about a month of being home I suddenly realized I was hooked on demerol and I was having shakes and everything and that was a struggle to get off that stuff or to get away from it (Gary, Army, White, BAKA).
- My staying away from drugs was a significant issue when I was in my twenties. Even to this day, I mean I can go to the VA and I can pretty much get any type of pain reliever or muscle relaxant or anything that I want. I had decided from the very, very beginning that I was not, unless I absolutely positively had to, going to take drugs, take pain medications, take muscle relaxants, anything like that unless I absolutely positively had to. I've had three or four surgeries over the years and the medication that they give me for pain, when I get discharged from the hospital, when that runs out that's it. I'm done. Okay. That was real difficult for me because drugs were everywhere. Not only that, but I could have gone down to the VA and not only gotten drugs for my own personal use but to sell them. When I was in my twenties, that was difficult. I think it's probably one of the best decisions I ever made... Because it would be very easy for me to really get addicted to those things. So that was one of the toughest things when I was in my twenties and one of the things that I feel that was a really, really good thing (Owen, Marines, Black, BBKA).

Fearing Falling

- I was so afraid of falling backwards. Sitting in that, you've got to understand my stump's only three inches on one side and ten inches on the other and I'm top heavy and I, it's like I would fall backwards. I mean it was real easy to tip over backwards in the chair and it took me a long time to get over that fear (Gary, Army, White, BAKA).
- Coping. Doing things differently. I just had a fear of falling and once I fell I overcame it and I said well it's not as bad as I thought it would be. That was a big change for me when I fell. [But initially] I had a big fear of falling (Shawn, Army, White, BK).

Losing Motivation

- One of the most difficult, I don't know if this was a challenge, but one of the most difficult was the fact that I have been driven as much as -- it was kind of self-generated just this longing -- it may be a product of my environment but it kind of self-directed again for myself to go and do and be involved and work hard and those sorts of things. That's been difficult doing that (Willy, Army, White, AK/BE/HD).

Wanting To Stay In The Service

- I wanted to stay in the Marine Corps. Believe it or not I fought to stay on active duty in the Marine Corps. Got congressional help on that (Chris, Marines, White, BK).
- I'd say the second hardest thing that ever happened to me in my life was having to get out of the army. I mean I fought getting out of the army. I wrote letters to the medical board protesting their signing of ordering me out of the service as being unfit physically, which was completely ludicrous but everyone supported me in my efforts because again it was part of this transition. I had to come to grips with something I really loved doing....It was certainly a sense of loss [when I was released from the service]. I mean it's what I set out since the time I was eight years old—the career path I'd chosen. I'd gone to military college and was a regular officer and had excelled in all my military training and was selected to be a company commander over several men that outranked me and was good at my job and was well received by both my superiors and my subordinates. So that to not be in the picture again, was a huge loss. Let me tell you I've enjoyed some significant success in my business life but let me tell you nothing will ever be as heady or as exciting or as meaningful or rewarding as leading men in battle, jumping out of airplanes, and stuff like that. It was tremendously exciting (Willy, Army, White, AKBEHD).

K. IMPLICATIONS – RESEARCH, POLICY, AND PRACTICE

This research study sought to better understand the care and life experiences of Vietnam Veterans with combat related limb-loss over their post-amputation life-spans (averaging around 40 years of experience). The findings here provide a vivid description of the veterans' experiences, primarily during the first 12 months following their injury, but with significant attention directed toward the remainder of the veterans' lives in the report's latter portions. The report's core focuses on the circumstances of the men's injuries, their care experiences following their injury and recovery, and their rehabilitation experiences. In particular, the report provides the men's own words on how they coped with limb-loss, their experiences with prosthesis and other assistive devices, and how they experienced and perceived their disability. The men's voices also elaborated on their experiences with work and insurance related discrimination, with pain and mental health distress, and with addiction to pain medication and/or substance and alcohol abuse problems. The material here also elaborates on the importance to the veterans' well being of various relationships with family, interactions with fellow patients and other veterans during the recovery process, and with such relations during the later portions of their life-spans. Finally, the report provides insight on how the men's injuries affected various aspects of their more private or personal lives, including how their injuries affected them as individuals, how it affected their relationships, and how it affected their overall mental and physical health and well-being. Items that critically affected nearly all the veterans throughout their post-amputation life spans included experiencing pain, experiencing difficulties with mental health challenges, and experiencing a critical need for social support from family and peers. Despite the array of challenges they faced, however, most of the men were able to attain college educations, find careers, get married, and raise children.

The findings in this report can be used to inform the development of:

- Additional research projects that seek to understand various dimensions of living with combat related limb-loss.
- Reforms in areas of policies regarding care for veterans with combat related limb-loss in both the short and long run, along with the development of new policies.
- Refinements in the approaches to treatment that are accorded to such seriously wounded US personnel as those experiencing limb-loss.

In the space below, the report summarizes the key implications of this research for future research, policy, and practice. While the differences between the research implications and the other implication types are straightforward and unambiguous, the distinctions between policy and practice implications are often confounded. For purposes of this report, policy refers to laws and guidelines or regulations surrounding the kinds of services and benefits made available to veterans with combat related limb-loss. Practice refers to the nature of the provisions that are actually provided, such as type of care, of social support, and of educational programs, to give just three examples. In this regard, it is worth noting that other interpretations of the information provided here may derive additionally implied research, policy, or practice recommendations beyond the substantial array provided here.

K1. Implications For Research

1. More research is needed to understand the neurological and social experience of pain over the life course for combat-related limb loss (What is the frequency of pain? How intense is it? Is there a neurological pattern? What pain management and coping mechanisms are successful? What effect does pain have on quality of life for the amputee and the amputee's social network? Do veterans from the current conflicts experience post amputation pain differently?).
2. There is a need to understand how veterans perceive the need for and management of pain medication, as well as the need to understand better the communication and coordination issues involved providing pain management care. Further, more research is needed to investigate whether current veterans with combat related limb-loss encounter experiences with inadequate detoxification care or if detoxification care has improved since the Vietnam conflict.
3. More research is needed to investigate how Vietnam veterans with combat related limb-loss overcame drug or alcohol abuse problems, especially in the context of not receiving formal care. (Do amputee veterans of current conflict experience similar drug and alcohol abuse problems? If so, do they receive care and does it help?).
4. More research is needed to verify the high incidence of self-reported PTSD through standard clinical assessment and to understand the occurrences, long-term effects, and experiences of living with PTSD, especially during major life transitions such as divorce or retirement.
5. More research is needed to identify both structural (e.g., limited availability of mental health care) and individual level barriers (e.g., negative perceptions of PTSD held by the veterans themselves) to mental health care among combat amputees.
6. More research is needed to compare the level of reported mental health care received by amputee veterans of past and current conflicts to assess if mental health care has improved.
7. More research is needed to learn about current veterans' perceptions of mental health afflictions such as PTSD and whether they hold more positive views of mental illness than veterans of past wars.
8. More research is needed to examine how the lack of mental health care in the early years, among those who report PTSD, affects the veteran's quality of life.
9. More research is needed to understand what is necessary to facilitate effective prosthetic use as well as the long-term effect on the body from using a prosthetic device.
10. Research is needed on reasons why aging veterans may move away from a prosthetic device later in life (e.g., obesity, other co-morbidities, impact of joints, too much hassle, lack of support from the VA and other health systems related to communicating new technologies that might make it easier to handle a prosthetic device). What is the impact of the aging process on the ability or willingness to use a prosthesis?
11. More research is needed to investigate issues regarding the nature of family social support from the perspective of the veterans and their primary support providers, especially how supportive roles may take on a greater responsibility and shift into a care-giving role over the life course.

12. More research is needed to better understand the nature of strain in the veteran's intimate relationships and ways identified to better support the primary support person.
13. More research could explore contradictory messages that veterans with combat related limb loss may exhibit and how best to manage them, from both the perspective of the veterans and their support/care providers.
14. More research should examine the vital role of peer social support, both from the perspectives of the veterans and their peers (e.g., recovery process, integration into the community, quality of life over the life span).
15. More research is needed to explore how veterans with combat related limb-loss positively adjust to the realization that their career goals may be dramatically altered due to limb-loss.
16. More research could also explore how career goals of veterans are impacted by a variety of kinds of traumatic injuries (e.g., limb-loss as compared with traumatic brain injury or major burns).
17. Discrimination today is more likely to occur in the area of health disparities and more research should explore this issue among current veterans (e.g., access to care). However, we should not simply assume work or insurance related discrimination does not exist because we now have legal remedies. More research can be done to explore whether work or insurance related discrimination continues to persist among combat amputees, perhaps in less obvious ways.
18. More research is needed to explore what factors are important predictors of success in major life-transition experiences (e.g., marriage, parenthood, and career) for veterans with combat-related limb loss). Our cohort was mostly well-educated. More research should explore whether other amputee veterans of lower social-economic level fare as well.
19. More research is needed to better understand how some of the challenges living with limb-loss are manifested as aging veterans (e.g., Do they have to retire early? Are they spending more time in the health care system?).
20. It is unclear how the findings in this study compare with non-military individuals with traumatic limb loss injury or with military veterans who sustain other kinds of traumatic injury such as major burns or traumatic brain injury. As a result, more studies are needed which,
 - a. Compare the experiences revealed in this report with those of male (and female) amputees whose limb-loss occurred in civilian life.
 - b. Compare the experiences revealed in this report with those of other veterans who sustain different kinds of traumatic injury.
21. All of the issues explored in this study, as well as relevant issues not addressed with this sample, should be probed further with veterans with combat related limb-loss of more recent conflicts

K2. Implications For Policy

1. Policies that provide services and assistance for the combat amputee veteran should recognize that amputation related pain may persist over the life-course and may exacerbate disability due to limb-loss.
2. Policies regarding pain management should insure that veterans receive better continuity of pain management care when being transferred between facilities or to different providers.
3. Policies that provide for counseling and disability compensation for veterans should take into account that alcohol or drug addiction may occur in response to the veterans' combat or limb-loss experience, and benefits and care allocated accordingly.
4. Screening for mental health illness, and the provision of care, should be part of routine health care from the very beginning of their post-amputation period to their later years.
5. More funding should cover the provision of interventions that successfully reduce barriers to mental health care among combat amputees, especially later on life. Will geographic disparities play a role in whether veterans will receive follow-up care in their futures?
6. Policies that provide for assistance to replace prosthetic devices or compensate for such devices, as well as other assistive devices, need to take into account that prosthetic use is a life-long experience and that as the veterans age, they may increasingly rely on additional assistive devices. Therefore, resources need to be allocated to ensure that veterans of past wars have access to current state of the art technology later on in life.
7. Some services for the veterans with limb-loss should be extended to key significant others, such as the spouses or other main informal caregivers of the afflicted. Such provisions might include educative services focused on limb-loss issues and, in many cases, some degree of counseling and mental health services. Resources devoted to such caregivers continue to be an investment in the veteran, and one that may save money in the long run.
8. Policies should be examined to ensure they emphasize both the need for independence as well as the need for support among combat amputees.
9. Policies should be developed to support different ways to stay connected with military peers such as through volunteer opportunities, military organizations, as well as to support the veterans to develop skills and the means to do so---if military service is not an option or not pursued. Digital technology such as virtual world environments via the internet might be particularly resourceful in developing different options to stay connected.
10. Policies should continue to allow for accommodations such that amputee veterans can continue to serve in the military if they so desire. Having the option to stay in the military may aid in the recovery of those veterans who wish to remain in the military.
11. Policy makers should explore whether policies that provide financial support for combat veterans to pursue higher degrees might provide additional financial educational support (e.g., special scholarships for veterans with traumatic injuries) who sustain traumatic injuries such as limb-loss because of the effect of traumatic loss on career options.
12. Policies that provide services and assistance for the combat amputee veteran need to take into account that specific issues related to the effect of experiencing both combat and major limb-loss (such as PTSD, physical disability, and phantom pain) may persist over the life-course.

K3. Implications For Practice

1. The veteran amputees and their primary support providers, including care providers, should be aware that experiences with post-traumatic pain may be life-long and thus require life-long management and care.
2. The dispensation of pain medications should be carefully implemented during both the start-up and the completion phases of treatment, and particular care should be taken to insure continuity of pain management care due to transfers between facilities.
3. Care providers and the veterans themselves should receive education surrounding prescription pain medication and efforts to discontinue cessation of such use should be closely monitored and occur gradually to avoid difficult withdrawal symptoms.
4. Screening for drug and alcohol abuse and dependency, as well as education around risk reduction programs, should occur soon after the veterans start to reintegrate into civilian life and should be assessed periodically across the life-course.
5. Insuring access to mental health care and regular screening for mental health challenges may reduce the reliance on drugs or alcohol as a coping mechanism in response to limb-loss and the combat experience.
6. Providing information about PTSD, and referrals for mental health care, should become standard procedure in the amputee veterans' program of care.
7. Some of the veterans viewed PTSD negatively. Such perceptions may hinder them from being open about their mental health state or from seeking help if it is needed. Education focused on PTSD and interventions to reduce the stigma around PTSD should reduce such perceptions.
8. Similarly, education around the different kinds of mental health services now available for veterans should increase use of such services.
9. Interventions to assist veterans with combat related limb-loss to maximize positive outcomes over the life span should take into account that use of prosthetic devices is an on-going process. As technologies improve and the veterans age, they may benefit from interventions late in life to encourage their use and assist them with the better technologies or different kinds of assistive devices.
10. The provision of information about the substantial difficulties that families of amputee veterans face should also become standard fare for both the veterans and their families. The physical and emotional challenges these families will confront are enormous and every effort expended to prepare them should help enormously. Creative ways to support families should be explored (such as amputee veteran care-giver support groups).
11. Significant care providers, whether professional (e.g., medical personnel) or personal (e.g., spouses), need to be aware of, and find ways to accommodate, the contradictory impulses that the veteran amputees will often exhibit. Specifically, many veterans will go to great lengths to underplay their injury, seemingly resentful or any special assistance they may be receiving, at the same time that they still desire substantial support, especially from their personal (e.g., family) caregivers. In short, a 'best practice' would be a balance of providing support while allowing for independence.

12. The rehabilitation and care efforts will often be significantly enhanced if the exposure to “peers” (other veteran amputees) can be incorporated into other pre- or post- treatment experiences. For example, the veterans in this sample experienced the following:
 - a. Peers can serve as a comparison group – thereby sensitizing the veteran to the very realistic perspective that it could be (have been) worse.
 - b. Peers can help reduce stigma associated with limb-loss by showing the veteran that he/she is not alone in having to sustain such injuries and their associated life changes.
 - c. Peers can provide guidance and support to encourage the veterans to access needed services (especially mental health care).
 - d. Veteran peers from past wars can serve as role models or counselors for veterans from current wars. This can provide the past war veteran with a chance to share their experiences while it provides the new veteran with the benefits of being helped by someone who is (or has been) in their situation.
13. Facilitating contacts between the amputee veterans under treatment and specific ‘peers’ and other (non amputee) veterans that the amputee came to know during the initial phases of their ordeal may also provide additional recovery benefits.
14. A greater emphasis might be given to providing information about higher education options, as well as appropriate advising (e.g., how to apply, degree choice, financial options) in the rehabilitation plan of those veterans with combat related limb-loss who lack a college degree.
22. The 1990 American with Disabilities Act would make the experiences described in this report illegal today and less likely to occur. However, more subtle forms of discrimination may continue to exist. Programs geared towards helping military personnel with combat related limb-loss should include assessing whether they experience any form of discrimination as well as interventions to help veterans manage and address such unequal treatment if it does occur.
23. Significant care providers, whether professional (e.g., medical personnel) or personal (e.g., spouses), need to be aware that despite experiencing combat-related limb loss, most such veterans will go on to experience the major life transitions such as marriage, parenthood, and steady employment. Losing a limb during combat does not necessarily mean such transitions will not occur.
24. Exposure of newly injured veterans to veterans who have been living with combat-related limb loss for some time and who have experienced some of life’s major transitions, may serve as inspirational role-models in modeling that life can go on despite traumatic injuries (e.g., importance of peer support).
25. Healthcare professionals may have education around caring for the elderly but may lack information about the disabled elderly. Professional and support networks need to be educated to understand and assist with life-long problems associated with traumatic limb loss.

Implications Conclusion

While the listing above may not be exhaustive of all that can and should be done to improve the lives of our veterans with combat related limb-loss, they constitute the key ones that flow from the research reported on here. More will be known and reported on when the remaining phases of the overall project are completed and released. Confidence in the above noted flows from the fact that most of the items suggested here for consideration as research, policy, or practice were taken from the veterans' own words, while the remaining were drawn from their descriptions, our observations, and our carefully considered interpretations.

L. VETERAN PROFILES



Photo Courtesy of the Disabled American Vets

Profile of Mr. Pete Smith (Above the Elbow)
(Originally Interview Transcript 36 pages)

Mr. Pete Smith lives in a Midwestern state where he was born and raised. He was born October 2, 1949. He served in the U. S. Marine Corps, enlisting on March 15th of 1968. He was wounded in Vietnam December, 7th 1969. He is a left arm above the elbow amputee. He has been married twice and remains married to his second wife. He has two stepchildren. He reports his overall health as fair. He also smokes and reports using drugs and alcohol. In addition, he reports currently having back pain, stump pain, phantom pin, depression, PTSD other mental health issues. He does not currently use a prosthesis. Pete was interviewed on October 20, 2008. This is Pete's story.

I graduated [high school] in June of '67 and I enlisted March 15th of '68. Between that time I was looking for jobs and stuff. I played football with my friends and just been a regular 18 year old kid. Didn't have a job. Just had a girlfriend and a guitar. I figured I would have been drafted anyhow. A friend [and] I both decided that if we have to go we might as well go with the best. So we joined the Marines.

After Vietnam, I had a little bit of college, close to two years in credits....I stopped working [in the late 1990s]. I worked for [a phone company] for 20 years...my wife worked with me, the same office. I've just been laying on my back, taking care of the grandkids and stuff. We were both married once before. In my first marriage I had two kids. They're both adults. I have two - I hate to use the word step -- but they are her original daughter and son. So these people are all out of the house although one moved back when he got a divorce. He's still here but that's it. I only have one brother and he was 15 years older than me.

I belong to the DAV. I've been a life member since 1970 or '71 and I'm a life member of the VFW, about 15 years maybe. I was over in Vietnam twice. The first time was September '68 to January '69. I was with Delta Company. A lot of us have gotten back together and that's been neat. I came back [to Paris Island] because I had hurt my foot. I went back in August '69 because I didn't like stateside duty and I didn't feel I had done enough over there since I had a short tour. I wanted to see my buddies and I honestly didn't feel like I finished the job. That's when I joined Golf Company, until December 7th, 1969 when I lost my arm.

Most of my left arm is gone. I've got about maybe four inches from my shoulder left. I was hit with an RPG. The first round hit my gun position and I never heard it until it hit. The shrapnel pretty much tore off my left side. Got a sucking chest wound out of it. They took out a little bit of my intestines. I carry a lot of shrapnel around. They removed some muscle on my side so it's sort of sloppy. You know, I can never have one of those bodies that muscle builders have but still all in all I was pretty lucky. I've still got 229 pieces of shrapnel. Range in size from pinhead to biggest one is about the size of my thumb now. Got PTSD later but that's another story.

I was a machine gunner. I was trained with a bazooka and I never had a bazooka. They gave us the LAWs and. Then they trained me how to use a flamethrower. Everything they trained me on had no point with my service over there. I really wanted to be a machiner.

[I was wounded on Dec. 7th, '69] I consider it my fault we were in our second night at the same burned out villa. I should have moved my machine gun position but I just kept it at the same spot it had been the first night. The squad leaders all had skulls we carried on the backpacks. Except me. I didn't have one. Well, December the 7th we had time to explore. It was extremely boring over there

if you weren't getting shot at and there was this gook inside there. I fished through there with an E tool and I got the fucker's head.

Now I had the skull and I was a little bit from the company perimeter. I think this might have been one reason why I got shot at before anybody else. But I had set up a fire and was trying to dry the skull out...this is what bothers me. That [it] didn't bother me one bit while I was doing that and I had just turned 20 years old. Anyhow, I got this rattle in this thing and out fell an M16 bullet and you can see this fucker got shot in the head. I gave up on the skull thing though. So I actually put what was left of him back where I got him. But I always to this day wonder if those gooks had me in their sights, you know, because their first round was right at that gun position

The platoon sergeant had asked me to go out because they had seen movement. It was kind of scary and it seemed suicidal, he was going to sandbag. That means he didn't really go out. He just took the rest of his squad and would fill in the foxholes along that side of the company perimeter. This was okay with the rest of the company because that meant we just had extra guys at our position so we might get a little more sleep. So I got a kid, a basic rifleman and a gunner. So, I went out there and sat with him for a while and we were just sitting in the hole and the first round hit. I'm guessing four to five feet from me. There was [a] white flash.

Next thing I knew I was in the foxhole with the other two guys. I heard them both start to moan and I remember saying shut up. I didn't want the gooks to know that we were hit and I didn't know I was hit. That's what's so weird. Gives me the feeling that people who get blown up don't know what happened to them because I hadn't, the only thing I found out my left arm was numb and I was sort of reaching for it and trying to find it. It was still attached. Then blood started running down my face because I had taken a piece of shrapnel just above my left eye and that was kind of lucky too. That's when I said ooh, I've been hit. It's just sort of a shock, you know, when this all happens.

Next, I remember them yanking me out of the hole and working on me. One of my good friends was the corpsman. He was talking to the captain, telling him I had sucking chest wounds and I should be in emergency medevac. He stopped the bleeding as best he could and shot some morphine in me. Boy, that stuff's really good when you're hurt. I was actually inviting people to, let's have a party at my house after the war, you know, and (laughter) I had trouble breathing too. Sucking chest wound's really a bitch.

Yeah, it was like I was trying to breathe with my hand over my mouth and they did call in a chopper and God bless him. The guy brought that bird in. It was a C46--came in to a hot LZ because we were still taking fire and they had unloaded a bunch of RPGs on us. He didn't have to come in but he did and he hauled us out. When I got in there the corpsman said, just try to breathe as deeply as you can. I've got to take care of this other guy, he's worse off than you...he made it but I don't know what happened to him. He's not on the wall. I've searched.

While we were in the air going to 1st Med Battalion in Da Nang. I was thinking, I guess I'm going to die. So, I tried to stop breathing. I held my breath. It started to hurt really bad and hell with this I'm going to live. I've had that feeling ever since--I'm going to live.

They wheeled me in and stripped my clothes off me. When I got into the operating room I remember one doctor touching my left arm. I can still see my left arm, my hand. My left hand looked fine. It had a little bitty scratch on the knuckle of my thumb and that was it and for part of the way up it looked okay. But then the rest was all covered and everything. He kept touching my hand asking me

if I could feel anything and I told him no and then they gave me that shot. I just blinked out. That kind of bothers me too...The next morning when I woke up the corpsman was doing something to me and I asked him what happened. He said the corpsman said that the doctor found it medically necessary to amputate my arm and the doctor who did it—he's a nice guy—he came in and he said they were just so busy that night they didn't have time to work on it and try to save it. Well, shit happens (laughing).

I'm still high on morphine. They got me really high on that for three weeks. I got hooked on that shit. It was just like, you know, I had too many other things that were bothering me. I had three tubes in my side and just living itself was my main concern [rather than worry about losing my arm]. After they gave me morphine and then they gave me Demerol. The shots were every four to six hours. Then the doctor saw I was hooked on it when I got back to the States, Bethesda Medical Center in Maryland. He noticed I was hooked and he just stopped me cold turkey, which I wasn't too happy about but it didn't really bother me that much. I got sicker than shit and I didn't know why. It was a year later after I was home watching a TV show about drugs and heroin and morphine and he explained what the withdrawal symptoms were and I had all those. So I figure I must of went through withdrawal.

I was there about two weeks and then they shipped me to Yosuka Japan, and I was there about a week. Then they sent me home. I remember spending Christmas there and getting drunk out of my mind. The rum was like a dollar a quart...I had a friend who would go get it. I was stuck in that bed and yeah, I was mobile. I mean I could walk a little bit but I couldn't go out on the town if I had to go somewhere. I was in a wheelchair.

I'd lost part of my intestines. They didn't give me a colostomy. They had put the intestines, sewed them back up but they still left them exposed for some safety bacterial reason. Then when I got to Japan they said we're going to have to give you a colostomy. I was there about a week for that and that's what all they basically did [in Japan].

No, [I had no therapy for my arm]. My arm was still open. I'll tell you I'll put my pain against anybody. Any woman who's giving birth. My arm was open and they had to stick a cotton swab in it every day. I have never felt a pain like I felt that. That's the only time in my life I've ever screamed. I dreaded it. So that was still open and then I'd be screaming, agony and stuff, and then they'd give me a shot of morphine. I'd said, you know, why don't you do that before you start digging on me? We can't do that because you're not in pain yet. Now what a dumbass reason. So you give it to me and then start digging and finally the main doctor I had [in Japan] did that and it was a lot easier. It was stupid policy. Uncaring people. Unthinking.

They [medical personal] were okay...my main doctor from Vietnam was pretty cool. He went with me from Da Nang to Japan and saw that I got settled in the hospital there before he left. Then when I was in Bethesda it was real nice. But, yeah it was just okay. You know, I can't compare it to any others because that's the only one I did.

Well, I've got a bumper sticker, although I don't have it on my bumper, but it says shit happens. That's how I think about it as one of those things. Combat. Take your chances. At least I lived so I consider myself very lucky.

I didn't get any kind of real treatment. When I was in the service hospitals, there was no rehab or nothing...not at Bethesda. When I got to the VA hospital, they had me go to physical therapy one

time where he tried to put a weight on my left arm so I could practice raising it and building up the strength in it and it would just keep falling off. So he just got tired of it and messing with it and he just let me go back to my room. That was the entire extent of my physical therapy. [I was there] from New Year's Eve '69 to first week of March of '70.

They closed up my colostomy. God, I'll never have another one of those. Oh, man. Then they put my, sewed my arm back up and that was the extent of it. They sent me to the VA Hospital and cut a little bit more off my arm because the military doctors didn't know anything about prosthetics and the doctors at the VA said that there was too much arm there—there was no bone—it was just flopping around. So they cut it so it would be better for a prosthetic. It took about six months after I got home before my wounds finally healed on my arm.

[I got the prosthetic arm] 1970, that summer. He was a nice guy. I didn't do any training on how to use it other than him telling me, you know, some basic things. When somebody asked about the training and physical therapy, I just laughed. I didn't get shit from those bastards.

[The arm] wasn't worth shit so I gave up trying to use it. So now I don't use anything. It was just uncomfortable. It kept locking which really would piss me off because it was supposed to move freely. It was just more of an inconvenience. But there's not much there anyhow for it to hold onto. I got so mad at the damn thing once [that] I threw it against the wall in the bedroom.

I wore it about two years. I wore it at my wedding, my first marriage was in April of '74. I was wearing it more for looks. I hadn't been using it much before then. A few times after that I would try for a little bit but just get mad and put it back. About 15 years ago or so, I called the VA here and asked about getting a replacement arm and they were very open about it. They said well, I guess it's about time you got one and they made an appointment for me to go there and everything and when it came time for it I just froze up and I called them and said I can't go.

I do not like the VA. They turned me off when. The way they treated the veterans. Especially, there was a lot of World War II guys there and probably World War I guys too and it was just, doctors, they didn't have any American doctors there. Anybody that spoke good English. It was all just give them a pill. Shut them up. Or give them a shot, whatever, and that was it.

You know, the way they don't want to give you any money. I was rated 100% total and permanent or not total and permanent. 100%, they give you 100% for the first year and then it's reviewed and whatever and so they send me this freakin' letter after a year and they said, my disability had been knocked down to 90% permanent and that pissed me off. Because the difference between 100% and 90% in compensation was like 40% of the money. It was a huge difference..what's the fuckin' difference between 90 and 100%?.and the thing also that pissed me off is they showed me my injuries the percentage for them and the first one was my left arm being amputated, that was 80% disability. Now I had 20% for back and another 20% for another back thing and another 20% for something and 10% for something else and it added up to like 140%. I'm thinking why am I only getting 90%. Then they told me how they figure it out. I lost my arm so that's 80% of me is gone which leaves me 20%. Take 20% out of that, 20%. That drops it down to 16. Take 20% out of that, 16. That's 3.2 that's coming out and so it gets to a point, I was like 94% disabled. But you have to have 95 I guess and 96 to be made 100. So that's where I stood at. I bitched. Went to the DAV and that's why I joined them. Yeah, and they got me my disability back because of unemployability.

I've got a screwed up disc...But it's, my family's had a back problem history and it's always been,

my mom said it's our Irish back. It also could have been that I fell 20 feet during boot camp and that might have had something to do to help it and when I was over in Vietnam the backpacks we carried, I was carrying more shit than I weighed and it would just cut into your shoulders and kill your back. It was very hard humping all that stuff around. So I think there's a lot of contributions or things that contributed to my back. I tore up my ribs, couple busted ribs. That's really all other than my arm was broken off.

I had to learn how to tie my shoes again with one hand, which I can do. People are still amazed whenever they really see me. Oh, it's so wonderful that you can do that! Well, what the hell am I supposed to do? I had to take my driver's test again. They said I had to have an automatic transmission and either power steering or spinner knob and an automatic turn signal to drive legally. The VA, sent me \$1600 for a new car which I guess everybody that loses a limb gets, although it's a lot more now and I went and bought a '70 Mach One Mustang. Ah, it was so hot.

Brushing my teeth I just have to sit the toothbrush down and put the toothpaste on it. My latest wife who I've been married to for 23 some years came up with a good solution for my toothbrush. I use an electric one and we get a thing that holds tacos and I can sit it in there and it won't roll or anything and I put the toothbrush on it. Because that was kind of a problem. The toothbrushes would sometimes flip over while I'm trying to put the toothpaste on. Getting dressed, I didn't find any particular problems. Tying a tie was something I had to learn to do again and I guess that was about it. I didn't have any problem eating. You'd be surprised, when a lot of kids see me they always ask how do you eat. With a fork. Do you use two hands when you eat? Oh, no.

[Before I was injured] I contemplated making a career out of the Marine Corps and if not I was going to try and get into law enforcement. I heard at the time that the State Highway Patrol, if you were a combat Marine veteran you pretty much had a shoe in to get a job there. So that's what I was kind of thinking I would be doing and that's what my hopes were based on. Yeah, they're the best, you know. There's no question about it. It still shows today. I'm still a Marine.

Once you're a Marine, you're always a Marine. [My injury] reinforced what I felt about myself after I took my Marine Corps training. When I got out of boot camp I said I can do anything and I did it. It was just, I can do it I'm a Marine.

[After my injury] I thought I'd get into writing and so I sort of took journalism courses, leaned toward journalism when I was at college because I enjoyed writing my letters home. When I was in the third grade I wrote a play that the class performed. So I consider myself a writer (laughing) but that was the only thing that I was considering since I couldn't be a cop.

The first thing I did [when I ended my service] was go upstairs to my room and put on the Who album, *Tommy*, and it has a song on it that says, I'm free. I just played that several times. My ending in the Marine Corps at Bethesda was not particularly good, although I'm friends with my equals there, my peers. The prick ass gunny sergeant who was trying to still maintain military discipline and some kiss ass butt corporals that were with him. I'm a corporal too. I'm not going to take any shit from those bastards...Then I explained that I didn't give a shit and I took my nightgown off and he saw I had one arm. That's the first time he knew. Said, okay and let me go. I have a love/hate relationship I guess you could say with the Marines.

I got into drugs shortly after I got home. A girlfriend that I had before I went in - she was anti-war and I wasn't -so she got in touch with me and we met and talked and she had a hash connection. In

Vietnam I never smoked anything except cigarettes and that was because I was so fuckin' nervous. Just smokin' a cigarette, especially after you got shot at, just kind of helps.

The hash was something that would take the edge off...I had tried marijuana in Vietnam but since I was in a rifle company and we were really never in a secure place for more than a day or two at the most but when we did have a night in a secure place than those of us who smoked would borrow a dub or two. Those dubs were huge like the size of a Pall Mall. It came pre-rolled. Depending on how far away from Da Nang you were was the cost. I got high about four or five times in my entire ten months I was over there. It just wasn't that opportunistic.

I got into acid. The first pills were called a synthetic mescaline. It's called Screaming Yellow Zonkers just like I guess the candy. I took over a hundred trips. Usually I got into LSD. I never had a bad trip. I can always remember feeling more about myself exploring myself more inside. But I stopped taking that because I just got tired of it and by then I had a real appetite for marijuana. I just always had a good connection. I even dealt marijuana for a few years. I was a dealer and it was just enough to get me free marijuana. Then when I got divorced from my first wife in 80 I stopped dealing. I've never stuck a needle in me and I never will.

I think [my drug use] had everything to do with Vietnam, especially the acid. I think it really helped me put off my PTSD. I went to the VA in 74 and talked to a shrink. I told them I felt like a burning inside me sometimes. It was just like if anybody talked to me about Vietnam and wanted to know, I would talk to them about it but it was just like really upsetting to me. He prescribed Valium with two refills and that was it. I just kept smoking pot.

In 72, I was seeing if they would give me anything for my ears because I couldn't hear for shit. They found out that my ears were fine. There's nothing wrong with them. Funny though, when I got hired [for the phone company] in 1978 I didn't pass their hearing test. They had to make a special exception so I could work. M16s are pretty loud. I imagine some rock and roll had something to do with it. My hearing was bad. I knew that but the VA wouldn't admit to it.

I didn't see the VA again after the '74 ordeal...When I retired, quit, whatever, it was the DAV got me my 100% back and I haven't dealt with anything military about my PTSD.

[At first] I didn't think I had PTSD. That was something that Hollywood had. You know, with the guys that wore the camouflage uniforms all the time and they had that look and they had their buttons on their bush hats and stuff like that. I still didn't believe it until I got together with my buddies with the Delta Company. One of the guys was telling me how am I dealing with my PTSD, which I refused to admit I had. He explained it to me and I still refused. Finally he gave me a website to go to and it showed ten signs of PTSD and my mouth fell open looking at it. I counted, I figure I was eight of out ten. My wife said I was nine out of ten.

[PTSD makes you] irritable and overly aware of things. I always had to have my back against the wall. This explained to me why I went off on my supervisor when I was with the phone company as a service rep. I had a corner position and they wanted to move me to a more open position. I went off on her. They were kind of afraid of me at work. They think because I was a Vietnam vet I guess. I didn't really know why I did it and then when I saw that was one of the things that they do. You had to have your back covered which I always did. Every time I'd walk out of the house I would look to see what's out. If I'm driving along the road I would see things. I would look for good gun positions. Where would I put my machine guns, stuff like that. I thought that was pretty much

normal but apparently it's not. When I saw that I said okay. So he helped me. He had worked with the VA in establishing the criteria for PTSD and also with Social Security. So he told me to go after Social Security Disability, which I would never have thought of...that's helped. So with that and my VA compensation, my Social Security I still make good money. Not enough but good money.

[in 1st 12 months] [my friends and family] took it lightly. I mean they didn't know what to do. One time, I was riding with a friend and I said you know, I don't think I've changed. He goes, Bruce, you've really changed and I didn't know how I had changed but I did apparently and it was, you know, I would get stared at all the time by people. I got laughed at. Somebody told me I should be dead. Things like that. That all happened within the first year or so.

My mom and my aunt, my dad's sister, flew out together to see me in D.C. That was kind of nice. And I had another uncle that I didn't know that well. They lived in New York and they came to see me...I did go down to my brother's. I stayed there for about a month.

The [other patients] and I, we were just brothers stuck in hell. In Japan, they were okay too. The corpsman had seen me before and then some of the patients that I knew. I remember waking up screaming from a nightmare around Christmas time and I apologized. The guy next to me said it's okay man, we all do it. I ran across a friend who was in Delta Company after I left. He had lost both legs and an arm. He runs his own business now. He's sort of my hero. I can't complain about anything with him. But we do compare phantom pains, which is nice. Phantom pains are a real bitch.

Ever since I've lost my arm it's never stopped hurting. It's just a matter of what degree. I can feel it now. At its mildest it feels like my left hand is really cold and when you stick it under a water tap, like tap water to warm it up and how it burns it real bad, that's how it feels all the time. Then sometimes it feels like my fingers are being bent back all the way on my left hand or there're being smashed with a hammer. Sometimes it feels I'm being stabbed. I thought this was something that's pretty much routine until I read about it and found out that no it's not. But I guess it has to do with the type of amputation you get and mine being rather traumatic with all the nerves would be on fire.

I was married the first time from April of '74 to 80. [I met her] because I had the prosthetic arm. I was at my buddy's house around '72. I was smoking a joint with some of my friends and they didn't have a roach clip so I popped off my hook and we used that as a roach clip, which they thought, was hilarious. They told some people and this one girl heard about it and she had to meet the guy that had that kind of a sense of humor. We met and things just went from there. Had two great kids. But destruction of my marriage has got a lot to do with Vietnam I'm sure because I still had the beast in me then. I just didn't know it. The divorce was official in October '80.

[It] was tough [giving up the guitar]. I sold it after I got home. I even bought a drum set hoping I could get something out of the drums but that didn't really work good. I liked to play music and stuff like that. Yeah, I still miss it to this day. My favorite song of all time is *Free Bird* and that's because of the guitars.

I was glad to be getting out of the Marines. Glad but lost. I still remember feeling like that burning I described earlier. Just real deep inside me. I tried to keep things as normal as possible. I had my old bedroom back at my mom's house and the family was nice to me. You know, but it's just, I stopped wanting to socialize with them too and that was another thing on the PTSD thing list. You dissociate yourself with family members and stuff like that and I did that right away almost. Like 1971 and stuff. It was Christmas at my mom's house and I just stayed upstairs and told them I was sick. I

wasn't. I just didn't want to be around anybody.

[In terms of the impact the injury had on the rest of my life], well I didn't look for employment. The relationships, they were okay. I got my new girlfriend but it only lasted a short time. Honest to God, the only thing that really made the biggest difference to me was LSD. That was the thing that really helped me more than anything.

I figured that I'd probably die earlier since I had heard that amputees have a shorter lifespan in general. Heart problems and stuff like that, because of circulations problems. Things like that.

The corpsman was like a friend and he did a good job of taking care of me after I got wounded as best as he could for the hour or so he had me before the chopper got there. The treatment was always okay. There was one sadistic doctor I had at Bethesda...He stuck his finger in my colostomy before we sewed up and he was moving it all around and I was hurting so bad and I didn't let the mother fucker see it but he probably noticed and he just had a little smile on his face. I just think, why did he have to do all that? I couldn't see any kind of reason for it. He didn't apologize or nothing. But there was a lot of nice nurses. They had such a sweet sense of humor, God bless them.

I'm proud of the way I handled [the amputation]. I wish to God it never happened of course. The phantom pains can be just so God awful and that's unspeakable because they can last from two minutes, the longest I had was 50 hours. 50 hours of being shocked every five seconds. I was proud of myself for being able to handle it. I was proud that I got a Purple Heart. They gave me a Bronze Star with a V.

[Because of my injury], I now have empathy for people who only have one arm or one leg or who are disabled in general. I'd sure as hell rather have my arm back. I can't play the guitar. Can't drive a manual stick. You know, it's nice to get the money from the VA and not have to work. Every Monday I thank God I'm not in that rush to get to work like one of the others.

[My greatest challenge is that] I need patience and I have a lot of it. You know, if I'm going to do something it always takes me longer to do it than it does someone else, generally. Like if going to the grocery if I'm bringing in things I can't bring in as much as other people and I have to sit it down before I open a door and pick it back up and take it on in and that, you know, you need your patience for that to keep doing that all the time. It just takes more time to do it. As my latest wife, once we had a fight and she says you don't have any patience. I said I use all my patience all the fucking time. I have patience. But it just depends on where it was at.

I get a feeling that the VA really just doesn't want me to mess with them. Sometimes I'm bitter. You know, I remember watching a show a few weeks ago how they were working on this rove or this lander for Mars, rover or whatever it was, and they were developing a hand on it that would be just like a human hand and it could pick up little things and stuff like that and how many millions of dollars it cost. I thought gee, wouldn't that have been nice if they would have developed a hand that worked for me.

[The prosthetics has improved] for some people. My amputation is so high up that it's hard. I'm keeping an eye, listening to everything. Hell there was a guy that they sewed artificial arms on or donated arms on. He'd lost a complete arm and they sewed that on just a few weeks ago in Germany. Yeah, I'm always looking but I figure nothing's going to happen. The way they have it they have it hooked up to your muscles and to get electronic feelings. What's left of my arm is not

big. It's rather small because there's no muscle. If you look at me you can see one side looks built more than the other, definitely. It's not, half of it has feeling and the other half is dead. I can touch it with a needle and it won't hurt. So, you know, I don't think I really have much of a chance of getting a good prosthetic unless some miracle happens.

I'm honored that you guys asked [for the interview]. I mean it's like somebody cared and this is the first time that anybody seems to care which is kind of pathetic since it happened 38 years ago or so. But I'm tickled pink.

Profile of Mr. Liam Hall (Below the Knee)
(Original Interview Transcript 38 pages)

Mr. Liam Hall was born May 16th, 1949 and lives in the Midwest. He was drafted into the US Army in 1969 and was injured June 20, 1970 near Quang Tri in Vietnam. He is a left-leg below-the-knee amputee and currently uses a prosthetic device. He is divorced with two children. Mr. Hall reports his general health to be fair and also reports smoking, heart disease, back pain, stump pain, phantom sensation and depression. To protect the identity of the participant, all names of individuals in this profile are aliases and some specific descriptors such as dates, ages, place of residence, unit assignment, and other identifiers have been changed or left out. The interview was completed on October 23rd, 2008. This is Liam's story.

I graduated from high school and cut meat in a grocery store for about a year and then took about six months off and helped my grandfather build a house and then...waited for the draft. I was living at home. Kept thinking that I would get drafted sooner than what I did. I don't know whether I would say I was eager. It was something that I knew was coming so I guess it was more of, I know I'm going to have to do it so let's get in and get it over with and get out, you know. But other than that I was leading about the same life as my friends.

I had two years of college [after the military] with an associate of Arts degree...The American Legion is the only Veterans Association I belong to, I'm not sure when I joined that. A long time ago. I go to the monthly meetings. I am self-employed. I would call myself more or less retired. [I did] Woodworking, scroll saw, and wood lathe stuff and I write for magazines once in awhile and sell a few scroll saw patterns. I've got a married daughter that lives elsewhere and my son, 32 years old, lives with me here. I think my divorce had more to do with the fact that I was working too much [as opposed to Vietnam experiences].

I don't remember exactly when I went in, [sometime in 1969]. I've got a left leg amputation, I would say boot high and then I got more damage to the right leg and scar tissue to the left arm and left side. They told me I've got hearing loss.

I've been basically on the same style of prosthetic. It straps on. Over the past ten years, they have tried building me a couple other styles and the graphite foots and stuff but they've never had a socket that fit so I never really wore them very much.

[At the time of injury] I was in a reconnaissance platoon in the northern part of Vietnam. I made it to Vietnam, went through a week of training there and then they assigned me to a unit and they said you're going to the 101st Airborne. So that was the first I knew then that I was even going there...We were taken out by helicopter and dropped off into an area and then we hiked through the jungle for a week looking for signs of the enemy of any type.

The Ho Chi Minh trail was to the west of us and then we could see the ocean to the east when we got up on good high ground. I was up in the mountains so I was never in a rice paddy. I don't know what those were like. All of our area was mountains. I was going down to pick up a, I guess we'd say booby trap that I had set up the night before but where I hit the booby trap was not where I had mine at ... All I remember is a big explosion. I was laying on the ground and I yelled for my partner...then the medics showed up...I have thought about it quite a few times but I have no idea what I did hit. It was probably not the smartest thing to be out walking down a little used trail in

territory that we knew was once heavily occupied, in the dark. I mean you couldn't see three feet in front of you. It was dark.

They never really knew what happened...I knew I was hurt and listening to the medics, it didn't sound real good. I gave them my knife to cut my boots off and they were bandaging my legs and then bandaged my side and my arm where I had large burns and I think I had three shots of morphine out there in the field and then waited for about an hour and a half for medical to come in by helicopter. They were tied up because they couldn't get any Cobras to cover for them while hovering to raise me out of the jungle...I felt they were giving me the best care that they were trained how to do. I mean I know they [only] had a bag that they carried so it was like I knew they couldn't do a whole hell of a lot.

[I had been in Vietnam about] two and a half months before injury. [Went to] some hospital in Vietnam...I would guess back at Phu Bai. I remember talking to the doctors there briefly and the next time I woke up I was in Japan but I'm not even sure where the heck I was...It was either in Vietnam or Japan that I received a Purple Heart...I think I was probably drugged up so much and I just don't remember a lot about it.

They did a guillotine cut, just cut it straight off. That's the way it was when they got to the States. I was [at the hospital on an army base in the states] about six months. I was put on a ward with about 85 other amputees. From there they chopped more of my leg off and did a closed revision on it that they always told me was the first closed revision they ever did as an experimental thing. Then I went through therapy and then some part of September they moved me. I was healed up and they moved me to a barracks beside the hospital and that's where I stayed for the rest of my time there. During that time I was fit for a leg and given a leg and did therapy sessions.

From what I remember of the doctors talking, part of it was because the rest of my leg was in good shape. As I recall at the time the procedure was to do a closure in like three surgeries to check for infection and stuff as it healed. My first surgery and only surgery was prolonged, from what I understood they had me on a lot of antibiotics to make sure that there could be no infection. But a lot of it had to do with the rest of my leg that was in fairly good shape with not a lot of scar or torn up or anything so they felt they had a pretty good chance of closing it up in one surgery.

I had burns on my arm that were probably two inches or larger in diameter and half to three-quarter inch deep and in Japan somewhere they sewed those up with like 105 wire stitches to pull the big gaping holes together and try to let them heal. And I did have to go down, I think it was daily, to a whirlpool and soak that arm and then they'd peel all the scabs off and stuff trying to get it to heal properly. I've got a lot of scar tissue on it but I didn't end up losing any movement in it.

I used to go to seminars with the major and he would use me as his walking demonstration board, and talk about how I could walk and stuff. I remember I talked to him about the fact that when I got there we knew nothing about what kind of life we were going to lead with a prosthetic or what we could do with a prosthetic. So they got myself and an above-the-knee amputee and did videos and stuff so that as the new amputees came into the hospital they would at least be able to show them videos of what they might expect to do with the prosthesis after they got it.

The normal thing was that after you got your prosthesis from the limb shop, you took it back to the physical therapy and then you had a minimum of three days there to do therapy with it before you could keep it. I spent extra time at the limb shop getting fit and basically learning to walk at the limb

shop and then made sure that the day I did pick it up I was too late to drop it off at the physical therapy. So I wore my prosthesis to physical therapy the next morning and my prosthesis was never left in the therapy room. I wore it over that day and got to wear it out of there when I left like two hours later. They were somewhat surprised. I was probably one of the quicker ones I guess you'd say to get used to it and be able to walk on it.

It was just a determination that I wasn't going to let the loss of the leg bother me. So when I got it, I just learned to use it. I guess I had some practice of walking without the leg. They had what they called at that time a walking pylon and it was a contraption that I believe they custom built there and they used a crutch and it was cut off at belt high and then it attached to a big belt that you wrapped around your waistline and tightened up and that was on a pivot. Then at the knee you bent your knee back at 45 degrees and they had a trough that was on this crutch and then that strapped onto your knee. So you walked with this crutch on your knee somewhat like you'd walk on stilts I guess you'd say. I had that and got very proficient and learned balance with that prior to getting my prosthesis. The balance wasn't as hard as learning to manipulate with it.

In the hospital [other wounded soldiers and I] interacted. You know, we talked to each other. We talked about our wounds, about our treatment, about our doctors, our therapists. I mean we kind of helped each other along. Everybody was in different stages. So you could talk to people who were healed farther along than you. When I was in the hospital getting healed we didn't have a chance to talk to anybody who already had a prosthesis and was walking because, as I found out later those people were all moved to this outlying barracks beside the hospital. We did run into them once in awhile down in the therapy room but [did] not [have] a lot of chance to talk to them. So you had people to talk to when you got there as to what to expect later on and how long you might be there and the treatment and the pain and whatever else you might be going through. Then as you completed that stay in the hospital, you are the one telling the new ones coming in what was going to happen. So, yeah, there was a lot of interaction... [that had a] very positive outcome.

At that time my therapy consisted of going over to physical therapy, I think it was like two hours a day and my therapy sessions. Since I was already walking all I did was walked from one end of the therapy room and back between two mirrors and watched myself walk that I didn't limp or tilt or whatever and [tried] to reflect a natural looking gait to my walk. The biggest challenge was getting well enough to go home. And, the challenge of just learning to walk and climb stairs and learning to do things in a different way than what you were accustomed to.

We could stay in the barracks, play cards, shoot pool or we could go into the city and do whatever we wanted. I ended up with a girlfriend out there with two kids and we'd go out to the park and feed the ducks or go to the drag races or go out to movies, go out to eat. You know, I mean so it was kind of I just did whatever I felt like doing that day.

I don't remember taking a lot of trips to the VA hospital here. The VA hospital was probably 15 miles away. I don't remember being involved with VA right from the beginning.

I don't think I had [any PTSD symptoms like] deep depression. Maybe I was fooling myself. But I guess I felt I was leading a somewhat normal life, you know, when I got back. I didn't feel bitter about the fact that I had been to Vietnam. I didn't feel bitter about the fact that I was injured. It was kind of like well I could have been home and got in a car wreck. So I guess I just felt shit happens and that's what happened and I was still alive and I'm going to get on with the rest of my life.

[Other people] didn't really respond in any way because a lot of them who didn't exactly know who I was for sure didn't know that I even have the artificial leg. The ones that did know, their first instinct was to let me do this for you, let me do that for you but they soon figured out that I could do all this stuff on my own. I was maybe a little bit slower, maybe a little bit more awkward than what I was prior but I could still function and do everything.

[Friends and family] were kind of like everybody else at first. They thought, you know they would help me do this and help me do that and they soon discovered, that I didn't need anything special. It was, I can pretty much do what I did before.

It was good to have visitors. The only one that couldn't visit me was my brother because he was still in Vietnam. He was in the army and he was down south somewhere and with tanks. He comes out okay. He got wounded a couple of times but nothing serious.

I had minor changes in the hospital, I guess. It's not any more than what you'd have to go through if you broke your leg and were on crutches or something. I mean, it's like okay yeah, you were in the bed and had to go to the bathroom, yeah, you have to get up and put your leg on before you can walk in there. But I mean, other than stuff like that, no, I don't remember any changes as far as daily routines.

I was glad to get out of [there]. I wanted to get back home. When I spent the days in the outlying ward and went to therapy for two hours a day and all I did in therapy was walk between the mirrors or helped other patients. I felt like it was a waste of time for me there. I was out doing things the other 14 hours a day and so why did I need therapy for two hours to do the stuff that I was already doing the other 14. I felt it was a waste of time. I thought the therapy should have went long enough for me to learn how to use my leg and then I'm done with it. Get me the heck out of here.

I felt I got good care all the way through and for the injuries...I felt the outcome was great. I don't remember ever being tested in any way for any psychological problems...I don't think Rochester hospital up in Minnesota could have done me any better. I don't think any other doctors or any other place could have given me better care than what I got.

My goals in life changed. One of my goals before I went was I was going to come back and cut meat but when I got home I couldn't find a job and I was outright told by one of them that because of my injuries they wouldn't hire me. They felt it was an insurance liability to have me working there and they just outright wouldn't hire me and that's why nobody else would hire me.

I walked pretty close to a normal person so I never really ran into anything that I felt had to be changed because of my disability...I guess I felt it would keep me from doing a lot of physical things, you know, playing baseball, volleyball, football and stuff. So as far as work and stuff, I guess I never really thought about it as being any detriment to the rest of my life. Some days you could walk good and other days it hurt like hell to walk so I pretty much figured out early in the process there was going to be good days and bad days.

They were all mostly good days but it was [bad on] hot days. The stump sock which you wore would make you sweat and then it would stick to the leg instead of sliding inside the leg and if you didn't go change it you finally wore a blister and then the blister popped and then you had an open sore on your leg. Well, then that made it a little bit tough for the next few days until that kind of toughened up but see we're still on it for the next two days, even after that.

The phantom pain was more of a five, ten-minute thing. It may happen multiple times during a day but it was just kind of unexplainable. You were like well I know it hurts down there on the toe but you know the toe ain't there. So it was just you put up with it for a while and then pretty soon it just kind of went away.

After I got back and couldn't find a job, I did a lot of drinking. I was pretty much [at the bar from] 3 o'clock in the afternoon 'till 2 o'clock in the morning. I got started drinking heavy in high school so I guess I just never grew up and learned to quit and then I guess part of it was out of boredom. I didn't have a job. Nothing else to do and so that was a way to go interact with people and do something every day. I mean most people had to get up every day and go to work. I had to get up every day to be at the bar at 3 o'clock.

After my months of heavy drinking I decided this wasn't the life I wanted and so I've never really had a drink since then...So, I guess I just formed attitudes that I wanted to make something of my life. I ended up getting married. While I was going to college, I went to a two-year industrial marketing course. After not being able to get a job I finally decided I had to do something. So I started working with the VA and vocational rehabilitation and I took tests with them to try to figure out what field to go into and then they came up with mechanical and dealing with people. So I guess that's what kind of got me into industrial marketing. I really had plans that I could do that but about six months into it my wife and I laid in bed one night and decided to buy the property across the street and build a grocery store.

My goal before I went to the service was I was going to get back and cut meat again in the grocery stores and I figured that's what I would do the rest of my life. That I would eventually be a store manager. When I got out and found out I couldn't get a job in the grocery stores, that changed my life and that's what got me started into college. But then I guess after I started college I still had that thought in my mind that I like the grocery business and that's probably what drove me to buy the property across the street and build a grocery store from scratch.

So I started looking for financing and couldn't get any banks to talk to me. I went to the small business administration, asked them for \$125,000 and they approved \$25,000. Then my parents and grandparents mortgaged houses and sold some property and I worked with the grocers federation and where I was going to buy my groceries from and basically came up with the financing through alternate means like that and we opened the store that year.

I put up a 50 x 50 building and now at that time the population of the town was 600 so it was a small town. I carried a full line of groceries. Had fresh meat and produce and cold beer. Not quite the selection of some of the bigger stores but I mean I had everything there. I ran that grocery store for about seven years and decided I wanted to get into the gasoline business, more of a convenience store type thing and accomplished that and then in 1980, about nine years after we opened it I ended up leasing it out to a chain of convenience stores.

We pretty well lived just a little bit above average income through that and then when I got out of the store and leased it out I did some part time odd job carpenter work and stuff and then that got me started doing some work right here at home in my shop for craft shows and stuff.

I got started in the scroll saw thing by people wanting me to do the odd jobs and the next thing I know the ladies want me to build shelves. One of the tool suppliers where I bought my scroll saws

from asked me to go do a woodworking show to demo for them. During the demo the booth across the aisle from me had this gorgeous damn woman in it and I had just gotten divorced about a year before that. . .

About '91, '92. I was trying to find out who this girl was and talked to the people at the editors of *Carpentry Magazine* and then got to talking to them about why they didn't have scroll saws in their magazine. The next thing I know I'm the scroll saw consultant for *Carpentry Magazine*. That turned into a very lucrative thing for me...I figured at the time I was probably making around \$20,000 a month.

Well, I was working 16, 18 hours a day but I guess that's the point where I started taking that money and bought the house across the street, tore it down and bought a commercial building so I kind of invested that money I guess.

As far as other affiliations, back maybe about 1974 I got into the fire service. I spent 24 years on the department, 13 of which I was fire chief. I helped keep the department running, to make sure all the calls are answered, to make sure the personnel are trained to work with the city council and getting financing for new trucks and other equipment that you need. I was also certified through two weeks of training with them on fire investigation and bomb detection and all kinds of stuff. I guess I enjoy helping others. You know, knowing that, out of the 32 years I was in the fire service, 23 of the years I was also a medic and rode ambulance.

I guess shortly after I got home I never really considered myself as handicapped. I always considered my leg was a little bit of an inconvenience but not really per se a handicap. I know the loss of the leg changed probably the course of my life but I guess I made the best of it and re-defined my goals to things that I knew I could accomplish even with the loss of a leg.

I was rated 60% disabled right from the beginning and I receive disability for that. While I was going to college they changed my disability to 100% rating. I got a thousand dollars a month while I was in college plus they paid all my college expenses, my books and tuition. And then once I got out of college they took me back to the 60% and then I think that was like \$580.

Compared to everybody else in my same situation, yeah, I guess I was satisfied with it. It was like I would sure give it all back to get my leg back but under the circumstances, yeah, I was satisfied. I guess I could sit and look at it and say okay, had I lost this leg in a car wreck they would have probably given me \$100,000 for the loss of the leg and that would have been it. So at least with the VA I had lifetime medical and they're going to buy my prosthetics all the way through...So, you know, I guess that over the years of looking at it I said yeah, the army took good care of me. They supplied me with a new prosthesis whenever I need one. At times it's been a hassle to get them. You go down and say this one don't fit and you know, I can't hardly walk on it anymore and it's like well, come back in six months and we'll reevaluate it and see whether you really need a new one or not. But I guess I've eventually got one and I've never had to resort back to going to crutches because I absolutely couldn't use it.

There were a few instances where I guess [my injury] slowed me down but I would say that's about all it did. I was still able to do the job as well as most of the people. But when it came to physical things that you needed your leg, I guess I was probably below average but I feel that I made up for that in the work that you didn't need your leg. I used my mental and other skills that I was probably above average.

I had a heart attack in 2003. I think it was, and reading on the internet about, amputees and that sort of thing it says they're now kind of linking health problems and heart problems to the amputation because of lack of exercise.

So I don't know whether to say that's true or not. I know I don't get as much exercise as guys that have two good legs that can get around good and it's just harder. I've really went down health wise. To me now, if you say let's walk up the street here a block to the restaurant, I'll drive. I can't walk a block.

I think it's more of a blood circulation problem or something. Prior to the heart attack I was getting around better than what I am now and whether I can attribute that heart attack to the fact of not as much exercise as the normal person, I don't know.

I guess I would say that being injured has forced me to do things more mentally. Rather than being the physical person out there doing the work, I've learned to be more of the one leading. So it's like I don't have to do the physical work now, I do the mental part. I'll get it all set up and then I'll tell you what I need done.

I think my life would have been a whole lot different had I not been injured. You know, my goal was that I was going to come back and cut meat in a grocery store and eventually become a store manager.

[Currently, my main challenges are] just getting around some places anymore. But other than that, I don't recall it's ever really been any barrier to doing anything else. [I mostly attribute my success] to my willing[ness] to give. You've got to be willing to put your time in. Get involved in things. Think about other people I guess.

I guess I felt my care and recovery were just as well as expected. For the new ones coming home now with the same injuries and I see on all the news media. Oh, they're doing this, they're doing that. They're going into this marathon. Enjoy it now. I guess from my experience I see that, yeah, they're out doing marathons and running now but in ten years I don't think they will be and I think they're going to see that that leg is going to slow them down on a lot of the physical stuff later on in life so it's kind of start developing some other talents. Don't depend on the fact that you're the hero because you can go out and do this marathon with a leg and get on the artificial leg and get on the poster. Because ten years from now nobody's going to remember that and you're not going to be able to do it anymore and if that's all you based your life on you're going to be shit out of luck.

Profile of Mr. Frank Robinson (Below the Knee)
(Originally Interview Transcript 49 pages)

Mr. Frank Robinson lives in the Midwest and was born April 10th 1945. He was drafted into the United States Army in 1967. He was injured March 29, 1969 near Plei Trap, Kontum Province, Republic of Vietnam. He is a right leg below the knee amputee and currently uses a prosthetic device. He is married with three children. He reports his general health status as fair. He reports multiple health complications including heart disease, back pain, arthritis, stump pain, phantom pain, phantom sensation, other pain, depression, PTSD, other unspecified mental health problems and a neurological disorder. The interview was completed on November 1st, 2008.

This is Frank's story.

I married in 1966, got drafted in '67. [Before being drafted] I was working at the phone company full time—going full time at night school—having the first year of our marriage. [I was studying] electrical engineering at the University. [At that time in my life I was] pretty lucky go happy. I was a lifeguard through most of the summers. I worked at a swimming pool before that. Worked at a gas station—various things—driving range. We didn't have a lot of money. If it wasn't in the garden, we didn't eat it out of the winter. Mom canned everything. That's what fed us through the winter...

[I entered the military] in September, 1967. [I was] not drafted. [I] volunteered for the draft. You were pretty well going to go at that period in time. We were just frozen in time and we couldn't move on and we wanted to move on with our life and it was one way to get past the bubble...[So then] I took basic at Fort Benning [and] I had volunteered for the draft [because] my four years as a student had expired. They were going to take me next month. You were blackballed. You couldn't get a loan for a house. You're scared to have children. We decided to volunteer for the draft and probably make use of what I had in skill sets...they wanted me to be an officer. I says—no, no you don't understand—[I'm] married, [I will serve] two years and [then I am] out. They said you are qualified for that. I says—no, no, you don't understand, two years and out. So at the end of that they turned around and sent me back to Fort Benning to the NCO school which was combat training, purely combat training, for NCO's.

[I was sent to Vietnam in] September '68. [I went in as a replacement for] the Fourth Division that was in Pleiku... Pleiku was the reason Johnson sent in all the troops. The 101st got wiped out and then the 173rd got wiped out and it didn't get any better after that. Then the Fourth Division came in. Airborne companies can go and start a hell of a fight but it is the Fourth Division, First Division, Big Red One—those are the people that actually can go in and hold ground and that's the harder part of the job.

I was an infantry sergeant. My job was to go out, seek out the enemy, and kill him. I was a squad leader.

[When I was injured...] in this particular battle it started—first part of March, March 2nd or 3rd, and we were going in—it was Tet Offensive, the following Tet Offensive, you see in the paper. It was the one all talked about. It was far, far worse but President Nixon had come in at the time and there was nothing came out of what went on there. You never saw any news men or any media up in that area...It was simply because they would get killed. It was very bad where I was. When I was injured we were 23 days in the battle to give you an idea what that battle was like. The first day of that battle one of our companies went in and they were with the 38th A Company. Within an hour

they lost 40 KIA and within two hours the rest all had holes punched in them. This was a big assault. The NVA outnumbered us tremendously. They had tanks. They had mortar and we didn't.

[On the day I was injured] there were thirty two of us. The 1st Company...they got wiped out. The second day of that battle another company had to walk in to get to these people because they were shooting our helicopters down. And they wired an LZ and it blew up and it mutilated a bunch of them but then they had to move out to continue the battle because there is no time-out in battle. Just because they showed up they were still getting mortared and shot at. The third day we went in to try and clear the LZ and get the wounded and dead out and continue the battle.

On that hill we lost basically two platoons out of my company. When I got hit, we were on a hill that we're—there were thirty-two of us left out of four... three companies. That's roughly, with replacements, pretty close to four hundred men. Company operating anywhere between 110 to 120 people.

[There was] an assault Christmas Day, the third day. It never ended. My turn was to lay down and close my eyes and try to get some rest. I no more did that and I woke up to a large explosion. I heard the words—somebody yell—attack. I don't know if that was our people or the enemy and I believe it was the enemy from the direction it came from to the left front. Then you could hear mortar rounds dropping down. Mortar tubes kept coming out: thump—thump—thump!

[During the attack] I rolled into a bunker and a fellow I continued to communicate with, he rolled into the bunker right behind me. Then I had a fellow—he wasn't to be trusted very much and was pretty lazy and you usually don't last long but he did for some reason. Being of that nature economics will take care of you one way or another. Either you don't cover their ass and let the enemy take care of them or they're stupid enough to get killed. There is no rank in battle it's a matter of function. We got down as slow as we could and you could feel and hear the shrapnel whistling around. Some would come in and hit the back of the bunker. We had put up a barrier in the back of the bunker because they would—you would throw a grenade up and let it roll down into the bunker. So, if you put a barrier up at least it wouldn't roll in with you. You know somebody's going to get killed but you just go on. You tend to compartmentalize. Those people get killed so you can keep your sanity and go on. I heard—it sounded like they were dropping a round, dropping a click on a mortar tube and walking a mortar down the hill. All of a sudden, we took a direct hit. In reality, what happened, the NVA had come off out of a draw in front of us and they took three bunkers and hit them with RPG's. After action report will tell you they hit two, they hit three, but only two were occupied. Sergeant Board, my E-6, and a new fellow and FNG—Friendly New Guy—were killed. We were in the third bunker and took a direct hit. That'll make your ears ring. That's a pound and a half explosive shape-charge meant to go through 15 inches of solid steel. It's an anti-tank weapon. It will also breach bunkers and makes a nice shot gun if you can detonate it in front of somebody. I'm feeling around for wet spots—remember, no light, no moon—and trying to feel if I'm bleeding...

And then I heard some footsteps go by and I heard something come in and hit the bottom of the bunker thud and I hear a fuse burning. I was the first fellow in the bunker and there only one way out and there was two men, you know, in front of me. I knew I wasn't going to make it out. I told the men get it or get it out—get out. Preacher, he got out and [the other guy] was starting to get out but ran into preacher's butt as he was trying to get out and he just sat back and put what he could in front of him. It detonated. I could feel myself being propelled up in the explosion. People will ask you, if you go to Fourth of July events do they bother you? I say no, the explosions are totally different.

They are much more slower velocity with their boom-boom. Where, with KGI explosive it's a crack. A real sharp crack. Loud crack. This particular explosion I felt myself—it went ba-boom! I was so close and on top of the explosion and I felt myself being propelled up through the top of the bunker, hitting the bunker and going up with the limbs and sand bags and falling back down and hitting the ground like a rag doll not feeling any pain. Then I went into an immediate white space. I could remember my mother canning cherries out of a cherry tree in the side yard... My dad playing football with me and me squealing like a pig and my dog putting my dad's head in his mouth... Playing baseball and things in the cemetery...it was the end of our street. Then I got to my wife and I could remember what we—the good times we had had and what we had planned. She said come back no matter what. I was given a clear distinct decision. I was either going to die or not die.

Instantly I was back in my body and I tried to breathe. I couldn't breathe. So I thought to myself in a very clear common sense methodical thought, I have no lungs and I'm going to die. Somehow I coughed. What had happened; debris had been blown into my mouth and into my nose and blocked the airway. Then I could breathe. Then I realized I probably ought to get a medic. So I attempted to step out of the bunker toward the back. We were in an old mountain yard village. And there was a path from behind my bunker that went up toward the top of the hill to where the command post bunker was. That was the captain, the medic, the radio man, the lieutenant, and the first sergeant. I was crawling up there I heard footsteps go by and I knew they were not our footsteps—we'd been over-run. I would lay still when anybody went by and there was explosions going off all around. About halfway up the hill or this pathway I noticed my right leg wasn't pushing like my left and felt down and all I felt was a stump. Actually my leg was there but it was just hanging on by meat. It took about six inches of my bone and turned into powder basically from the concussion. I thought, well, I need to get a tourniquet. I called to the top of the hill. I yelled for the medic and the first sergeant came out...I've never found him to this date but I've looked for him. He came out and he laid with me through that time—told me to keep quiet. And again, I wasn't feeling a lot of pain. Your adrenaline is up and that's one of the reasons that allows you to live like this because your arteries/veins shuts down defensively the blood extracted into the trunk of your body during combat. As time went on lights started to come up. I couldn't see because my eyes had hemorrhaged and it was dark so that made it twice as difficult. The medic came out and attempted to straighten my leg. It was just excruciating pain at that point. I said leave it alone and he realized he couldn't do anything with it...

Shortly after that I heard the captain yell for the first sergeant to drag me into the command post because standard order of battle is when you are over-run you call your artillery in mortar fire in on top of yourself...After that ended I had probably been into my first or second morphine shot. I can remember the light of day start to come up. I tried to look with my eyes and all I saw was red shadows because the blood.

So, I was medivacked out. I can remember as I was pulling out, I looked for the bunker I was in and I could see a little better by then but not much. I could see the bunker I was in and the sandbags after—when the explosion went off—it took the sandbags and laid it in a neat row in the back of the bunker and in a neat row in front of the bunker. Some of the wood had fell into the bunker. It was astonishing. It looked like somebody placed them there by hand. They were in a very neat row.

[When I was being taken to the field hospital] I would lapse in and out [I was taken to] a place called; I believe it was Polei Kleng. [At the field hospital] I can remember telling the doc, he came around and I said—get the other guys they're worse than me. I didn't know that necessarily but that was my demeanor and thought at the time. He came back and he looked at me and he said—

well I m going to have to take the leg. I said—I know that, it doesn't bother me. But he says he's going to take both testicles and that upset me quite a bit. [With my testicles] they debrided which means that they took portions of it and put the rest back in and hoped it would live...I'd been through my fourth shot of morphine by that time. Then they moved me back to an area where I was behind a white sheet and knocked me out. Triage, when they treat you in combat, they treat those that are going to be most likely to return to battle fastest are treated first. Those least likely to make it are put behind a white sheet and if you're still living when they get to you after these other people that's good but if not that's the way battle goes.

[I don't know how long I was behind the white sheet for]. I can remember waking up and coming about eighteen inches off of the table because of my, the only thing I had left on me of my clothing was my zipper and my pants pockets and my belt. The rest had been melted and blown away or injected into my skin. They were trying to literally rip my pants out of me and take what debris and scrub me down and prepare me for surgery and that was excruciating pain. They must have hit me with a little more morphine and knocked me out. I went in surgery. They woke me up after surgery. The doc did intentionally so he could tell me and then knock me back out again. I was medivacked out to Camp Enari which had what would be more acceptable as a hospital.

And I can remember bits and pieces of that [Camp Enari]. I can remember seeing a full body x-ray of me and I had three IVs: one in my neck and two in each arm. I can remember seeing vague things, cloudy. Things of that period but not a lot. I was knocked out probably for, I think it was, three days before they shook me out. They generally didn't shake you out unless they thought you'd live. [Then they kept me at Camp Enari for about three days to make sure I was stable. They also cleaned up my leg] but they didn't sew up my leg. They left as it was cut off like a meat cleaver. And it stayed that way for quite some time.

[After Camp Enari] they flew me to Camron Bay. On a beautiful day, I flew in to Camron when I came in. They kept me there overnight. Then they flew me from there to Japan where I probably stayed for about two weeks, two and a half weeks [at Camp Zama]. Every day twice a day they sent me to a little stainless steal tank and put me in Phisohex and water and hot tub and flushed your wounds to try to keep from getting infected...They marinated me in antibiotics.

I was on a severely injured ward. There were two guys across from me that took five AK-47 rounds. One had it from the left hip to the right hip. One had it from the left shoulder to the right shoulder and now they had organs missing and they were paralyzed. They were still alive. Had it had been M-16's they would have been dead because they don't pass through you they expend all the energy in you. You get hit in the arm they will take an arm off where an AK-47 round would just pass through you. Their rounds had a steel core to them. They would pass through a helmet like butter but they weren't armor piercing rounds. It was cheaper because they didn't have as much lead as we did, apparently, in Russia or China. There was another fellow. He was one of these big pin wheels where he was totally paralyzed. His mother and father flew over. I can remember seeing him—got pictures of him. On my side of the room there was a fellow that had lost his leg and another guy that was shot up pretty bad and there was me. Above us was the burns ward. They actually had tanks that you would water livestock filled with saline solutions and actually had people floating in that solution to see if they could, you know, they could survive.

[I have a purple heart but never had a ceremony]. When I was in Japan they were cleaning up the fellow's... floor, who had left along side me. They said—who's Purple Heart is this? I heard them and I said—it must be the other fellow's. They said—is your name Robinson? I says—yeah. He

says—well this is yours. That's how I found out I was awarded a Purple Heart. That Purple Heart was probably awarded, I don't know where, it was issued the day after I got hit. I don't remember where I got the Purple Heart.

You were in pretty much pain. I didn't want any narcotic shots. I got to the point where I could take them, look at a spot on the ceiling and put myself in that spot on the ceiling and look down on myself to avoid the pain or circumvent it. Every once in a while that spike would come up through my marrow of my bone—kinda wake me up.

[I was even having phantom pain at that time] and the first two weeks the burns were terrible. They had me wrapped in oil gauze when I arrived there. And then they sent me in and they opened me up again and cleaned me up. I don't know what this doctor's mind was, or whoever, but they didn't wrap me back in oil gauze and they put me back in the bed without any dressing or maybe they had dressing on it but it wasn't oil gauze. I can remember waking up in the middle of the night after being knocked out screaming and yelling and again about eighteen inches off the bed. What had happened is that my wounds had oozed out, adhered to the sheets and then when I started to awake when I'd move my leg or anything else that was burned from my waist down it would just rip flesh off my body. Again, they came and hit with some Demerol and knocked me out. So about two and a half weeks they figure you'd live long enough to get back to the states and they put me on a plane. Twenty-three hour flight back to Andrews Air Force Base. We stopped in Alaska and refueled over Hawaii. We only lost one man on the way back. And from there [Andrews Air Force Base] I flew to Fort Gordon in Augusta, Georgia.

[My wife was on the base and] they took us inside and they put me in a bed and my wife came in looking for me and I was there I could see her in the doorway but she didn't know who I was. I was down probably about 125 pounds at that time I went over at 180-165. I was probably pretty well messed up because of burns and scrapes on my face and stuff. She tried to tell the nurse—my husband, my husband's here. The nurse kept asking what his name was. She never got to that. Finally she looked over and she recognized me and she says—him! You know, and she come over and we were there maybe a half hour. Being so callus and hard from combat I said jokingly—and you got to put it in perspective—let me show you my wound. They were changing my dressing at that time, one of the nurses was—he or she. I showed her my leg and again it was as if it was cut off by a meat cleaver and I says—here I am, you can have a pound of me for free. And she almost passed out; went to the floor. She stayed with me for seven months while I was down there.

[During my seven month treatment] I was sent to a whirlpool several times a day, and then it lessened. The docs; one of them's learning to be an orthopedic doctor and another one's a regular doctor. They gave the best they could. I mean they were very sincere. The nurses they were the ones that kept you alive, okay. Not the doc, they weren't there that much.

As whirlpools went on and they thought that possibly they could sew you up. They would take a skin graft off your part of your other leg or whatever a good part was...and sew the skin graft over the stump. See if it would hold and not fester and blow up with infection. Mine did well and, I don't know, maybe a month and a half two months into this, I think, they did a final revision on my leg. They cut off another inch of bone and two inches of the tibia and somebody to down there with a brass file and beveled it off so it didn't cut through the flesh. They took the back of the muscle and pulled it up over the top of the front of the bone in front of it and sewed it together. I was lucky in a way because my ear had been damaged so bad that they had to put a new ear drum in and the normal procedure for that was you would sit on a normal examination table they would have a bucket along

side of you for you to puke in and they would cut your ear off and you would get nauseous and puke in the bucket. They would cut your ear off and then go in and take a snippet of muscle tissue covering your muscle and sew it in place of your ear drum. In my case they decided to do that all at once.

[In the end my leg was amputated] six inches below the knee. Burns were the major problem of the first two weeks of my injury or so but that subsided and other pains came in. Pain kind of comes in ripples. What ever hurts the most you pay attention to the most and then it just progresses to the next one after you get rid of that one. [I continue to have pains today]. You just get a different pain. Like somebody drives a spike up the marrow of your bone.

I had my left ear drum blown up to the point they had to cut my left ear off and sew that ear drum in. Just recently they discovered traumatic brain injury and I have a recent discovery within the last ten years, I'd say, of a syringomyelia in my spine. That's where my spinal cord's expanding and it's like a slipped disk only mine is from T1 to T12 and it is gradually killing the nerves from the inside out. My spinal cord is three to five times the size. That's something that occurs twenty, twenty five, thirty years out from the injury. There's only 65,000 people in the United States with traumatic injury at the VA of that nature. At the VA there's only two of us [here]. Very rare. [I also suffered an injury] to my groin area. They had to remove both of my testicles and I told him you can't do that and he said—I'll see what I can do. He said—one's got a quarter-inch whole through it. It's dead. He was nice enough to me after the operation to let me come to enough to say—what was left of the other one I debrided and put it back in.

I got a prosthetic [for my leg]. At first they were rather primitive. They were—you wore a wool sock on your raw skin. The wood was light and strong and it wasn't actually a wooden leg. The foot was basically a mannequin's foot. It had no dexterity or flexibility to it at all. It gave you a lot of back problems. Now they're progressed to the point where I have a sheath I pull on. It's anywhere from an eighth-inch to a little over a quarter-inch maybe a three-eighths inch flesh feeling plastic, well, it's not plastic, it's actually mineral oil so it doesn't irritate your skin. You don't have skin break down, tissue break down like you used to if you walked a lot. [I've used the prosthesis] to this day.

[With the prosthesis] you put it on and it hurt like hell and they'd adjust the file out somewhere, you'd put it back on and it felt pretty good and then it would hurt some more and then they'd file it out some more and relieve the pressure until you got all your pressure under your patella tendon right underneath your knee cap below the amputation. In the back part was a bar that pushed you forward on that knee, on that patella tendon, and held you there. That was a matter of bearing the pain and walking. I learned how to walk within five minutes when I could withstand the pain. They would send me in and try and get my left foot to work and we would try to pick up marbles which I was never able to do with my left foot to get better to get my toes working. I was never rated for that.

[As far as my other injuries] what had turned out in a rating later on, they awarded me for perennial nerve damage of my left leg all the way down the side and loss of strength in my two outside toes. I could bring my toes down and the big toe and the toe next to it would stay down but the other three toes would eventually just kinda float up. Matter of fact, after I got home I was in a swimming pool, first year with my wife, and I grabbed and went to throw her up in the air and the neighbors yard, it and sandbox, and I broke all three of those toes because I had no strength they were just peeled back. But I was never rated for that until that until later. My burns healed up and they didn't rate me for them because they weren't visible. You had to have eighteen inches or square inches or about square

foot of continuous burns. They didn't impede me in motion enough. If I get in a hot tub I have fry spots constantly because the skin's real thin from the burns. A high explosive burn is much different than getting burned like getting burned by a fire. It is a very rapid; it's a very [claps hands to emphasize effect of concussion] flattening of the skin. It's a concussion of the skin, a totally different burn than if you get burned by a fire like a match or something.

And I was discharged... My retirement orders were for September 10th

[When considering the care and treatment I received the first 12 months after being injured I believe that what was most helpful was] my wife [even though] I think everybody's doing the best they could with what resources they had. I don't know that there was a least helpful—I mean you—they were doing the best they could.

[Looking back] I can tell you the VA was a negative experience...I went in and everybody had the same appointments—7:00 in the morning. I didn't know that at the time. If you got out by three o'clock you were happy. I finally got in to see a doctor because I wasn't assigned a doctor. An out patient clinic. I finally got into see a doctor. I said I need to get some ankle balm which was kind of like a Noxzema that you would put on your leg to keep it from rubbing holes through your skin because I had pressure points from the breakage. And I said—to be able to wear this leg. And he looked at it, took it off and everything, put it back on. He says—I can't treat you here. He says—you're going to have to go to Fort Knox or Fort—Wright-Patterson Air Force Base. I said—but you have my retirement folders. And he says—I can't treat you here, sorry. And I can remember thinking; I've killed people for less than this. [As to why he couldn't treat me he said] “Well, you're just not in the system.” But why he chose not to treat me is...I don't understand why. So that afternoon after I left there I had got my leg made by Hanger and I looked up Hanger in the phone book up here Hanger is a large prosthetic company. I found one [here] and I drove over to there. I went in and I saw a fellow and this fellow is an old-time prosthetics' and he says—were you injured in Vietnam? I said yeah. He says—well why didn't you go to the VA? I said I did. I says—this is what happened. He says just a moment. He went in and he called a guy and he comes back and he says—I want you to go to the VA and I want you to see this man at one o'clock tomorrow. So I went to see him and this guy was not a doctor. He was head of the prosthetics area. Now, the doctor had to give him dispensation, I'm sure, but he asked the doctor afterwards, I'm sure of that. Fifteen minutes after I saw this man I walked out of his office with an order to get a new leg made. I learned right then that the system is generally not the problem...it's individuals within the system.

[With all the medical care of the first 12 months of my injury] they treated me with respect with the exception of the VA. I didn't go back there...

[The most challenging part of my recovery was when] I had to go home and tell my wife after the VA, after the third procedure, that there was no sperm and I can remember her slamming the door in my face. I was standing on crutches with one leg outside the door. Other than that I don't know of any challenge.

[When it came to the fact that I was injured] they [the injuries] didn't bother me. At that time it didn't bother me. I was so thrilled and ashamed to be alive. You don't understand combat...I mean, I met a guy and I'm carrying him up the hill, and I'm finally so exhausted we all take a break and lay down. He says—my eye, my eye; he says—take a look! And I looked and I said—oh yeah it was an eye socket. And I says—you don't need to worry about that. That went on. It was seven months of combat. This was mundane. This didn't—I wasn't important but you don't understand that. I

wasn't important: it was my men, it was getting home, it was my wife; it was everything but me.

[The most challenging thing I had to deal with after Vietnam was] telling my wife we won't have any kids. [After treatment for my injuries] I had a mission to get on with putting my life back together and getting a family and traveling like a normal person. Again, I didn't have any condescending thoughts of anybody outside of that doctor and therefore I didn't go back to the VA except when I absolutely had to for medicine or something like that or an infection. I went to a private doctor for most everything. Put yourself back in my state of mind and I was lucky to be alive. I felt guilty getting medical care and attention. I didn't realize if anything was short or bad or indifferent.

[Looking back] I felt guilty about living...I mean, I was the only one out of my squad that made it. I lost two E-6's above me and two lieutenants above me. It was not a tennis game. [The men who led the assault against us]...we didn't hate each other. There might have been anger and things but we didn't know each other to hate each other...It seems odd but that's just the way it is. If you're at somebody else's mercy, neither of you want to be there. Somebody with a pile of money put you there and that's the way it goes.

Profile of Mr. Willy Wilson (Hip Disarticulation, Below Elbow, Above the Knee)
(Original Interview Transcript 43 Pages)

Mr. Willy Wilson, who lives in the southeastern United States was born June 13, 1944. He was commissioned as an officer in the US Army and served in the 101st Airborne in Vietnam. He was injured near Cu Chi, Republic of Vietnam July 21, 1968. Mr. Wilson is a right above the knee and left below the elbow amputee. He currently uses a prosthetic device. He is married with two children. Mr. Wilson reports his health to be very good and also reports other pain. The interview was conducted on November 3rd, 2008. This is Willy's story.

I have a right, above knee, amputation. My right leg is about eleven inches long. I have a left hip disarticulation. I have no femur at all in my hip joint. I have a left below-elbow amputation. My lower arm on my left side is about six inches long. The only other significant injury [was the] damage to both ears. Both eardrums were perforated and I have had problems with them over the years. Fortunately, I had no internal damage. That's one reason I had that somewhat accelerated rehabilitation.

I have a wheel chair, which I use probably eighty five percent of the time. For the last two years, I've had a power wheel chair, which I use when I need to go extended distances. I have a left below-elbow prosthesis that I wear [all day]. That's the only two personal devices that I use.

I finished high school in Georgia. I graduated from college with a BS degree in mathematics in 1966. I had intended to make the military a career so I was in a military college. The last six months prior to my enlisting in the service was my last six months in college. I entered the military within two weeks of my graduation. That was my intention, it was the culmination of a process that had been set in motion.

I attended infantry school, Ranger School, and airborne training all at Fort Benning before I left to join the division at Fort Campbell. That was my first unit assignment. I was at Campbell approximately nine months before I left to go to Vietnam as a platoon leader.

I went over with the men I had trained with. Our unit was kept intact. It was a tremendous assist for anyone going to Vietnam to go with people you already knew, as opposed to being a replacement when you knew no one.

You go to school to learn the school solution. But, how it applies on the ground is another whole round of education. Familiarizing yourself with real circumstances was essential to become a cohesive unit, as the situation got serious. [Being] from a military family I kind of had a leg up.

Well there are instances where we would come across combatants but normally they fled at the first opportunity, during the first several months. It wasn't until we were into our third month in Vietnam that we began to have any substantial enemy contact. We had suffered our first casualties in our third month. It escalated significantly from that.

My base camp had remained the same for the entire time I was there, even though we traveled. The furthest we ever traveled away from our base camp was almost two hundred miles north of where we lived. But we always came back. I had been in the field approximately two weeks. My company—I was a company commander at this time.

I had a company as a first lieutenant, which was not that unheard of. We had been in the field about two weeks. That was a long stretch for us to be in the field without being pulled back to the base camp or to another substantial base for us to have a little time to clean up. We were excited about the possibility of getting to go home. The day that I was injured, was the day we were scheduled to rotate back to the base camp.

We were on search and destroy and clearing operations with a substantial number of enemy combatants. It wasn't very hard to find them. We were scheduled to rotate back to the base camp, so we had been given a pick up zone some ten or twelve kilometers from where we were. As soon as it was good day light, we moved out to the pick up zone. We were set to be picked up about eleven o'clock in the morning. But, we were there by nine o'clock because we were anxious to get back. While we were resting near the pick up zone, I began to hear on one of my radios that a sister unit had observed some fifty caliber machine gun fire coming out of a little village. The more I listened to this the more involved it became. I thought this was the kind of thing that would screw up getting rotated out of the field. My worst fears were confirmed because instead of being picked up at eleven o'clock we were told to stand down; we were going to be part of a six company cordon. Six companies were going to make a big circle around this complex and close in and see who we could catch. Then shortly after noon we were picked up. My company was the last of the six companies to be put into position. We were placed about a kilometer short of where we were supposed to enter in.

We began to move out. This particular portion of South Vietnam is marked by what we referred to as hedgerows. The area was old garden plots or farms. Typically they were rectangular shaped fields anywhere from twenty to forty yards wide, fifty to seventy yards long. Around the perimeter rim was a low amount of dirt probably eighteen inches to two feet high, five or six feet across. Over the years these areas had grown up with bushes and brambles and trees. It made a natural barrier, very difficult to see what was on the other side of that until you had gone through that area.

That type of terrain lent itself for sniper and guerilla-type activities because it was difficult to traverse. And the way we would find to best operate in that was to separate your unit into two columns about ten yards apart and in this column each man was to be some five, six yards behind the man in front of him. We would proceed in these two columns in the direction we wanted to go and I had my map and compass out and I circled the direction of march. We'd come up to one of those hedgerows and a team of three or four men on each column would go through that hedgerow and go all the way across to the next hedgerow. Once they cleared that area then we would proceed with the balance of the unit. It's slow and tedious work. We had to look for mines and booby traps and all that stuff.

There was evidence that this area had been active before. We could see evidence of explosions and US Army material that had been damaged. We found the stock off an M16 rifle and stuff like that. So, we knew activity had taken place in this area, which certainly makes you want to be as careful as you possibly can. I'm talking to my boss in the helicopter flying around. He's anxious for us to get in position. You want to get this over with so we can get out of Dodge before sundown. I had a rifle platoon in front of me, in the two columns. So, immediately in front of me I probably had sixteen or eighteen men.

Behind the Second Platoon, which was the first one in the column, was my headquarters element. In the headquarters element, I had my artillery observer, his radio man, my two radios, my medic, and the artillery observer for the 4.2 mortar platoon. I had about nine men in my group. When I got to this hedgerow, my first sensation was eerily quiet. I had stepped on a 105 mm howitzer round.

It was one of our rounds that had a bad fuse. It was fired by our artillery, dug up, fuse housing taken out and was replaced. It may have been a 105 mm howitzer round because one of the men in my company picked up the fuse housing and brought it to me in the hospital about a week later. I'm aware it's really quiet and all of this debris is raining down on me. It was a strange sensation. It was sunny and now it's cloudy because of all the dust. All the stuff was plopping down on me and it was certainly confusing. I was trying to stand up.

The concussion was so overwhelming. My senses were overloaded, and I didn't know what had happened. My first conscious thought was it's dark and what's all this stuff plopping down on me? I kept trying to get up; I could not get up. I had fallen in the cone made by this explosion. I went straight up in the air and came right back down in the hole. When I looked down in this hole, I saw that both of my legs were gone at the knee. My right leg was cut off cleanly at the knee. My left leg was gone at the knee but the thigh bone was exposed from the knee all the way to the hip. The most startling thing was how glistening white the thighbone is surrounded by all this red flesh. I'm looking and seeing that blood is pooling in the cone. When I saw that I just kind of laid back. I stopped trying to struggle to get up, because I was coming to grips with the reality of what I'd just seen. My first thought was I was extremely angry. How could you do something this stupid? How did you let this happen? You're a company commander! You're in charge of all these guys! If any idiot had to do something like this, why is it you? [The] anger was self-directed. Somehow I had done made a mistake. It seemed like I had all the time to really flesh that out, to really get as angry and as spiteful as I could. My next thought was I wanted to die.

I had been married six weeks from the day I left for Vietnam. We were supposed to be married about a year but the division decided everybody was going to go at once and that skewed our plans. The idea of going back to a new bride like this was something I was just not prepared to do. It was going to be terribly unfair for all of us. I guess I was thinking more about myself at that time. I did not want to go back like this. It seemed like I had all the time to be resigned to that decision. I was ok with it. I was just going to die. My third reaction was that I wanted to live, and I wanted to live so badly. I don't even know that it would take; what it would mean; how difficult it would be. But, I'm going to accept all that in order to live.

All of this happened before the first man laid a hand on me. I know this is difficult to comprehend, but the first man approached me within probably fifteen seconds. It was a little longer than that before they actually began to do anything medically. It was a very rapid type of thing. When something goes off, your first reaction in the field is to take cover. You don't know if that's the first round of an attack. You fall to the ground, secure your position, get your weapon ready to fight because generally that's what happened.

Once they determined that it was a mine, they felt safe to move about. So there was a short delay. I was traveling with headquarters element and the man behind me was my company medic. This is a guy that I had been closer to than many of the other enlisted personnel. I had heard his family tapes and he'd hear heard mine from my wife and stuff like that.

He is a very accomplished medic. He had seen some horrendous injuries in the nine months he had been in Vietnam. He looked down at me, his arms fell to his side and his rucksack off his shoulders and his chin hit his chest. The gravity and who it gave him pause. Many things conspired to enable me to survive this incident. One of them was the fact that we had the battalion reconnaissance platoon attached to my company that day. The senior field medic – this was his second tour in Vietnam as a medic -- was the medic for the recon platoon. When the initial round went off, and

people got on the radio and said it was a mine and there were injuries, send your aid people up. This guy comes running up the column, and of course my medic who was familiar with me was stunned. This guy was able to begin to coordinate the three or four medics who were all able to attend to me. That is one of the reasons that I was able to survive because we had an accomplished team.

Both of my radio operators were injured to a degree from shrapnel wounds. [They] were evacuated in a helicopter with me, but they returned to duty in a short period of time. They were not seriously enough injured to be evacuated out of country or stay out of the field.

They didn't give me any morphine. They were afraid that I would bleed out. It would effect my heart's ability to pump. I was in pain, your body can only take so much.

I am aware of a portion of what happened. I was in shock but not unconscious. They could always shake my face to get me to respond to specific questions, which they would do to get me to focus. I was talking a lot. They could not put a tourniquet on it, because there was just not sufficient tissue there to use a tourniquet. I remember their efforts at lifting me off the ground, wrapping cloth and other material to get as much pressure on that site as possible. The sensation that I had that was most troubling was pain in my chest. I had no wound in my chest, but my heart was having to beat so hard to circulate what little fluid there was that this rapid beating was just fatiguing me and causing this pain. I didn't know that until later. I had asked one of the medics attending me [to] push my chest. Give me compression. They would and when they quit it, I'd tell them to start it again. One of the aid men said [that] in all of the time he had served in Vietnam he never had one of his patients direct him on how to conduct his first aid. The compression of my chest alleviated some of the sensation I had from this rapid heart beat. I can remember one of the men standing and blocking the sun. I was aware of them putting IVs in my right arm and standing there holding it up. Some of the things that happened during this time I was not aware of. I had no recollection of calling my senior platoon leader forward and formally telling him he now had command of the company. Several people have told me that they vividly recall that. Considering the circumstances I was in, how someone would have the cognizance to formally turn over the company. About twenty minutes after I stepped on the mine the evacuation helicopter arrived. I had no sensation of time. It was just what was reported to me. It was about a fifteen minute ride to the evacuation hospital.

I was aware that my life was really pressing against that thin veil that separates life on this side and life in the hereafter. I am a spiritual person and while I did not want to die, I did not fear death. Even in the seriousness there were things that happened that were humorous, certainly to me. I remember when the helicopter finally got there, and they took out the stretcher. Medical stretchers are rigid but they are bowed in the middle.

They are not perfectly flat. They put the first two, my radio operators in the helicopter, and they were lifting [me] up. I noticed a rivulet of my blood running right down the center of this litter, hit the aluminum floor and rolled and spread all the way under the co-pilot's seat on this helicopter. I thought this cannot be good. That's a lot of blood. It's amazing how humorous that seemed to me.

When we got to the hospital, I remember the sweet smell of jet fuel on the helicopter and how warm it still was. I looked and here is a wall of about five or six people, a surgical team wearing the green surgical garb ready to battle. They set me in the receiving area, cut the rest of my clothing off and began life-saving procedures. I remember looking down watching them work and one of these doctors is cutting right in my groin.

Now I'm looking down, and seeing another good set of flesh I've got down there. I'm thinking, why don't you go down and cut on the end of that thing. What he was doing was cutting into a vein to start a much larger IV. I can remember a doctor asking for the blood pressure. He called, blood pressure, give me pressure, and the nurse said, I can't find a pulse. There was a lot of noise and it was bright. I remember about this time after hearing that, things started getting darker and a little later got brighter. After they stabilized me in some period of time, I was moved into the operating theater. I was looking at my privates all decked out there for the whole world to see. They were afraid to use any general anesthesia for fear once I went down I'd not come back. In order to keep me part of the process, they sent back to my unit and had one of my friends, another lieutenant, come into the operating room, and he and I would carry on a conversation. He said that was the most difficult afternoon that he ever spent in Vietnam. I went through the surgery and the next three days I was on the intensive care unit. It was a miraculous set of circumstances that enabled me to survive those injuries. Even with the substantial blood loss, I did not have any lasting brain impairment, oxygen deprivation, or anything like paralysis.

The idea of coming back with a significant injury is something that I never really thought about. I've always been a little better than average in everything I've ever done in life. I thought if anybody's going to make it through then I'm going to, because that was my mind set. I didn't fear for myself in that way. I was angry because I was hugely disappointed.

At that point I wasn't thinking about life, I was thinking about the military. The job you wanted most in the world of Alpha Company commander was yours and you blew it. In retrospect, it was not anything I ever dwelt on for any length of time. It was a one-shot deal. I've seen far too many people zipped up in a body bag with a wound you could cover with a dime to ever be worried about the fact that I got these extensive injuries and somehow survived.

I do remember every day I would go back into the operating room where they would change my dressings. The recovery room was not a sterile environment. It was one end of a large surgical ward that was just very near the operating theater. I had survived the initial day, they would sedate me when they changed my dressings. On the third day, is when they finally did the hip disarticulation.

My hand was removed the first day. If that had been my only injury, they would have handled it differently, but they were so concerned about just saving my life. As a result of the debris and filth and all that was thrown back and contaminated my body, I did get an infection which kept me in the hospital for three and a half weeks. Normally, someone like me would have been there four or five days and once they were stable, evacuated to Japan. Because I had an elevated temperature, I stayed there in that ward with the same people. After the first week or so it became obvious that I was not in eminent danger. I began to engage the people. The others would come and go, and I was the guy that stayed around. I became probably a little closer to them than most of the folks who had come through. I was somewhat of an anomaly because I was kind of glad to be alive, in spite of my injuries. We have seen other people come in and go through the same process I did and some of them would have these really emotional breakdowns. They thought they were going to escape with all of their limbs in tact and then finally one of them succumbed to infection or surgery. I began to sense that people were keeping a close eye on me, fearing that it was only a matter of time until I had one of these realizations about what had really happened to me. I would go through this emotional need to vent, cuss, cry, by far more the norm than what I was going through. It took me awhile to realize that they were waiting for that. I was exactly the opposite. Every morning we began a ritual with the NCO that was in charge of the ward. Everybody come in and he'd say, I think I can take you today. Of course, my strength in my one arm was good in the beginning. But, naturally the effects of me

being in the bed and on a non-solid food diet began to take its toll. For example, I wrote my wife about five or six letters during that period of time. The one I wrote the third day of my injury was quite legible. In fact it looked almost like my normal hand. By the time I got to the end of that, the last letter, I had to dictate to a Red Cross worker because my strength was such that I was just too shaky to make my writing coherent. That served me well because it started me on a road to assessing my life, my situation, my possibilities in a positive manner. I got positive feed back from that. When I tell you that I went through this thought process while I lay in that hole made by that artillery round, I never looked back. I never once brought it up.

I never wanted to look back. It never required a great deal of effort. I just sensed that it was not productive, it was not going anywhere. Over the intervening months I became even more determined, once the reality of the difficulty of life as I began my rehab process back in the states began to evidence itself, I realized that I could not allow what happened to me in few brief seconds in 1968 to FOREVER be the lens through which every single thing in my life had to be focused. I'm sure as hell not going to let an isolated incident, as significant as it was, be an albatross and drag me down.

Well [the care I received] was excellent, 'cause I'm here. Naturally, they were very attuned. I did not want for anything. There was a lot of discomfort involved in this process. The longer you stay that way, the more discomfort you have associated with that. Now they would put me in a striker frame. Toward the end of that it was so discomforting even when they changed from one position to the other, I always had just a sunny disposition, someone who was capable of raising above this discomfort that you feel and you act out in very human way.

All of my surgery had been completed in the first three days that I was in Vietnam. Once I had the femur removed, that was the last time they cut on me at all or needed to. Once I got to Japan and continued to stabilize, I was able to be moved back to the states. And, after ten days we went to Brooke Army Hospital at Fort Sam Houston, Texas.

I do remember that there was this absolutely Florence-Nightingale-reborn in the night nurse on the ward that I was in. I was probably the second or third one from the nurses' station, the big one where she looked out on the ward. At night she would give a massage to every single man on that ward. Once the ward shut down at night, aside from giving out medications and this sort of thing, she had time to do that. That was a really blessed relief to the discomfort that I felt from being in the bed all of this time.

I failed to mention while I was in the evacuation hospital the pain medication was an alcohol drip because it was a good anesthetic for a long, extended period of time I was not receiving any other pain medication. Once I got to the hospital, in ah, the one night at Long Bin, Bin Hua, Tan Son Nhut, whatever. They began giving me Demerol.

Every four hours, and that's the drug I received every four hours, during the ten days that I was in Japan. Now that drug is highly addictive and effective. You become somewhat accustomed to the basis by which you have to tell time. Once we got on the airplane and we were about to descend into Brooke Army Hospital, we had hit the four hours and I was calling the nurse. I said, hey, I need my pain shot. She said, well we are in the decent mode we cannot give you any medication. This is the first real pain that I have experienced since that first day. She said, well now that the plane has landed you are under the control of the military hospital and we can't give you anything. You are turned over to another team. Even though they are not here, they are responsible. As a result, I went about seven hours before I finally got to some. I'll always remember, the physician when I tell him

I'm pretty uncomfortable and I've got family here. He told me, I'm sorry but that ride's come to an end. We don't have any more pain medication for you. Of course, not only was I discomforted, I was really pissed.

I think anyone that gets Demerol every four hours in the dosage I got it becomes addicted. You can sure tell; you want it quicker than four hours. I'd not felt any significant pain, and now I had it, big time. I was antsy. That's the way I met my family. Not only am I a shell of my former self. Not only had I begun to waste away as it related to my upper body definition. I was uncomfortable. The good side is that I never got addicted to pain medication. The only other pain medication I got was the day I fell out of my wheel chair and broke the end of my stump open. They did give me some low-grade pain medication. I didn't get any pills or anything to take. As it was I got over my discomfort and my pain and was able to tolerate my injury at a pretty rapid pace. Other injuries, it's hard to compare one to the other; but, I resented a long time the fact that they treated me so abruptly in my mind. Yet, what a blessing it was that I never had the craving for drugs that other veterans are still struggling with.

I go there most of the time it's when someone contacts me about an individual that they think would benefit specifically from having me visit them. A multiple amputee or they just think that life cannot really have any meaning for them. I get to tell them about all of the stuff I do to give them an example of the possibilities that they can elect to attempt. I try and encourage them to not rule anything out, don't close any doors.

I should have said this in the beginning. It's been thirty years since I was injured, and I learned a lot. I matured a lot, and I recognize a lot about the human condition.

We are all individuals. It's impossible to expect people to appreciate, have the passion for something or the ability or the fortitude to deal with the particular element of a significant rehabilitation. That said, I did not whine. No one has given me the evidence of anyone who has ever had an injury as significant as mine that went from the day of injury to becoming an outpatient living outside the hospital in about five and a half months. But, that's what I did. I didn't like being in the hospital. I was in this ward with fifteen beds and fifteen amputees. It was all young guys. I was one of the older. I was twenty four.

See all these guys grab-assing, singing, dancing, jiving, short-sheeting one another. Once the ward shut down in the evening about 4:30, it was like a frat house. I was having a great time. There was a lot of support. I was one of three triple amputees on that one ward. So, I wasn't alone by any stretch of the imagination. One day they came in and said, how would you like to go to a VA hospital near your home? I thought, cool. My family was traveling back and forth to see me every couple weeks. I'd be closer to home. I went from that nurturing environment to the VA hospital in Fayetteville, Arkansas, that did not even have air conditioning. I was the only Vietnam veteran that I saw the whole time I was there. I was certainly the only amputee. And, I was miserable. Finally, they decided that it would be best for me to go to the VA hospital in Little Rock, Arkansas. I was transferred on Veterans' Day, November 11, 1968. That was a holiday at the hospital, like all federal facilities. The available bed for me at the VA hospital in Fayetteville [Little Rock] was in the geriatric ward. I was in the ward with seven other men. I was the only man in that room that was not diapered and fed through the nose. You talk about a reality check. I stayed in that room two days and was finally moved to a four-man room, still in the geriatric ward. It was just an overflow room across from the nurses' station. That's where I spent the balance of my time. So by December the 15th or 16th, I was an outpatient, living outside the hospital.

That's where I got my first [Brooke Army Hospital] lower arm prosthesis, and it was a god-send. Also, that was the first time that I got a wheelchair that was capable of carrying me around. That was a big deal. I mean, any time before when I wanted to go somewhere somebody had to push me. You want to roam around or do a lap around or whatever, I couldn't do that. So, I got a prosthesis and trained for that. It was so essential for me because it was a great assist getting out of the bed to bear weight on that lower extremity by putting my prosthesis and my hand on the floor to raise myself up in and out of bed. It was a great assist and an essential part of my ability to move around. The wheelchair, it was just fun, because I could take a lap around the ward if I wanted to. Those were huge self-esteem-building assets. Since I had no medical required intervention the only thing significant they did to me at that hospital was pull all the wire sutures I had in the sixteen-inch scar I've got on my hip. That was pretty nasty, and it was pretty uncomfortable getting those things out.

Again that physical therapy at Brooke Army Hospital, basically the kind of therapy I got initially was just being able to balance in a sitting position. Of course, I only have one leg. Strengthening and getting in and out of bed and doing modified sit-ups and stuff like that, being in that process of getting your strength back. That was always a pretty strong and a long step to putting some meat on my bones

That [fitting leg for prosthesis] was all done at the VA Hospital in Little Rock, Arkansas, and the practicality of lower limb prosthesis, particularly in technology that 40 years ago was not all that good. It was essential to me for my sense of self esteem just to stand up again. They authorized the prosthetics and I got them shortly after the beginning of the year as an outpatient. I was an outpatient from the 16th of December through about the middle of March of 1969. My wife actually had an apartment near the hospital. She happened to be a physical therapist. She'd go off to her PT job, drop me off to the hospital on the way to work and she'd pick me up on the way home and that's the way I'd spend my days, a lot of PT and using the prosthesis.

She really wanted to be a help when we were at Brooke Army Hospital and that was just not compatible with their protocol. Families, spouses, just did not assist. They really didn't want her on the ward much at all unless it was an evening. That is completely contrary to what you see now at the Walter Reed. Families have almost unlimited time that they can spend with their vet. She could tell me how she was able to help me. For example, on our anniversary while I was at Brooke Army Hospital I got a pass to go spend the night with her. A viral, young man, feeling my oats, I didn't want to spend my anniversary in the hospital. So we got a pass to go home. Her ability to assist me in and out of the car and in and out of the wheelchair and stuff like that was essential. Once we got to the VA she had pretty well resigned herself that they weren't going to allow her to practice on me on their time in their station.

Now, the whole time I was at the VA hospital I only saw one other amputee that was not a diabetic amputee 60 years age or older. I was in that nurturing environment at Brooke to being on my own with a bunch of diabetic amputees. They wanted me to do very little and I was tremendously bored and it was not a good time for me.

[The VA at Little Rock was really not prepared to meet the needs of a young soldier]
Not at that time and certainly not to the degree of my injuries and the skill level it took in a physical therapist to really maximize my abilities was beyond anything that they'd ever done. But my wife, while I was in Vietnam, she was a physical therapist at the Georgia Warm Springs Foundation, which was a rehab center that saved Roosevelt. After our experience at the VA hospital she called these

folks. It's almost like a resort. All the staff lived on the campus and this sort of thing. When the telegram came in from the Department of Army informing my wife of my injuries it went to their telegraph station. They were able to immediately be with her and offer her support during this time. I was continually telling her don't come, and it took a lot of effort and fortunately there were some delays in her ability to get permission to travel into the country. During this travail these people were very close to her and supported her and got a blow by blow every day of whatever she knew about me. So they were familiar with me. She called them and she said, how about I come back and work for you and you treat my husband. You let him go through your PT program for a month. They said, that sounds like a wonderful idea and so for the month of late April and the first part of May, a one-month period. We went to the Georgia Warm Springs Foundation and they worked my butt off. They wanted to be walking all over uneven terrain, grass, hiking, getting up off the one arm and make sure I'll fall. They had me swinging a golf club and all this other fun stuff. The first and only time I fell the whole time I was at Warm Springs Foundation on my prosthesis was in a sand trap on the fifth hole at Cy Young Golf Course.

As a result, I became as proficient as you can. Since I had no left leg at all and such a short right leg, it required using crutches to ambulate even with a prosthesis, and shoes are important to me. I did play golf. Once I got back home after our stay at Georgia Warm Springs Foundation, I didn't know what else to do. It was either go to school or go to work. So I studied for a real estate license, passed that, and went to work selling real estate eleven months from the day I was injured in Vietnam.

I'll tell you the support I got from other veterans in that process with the shared experience, a sense of camaraderie. Somebody, you talk about your frustrations or you can see an example of something that worked. I'll always remember the first time I saw a below arm prosthesis. I asked the man how it worked. I had no idea how it worked. It was being in an environment where people showed me they could do it. The clinicians and therapists were not accepting anything other than the fact I could do it. So even at that time I had really positive support and it was so important. No one tried to put me into a category or a slow track or an appropriate track or any. They said get all you can get, be all you want to be, and that's exactly what I tried to do.

[negative experiences] I didn't have that support and didn't have others on a similar travail, it was difficult. Also being at the VA at that time, 1968, they were ill prepared for someone like me. That doesn't mean that the other VAs that were absolutely capable as anyone in the country for conducting rehab. That's just the luck of the draw. Had I had a clue I would have stayed at Brooke Army. I didn't know any better.

[greatest challenges] Well, probably the most aggravating were tasks which required the use of two hands. Dexterity that was generally beyond what you could afford by a prosthesis. For example, taking the link out of a watch band which caused -- you know those teeny tiny little pins that hold the band in. That's not that big a deal for most folks. It was a huge tedious thing.

I worked and worked and worked at that until I finally found a way to get the damn thing done. Well, there are many other things like that and those things frustrated me most. Something that used to be without even any consideration, all of a sudden now required care, planning, frustration, many trials to do. It used to result in me blowing a fuse and being very vocal in my displeasure with myself and life and everything at that point. It was generally short lived but it's that kind of thing that probably caused me more aggravation than anything else.

[how would you say you learned to handle being injured to the extent that you were] I think it was

mostly a trial and error process and I'm willing to do it even though it took five times as much effort as it would take somebody else to just do it for you. I was fiercely independent, if I was rolling up a doorway and someone inside was two paces away and I was five paces away and I could see them hurrying to open the door, I'd race him. If he got the door, it would be because he got there first.

I don't know why it became so important for me to do that. Now, it would have been much easier I guess to go on and let people push me around. I didn't want someone pushing me. If I was tired or it was uphill or across grass, then, yeah, I'll take some help. I didn't want somebody pushing me. One, I needed the exercise. I just learned by doing it, unwilling to take the easy way out and not doing something even though I looked awkward or crazy. I'd learn a way to get it done. It was important to me and I'd do it.

[friends and family] Well, I think it [his un-medicated pain level] colored the way they interacted with me. It was not apparent. I mean I have a very loving, supportive family. I had twenty-four members of my family that traveled five hundred miles to come see me that first night.

So when you've got that kind of support and they're so thankful that you are alive under any circumstances. I looked like hell and ancy as hell. You can't ever re-do that first meeting and I'm afraid for many of them that probably remained a little too vivid in their mind even though I began to make rapid and significant progress after that.

The big family came the first time. They stayed about three days and then most of them had to go back to take up their lives again. Some of them were in the military and had to go back to base stations and stuff like that. Aside from my mom and dad and my wife and my brother, all the others did not see me until I returned back to Arkansas.

The citizens of my home town, while I was still in Vietnam, that they ought to show their support to the effort in Vietnam by focusing on one person. Every day there was something in the newspaper because I was there three and a half weeks before I got to leave. It was big news, because it was unusual in the way it was playing out. They turned around and built me a house.

When I first heard it just sounded so outrageous. I just blew it off. I thought my wife didn't know what she was talking about. As I began to hear the steps that were being made and the people involved, the citizens of the town, I began to appreciate how significant this was and they built me a house and I still own that house and it is magnificent.

The big part of my family came the first three days, and I didn't see them again until I got back to Arkansas. My wife was there the entire time. My parents would come every couple of weeks. They'd stay over the weekend. The weekend in the hospital is kind of a down time anyway.

You know, I do remember, my Brigade Commander pinning a Purple Heart and a Silver Star on my pillow in the hospital in Vietnam. He came by to see me several times.

You know, I'm not all that big on stuff like that. It would probably be meaningful for them. I'm very comfortable with the type of soldier I was, what happened to me, and the recognition I got from my peers. I'm much more comfortable with what the men that served under me say about me, and how I conducted myself than the fact that a full Colonel pinned some medals on my pillow. Or, that we would have some ceremony and go through that exercise again. I'm very proud of what I've done but I also don't like to give any blow by blow about it. For example the medal I most cherish is

the Combat Infantry Badge, not the Silver Star or the Purple Heart. You set out with it, with something in mind, and that was accomplished.

Many of them contacted me. We'd write letters back and forth. Some of my classmates from college that had been in Vietnam would come through the area but there's a pretty good general telegraph about where I was and what I was going through so I had a lot of support from people that served other than just the ones in Vietnam. Now, I was through the hospital and in the VA system before most of the men that I served with began their rotation back from Vietnam. One of the exceptions was my battalion commander, the guy that selected me to be a company commander. He was also stationed at Fort Hood and he came to see me once and invited my wife and I out to his house. He fleshed out a lot of what had happened after I left and different command positions and it was very supportive and well received by me.

[Knowing how things had happened after you left was important to you?] Those were my men and my comrades and my battalion leadership and I was anxious to know how they had fared and what subsequently happened to my unit.

I'd say the second hardest thing that ever happened to me in my life was having to get out of the army. I wrote letters to the medical board protesting their signing of ordering me out of the service as being unfit physically, which was completely ludicrous but everyone supported me in my efforts because again it was part of my, part of this transition. I had to come to grips with something I really loved doing.

[Being released from service] Well, it was certainly a sense of loss. I mean it's the career path I'd chosen. I'd gone to military college and was a regular officer and had excelled in all my military training and was selected to be a company commander over several men that outranked me and was good at my job and was well received by both my superiors and my subordinates. Not being in the picture again was a huge loss. Let me tell you I've enjoyed some significant success in my business life but nothing will ever be as heady or as exciting or as meaningful or rewarding as leading men in battle, jumping out of airplanes, and stuff like that.

[relationship with military father] He's a three war soldier. My dad fought in World War II, Korea, and Vietnam. His last full year, last full assignment was in Vietnam. He was also injured in combat and was an infantry officer so we had a lot in common. I saw how he conducted himself and what a gentleman he was and how supportive he was of the men in his unit and yet what an accomplished person he was. I know this is going to sound crazy. There are certain injuries that are considered honorable. For example, being in a helicopter crash in training and being a paraplegic somehow seemed less honorable than being a paraplegic getting blown out of the sky in another helicopter in Vietnam. So when people look at me, they have a pretty dang good idea how I am affected. I don't have anybody second guessing what I did or anything like that. Well, my father was supportive of me in that he had some idea what I was going through but he also knew I had a pretty good attitude about it. He was very supportive and enabled me to use any resources that he might have to try some different things. Different career challenges I had that he was able to facilitate. He also was my most immediate contact in the Army. He was still involved in a lot of organizations and military reunion groups and still took the Army Times. That was important in my transition process, too, because by and large [in] Fort Smith, Arkansas, there wasn't a whole lot of active military activity taking place, and I had grown up in and around military bases all my life so it was somewhat of a difference being in that locale.

[interacting with civilians] I didn't have any problem with it. The beginnings of frustration with

some of the perception that people had about me began during this period and it was active beyond the twelve months. It took about twenty-four months for it to work its way through the course. As a young man I was a very reserved person. Generally speaking, if it was a big group, I would just generally migrate to the wall and would interact with those who came up to me, and could engage myself. I was not overly outgoing in my relationships with other people. I was reserved. I was six-foot tall big guy, accomplished and a recognized leader. They just let you be the strong, silent type. I came back on my wheelchair. I'm basically the same person. I was still appreciative of my attributes and abilities and this sort of thing. But in a wheelchair people read all kinds of facts into it. And they would look at me and I'd see these big sad eyes like oh, dear. Now it wasn't always vocal, rarely ever was it vocalized. But I sensed that. It just pissed me off. I was not that person. I didn't need to be pitied. Yet somehow I had to change how they perceived me. As a result, I became somewhat aggressive in the manner which I interacted with people. If I saw them looking at me with those sad eyes that are, you know, pitying look, well I'd go charging right up to them, I'd stick out my hand and I'd say I'm Willy Wilson, I don't believe I've met you. Because if someone had to be uncomfortable, somebody had to be on the defensive, it damn sure wasn't going to be me. I had to will myself to get out of my comfort zone, to go over and I would put them at ease, because I would convince them in a few brief moments that I was okay with me. If I was okay with me, they could be okay with me. But they weren't okay with me and I sensed that. I let them know. I could make them uncomfortable because of the strength of my determination to show that I was not a lesser human being in any way that they wanted to measure. It took twenty four months before I did not have to make a conscious effort to make that decision to be the one to be outgoing or aggressive or to initiate the conversation or to take the first step. Sometime after that period, that became my personality. As a result I don't meet strangers. It's just people that are not friends yet. I'm completely at ease about people.

I was -- One of the things that other people did, either consciously or unconsciously, just in association with me, they responded to what I did. They acknowledged the effort it took. They acknowledged my willingness to be involved, and it created this positive environment. That began to manifest itself in that first year and a lot of it was not specifically by design. It was sincere on their part and that's probably why it was as effective and helpful as it was. I didn't want anybody raining on my parade and anybody saying I couldn't do it or anything like that. Does that mean that everything I did was successful? Oh, hell no. Sometimes I'll try it and I'll find out, you know, I'm just not going to be any good at that. I'll give you an example. My wife and I love to dance. Well, I found out I was just goofy looking when I danced and as a result that was no longer excited about dancing. It took me about a year to come to that. Now occasionally if I have too many adult beverages I'd lose that inhibition and get out there and look goofy for awhile. I was good at every kind of sport you could play with the exception of basketball. Everything else I was good at. Bowling was terribly difficult for me. After six months I said I just don't believe this is as much fun as it used to be and I'm just going to let this go. I'm okay with that decision. I should mention this because this is the genesis of why I was able to do a lot of what I did in the first twelve months, why I have the life I've got today. For some reason I appreciated the guy I was and all that he could do, and the accomplishments he had, was gone. This new guy had a lot of the same interests, a lot of the same abilities, and some of the same talents. His skill sets were different. Let's concentrate on what the new guy can do and not compare the new guy with the old guy.

I chose not to consider those things that were going to be shut out of my life. I considered all the things that I was going to get to attempt and had a potential for accomplishing and mastering.

I went all that time to school. My wife really wanted me to go back to school. She was convinced

that I would enjoy it and had a place for it. I wasn't all that excited about school. I just wanted to get on with life and get back to work.

That's why I took the real estate training. I didn't want to do banking or anything like that. I would have ended up subsequently being a savings department, a savings and loan association manager, but I just wanted to get back and get into a normal life. Get my family, my house, my little place of gold, my little world, and that's what I did.

Right, until, I began to retire in 1998. I was just ready to just have fun all of the time and pursue things. From probably the late seventies onward, I'd been active in the veterans and disability scene based primarily out of Washington D.C. in different capacities.

Disabled American Veterans, The President's Committee on Employment of People with Disability, the Rehabilitation Advisory Committees, and other things that I'd done that were very rewarding to me and felt like I had an opportunity to have some input that would eventuate in a good change, a good outcome for other people.

I was long ready to be gone [from treatment]. Eleven months was a long time for me, but when I became an outpatient early, some eight months after my injury, I was ready to be done with the whole bit of it. Would have had it not been for the opportunity to go to Georgia Warm Springs Foundation, because there, they challenged me. They brought me to a level, a skill level on those prostheses that I didn't think I'd ever accomplish and even though it had a short lifespan and once I started selling real estate there's no way in hell I was going to wear the prosthesis. It was too cumbersome, too time consuming.

First of all, anything I chose to do I was going to have support in. My family would have done anything [and] spent any amount of money. I knew that my wife was not going to leave me. Not that she told me I didn't need to fear it, she demonstrated that totally committed. That is hugely important. There's nothing in my life that was any more important to the accomplishment of what I've done than the fact that I've had a loving, devoted, supportive spouse. She was part of every success I've ever had. She was not a part of my vocational pursuit in real estate but she always allowed me to run crazy hours and leave the table and go do something or take care of something and never fussed or any of that. Secondly, I did not allow myself to think that life was ever going to be meaningful if I could get to be most of the guy I used to be. For some reason I knew that that was not going to be possible, and I needed to deal with the new guy. Every time I did anything that was a victory it was a new water mark, and I considered life a hell of a challenge. I was determined that no one, injured anywhere near as severely as me would ever let them have anything on me.

Because that's part of the work ethic of my family. We're all successful people. We take on big challenges; that's the way we do it, and it doesn't mean we're always successful but at the end of the day we can say that's what I've done and I'm proud of it. I'm extremely thankful to be alive and I thought, you know, I want to make a contribution. I didn't know exactly how to go about that, so I thought I'll go to work. Maybe something will come out of that. It was other things that I did in conjunction with that that was also rewarding and accomplished more than the fact that I was successful at real estate.

Well, the big part of it was just the recognition of what I was doing. I was getting on with life. I had sustained substantial injuries. I had gone through the rehabilitation process. I was not bitter about what had happened to me [or] disrespectful of our government or the VA. I was capable and earning

my way over and beyond compensation. I was willing to share what I had learned. When I tell my story, I tell the failures and the difficult times. I let people have a realistic idea of what it's like. My wife and I give a seminar to couples who are young in the rehab process because we lived through some great trials and we've learned and got a great story to tell.

At the bottom of everything, I don't give a damn how good you do the rehab process—physical, psychological. You will never get that done good enough to overcome the issues in the couple's relationships. At the bottom of all of that, sometimes we want to deliver the five hundred pound gorilla in the living room, that being the disability, the amputation, the loss of sight, the whatever. You know, that's what's holding us back. I tell them the best, important asset I've got in life is my wife. Now, did I come to that early on? It took me ten years. We fussed, we fought, we squabbled. But, we survived it and we got through it.

She wasn't a quitter and hung in there until I finally lost some of my rough edges. Part of it was my aggressive attitude on life many times was directed at her. I couldn't bitch at my circumstances, but I could bitch at her. Part of it goes back to that first twelve months. I did not want my wife to attend to me. I didn't know why. She thought, I've got a degree in physical therapy and if there's anything I know it's how to bring that training into this life. I have helped other people with the same sort of stuff. Why is it I can't help you? Why is it that I can't wrap your stump pad and do this other stuff right?

The deep and classic symptoms of PTSD did not manifest themselves to the degree that I've been either diagnosed with that or felt that was part of it. What I recognized all the years later what I was fearful of and could not voice. I never had any counseling. They offered it but they would talk to me for about thirty minutes and say, well if you need us, let us know. I was afraid that somehow if she continued to provide the kind of support she was doing she would become a caregiver. I didn't want to be her patient, and we didn't know how to vocalize that. No one had ever explained that could happen. So when I talk to these young couples I tell the guy that sometimes you have trouble with your wife and you don't happen to have any idea why and it may well be that she's having to help you and you resent it, because you don't want it to detract from that special, intimate relationship that's appropriate in a relationship. We put that in jeopardy when we fail to communicate; it almost did us in until we finally went through that and got a little maturity on our part.

If the feedback we get is appropriate, even if it's raw, we tell all, the dirty, slamming, banging, shouting, fussing. It's just saying we had a real life and it was strained, it was difficult and it was not pleasant. It was not happy at times. But, we hung in there. And what we learned from it, if somebody would have told us, these are some of the things you're going to feel, experience, and you need to encourage your wife to have her own life and why she can't expect him to understand your need to discuss things absent of him. So did it make a contribution? Again, not only people with normal, with disability issues to deal with come up to us and sit in on it, because we make it available to anyone who wants to sit through it, and VA employees. You can't believe how meaningful that is.

When I was laying in a hospital in Vietnam I thought, got to be something good come out of this. First off I thought, my God, you will never have to work another day in your life. At the time that appealed to me. I thought that's cool. So what do you want to do in life? What challenges? What can you think that you want to do, and my first one is I want to water ski again. I'm a very accomplished water skier. I loved it. Good at it. Second thing is I want to fly an airplane. I thought that's possible. That's a very physical skill. People perceive it as being almost all physical. Well, it's about ninety percent mental, about ten percent physical, but people don't know that unless

they're pilots.

I bought an airplane about a year after I got back from Vietnam. [I] got my license and flew that until I got two kids. Too big a family for too little airplane. I sold it. I didn't fly again in the eighties. I bought an airplane in 2000. I still have an airplane today; high performance, complex, retractable gear, airplane.

When I was 31 years old I was finally exposed to snow skiing. It was everything I ever wanted to do. It was so much fun and so exciting. I've always been a risk taker. It just had such great possibility. Well, I got good at it. I was finally asked to join the U.S. ski team, and I skied competitively for six years. The last competition I was in was the Paralympics in Albertville, France, in 1992. I won two gold medals and never skied in competition since. So I still ski. I still love flying my airplane. I enjoy public speaking. I speak at a nursing home at least once a month when the occasion presents itself and to other groups. Not just on disability issues or veterans' issue, I can speak to anyone; the Rotary Club, the Chamber of Commerce, or whatever. One, because I love speaking to people that don't know anything about me because they don't know what to expect. I mean they look at me and just picture themselves in that situation and life would suck and have a little dark cloud following you around. I can dispel them of that in short order and have a lot of fun. I use a lot of humor, much of it is self-directed and again a lot of positive feedback. People enjoy me. I don't advertise. It's just by word of mouth but seminars and I go somewhere else. That's also part of the reason I was involved nationally is through different speaking events. Some people learned of me.

It's a volunteer basis. Certainly, if I'm flying to San Diego or someplace like that I would. And if it's somebody like IBM, yeah, I expect them to pay me just because they can. If you don't charge them they don't think it's worth anything.

The Disabled American Veterans is the principle national veterans' organization that I'm involved in almost exclusively. The only other active association I have is through the battalion, 3rd of the 187th Infantry Association, which is the group of 1,100 guys that I went to Vietnam with in 1968 or 1967 and came back.

We have an annual meeting. On an active VA list and based on a lot of anecdotes and complaints and later tips and all that type of stuff and they're a very supportive group. I did not have that for the first thirty-two or three years of my time since Vietnam. It was only in the last seven years that I've been actively involved. It's really been available. The internet is a miraculous tool for re-associating the people with one another.

Negative changes? Well, I can't think of any. I mean it's a reality that I have learned to be able to the degree that I don't even [think about them]. It would be like you dunking a basketball. You don't even think about, gee, I wish I could dunk a basketball. I'm just saying I don't look at things that I can't [do], I don't even consider them. I've become so accustomed to what I can and can't do

I [suffered from phantom pain] for a period of probably three or four years, with random occurrences is something [that] presents itself to a lesser degree, I don't know, six or eight times a year over the course of a day or two.

I would offer the same caveat into the fact that I'm a product of my environment, had immeasurable support. All I had to do is get on with my life. I just had to accomplish rehabilitation; I did not worry for anything. I had a great amount of support out of my immediate family. I told you what my

community did. I am a spiritual person. I have real value in our purpose as human beings and our relationship with our Creator. You cannot take any of those elements out of me and from my experience and think for a moment that I would have gotten here. People want to think it's all about me and my determination, my effort. It's a combination of all of these things. Every single element was essential. I can do a mediocre job and get praise from most folks who do not know. They can't tell if I'm really putting out or if I'm really slacking. Because they picture themselves in my position and realize they couldn't do it. I would never suggest to anyone [that] the way to do it is the way I have done it. How ludicrous that would be. To say that I would go back and do it the same way again, I hope I wouldn't do that. I've learned something along the way. I'd like to think that. I had the opportunity and to make some better choices in my life than I made. I'm sure that I could, but you don't get to do over.

Profile of Mr. Gary Thomas (Double Below the Knee)
(Original Interview Transcript 36 Pages)

Mr. Gary Thomas lives in the Midwest and was born March 26th, 1949. He was drafted into the United States Army July 1st, 1969 and was wounded in Vietnam, 1970. He is a double below the knee amputee and does not currently use a prosthetic device. He is divorced and has two children. He reports that his general health is very good. He reports smoking, arthritis, stump pain, phantom pain and other unspecified pain. The interview was completed November 6th, 2008. This is Gary's story.

[Before the military] I was working on an apprenticeship as a heavy duty operator. I was working on I65. I was running a drag line crane. The apprenticeship pays you three-quarters pay and then after the apprenticeship you get your license and then you can go on your own. That was just after high school. Actually, I had a deferment because of my apprenticeship, and then they, what was it, two weeks before I was to finish up I got my deferment taken away and then I was drafted about a week later. I never got to finish my apprenticeship. There was just a lot of bad decisions by the military because I could run just about anything in engineers and that's what I wanted to do was go into engineers. Instead I got into the infantry. I had an opportunity to go to West Point and I turned it down and then they tried to get me to go to OCS and I didn't want to go to Vietnam as an officer without combat training or with a prior combat and so I ended up going to NCL school which is noncommissioned officers' school. My whole family's military. My brother was a Korean War vet and my other brother was 16 years in the National Guard when I was getting ready to go into the service. So I grew up around soldiers. I was doing so well with my apprenticeship and I was making around \$500 a month and I decided to get married and really didn't even think about, I was actually thinking about joining the Navy and going that route and not going as an infantryman in the Army. Then I ended up getting drafted before it got all done. So I was married exactly 30 days and then went into the Army. It was July 1st, 1969.

[During the war I was in] the 90th replacement center and then from there I was assigned to the 9th Division. I went to Tan An and took two weeks course of basically learning how the 9th Division does things and then was sent off to Bin Phuoc to a fire base and that's where I started. I got to 'Nam at the end of April. Or, no, the end of May. And then from there my outfit was already in Cambodia and I got shipped out to Cambodia.

I was assigned to take care of the Tiger Scouts because I've got a personable attitude. Anyway I took over taking care of the Tiger Scouts which were the Vietnamese, they're part interpreter, and basically they cut trails for us and give us advice at times.

[Prior to my injury] the 9th Division was getting ready to go home so they had shipped us up to Koo Chi and we were working in an AO that we had never been in before because it's up north. We were working, where I was at before, we were working south, about the furthest south as you can go in Vietnam and we got moved up into the rolling hills which is a different kind of terrain for us because we were working in flat land and rice paddies and this was just totally different and then on top of it what they did is they stuck us with an AO that had been a MEK unit AO and so there were a lot of big land mines floating around and it was unfriendly territory compared to where we were at.

When I was injured we were setting up a night ambush and the lieutenant asked me to shift the machine gun. I went over to shift the machine gun and the whole world blew up.

I had walked across and then I took the same path back and I hadn't taken five steps from the lieutenant when a command detonated 155 round went off. When I got hit I lost my right leg immediately. I have three inches of bone left on that leg. And that was immediate. There was no change. Now on my left leg it was still kind of together and then the amputation was taken off right about where the knee was, just above the knee and then there was a blood clot and so they took off about another four inches or so. My second man lost an arm and a leg and he was behind me. And then the third guy back got shrapnel just in his thigh because we protected him from the explosion. The shrapnel went completely through his hand and into his thigh and then the medic, lost a leg below the knee. The lieutenant got his bell rung. He was in a knoll but the top of his head got banged up and the RTO missed everything. He was laying in the same hole and it just went over the top of him. Then Johnson, Nicolas Johnson got killed that day. And then there was various guys with shrapnel wounds. I'm not sure who all that was. That's what we had. When I got hit half the platoon got wiped out in that episode and there were four of us that were amputees that got shipped off to the 12th Evac hospital.

[I don't really blame anyone for what happened]. The lieutenant screwed up because we should never have set up where we set up at but I don't really blame him because I think he was ordered to set up there. People make mistakes sometimes and I mean nobody's perfect. And actually what happened, that morning we came across four dinks or four VC digging up land, or they were digging up, every fifth round the artillery fires is a dead round in Vietnam because of the mud and so [they] were doing was digging in the mud, digging up 155 rounds that hadn't exploded and then they'd turn them into land mines. Well, we gathered up all those. We killed three of them and one got away and what I'm figuring is the one that got away we must have killed some of his relatives and he came back to get even. And a couple of other guys kind of agree with me because that whole day we were all jumpy. I mean I blew up them rounds with C4 and I never wore a helmet, I never wore my flack jacket. The only thing I ever did was have a ribbon in my hair I used as a sweat band and that day I put my flack jacket on and put my helmet on and [said] that somebody's going to get hurt today. And that [is the night] when I got blown away. I mean he didn't do anymore than what I would have done if I'd been in his shoes, you know. So, no, I don't hold any part of that.

Oh, well we just came down a hill and we should have set up on top of the hill because it was a better vantage point to go to where we were going to set up for the night ambush. And there was a clear trail up on top of the hill and we should have used that for the ambush site and I don't understand why we went down on the flat ground.

Well, the lieutenant had been around about the same time as us and I'd been out with him several different times. He was doing everything he could to keep us alive. Sometimes to the point where he didn't follow orders. So, no, I think it was just a screw up and nobody's fault. Personally I think he was ordered to set up there but for what reason, I have no idea. It could be that they had set it up for artillery to protect us there and if that was the case then that's why we set up there.

[But I'm not angry about being hurt]. No, the only thing I was angry about was when we pulled out of Vietnam in '74 and just let those people to the mercy of the VC.

[After the explosion] I came to, my eyes were burning, I couldn't hear nothing...when I was hit I was bleeding just pretty much out of every orifice in my head. My ears were ringing like a giant firecracker went off. I looked down and I could see my right stump, the blood shooting out of it, and so I put my fingers on the carotid, or not the carotid but the femur vein and tried to stop the bleeding as much as I could. And I noticed that my other leg was turned around backwards so I knew I was in

trouble and then everybody thought I'd been hit by an RPG because we didn't get ambushed. So everybody hesitated. So it took a little while for people to get to me. Then Blue, the medic, he came and patched me up as best he could and I was in and out from that point. There was a chopper that saw the explosion, called up and said he would come in and pick us up and he picked us up. I was in the hospital in 15 minutes. And that's the only reason that I'm alive. I woke up when the chopper landed and I got some big, heavy-set female medic. She wasn't a nurse. She was a medic. Asked me what my name and rank was. And I couldn't even remember what my name was and passed out and then the next thing I know is I got some little tiny blonde. All she would do is put water on my lips and wouldn't let me have any water.

About an hour after having water on my lips they moved me out to intensive care and then I, I remember moving out there but I must have went, passed out and went to sleep immediately while I was out there. And then this is when I was not as groggy as what I was before and I came to and this is the weird part. I was looking at the guy that was laying next to me and I saw that he didn't have any legs and then I followed him on up and I realized he didn't have any arms and then that's when I turned over and I realized both my legs were gone and you know, you're coming to your senses and then I'm thinking to myself, damn I'm lucky, because this guy he was in really bad shape. So I've always carried that attitude that I've been lucky. The next day I woke up to a two-star general walking away after they presented me the Purple Heart. They didn't bother waking me up which upset me because I figure if I'm going to get a medal I should be awake for it...I got hit on the 13th and that was the 15th when, the morning of the 15th when I came to...when I woke up.

[My injuries were severe]...Oh, I'm just loaded with shrapnel. As a matter of fact I cannot have an MRI because I have shrapnel in my eyes and they're afraid I'll go blind if I have an MRI. I had 140 stitches. Part of my nose – my nose was broken and it was shattered I guess. Anyway there's 140 stitches that went down my face, kind of around my cheek bone and then probably ten stitches upper lip. Probably ten stitches lower lip. Then I don't know how many on top of my head. There was three lines going across the top of my head with stitches.

I left on August the 27th from the 12th Evac because my daughter was born on August the 27th and the Red Cross came and, it might have been the 28th. She was born on the 27th and they told me as I was leaving that I had a daughter. But I didn't realize, I didn't find out what her name was until I got to [Camp Zama] in Japan. [While at Camp Zama or 12th Evac] the only thing that drove me crazy while I was there was I had a white mice or he was a Vietnamese MP laid across from me and he would lay there all night and he was begging for his lieutenant. And it just would drive you crazy because it was constant. I mean I can still close my eyes and hear him. (laughter) Because it was di wee, di wee, di wee. But as far as medical care goes I can't complain about any of it. Everybody was very nice and very professional.

[From Japan we] went over the earth and the first place I landed was Anchorage, Alaska. Then from there we took this really strange course to get to Ft. Dix, New Jersey. I mean we must have stopped six times before we got to Ft. Dix. Spent all night at Ft. Dix and then was loaded onto an army bus and drove to Valley Forge, Pennsylvania to the army hospital there. It was 4CD and they called us the Animal House. The craziest thing about the whole thing was we're on the fourth floor. All amputees and no elevator. That was the crazy thing. And we had the longest ramp in the world to go down when we went down on the first floor and then coming back up was a real struggle. It was a learning experience. It just made you stronger. That's all I got to say about that. It was, you know, it sounds cruel but it taught you how to be in the real world because the real world was actually a littler crueller than that long ramp. (laughter) Because when I got back out, there was no handicap

facilities whatsoever. I mean, we went to King of Prussia Mall and there was three of us and we're all getting shoes for pylons but people just stared. They'd never seen handicapped people before and it was a trip... Well, we're real protective of each other so we just laughed it off in jokes and freaked out the straights. That's basically what we did. I mean you got two guys that got the same size foot off and they got opposite legs off and they're buying a pair of shoes for each other. And then you got me and this poor shoe salesman, you got two guys that are arguing over what kind of shoe to buy and he didn't know how to take it and we were being kind of vulgar and then I told him I wanted a pair of shoes and he had other customers that he wanted to wait on and this is where he was heading and he looked at me and went in [and asked] what size and I told him I'd make the feet to fit. And then anyway, I told him what size and I got the shoes and he was waiting on this older couple and as I went out the door I thought of something and I turned around and I says if these shoes hurt my feet I'm bringing them back. So that was the one nice thing about, there was 104 of us, all amputees, all under the age of 25 pretty much. I mean there was a few a little older but they were officers and they didn't hang with us very much and so we got rowdy and we were pretty much protective of each other and we made each other stronger because of it I think. That just happens to be one of those things I don't see happening with this war.

Well, I've been to Walter Reed and they've got them spread out everywhere. They don't have them hooked together where they're together and they can hook up a camaraderie, you know. I mean I'm still friends with guys that I was in the hospital with and we're close just like if I would have been in combat with them. We all leaned on each other. I don't think I was any different than any other one that was there. The problem I seen was when we went home the guys would get what we called the poor boy syndrome where everybody waited on them hand and foot and then they would come back and they would end up, some guys would end up going to the shrink or to the psych ward. We had a couple guys do that. We're all close. We all talk to each other and they'd come back and they'd be in their room for a couple of days and then all of a sudden they'd disappear and we'd find out that they're in the psych ward. I don't know that part of it, you know. All I know [is] they just went off the deep end for a little bit and then they'd come back and you really don't ask questions. You just kind of try to be their friend and let it go at that.

[Being fitted for a prosthetic at Valley Forge] was an experience in itself just to get there because we had to drive from Valley Forge down to Philadelphia and it was in, smack dab, down in the middle of Philadelphia and that was a trip. The problem is, if I could have the prosthesis that they have today I probably would use them, walk with them, but the prosthesis back then were so doggone heavy they were worthless. Too much, it was too hard work. If you want, I can go in my wheelchair and I can wheel slowly twice as fast as a person walking and so why should I go through all that discomfort? That's the decision I came to. I tried it down in Indianapolis with prosthesis down there and I tried it probably up to about 1974 and then I started playing wheelchair ball and I just decided well, I can do without this hassle. I left there [Valley Forge] July the 9th of '71.

[At Valley Forge the] medical care was really good. I had no problems with any of the care. The nurses were wonderful. The only problem we had was one lady and she was a nice lady. She just happened to be a little older and a little grumpier than most and she couldn't give a shot. We all used to hate it when we have to get shots around the clock because she would be the one that ended up giving the shots and we'd always have black and blue marks from her shot. (laughing) But other than that we had wonderful care.

Me and [the doctor] got into it once. I almost hit him over the head with a urinal. But that's because his bedside manners really sucked (laughing) and he didn't tell you anything. And my femur vein

lays real close to the top of my skin and you had to put sterilized water onto the gauze to take it off. Well, I told him that and he, this was right after surgery, and he went ahead just ripped it off and the blood just started flying and I was ready to crown him and the closest thing I could grab was a steel urinal. So I was going to clang him and I got the nurse going, now sergeant, now sergeant. Other than that, that was probably the only problem I had at all. I had 13 leg surgeries or thereabouts. A lot of clean up and a lot of shaping of bones and my right stump looked like a Thanksgiving ham. The bones stuck out about an inch and a half beyond the skin. So, there was just a lot of cleanup. I'm just lucky that I've got flexible skin. My skin stretched real good in traction. Traction is, they take a cloth, the cheesecloth, that's in the circle and they glue it to your skin and then they add length to it. We played dirty tricks with each other too. Because it would come off at times if you added too much weight and guys would sneak around in the middle of the night and add a little more weight to traction and in the middle of the night you hear a boom from the weight falling and then you call the nurse. The nurse comes back in and has to glue it back on again. They didn't sew me up until probably the end of June or at least the third week of June, somewhere around in there. Or June, let's see, yeah I left in July so yeah, it would have been June. Yeah, but I also had eye surgery and I also had ear surgery where they put a new eardrum on my ear because I couldn't hear for three months. [I had surgery] to remove shrapnel. I really don't, they give me some really goofy medicine. I was out of it for two days after the surgery because you had to be awake during this surgery and this medicine made you just plain goofy. I got a picture of my arm around some woman that came in. I have no clue who she was. But, you know, it just made you goofy. And then the ear surgery really was a miracle because I mean I could almost hear immediately after that. The only weird thing was I went in for ear surgery and ended up with both my eyes covered because on the way to surgery something fell into my eyes and scratched my eye. So yeah there was about three days there I couldn't hear or see anything. That was really kind of strange. People had to yell at me for me to hear anything. Both eardrums were punctured. One healed on its own and the other one, there was no hope.

[But the medical care I received during the first 12 months of being injured was good]. Real well. They told me what was going on and people would talk to me. Medically I never, I mean as far as the nursing care and the doctor care, I really never had a problem. The only one time I did I already told you about. But with us and the nurses, it was always fun and games at times because a lot of the nurses were closer to our age and they could understand what we were doing and we used to tease and harass them. I mean, Easter the Girl Scouts came in and gave us two hard boiled eggs and jelly beans. Well, you don't give that to guys who are under 25 because when the lights went out all you could hear was thump thump, ding ding ding ding. And the nurse comes running in and she slips and falls on her butt. There was a lot of goofy times. I mean you know.

I came home and ended up staying with my parents for about a month I think till my disability pay started coming through so I could get a place to rent. That's where my wife had been staying and then it was just poor times, you know...[My disability pay] was an automatic 100%. Anybody who was a double amputee back then was automatic 100%. So, it was basically just filling out the paperwork and getting it done and sending it in. Of course I dealt with the VA directly because I was down at the VA. I really didn't have a problem. I think my problem with the VA is more with appliances. Trying to get my [appliances], I order a wheelchair and all of a sudden I find out that they forgot to order it and that becomes a pain.

[As far as rehabilitation] I started out with physical therapy in Japan. And the only thing I could lift when I was in Japan was five pounds. And then I got physical therapy in Valley Forge and I greatly improved. See I started out on a gurney because I was on bed rest so I had to go on a gurney and the gurney's got wheelchair wheels on the front. So you wheel down to physical therapy which was on

the same floor and you go in there and you work out. They work with balance. With me, because of me being so short they really worked hard on balance. So I got the medicine ball thrown at me quite a bit on a matt and it really helped. I have terrific balance now and I think it's all because of all that training. Yeah and then they trained me to go from the floor, to do a lot of things on the floor like go from the floor to the top of the toilet, hopping up and down stairs, doing a lot of things without the chair. It made me a lot more mobile and I don't know, I think that really helped because I worked with several guys trying to get them to do it but they just felt like it was so degrading but to me this is how we're going to live and if you want to get around and you want to do things you're going to have to learn to do some things that you might not normally want to do. I mean she was really good and then the colonel that ran the physical therapy, actually she was trying to get me to stay in the Army and become a physical therapist and we actually had everything all approved for me to stay in. But I got ticked off at a first sergeant that had not been in combat telling me that my mustache was too long and I had to cut it before I left home for leave. Then I said I'm not going to be in the Army anymore [that was] July the 9th, 1971. Same day I got out of the hospital.

I was going home and it felt good. I don't know. I'm looking, I guess in some ways I might have looked at my amputation a lot different than some people. I looked at it as an adventure. I mean I came to the conclusion that I was going to be this way for the rest of my life and I had to face it. So, it just kind of became an adventure and I probably did a lot of things that a lot of other amputees probably wouldn't have done. But I mean like when I came back home and I finally started getting money and stuff straightened around. I had a car that was really hot and I went on the racing circuit for four years and I drag raced four years without legs. Freaked out a lot of the people but it was fun.

[When I got home my relationship] with my older brother...changed quite a bit. I mean we actually got a lot closer. Dad watched over me like a hawk. He was always worried about me. He was disabled himself. He had emphysema. He ran a threshing machine and from breathing all the stuff from the threshing machine, it destroyed his lungs. I actually could have got out of the military when I was drafted on a hardship just because my mom worked at the hospital and she didn't make that much money at the hospital and they barely had enough money to feed themselves. And that and my wife being pregnant. But I just stayed in because I felt like it was something that I should do.

[My mother and wife visited me while I was in the hospital (At Valley Forge?) and you know] well, it makes you feel good and you feel good about it. I mean, your loved ones are there with you and going through everything with you and you're trying to make them, you're trying to make them understand that it's not as bad as it looks. At least I'm alive and I'm not crawling in mud anymore. So, I don't have to worry about leeches crawling up my butt. So, I was basically just trying to survive and trying to get them to understand that that's how I felt about it. Mom hid her feelings. I can read my mom pretty good and when [I was at Valley Forge] she starts showing me pictures of things going on back home. She's trying to ignore the whole situation of what's going on. So that's basically her. My wife was just, I don't know, caring and she just was trying to make sure everything was taken care of with me.

[While coping with my injuries] I was so afraid of falling backwards. Sitting in that, you've got to understand my stump's only three inches on one side and ten inches on the other and I'm top heavy and it's like I would fall backwards. I mean it was real easy to tip over backwards in the chair and it took me a long time to get over that fear. I think it was about the first time I fell backwards that I got over it but it did, that really frightened me.

I don't know [what the challenges of being a new amputee were]. I mean it was just, with us it was

nuts. I mean it was one giant kind of laugh it off party and [I] never really thought about it. The biggest challenge I think I faced was when I came home and after about a month of being home I suddenly realized I was hooked on Demerol and I was having shakes and everything and that was a struggle to get off that stuff or to get away from it. I mean it was sweats and everything else.

[I needed a wheel chair to be mobile]. That was a trip and not only that it was the blizzards that came when I came home and I'm still trying to get used to being in a chair and then we get these horrendous snowfalls. It was a struggle. The good thing was I was lightweight and I learned how to jump curbs and get about. I mean I stayed pretty physical fit. When I finished my physical therapy at Valley Forge I was lifting 40 pound dumbbells for my biceps. So I was really strong and I learned to get around but it was a struggle. Here in Lafayette I got together with another guy that played wheelchair basketball and we invited all the congressmen and senators to Lafayette to be in chairs and Lugar about knocked himself out because he fell over backwards in the chair.

[So] I took a negative and made it a positive. It's made me a lot stronger. I think I'm a stronger person than when I left. I came to the conclusion that there's a rhyme and a reason for everything and I just use that theory and I think it's made me a lot stronger and I've done nothing but work on veterans' problems probably the last 25 years or so.

I've been the State Commander for the Purple Heart and the Sergeant in Arms for the DAV. I've been an officer and done a lot of different things. I volunteer now over at the Indiana Veterans' Home. I do one-on-ones for guys who are feeling down.

People ask me while I smile all the time and I tell them it's just I'm on this side of the grass and I wasn't supposed to be. A centimeter more and I would have lost my eye. If that chopper hadn't been overhead when I got blasted away, I'd be dead. I mean there are just so many things that it was just literally a miracle. I'm just real fortunate and real lucky to be alive and I try to put, I try to appreciate everything because I'm seeing guys my age right now dying left and right. Vietnam vets are being hit really hard right now with heart attacks and diabetes. I may have lost my legs but I'm in a hell of a lot better shape than 90% of them.

[While adjusting] the only thing that really bothered me was trying to get somebody to hire me. You know, to, what am I going to do. I'm a person that likes working outside. I'm not a person that likes sitting at a desk. I would rather spend 90% of my time outside than I would inside. Sitting behind a desk just wasn't it and that really bothered me. I think that's part of the reason I drag raced all that time was [to] feel the fear or I don't know. It was just an escape. But I was more worried about finding a job and working and whatnot.

[But when I first came home, I didn't know what I was going to do]. I had no clue. I really didn't have a clue. I'm a gear head so I decided that drawing gears would be a good thing and my family was in construction so I figured that's where I would go and so I went to school and got my degree in engineering. The only time I used it was for five years at Fairfield and then they were putting me to work 60 hours a week, sitting behind a desk, with no window and it just drove me crazy and then that's when I got a divorce and laid off at the same time and (laughing) ah. A friend of my who's a school teacher got me on a lecture circuit with the Daughters of the American Revolution because he knew that I was going through some kind of experience and so he thought I should talk about it and so I started talking to all these little grannies about Vietnam and actually talking got a whole lot of frustration and a lot of feelings out and I think that's what really helped me a lot too.

Yeah, and he started me up with schools and I started talking at high schools and then Purdue had a Vietnam literature class and I never read in school but after I got back from Vietnam that's all I did

do was read Vietnam books. So I became kind of a literature nut on Vietnam so I did talks there and at Dayton University at their literature on Vietnam. And then [I] wanted to talk at IU but I never got a chance to talk down at IU. But I did go to Dayton, Ohio or Columbus and talk at the University of Ohio and then I started working with ROTC students here in Lafayette on the POW/MIA issue, primarily the Air Force. Those guys came to the conclusion that I was right that if they go down they want to be brought back home so they worked real hard on the MIA issue and now if you watch Purdue football games, every football game they play the POW/MIA sign.

I work with Purple Heart and we do the march on the Hill every year so I talk to all the representatives and Lugar and Bayh about veterans' issues every year. I've been doing that for about six years now. I mean, I guess I really wanted to work with vets and so I just kind of copped out and not really worked a lot after I got laid off at Fairfield and I just started doing a lot of work with vets and I've been doing that ever since.

[I didn't let my injuries stop me from doing what I wanted to]. No, actually if I put my mind to it I'd just do about anything I want to do. I bought, back about '85 I bought this old farmhouse and three acres of land and the house itself was crap and I remodeled the whole thing by myself and built scaffolding and put ceilings in and the whole nine yards. I can do it if I just sit down and figure it out...but when I came home here no veterans' organization helped me whatsoever. As a matter of fact one of the things that really disgust me is my mom and dad got a telegram telling them that I was wounded and nobody showed up from the military or any veterans' group.

The only organization that actually helped me was the DAV and a guy out of New York. He helped a whole bunch of veterans. They took us to Trinidad, to Las Vegas, to California, to Disneyland. And those were the healing trips I mean as far as making you feel good and you started feeling like a human again and they provided plenty of beer and everybody was happy. Especially that trip to Las Vegas. I mean that was a trip. They gave us \$50 a night to gamble with. That's what the DAV gave us. \$50 a night to gamble with plus they were paying for the hotel rooms. We were there for three nights. And then the dealers down there caught wind of what was going on and dealers were sending show girls up to the rooms. It was a trip. I mean you start feeling like a human again.

[Today I still suffer from residual limb pain, which can be debilitating], [but] it all depends. There's several different kinds of pain. There is the, like the numbing, rolling pain and then there is this like somebody's hitting you with an electric shock and it's just boom, boom, boom, boom, boom. Those are really a struggle. And it's more or less when the weather is changing and see I just went through all that a couple weeks ago and I think the weather's changed enough now that I won't get anymore until spring. When spring gets here, when it goes from cold to warm, then I'll get them again. Then if I overdo sometimes when I'm playing ball, if I overdo then I'll get them. But everybody gets them. I mean every amputee gets them.

Profile of Mr. Roberto Garcia (Below the Knee)
(Original Interview Transcript 53 Pages)

Mr. Roberto Garcia was born September 1, 1947 and currently lives in the Southern Part of the United States. He was drafted into the United States Army on June 5th, 1967 and was injured in Vietnam, September 5th, 1968. He is a left leg below the knee amputee who currently uses a prosthesis. He is married and has one child. Mr. Garcia reports his health as fair. He has several health complications. These include diabetes, back pain, arthritis, stump pain, phantom pain, phantom sensation, other pain, depression, PTSD, and other unspecified mental health problems. The interview was completed on Dec. 17th, 2008. This is Roberto's story.

[During the time before the draft] I [was] working after school. I was a dishwasher and then I got promoted to a short order cook at the restaurant. But I wanted something better so I started working for an aircraft company repairing aircraft. I was a sheet metal technician. You're fixing the fuel sheet lodges for the aircraft.

The six months prior to going to the military, we had the draft. When they drew your number, you were drafted. So I was just going between jobs waiting for that to happen. One day I just ventured to the draft office and I inquired about when my number was coming up. They couldn't tell me but they say it's coming up pretty quick. Which was really strange because there's a young man there pleading with them for more time to stay home because his mom was going to get surgery. So I just told the draft people, how about if I take his place. He takes my place. I go now, because I don't have a job and am just waiting to be drafted, and he can stay home and be with his mom for the surgery. And that's the way that whole thing started.

I was very introverted, very shy, didn't have any plans for the future. I was kind of just bouncing around. I didn't have any direction and I thought the military might give me the direction that I needed. [I was drafted] June 5th of 1967. I don't even know why I did it. I was ready to start looking for something better for myself. Home was a good place. It was just that I wanted something, I've always been the kind of guy that wants to live away from home and to start living my life, develop my own life of sorts.

[I trained at] Fort Polk, Louisiana. 11B40 was the MOS I ended up with as an infantry squad leader in Vietnam. [I don't remember the date I was sent to Vietnam] I don't remember any of those things. It's a big old blank spot there. [But] I was with the First of 16th Delta Company for the Big Red One. I was based out of Lai Kai. We were a jungle troop so we stayed in the jungle the majority of the time. So I don't remember too much about the base camp other than flying out and flying back in. [to engage in various types of combat related activities].

[When I was injured] it was around midnight. We were like a semi search and destroy security patrol and so there was a burning, armored personnel carrier had gone over a land mine and it broke down. It was loaded with ammunition and they sent us out there to secure it because the ammunition was going off and they didn't want the enemy to come in and salvage any of it. So our job was to secure the armor, and that's where some of the others would end up getting ambushed...we were working in a shrub area. The shrub went up about two and a half foot. We were not dug in; we were just laying on top of the ground or moving. We didn't make any foxholes or anything else.

[We were ambushed and I don't remember what happened]. I talked to my psychiatrist, say it's better if you don't remember that. [I was the] squad leader and I lost my leg and I lost three whole machine gun teams at the same time. And my radioman got wounded fairly bad.

[I remember being treated on the battlefield by the medic.] I never lost consciousness. It was lucky for us that nearby was a battalion operation going on. So we got Medivaced out within 15 minutes—myself and the dead soldiers and my radioman. [Before I was put on the medivac helicopter] I got a tourniquet on the leg and two shots of morphine.

[I don't know where the medivac helicopter took us]. I know it was one of those field hospitals but I wouldn't know where it's at. I remember getting in and off the helicopter, taken into the field hospital and then I remember when they took me off the stretcher and they put me on the cold little table. When they picked me up and put me on the table, the people, the doctors and staff say oh shit and I looked over to that stretcher and it was just like a big old pool of blood on that thing. Then I thought, hmm, this is serious stuff. I had three shots of morphine. Then I told them where I had my money in my boot. Like it made any difference. I mean it was silly. Then I passed out and I didn't come back around. I don't have the slightest idea. I don't remember.

I was there [at the field hospital] for a while to get stabilized and I was there probably, maybe about seven or eight days. [At the field hospital] they took very good care of us. They looked after us like we were kings. Anything we needed it was like 24-hour care. It was wonderful. I mean you couldn't find better service or better care anywhere else.

[At the field hospital] they removed the leg. What was left of it. It was a little piece of muscle holding it down to the rest of my body. And of course, they went in and took shrapnel off of my pelvis area and sutured everything back up. They also did an exploratory operation. I had so many wounds on the exterior and pelvis. They doctored me up on the stomach side to make sure there was no internal bleeding and they put me back together and I was there for a few days. They found nothing [in exploratory surgery and they left a piece of shrapnel lodged near my spinal column] right where it was at.

[While I was there] the only infection that I ended up with was my leg. The one I lost. I got gangrene on it and they kept trimming it back till they stopped three and a half inches from my kneecap. It was an ongoing process and I was on the ground maybe just 15, 20 minutes after the injury but it was enough time for me to pick up stuff from the surroundings from the ground. I [also] got diagnosed with malaria.

[When I was at the field hospital, I didn't have any contact with my family]. I didn't want to worry my parents and in fact, I told them that I wasn't in combat. I was actually just driving a truck around the base. [So that's what I told them prior to my being injured]. I didn't want them to worry that I was in danger. That's the only thing I could do for them for. I didn't want them to worry about me.

[They] ended up, transferring me from the field hospital to Japan and they kept me there for, I don't know, a couple or three weeks until the malaria was under control. [They treated me] basically to stabilize the malaria but of course just keep treating the wounds and stuff like that.

[When I was in Japan, I don't remember anything about the ward I was on]. I think when I got wounded I went into a real deep, deep depression. I just went into a deep hole and I was just surviving from day to day. [But when I think about my injuries I just think that] I myself volunteered

for the military and then that to me that's part of the hazards of duty. And to me everything was planned accordingly and everything was done right. It was just, I guess wrong place, wrong time. Basically, it's combat. Nothing is assured. [But] I think that the depression might have come because I was trained as a squad leader. I had gone to Fort Benning, Georgia to be trained and I had intensive training and leadership and when that happened I took it all on my shoulders, you know, what did I do wrong? I didn't do my job well because I lost three guys in this situation. So when I got back to Brooke Army Medical Center where I was discharged a few months later I dwelled on that for the whole time and I actually dwelled on it until 2005. But to go back, Brooke Army Medical Center had excellent medical facilities but there was nothing that I could talk to anybody about this. There was no psychologists, no psychiatrists, nobody I could talk to in confidence and stuff like that.

[Looking back I don't think the VA or military was paying enough attention to the psychological needs of veterans] and I don't think it was an intentional thing. I just don't think that we've been through this before. So I think the Vietnam veterans coming back were a catalyst to having all these programs now.

[But all of the treatment I received, whether it was in the field hospital or in Japan,] all of it was great. All of it was fantastically well. Even BAMC [pronounced as an acronym, Bam Cee] with the medical and then the prosthetics place at the BAMC. They had a prosthetics place and what we were getting prosthesis-wise was what was happening then. You know the wooden legs shaped out of, I think it was balsa wood because it was a real lightwood.

The only thing that I would have loved to have had was somebody to talk to. Somebody in the psychologist/psychiatric/social worker. Somebody besides military guys, besides soldiers. And that would really have been helpful in the field hospital, in Japan, and at BAMC.

[When it came to needing psychological help, I believed all of the soldiers needed it]. I would say all of them because when I was at BAMC - my ward, half the floor was amputees like myself. The other half was the burn unit and so all these guys could have used something, some kind of psychiatric, psychological, or any of those things to help them ease their mind in a way.

I was discharged April the 15th of '69. So I was at Brooke Army Medical Center for a few months. I don't remember how many months I was there. They did everything for you. It was kind of like—they didn't baby us. I was on a bed and I had IVs in both arms and I had a weight pulling on my stump. So they brought me food or whatever it was but as soon as I was able to get on my feet, it was go down to the mess hall. Go to the mess hall. We're not going to bring your food. It was one of those things of we're not going to baby you. To me that's the thing they were always like, do for yourself. It was wonderful.

[Eventually] my stump started to heal. Then I went down to prosthesis and they made me that leg, the carved wood leg and then I used that to start trying to walk on it. And it was just trying to get back on my feet. They offered me a wheelchair but I didn't want a wheelchair. I didn't want crutches. I wanted to be able to walk on my own two feet.

[I remember the ward that I was in at BAMC]. It was very nice and quiet. It was squeaky clean. Then the nurses were marvelous. I remember one old doctor was a major. He was wonderful. He was a very nice gentleman, very compassionate and always smiling. He was real positive. There was never a face on him that wasn't good. Kind of like a happy go lucky guy and boy that is so good

to see that when you're laid out on your back that this guy's got such a good attitude. [And the nurses] were very attentive and they always had a smile on their face and very positive and if you want to talk to them you could sit and talk about problems with your girlfriend or your wife or whatever. They treat you like a family member—full of love and attention.

[But being bedridden did take its toll on me and] the worst thing of it was if you want to go to the bathroom for the number two thing, you know, to go take a shit they get you a bedpan. So you had to sit up in your bed. They put a bedpan under you so you're sitting on top of the bedpan. You feel like this silly board. So I talked to my doctor, and I says is it okay if they take me to the bathroom so I can have privacy. Oh yeah. We can do that and they did it. Yeah, so it was good.

[When I think about all the time I spent in bed] the only thing that stands out in my mind was when I went from the field hospital to Japan and into Brooke Army Medical Center was that I hadn't taken a bath. I was in the field. I was dirty. I had red clay in my hair and so I got wounded and brought in and went to all these places. But I was so bad off, so injured that giving me a bath was not an option because I had so many wounds everywhere. So after I was at Brooke Army Medical Center for a few weeks I was able to go take a bath. Take a bath and [it was a good feeling]. But the stump was still open so we had to put a plastic bag and tied it real nice and tight so it won't get wet. It was wonderful to take a bath after I don't know how many weeks or months. I don't know how long it was.

[While at Brooke Army Medical Center] I didn't allow [my family] to visit me. I would not allow it. One time they came down, my mom and my brother, came down to visit me and I visited for just a few minutes and I told them I had to go to my next appointment which was a lie but I didn't want to be around them.

[I also became tired of just laying in bed after a while]. It was terrible but I was in so much pain—they gave me pain medication and things like that—so I could lay there and be okay. The guys would come around and talk to me and nonsense and stuff like that. [There was a lot of camaraderie among the soldiers in my ward though]. And even the guys in the burn unit. Those silly guys called themselves the crispy critters and it was like a family of amputees and bone guys. [It helped me to be with those men]. They were handsome young men and then you see them going out into the community and they'll be burnt and some won't have ears and stuff like that. People are going to look at them. Just like they did me.

[After I left the hospital] my mother would get a call from people that knew us and we saw Roberto and I think he was drunk. And it wasn't that. It was that the leg didn't fit good so I'd go around, you know, wobbly... I felt it disrespectful.

[But on my road to recovery after the first 12 months of being wounded my greatest challenge was] the prosthesis. And I guess no counseling but at the time the prosthesis was the main thing because they were awfully painful. The first leg I got was made here at Brooke Army Medical Center while I was recuperating from my injuries. It was actually carved out of wood and had a real hard plastic foot and of course the socket was made to mold to my stump. That's what we call what's left over of the injury. It was really made out of wood and it was very crude and held on by a little belt right by the kneecap and it was very crude. You got a lot of blisters and it was just painful and you had to drag the thing around. [But the prosthesis technology has improved a great deal in the last 30 years]. It's fantastic now. Fantastic.

[The] one I'm using now works on suction. So there's no straps to contend with. A strap, it's kind of like if you had a belt around your waist that didn't fit snug and then you had a piece of weight hanging on it when you're trying to walk and it would always just be pulling on you. So it's really complicated. But this one works on suction. It's got what you call a flex foot, a carbon foot. It energizes. When you take a step your toe energizes and it kind of makes you go forward a little bit. It's just marvelous.

[At the time], I just wanted to get out of the hospital and go back, start living life again. [I thought life after being injured would be], a piece of cake. Go back, lose a leg, no big deal. I feel imperfect anyway. Boy that was a rude awakening.

I remember getting discharged [April the 11th of 1969]. The reason I remember is because when I went to get the money that was coming to me at discharge, it was like seven dollars and some odd cents. So I had to take a bus back home and the bus cost me seven dollars and some odd cents. So I got to Victoria with no money. And then went home with my parents. It was difficult, having one leg and still getting used to it because I wasn't still 100% on it and you go home and you have no money and you have to borrow from everybody and it took the VA forever to send me something. They gave me 40% [for disability] and I was like gee whiz I lose a leg and get all shot up and I'm deaf in both ears and they give me 40%. And then I had to wait forever. [I didn't agree with the Army only giving me 40% disability].

[After all the hospitalizations and surgeries I was left with an] amputated left leg. I've got my kneecap and three and a half inches below the kneecap. Also, got some serious injuries to my back. I have a piece of shrapnel close to my spinal cord. They didn't want to take it out because it might paralyze me. So I'm living with that and then I have multiple wounds to my pelvis area. [So I suffered] shrapnel [wounds] and the leg was actually a bullet wound. I'm deaf in both ears [as a result of the same incident that caused me to lose my leg]. So I use hearing aids.

[And because of my Mexican heritage some people had trouble accepting the fact that I had lost a leg]. The Mexican thing is that if you've got an arm missing or leg missing or these things you're not a whole man anymore. And then if you have a leg missing and stuff and you become married and you have a daughter then well, you're even less of a man because you can't even create boys. I felt a lot of people didn't see me as a whole individual anymore. And that kind of threw me towards hanging around with white people, the Anglos. I felt that they accepted you for what you are and that was it. So I became one of those infamous coconuts. You know, brown on the outside but white on the inside and then they let me be as that—as a coconut.

[So some of the people that I knew of Mexican descent were calling me a coconut and] it was like well, you're not a man. They put you down. So then you go and be with people that accept you as you are, being the Anglos, and then the same people that didn't consider you a man are now calling you a coconut. It's kind of a lose-lose situation. You can't win. [Our Mexican culture put a distance between itself and the Anglo culture]. I think that the Mexican people always thought that the white people were always stepping on us and doing things to us that shouldn't be done. But I think a lot of stuff might have been imagined. You know, when you're dealing with people from the back, old days—like my mother. My mother didn't like white people but I think it's just something in the mind that we set ourselves apart from other people. [With the way I was treated by my culture when I got back, sometimes I felt betrayed]. But then, that's the culture. That's the way things are. [I eventually found new friends among] the Anglo, that accepted me. And now I'm making friends with my colored brothers and everybody else. You know, many of the older Hispanic, Mexican, mostly the veterans, accept me very well but of course they're veterans. [So I was injured, and I had

to go back into this Mexican-Spanish culture that placed a lot of emphasis on machismo which was] very difficult. It was terrible out in the community. It was a real world and it wasn't very welcoming.

[But among my own family] I think there were many that felt sorry for me. They wanted to do everything for me. I think they see, poor guy and I didn't want any of that. I used to say don't do it. I'll do it myself. One day I jumped around and I just slide on the side of my butt and everybody was going to pick me up. I says, I can get up on my own. I was feeling sorry for me. I never took it well.

When I got back home from Vietnam I went looking for my friends and they were all in Vietnam. Some of them would be come back little by little. Finally everybody came back. Well not everybody because some died, but most came back. We still hang out together. They accepted me well because they're veterans. [Most of them were of Spanish or Mexican descent].

[But in spite of how I was treated, even considering my injuries, I'm proud of what I did in the service]. I wouldn't change any of it. [Before my injuries] there was two things I wanted to do. I was going to stay in the military, make it a career. [I had to change the way I thought about the future after being wounded]. The military was going to be my life. And then when that didn't work out I was going to go into law enforcement but I had a leg missing so law enforcement was out of the question. So that really threw my brain to chaos because I had no goals, no plans, nothing. I wandered around for many years. Wandering around and around.

Immediately after I got out of the hospital I was having [psychological] difficulties. My mind wasn't functioning correctly. It wasn't working well and I went back to Brooke Army Medical Center, the psychiatric building and I went in and told them I was having mental problems and I need some help. I need somebody to help me. They gave me this non-commissioned officer to do the intake and the first he asked me, are dogs talking to you? It must have been the time of Son of Sam I guess. But he asked me are dogs talking to you and that irritated, it pissed me off big time. They gave me bottles of pills and I took the pills but it was terrible. You went from being a wonderful fellow to just being like a zombie walking around, so I just quit taking the pills. I had no feelings. Literally my brain was in a fog. I just felt not normal. But I guess back then, that was the thing, they gave you medication for those things. I never went back.

[But I had mental health issues and] back then, I was very angry and very hostile and all those things and I don't know why but, people just irritated the hell out of me—just by doing nothing. You know, they would do nothing. They would just light me up and I was a raging maniac. [I think I was suffering from Post Traumatic Stress Disorder]. I guess I felt I didn't have any control over myself over my life, I think it was just a big old mess of confusion.

[The first 12 months after I got home I saw my life chances and opportunities as] very bleak. I didn't see anything positive coming my way. Nothing. [And I don't think it was because there were no positive opportunities]. I think it was [just] my state of mind. I think there was a lot of opportunities but my state of mind wouldn't let me do any of those things.

When I got out [of the military] I went to Victoria College, and that's where I met my wife. I went there for about two years. I'd go from Monday to Friday. Then on Friday afternoon after school, I'd just go back to San Antonio. There's a little cheap hotel/motel here in San Antonio and I would check in on Friday and stay in the room till Sunday afternoon and then I'd go back home and then Monday I'd go to school. Come Friday, come back same place and stay there for the weekend. I

didn't spend it [the weekend] with anybody. I just locked myself in the room and stayed there for the weekend. I guess that's my isolation. I was very sad. It was just like I go hide from anybody. Nobody can see me. Everybody thought I was going to San Antonio and partying. I never told them otherwise.

[I felt out of place compared to the other college students because] I guess I was so young but I was so mature. All these youngsters, children, running around and laughing and having a good time. I remember that. It was just like, it was so sad. [It was different because] they see fun and games every day and I saw death and it was a big slap in the face.

When I finished school I was already married. I had met my wife and we finally got married. When we were married it was wonderful. It was very nice. It was a lot of fun. [We had to elope though because her mother didn't want her marrying me]. One of her aunts told her, why would you want to marry him? You've got to take care of him the rest of his life. You've got to take care of him forever and her mother was absolutely against it. But it worked out okay.

[The only thing I can think of about the first 12 months after my injury that stands out in my mind is one incident]. I was pumping gas at a service station and this car pulled behind me and honked the horn and for some reason when people honk their horn, it throws you into a rage. I go from here to there in a split second. When he honked the horn I reach in the back seat of my car and I had a hatchet and I was going to go do some work on that SOB. It turns out it was a friend of mine. And he just, you know, acting stupid—honked the horn. I don't know what I would have done if it was somebody else. But at that time it just shocked me that I reacted so quick and it just scared the hell out of me and right after that we moved out to the country. [I was not like that before I entered the military]. My whole family is a pacifist. Yeah, we don't look for trouble and we don't create it. Other than I wanted something for myself. But the whole family is pacifist and I go off to war. But I was the black sheep of the family anyway.

[I had trouble adjusting mentally and eventually] I just moved out to the country. I was very angry... I had some guineas, the little guinea hens and I had some chickens. So one day the guinea hens was piled up on top of my rooster. They were just knocking the hell out of my rooster. It must have been about six or seven guinea hens and to me that behavior was not permissible. So I went and got my shotgun and those guineas never had a chance. But those guineas fighting just made me react like, fighting, any kind of fighting would make me just go into a rage and I killed the guineas. I don't know why. That kind of stuff just did that to me. It's scary. The things that I do and have done. I never harmed anybody, at least not physically anyway. But I've did some weird stuff. You know, killing the guineas and all kinds of stuff.

I was lucky that in '03 I was diagnosed with what is called now Post Traumatic Stress Disorder. [I was diagnosed when I went to the VA for a check-up and I didn't have a living will], so they sent me to this social worker so she could explain what was going on and she started asking questions. When she got to the part of my combat thing, I just fell apart. I think she was shocked. It didn't take much to get me to break down. She was, I was surprised that just the mention of my combat. It was really scary. She decided boy you need some help because you've got this thing really bad and [so] she recognized right off the bat [that I had Post Traumatic Stress Disorder]. So I stayed there coming to the weekly meetings in Victoria for PTSD for about two years and then finally my daughter and her husband got divorced and I was very attached to the grandson. When I couldn't see him anymore it threw me into a breakdown. I ended up in a mental hospital in Waco in '05 and I stayed there for almost 20 months and that's when I started my road to recovery.

[And since then] life has gotten better. I went to the hospital in '05, got out and I didn't do anything for about two years except just kind of enjoy life. You know, you just got to try to readjust myself and let my family know that this is the new me and I'm not going to go back to where I used to be. And has it been easy? It's been easier than it was before for darn sure.

[All those years I just felt such guilt because] I was trained as a leader and I lost three guys. That was the main thing, I lost those guys they were young. They were younger than myself, maybe a year or two and everything that I did afterwards was so painful. When I got married I went back and these guys will never get married. When my daughter was born I said well, they never got married and they'll never have children. So everything good that happened to me I always linked it to them. You know, I did this but they can't. And that really pushed me down. I think that's what did it. I have so much and they have nothing.

[So at Waco] they let me let out everything that was bothering me. They told me that it wasn't my fault that these things happened. I wasn't responsible for all these things that happened and I kind of knew that but I needed somebody else to tell me that besides myself. You know, family would tell me well, it wasn't your fault. But it's not the same as a total stranger that's in the psychiatric field to tell you that it's not your fault and this is how we're going to deal with it. Do I forget those guys? No, I'll never forget those guys but I put them in a place of respect.

[But looking back] when I got out of the military and I was discharged and then of course all these anger and rage things, we moved out to the country and I think that really saved my life because I didn't have to worry about coming into town and putting up with people, I was on my own. I didn't have to do anything that would stress me out. So I stayed out in the country. I didn't have to drink or do drugs to survive, I tell people and it's like losing the leg was actually the best thing that happened to me because I didn't have to go out and face the world like everybody else did and it's sad to say but I think that's what saved my life. It was, probably having this leg amputated. Because I think if I'd served my 12 months in Vietnam I would have come back just as bad as I did after I lost the leg. Because I still lost my three guys and probably lost more and I would probably have suffered worse than what I suffer now.

[My personality also changed a great deal after I served in the military]. When I was a youngster I was easygoing and very considerate, kind. I wouldn't do anything to hurt people and when I came back I was just opposite. If you lived on the street there and you needed help I'd just walk by and didn't give a shit. And now that was after I came back from the military. It's just, tough shit, let's go and when my parents died I was kind of like well, my father died first and well, oh shit. Shit happens and let's go on and then my mother passed away and I did same thing. Then my brother passed away. Same thing and I thought this shit can't be right. So, all that stuff is gone. Yeah, that's, if you sit here my eyes are kind of wet but that's the new me.

[But definitely the biggest challenge] was trying to fit in, trying to be normal. Whatever the heck that is. I'm still figuring out what normal is but something that gives me some kind of balance, and that's number one. I've worked over the years with my prosthesis and most people don't know that I have one when I walk. But that's an effort that I've done because I wanted to fit in. I wanted people to see me as a normal person. [And the next challenge was] not being able to feel love, for people, for anything. It was just, the don't give a shit attitude and to me that was a challenge in itself.

[It was important for me to fit in and appear to be normal] because you don't want people to know that you're handicapped. And that was my thing. I didn't want people to know I was handicapped

and I busted my butt practicing over the years walking, walking, and walking and I'd look in the mirror to make sure my walk is good but that's the weird thing about me is that I don't want people to know that I'm disabled.

[So] I'm so glad that I got the help I did in '05 because the recovery, where I'm at now is fantastic and that's the reason that I stayed, that I applied for the job with the VA in the first place because I know the feeling of being in a deep mental problem and then the recovery and it's fantastic and the reason I wanted to get into this program, these things, because I want people to realize that it's beautiful out there once you get into recovery and get rid of these things. And I just want them [other veterans of Vietnam and Iraq] to see that it's there and I hope to be living proof of it that recovery is wonderful.

Profile of Mr. Mark Johnson (Above the Knee)
(Original Interview Transcript 38 Pages)

Mr. Mark Johnson lives in an Eastern-Midwest state and was born December 3rd, 1948. He enlisted in the United States Marine Corps in the summer of 1967 and was wounded in Vietnam September 3rd, 1968, near a place known at the Rock Pile. He is a left leg above the knee amputee and does not currently use a prosthetic device. He is married with two children and two step-children. He reports his general health as good and reports being overweight, experiencing back pain, arthritis, stump pain, phantom pain, other pain, depression, PTSD and other unspecified mental health problems. The interview was completed on December 19th, 2008. This is Mark's story.

[I entered the military to serve in the Marine Corps on] September 17th, 1967. I [had recently] graduated in June of 1967 and I remember telling my dad that I was kind of tired of school because I had gone all my life and I think that was like 19 years [old]. Other people only go from like eight years grammar school, four years of high school but I went nine years of grammar school and four years of high school. I did get a scholarship to play football but I wanted to do something else right then and there. Anyway, my dad told me that son, you live under my roof and you got to do something. I said but...[and he said] "you're either going to have to work or go in the service." And while I was in high school I saw these guys that came to the school and these were marines, well dressed, and I remember that and I said, I looked in the phone book to see where I can find the nearest recruiter. I got on the bus one day and told my sister don't tell anybody where I am going and I went to the recruiter and I enlisted. Now the funny thing about it, I told them I want to go right then and there but my sister, she couldn't hold her tongue, so she told my mother (laughing) where I was going and she went and talked to the sergeant and, the recruiter that is, and they made a deal for me to stay out a month so she can get a chance to throw me a going away party and I said wow. [But my mom,] she wasn't too happy [about my decision to join the Marine Corps] and neither was my dad. My dad was a World War II veteran but he was Navy and he was trying his best to get me to join the Navy instead and a friend that he worked with was telling [me] what boot camp was like and I said well, I'm going to try it anyway.

[Prior to my entering the military] I think for three months I might have worked for a painting contractor and I was telling them I was going to go into the service. It was like a painting job but what I wanted to do is move down south to where my auntie lived in Tennessee and I wanted to live there and then try to get my life together down there because I liked my aunt. She was my favorite aunt and I wanted to try to well, definitely get away from my father. See if I can live in Tennessee but my dad was putting too much pressure on me [to either find work or join the military]. [And at the time,] I, well I was a bit of a lover. I had several girlfriends. None that I was really interested in until I got into the service. [But] I was a quiet young man. I tell people that I was only in two gangs in my life. One was the Boy Scouts and the other one was the Marine Corps. [So at that time in my life, prior to becoming a Marine, my social life consisted of] taking the young ladies to dances and movies [and] that was about it.

[But I also thought of what life would be like after serving in the Marines]. [Even after serving in Vietnam,] well, after what I [had] survived, I [thought of] going back to school. [But before serving I thought I might one day] go play football and I figured that after the four year college I wanted to be an engineer. At that time I wanted to be an architect engineer. I figured I can design my own house and be with a company and be doing the nine to five.

[But my future after the Marines was altered, as today] I am a AK which [means I have an] above the knee amputation [on my left leg]. I was also wounded in my lower back with a 122 rocket [and as] a result I have severe arthritis in my back. I have arthritis in my right knee and I can't raise it higher than 90 degrees. I also suffer from Post Traumatic Stress and that has caused me a lot of trouble.

[But to go back to 1967, when I entered the Marines I was sent to San Diego for initial boot camp and then] after boot camp I had [the] opportunity to go to recon school which I turned down because I wanted to go home. [So] I went home for 30 days and then I went back to California with my orders and I did end up going to Vietnam around March, the end of March or the early of April [of] 1968. I was in the tail end of [the] Tet [Offensive]. [And] when I got to 'Nam with 13 Alpha Company, First Platoon, Third Battalion. They were based at the Rock Pile [and] that was in Quang Tri Providence.

[As a unit] we were doing search and destroy [missions]. My job consisted of [being] a radio man, rifle man, and the new guys get the lousy job as a point man. [So] unfortunately, I did [get the job of point man in the beginning]. (laughter) [And] I was [promoted in Vietnam too]. I was promoted to Corporal but I didn't get a chance to do much because I was, unfortunately the next day [after being promoted] I was wounded. (laughing) [So I was assigned to the Red Pile and my unit was on a search and destroy mission. I had been in three combat engagements before being wounded severely but I will cover the one I was wounded in.] The time of the month was September and we were on [a] search and destroy mission. A couple of guys didn't want to go because we were supposed to go up in the mountains again and a couple of the guys shot themselves in the foot so they didn't have to go. And [because of that] the day operation was called off but at night time we had to go on a listening post which is four guys, they go out and be in front of the company and listen to see if [the] enemy is coming. So, I volunteered and I told them that I wouldn't mind being on the radio. So it was four of us. Normally we used to go out early, about well, it would be just getting dark... Well this time they were late and the skipper said that, well, I guess it must have been around nine o'clock [so] it was definitely dark but we had to have the incoming so if they were, by the time they get started we would be in our positions. So you were just crossing at the bridge when the next round landed three feet on an angle of me and caught me square in my back of my left leg. Hit my square in the radio which went, my leg was hanging on by the meat. The shrapnel went through the radio, my flak jacket and me and missed my heart about a half an inch, my spine about an inch. The guy behind me, the blast hit him square in the face, killed him. So, I fell to the ground and I remember screaming like mad and one, the one in front of me, soldier, he came back. I remember him smacking me in the face. He told me be quiet, be quiet. I guess I was screaming very loud and I remember him telling me to be quiet but then I remembered that I was starting having a pain in my face and I was forgetting about the pain that I had elsewhere. (laughter) [And the pain in my face was from him smacking me].

[So in this particular mission I was wounded because normally we would have waited for the Viet Cong to shell us in the evening and they were late so my commanding officer told us to move out so we were out in the open when the incoming rounds started to land.]

[Also, as a brief side note,] in my company, [it was common for Marines to get out of combat by shooting themselves in the foot]. We [did] a lot of humping and sometimes when we, like I say I was on the end, personally was in three combats but normally when we're in a fight it appears to be pretty fierce and some of the guys, they just didn't want to go through it anymore. [So they would intentionally injury themselves. Some of them did that before I was sent out on my mission that night, so they got out of going on the mission].

[I also do remember certain things about the night I was wounded]. Ah, it was hot. That I can remember. What made it so, I guess, ironic is that when the guy brought me back to the CP, which is command post, I didn't think I was hit that bad. I remember that I was hearing on another radio that they wanted a Medivac, and we were still getting incoming at that time and the Marine chopper said that he wasn't coming in because we were still getting incoming. [So] the Army chopper was, I don't know where he was going but he made a detour, swooped down, got me and this other guy and took us to the field hospital. [So the Army helicopter landed under fire and Medivaced me out]. [But it was one of my fellow soldiers on my patrol that picked me up and carried me back to the command post so I could be medevaced out.]

[And during that time I wasn't sure about how badly injured I was.] I didn't feel my back at all. It was just my leg and my face. I didn't find out [that I was wounded in] my back until I was dropped in Japan and then I knew that I was wounded in two places.

[But the medics treated me at the command post]. A corpsman [and the medics], they put my leg together and they wrapped it up and they gave me morphine and I'm not sure if they did anything to my back. [I remember] when the chopper came and I asked them for some water because for some reason I was dry. Never ask for water in an open chopper because I got water everywhere but in my mouth. [And the helicopter took me to a field hospital. I can't remember which field hospital exactly but I'm thinking it might have been Dong Ha.]

[And I was at the field hospital for] about a week [which I remember] because we got mortared and I know that a bunch of guys from the 33, which was Third Marines, Third Division, they got mortared and we got a lot of [soldiers] coming in and wounded. [I] was scared because I was all hooked up and I said oh, hell, that's a hell of a place to be and the doctor told me they had to amputate my leg below the knee [so] I [would] fall if I tried to get out of bed. I remember him telling me that [but] it didn't register until I tried to get up and naturally I fell out of bed and I remember feeling my knee but nothing further down. . . [So my initial amputation was below the knee, not above the knee as it is today.]

[I should also explain here that I also had a different experience in Vietnam than other Marines because I was African American. I mean,] for the most part [all the Marines got along together. But] unfortunately I was over there the year when Martin King was killed and [there] was some tension [amongst] the brothers. They [also] took the rifles from us. Then when Kennedy was killed, it wasn't a riot but they kept everybody back in the rear. [But the rifles were taken away from the African American soldiers when King was assassinated and we were] confined to the barracks. It was wood and I don't know what they use, hooches. It was like made out of wood. Because we [were] out in the bush when it happened. [So they took away our rifles and confined us, which] we weren't very happy about. [I think they did that though because,] well, some of the guys wanted to start, I guess you [might] call it like a race war. Me personally, I can say I was basically a quiet person and I, I mean even though I didn't like it, because I said, I mean what the heck, we [were] all supposed to be the same over [there but] after the day was over they gave us back our rifles and everything went on as it was but you know... A lot of brothers did have strained attitudes. Because for them it was one activity. They shot themselves in the foot and they said, hey, back in September they said they weren't going back out anymore. And then a few others got put in Long Binh in a prison. [So there was some tension between the African American Marines and the white Marines.]

[But to go back to my injuries, I was in this field hospital. And my leg had been amputated below

the knee. I also developed an infection while I was there.] Now, I've been trying to get records. I just stop and say gangrene because I was shipped to Japan and based, I was on the emergency ward for three or four days because I remember this woman Marine because she was writing letters home for me because I couldn't write. I understand they took out a big hunk of shrapnel out of my back. They broke it in half and I was going to keep one for my daddy and unfortunately I lost it. Then [they also] had to cut my leg 22 inches above my knee.

[I do have a distinct memory of the field hospital though.] I remember being flown there and they took me off the chopper. A corpsman asked me did it hurt and as I was in so much pain, I was kind of chilly and hurt and then I remember they asked me could I stand and take an X-ray and I passed out. [The] next thing I know these two doctors [were] leaning over me and one was a very great doctor because he was saying, son, I know you're hurt kind of bad but we think we can try to save your leg. I remember he was moving his finger up and down my foot there and he asked me, did I feel it, and I was just [thinking], no I don't feel anything. He said some kind of medical term and the other doctor he said oh, just cut his leg off and let's be done with it and that dude was scaring me. So eventually the doc, the nice doctor, he was an admiral and he said well, I'm sorry son but we're going to have to amputate. The last thing I remember [asking was] will it hurt or will I be awake or something to that effect. [But they sedated me when they did the procedure] because I don't remember anything.

[But after the field hospital I was taken to Japan, which I remember some things about too.] While I was there, when I first arrived the Japanese [were] taking me off the [gurney]. They had my head lower and I don't know some idiots dropped me and that's when I was surprised that I was wounded in my back also because I was having a heck of a pain and then when they put me in this hallway for X amount of time and the doctor told me that they would get to me as soon as they can. But when they finally did they found out my temperature was around 103 and I was going into shock. Anyway, when they did operate they took, like I said, above the knee and I had a nice hole in my back and they took the shrapnel out. I had a piece of the original, which is I believe, it was tan, not tan, it was bronze in color which was my meat and blood dried up because I was going to try to keep that for a souvenir and only God knows where I lost it at.

[They also took some shrapnel out of my back but] they didn't do much except for that. But they had to fill the hole in my back with gauze and they kept checking the dressing of my leg and I remember in Japan that they gave me a Purple Heart and so they took a picture of me. I was skinny. The Secretary of State, whoever he was at that time in '68, he came in, a captain or another officer pinned the Purple Heart on my pajamas.

[So I received a purple heart for my injuries, but actually,] I was wounded twice. The first time I was--it was also shrapnel. It was during this F16 Platoon [as we were guarding an F16 that had crashed] and the scariest thing you can ever listen to is when a mortar shell or a rocket shell would blow up and you hear it zipping through the air and you don't know where it's going. You hear the shell too but when it bursts, when it blows up, you will hear the shrapnel (laughing) and that's a scary thing. [And I was wounded when] the shrapnel went through my arm.

[But getting back to Japan, there are some other things about the treatment that I still remember]. I know that every time I'd cry out that the doctors would, the corpsman would give me morphine. One incident that happened there was, Japan [has] a lot of earthquakes, and this one particular time it was just a tremor and the bed was moving and I was thinking they were transferring me into another room and I know [someone] was running, the "word inaudible" was carrying on and I'm looking, I said

what the heck? I asked, well what was that that I just lived through and he said, oh, it was nothing to worry about, it was just an earth tremor. I remember when I was at boot camp. A politician or somebody said that California was supposed to fall on into the ocean and Japan was supposed to fall in the ocean so after it was done I told them get me the heck out of here quick. So the doctor asked me, could I try [to move]. Yes I think I can try, I can try. Get me out of here. (laughing)

[And from Japan they sent me back to the United States.] They asked me where was [the] nearest hospital to my home. I said, well I'm from Chicago. They were going to send me to Great Lakes. I said I don't want to go there so they sent me to Philadelphia Naval Hospital.

[Today when I look back on being injured,] well now I think of it as simple fate of luck (laughing) but when it happened I was totally, totally messed up because I said I am a volunteer. I don't know how it is I wouldn't have survived 'Nam or whether go to, like I was supposed to but, oh, I was quite, as we say now, I was quite warm. [But after being injured I was mad] at the world and myself. I was a very unhappy camper—very—because then I was, like I say, I was shy. [And then] because of my [PTSD] I got kind of aggressive. [So once I came back to the States my temperament became more aggressive than it had been before I went into the service.] I was like a totally different person. I think I could have dealt with the below the knee [amputation] because most amputees I have met who were casualties of amputations, leg amputations, they are below the knees [but] I wanted to know why I was the one that had to be above the knee and I just hated [myself]. I hated the world. I couldn't run [any] more. I couldn't ride a bike. I wanted to know how the girls would take me. I'd had a dream that I'd be sitting on State and Madison with a cup begging for, selling pencils, begging for money and a lot of things going through my head. [I thought about things like that because] when I grew up, as I was growing up, there [were] some guys—I don't know who they were—but some [were] amputees, some were blind. They were selling [things and upon suffering my injuries] I say, oh man, I had to join them and I said oh, boy.

[So the way I was wounded and in particular the fact that in Japan I lost more of my leg above the knee, that had an influence on my recovery over the next 12 months and the rest of my life]. I would say so—definitely.

[There are a few things that I remember about the hospital in Philadelphia]. Ah, well, I know they moved all that, I mean the amputee was in the basement. I do remember that and we [were] getting an influx of disabled veterans daily. Some with legs gone. Some with both legs and hands gone. We were like way in the back of the hospital. I mean, if I remember that you have to go to a long corridor to go down an elevator and something else but anyway we were way in the back and so what most of the guys did, we drank. Boy did we drink. [I personally was doing some heavy drinking].

[And this was all in Philadelphia, which I went to instead of the Great Lakes] because I felt better for myself and I didn't want nobody, my family or no one to see me or my girlfriend at the time. [I wouldn't have even let them know that I was injured, but while in Japan] this nice Red Cross worker—the only thing I remember about her, she was very old in her seventies I think she was. She was real nice, very nice because they told me that she stayed by my bed day and night and I said—what. . . [So she really kind of told my family what was going on.]

[I also remember the treatment we received in Philadelphia]. We had nice nurses and I know a priest used to visit us a whole lot. We begged, they would give us, I guess we got, we were treated pretty well. They taught us how to, I mean after a while they taught us how to walk. They gave us pylons and a wheelchair and ah. . . [and a pylon is a cast and a pipe with a foot on it so it's like a rudimentary

prosthesis.] [I really couldn't walk very well with that]. Well, [at least] not at first. I was feeling sorry for myself and [then there] was this young Marine who was, he was 21, he stepped on a 500 pounder and he lost both legs above the [knee]. With this attitude this guy had, he had to be a millionaire now because he left the hospital before I did and after it I was saying I'm feeling sorry for myself losing one leg and this guy lost both legs and he, well, with help, he walked out of the hospital. He didn't take a wheelchair, he went on crutches but he walked out of the hospital. I said well, damn Dave, you're feeling sorry for [yourself]. And so I tried to become a go-between. With the guys that was coming in I would try to talk to them not to give up which was kind of funny because I was telling them not to give up but that's what I was doing.

[One important point I should mention is that there was no psychological help provided to us in Japan or Philadelphia]. In '68 and '69 there was no such thing as Post Traumatic Stress because you had, what did they call it, you had a mental, what did they ah,. [they referred to it as a mental breakdown or shell shock or] something like that because when I got through to the West Side VA in Chicago, they still didn't call it PTSD. They called it like a breakdown. I had a problem with authority. I had problem with mood change. That's what they called it. I had mood swings and I said okay. I didn't know what that that meant at that time. [But I didn't even think that I had a problem]. [I thought I was okay, but I continued to drink after I left the hospital in Philadelphia]. Oh, God, yes [I drank]. That's what happened to my first marriage. With the nightmares and the drinking problem [I] almost killed my first wife and she [said she'd] let me go in a heartbeat. [So I continued to drink and I was having nightmares and I was having problems with my temper and that kind of thing. But nobody recognized it as related to my combat service. No, everyone thought that my problems stemmed from my] drinking too much.

[But today, looking back at the treatment I received, all the way from the medic in Vietnam to the hospital in Philadelphia when I think of what was most helpful I remember that] I was beginning to take drugs, [such as] morphine, but when I got to Philadelphia, these [medics], they were smart enough to, when I bought it they were shooting me up with water. I'm glad they did. [That was helpful because it prevented me from becoming an addict.]

[But after I left the hospital in Philadelphia I continued to have some issues with drugs]. [I used] marijuana too. At that time is was, what the heck—oh, Tylenol—no it wasn't Tylenol back then it was, I forget the name but I was taking that like crazy but I wouldn't O.D. on it because like my stomach. [But this was pain medication and it] wasn't over the counter. The hospital was giving it to me. [It was the] very first pain pill.

[There were also some parts of my treatment that were not helpful and were not positive]. When I went to the Great Lakes Hospital which is not [there] anymore—it merged with West Side VA, [it wasn't a good experience]. I went there trying to quit drinking. And you go to classes and you, well what the nurses finally told me was that all I did was put the cap over the bottle [but] I said I'm quitting drinking [but then I'd] go to a lounge and [no one would even stop] me. And so I went to the lounge and had a drink and [then I] had a couple drinks and walked away. I said, I told them all that I can do this. [I thought I could control my drinking, but] I was in the lounge every day. And then I gave up the lounge and I was drinking at home. (laughter)

[I continued to face some other challenges during my first year of recovery]. First I was trying to go back to school and I did give up marijuana because I couldn't concentrate so mentally I had to force [myself] to give that up but I started taking, snorting cocaine. I was doing so poorly in school [but] in my third year they gave me an associate degree in drafting [and I'm glad they did]. [And I was]

still drinking. [I was also married twice in a three year period.] [My first marriage,] she was my high school sweetheart. Once she saw me in uniform she told everybody we were going to get married and I would go by her house constantly and loved her a lot. If I hadn't gone to Vietnam, I think that we still would be married because I end up hitting her once too often and [she slipped into a coma but she came out of that]. Next thing I knew, I went to school and came back [and] my house was empty, [and she was gone].

[And] after [she] left me I got a job with Jobs for Vietnam Veterans. It was [through] Mayor Daley, [and the] Daddy Daley Pet Project. I got [a] job [and] I tried to get my first wife back but at [the] time she was [in] no way interested. So what I just kept working and I was nominated in Washington as the Outstanding Disabled Veteran of the Midwest and I went to Washington and I asked her to come with [me] but she [wouldn't]. Her excuse was [that] she [was] afraid of flying and I said I'll buy you a train ticket but she didn't want to have [anything] to do with me. [And at this time] I was still drinking and using cocaine.

[So I got this job through the Senior Mayor Daley's Job Program and] I was a civil engineer technician. My job was to test all the sites and the gravel, the rocks to get it okay to pave and then what we also did is check the sites before they build city buildings like the jails, the schools, the parking places. That was my job. I had to test the soil and it was a nice job because being a technician, I had to tell the big companies, the asphalt companies, the companies that [were] doing the work where and how to do their work. Sometimes I think they got kind of offended because [I was just] this little black man [who was an amputee telling them what to do].

[But] I was discharged in Philadelphia [and] they gave me a deal that I couldn't refuse. I was promoted to Sergeant and I guess, well, my idea was they couldn't get me out fast enough and so with all my drinking they were going to bring charges against me. [So] I did get an honorable discharge with a medical backing. [And] at that time I was very glad and then I was saying that, I kind of wished that I, in some way I wished that I could have stayed in but that didn't really happen until in, what was it, '91 when Beirut and all those Marines and [sailors] were killed. [When that happened] I went down to the recruiter to see if I [could] join [the military again] and then they saw the type of discharge I had and they said well, you should have [re-enlisted] right after [you were] discharged. And I said really? But now I was heavy and they said well I'm glad that you're still thinking about us but no. [But even today I still think of myself as a Marine].

[And I continued to be treated as a patient at the West Side VA] for a long time and everything good started happening [when] I came to North Chicago VA. [Things turned around because] I went to my advance treatment with Post Traumatic Stress and the psychiatrist told me that I didn't do anything wrong. [He said I was even] unusual because I had a job for 20 years and I'd only been in jail twice.

[So I did get into some trouble with the law for carrying a gun. And I was carrying a gun] because in Chicago its bad and I was trying to tell the judge that I had to [protect myself] and the second judge he was telling about his nephew [who] was an amputee. He said well my nephew don't have to wear no gun and I say, he ain't no man in Chicago either. And so he [was] a lousy lawyer and I ended up having to go to see a probation officer which he was real nice because all he [said was not to show up drunk and that if I did that there would be no problems.] And I did what he said.

[There were some perks to being a marine though]. Now this is going to sound kind of goofy but a couple of times when I was stopped [by police,] once they found out that I was a Marine and I was a

Vietnam Vet they would help me get home without charging me.

[Also], up until recently, all I had was a lot of associates because I didn't hang around with anyone because [the only person I] trust is another veteran. A civilian—I wouldn't trust him. So I had a lot of associates. Even now I [can] count on one hand the friends I have and one is a legally blind vet who's in a wheelchair and another veteran but he's a peace time vet. The one who's a Vietnam vet. This other vet he's a peace time vet and then I have another peace time vet who is from New Orleans. Those are the only friends I really have. Everybody else is an associate and they are military. I don't have too many civilian friends.

[And back then] I was 70% disabled and you know, you could work being 70% and I worked then until Mayor Daley Jr. basically made me an offer. I joined the Chicago Police Department as a supervisor technician and then that's where I ended up really retiring. So, it still was within the city structure that I worked 20 years covering Daddy Daley and Jr. Daley.

[And I struggled with psychological issues the entire time.] One day my supervisor came in and told me that my work was beyond (in)efficient? and he wanted to know what could be done [to help me]. He said, you know, you can go see the police psychiatrist and I said well, I'd rather go to the VA and go to the alcohol treatment there. So when I went to the West Side VA for treatment the doctor told me that I had PTSD. He said you have Post Traumatic Stress and that was in 1989.

[Also, aside from coping with my injuries I was somewhat conflicted when I think of how I felt coming home to the US after fighting in Vietnam.] [At the time] I just said okay, we did what we could over in 'Nam. We were honorable although some of us [weren't]. And people [were] telling us that we were baby killers and [some might] have gone and left the country [but] I went [to Vietnam] on my [own] free will. I believe in the United States and at that time I would have [done] anything for the United States. If they would tell me go jump off a cliff, [I] probably would have done it. (laughing) But anyway, I believe in this country and they did really have to lie to us to say that we [were] going to [fight] communism because well, they made us or made me look like a donkey, especially since I lost my leg. [And] it was a turmoil back in that time especially for a black person. [Because I'm] a black Vietnam Vet [I couldn't] go down south to live comfortably. I say now this country is a joke. [So I resented the fact that there were still places in the United States that were not going to be welcoming to African Americans, whether they were veterans or not.]

[On the other side I was pretty positively received by my family and friends when I came back from Vietnam, however] Well, my family thought I was a hero and at that time my girlfriend thought I was a hero. I guess they felt sorry for me because I lost my leg and I had to try to convince them that I still can do certain things. [And with my friends,] well, most of them were in jail or were dead so the new guys I met, they said they had a lot of respect for me going in the service, even though they said they wasn't going [into the service]. (laughing)

[I did have to learn to do things again like getting ready for bed and getting dressed. I re-learned them] with difficulty [too]. (laughing) Well, my girlfriend, she was the one that helped me or my wife I meant, one of them helped me a lot but what I would do [is] I would hop around. Well, I was young so I could do those things. I can hop around to hop in bed, to hop to the bathroom or if I didn't want to do that I would use my crutches or I would sit on my bed to get dressed. Now that I'm getting older I'm confined to a wheelchair. I think back to how I used to run around and I could wear all kind of shoes back then but now I have to have a certain shoe. My leg hurts most of the time. My back hurts most of the time. Going to the bathroom is a chore because now I use a wheelchair, [so I

have to] stand up.

[I also have issues with phantom pain now.] I do have phantom pain but to me it's like an itch—an itch that I can't scratch. And so all I can do is rub it but what I do have is [a] stabbing pain. I get this sharp, stabbing pain that lasts about five minutes and sometimes even longer because when it come it wakes me out of my sleep. When I'm driving it makes me shake so I have to pull over. It's serious. [And] that's in my leg.

[I also felt like my life opportunities had changed because I was a wounded vet.] I wanted to play sports again and I knew that that wasn't going to happen, especially football [which I had once played]. I was a halfback and I knew that [I] wasn't going to [be able to play anymore]. I tried to play softball with my prosthesis and I did pretty good as a bat catcher but naturally when I hit the ball I couldn't run so I was out real quick and even if they had somebody to run for me [it just wasn't the same so] I lost interest in that. [So then] I started being a loner. I would stay home and drink and I wouldn't go out anywhere.

[And] the only job I ever had [was] working for the city. That's the only job and I did that for, believe it or not, I did that for 20 years even when I was drunk and I would draw myself by the boot tail and I would get to work. I wouldn't, as I find out years later that sometime my efficiency was very bad but I actually survived 20 years of work.

[My family relations throughout my life have also been somewhat strained.] I didn't raise my daughter because of the way I was, anyway after my divorce I went through women like it was going out of style so my mother felt that a single man couldn't bring up a girl, a daughter. So my sister had to do that because she didn't want my daughter calling every chick mama and I agree with it because I really wasn't doing anything with my life but just going to work and coming home and drinking. Sometimes I would even have what you call an eye opener at work and a liquid lunch. And then when my, that was with my second wife with my daughter and then my son, he would, my wife, you know, moved away and would at least let me have my son for the weekend sometimes or for the summer and he would be messing around with these gangs and stuff and I wouldn't keep tabs on him. I didn't get to do that which was almost too late until he was 18 years old. My dad told me to go get my son and I looked at my father and said what do you want me to do with a grown man? He said, that's your son. You think about it. I damn near had to kill my son to get him to realize that the gangs are not what he wants to be in because even though they have their popularity about being in a group [they're just not good.] [And] I said now if you get hurt or killed, what [are] they going to do for you? Nothing, [but] I will have to go to your funeral. And even to this day these gangs out there they don't have nothing because they don't care about anything, not even their own [lives]. And at least I did [get it through to] my son that he does mean something to somebody and that's me and his mother and his girlfriend or whatever.

[But one problem of my life is that I wasn't diagnosed with PTSD until 1989.] [And going into treatment for that didn't really help me] because at the West Side the guys were, some of them were sneaking away and they was still doing drugs and they was still drinking then. They tell you on the ward that with confidentiality that if you see somebody doing something you're supposed to tell on them or you're all guilty [but] most of the guys won't say nothing so I didn't say nothing either.

[But after I retired in 1991, I got more serious treatment when I went to the North Chicago VA.] The first time I was there for three months and that's where I got my serious treatment. I learned pretty much everything about the Post Traumatic Stress. The last time [I went in for treatment] was 2004. I

haven't been back since then. One time in 2002 I went back but I got caught with cocaine [in my system so I was forced to leave treatment]. That's the only time I did something stupid like that because I've been clean now for a year and a half on everything. [That treatment was helpful because,] well, I finally realized that I was actually damaging my body and that I was being a hypocrite. I was going to the VA and the programs I was in you were not supposed to be drinking and I was just doing it on the weekend even though I would you know, patrol myself pretty good. But I just kind of, I got to thinking and I said well ah, you know, you get tired of feeling tired. (laughing) [But] I'm doing a lot better now. Although I still have bouts of depression. I mean, they tell me that in recovery that it's always, it's going to be a fight for the rest of my life's recovery, because at times I do have my bouts with depression. I don't think of, it's been several years since I thought about suicide or even doing suicide. [But] I have [contemplated suicide before].

[And I think that if there would have been some psychological counseling available in the 1960's for PTSD that my life would have been different.] Oh, I'm sure it would have but Post Traumatic Stress was in its infancy then. [Also, I had heard from other vets that when they went in for treatment they were given drugs that would control their way of thinking and they would all do the "Thorazine" shuffle, which I did not want to experience].

[But other than that the only thing I do want to say is that] since I've been home from Vietnam I have looked for religion. I've been Buddhist, I've been Catholic, I've been Methodist, I've been ah, Baptist but they have their faults too. [So] I ended up being a Muslim but what I do now is I take from all the religions and I take the good part from all the religions. So that keeps me in tune with the Lord. And that helps.

Profile of Mr. Ian Moore (Double Below the Knee)
(Original Interview Transcript 37 Pages)

Mr. Ian Moore lives in the Midwest, was born November 26, 1946. He was drafted into the United States Army May 13th, 1968. He was injured April 30, 1969 near Chu Lai in Vietnam. He is a double below the knee amputee and currently uses a prosthetic device. He is married with three children. Mr. Moore reports his general health as very good. He also reports stump pain, phantom pain and sensation pain. The interview was completed on December 22nd, 2008. This is Ian's story.

[Six months prior to entering the military] I was working for a construction company—Chicago Bridge and Iron. I had gone to a couple of years of junior college and was probably sort of young and stupid. [I] probably didn't apply myself. I started working for this construction company one summer between semesters. I worked through, I think about October the first year and then the second year I just kept working for them after I started back in the summer. [And] they build water towers, hydroelectric plants, oil storage tanks and I was working on a hydroelectric plant in Pennsylvania and then I got transferred to a storage tank project in Bethlehem, Pennsylvania. While I was working in Bethlehem, Pennsylvania I received my draft notice. I actually took my pre-military physical at Philadelphia. About one month before I knew I was going in I took a military leave of absence and [went] back [home] to Illinois. I actually [was drafted] into the military on March 13th, 1968. [And prior to entering the military,] I was dating my current wife and I believe, if I'm correct, we got engaged at Christmas before I went into the Army. [And] we were married October 11th, 1969.

[At the time I entered the military] I was probably happy go lucky but I would describe myself as maybe introverted. [But] I had a lot of close friends.

[And just to make note of the severity of my injuries, today] I am a double amputee below the knees and I was pretty fortunate that they made a real effort to save both knees which is very important if you have lost your legs. I use prosthetics. I do not use any cane or crutches at this point. I did when it first happened but I probably haven't used them since, I would say with a couple years after the original injury.

[I also sustained other injuries besides those to my legs.] My left hand suffered some lacerations and the lacerations or fragments went up my left arm--sort of the forearm mainly. I also [suffered] some facial [injuries which] used to sort of bother me. It was like a black spot and I think it's lightened up over the years. Right on the tip of my nose and also on my right eyebrow there is a laceration with some black in it but the eyebrow pretty much covers it up. And as far as the part on the nose I don't even notice it. It seemed like early on people would sort of comment to me, you've got something on your nose and I'd just say it's permanent.

[But I was not sent to Vietnam immediately following my basic training because] while I was in infantry training they were taking people who were interested in going to NCO school. I applied for it, was interviewed, and was chosen to go to NCO school. And I was there until I think it was about the end of January. We did get leave to come home at Christmas. I think I had a two week leave for Christmas and then after I finished school I received another two weeks to come home before I reported to Fort Lewis, Washington which is where I shipped out for Vietnam. [So I was sent to Vietnam] in February of '69. I was assigned to the Americal Division, 198th Light Infantry Brigade.

[And] they were in Chu Lai which is not too far from Da Nang.

I was a squad leader and when I first got there we were assigned to LZ which was overlooking Highway 1 which was the main road along the coast. I was there probably a week or two and then we were rotated off and we went out in this area. Our name for it was Rocket Pocket and we patrolled in that area looking for rocket sites set up by the Viet Cong which were, they were firing rockets into Chu Lai. So that was our area. We were probably out a month patrolling like this but it wasn't as bad as it seems because we were very fortunate. Once a day a helicopter came in and brought us a hot meal. You mainly would spend most of the time during the day back in your camp area and then at night you would go out and set up ambush areas.

It was a clear day [when I was injured and] we had actually come in from this area, the Rocket Pocket, and we came in on a stand down which is rest and relaxation in Chu Lai where you get three hot meals, showers, and everything and then after that our entire company was lifted out to LZ Minute Man which was on the Batangan Peninsula. I was probably too stupid to know more because I wasn't aware of it. I hadn't been there that long. But most of the guys who had been there awhile when they heard we were going out to that area they just really cringed because it was known as an area that was just loaded with mines and booby traps. The day I was injured I was out with my squad. I'll go back one day actually. The day before, we had a captured Viet Cong with us and the Company had taken him. It was a Company-size operation and we had taken him out to use him to find tunnels and so forth so that maybe we could find where some of the Viet Cong were hiding. I was not in charge of it. I was there but he escaped (laughing) and I was glad I wasn't [in] charge of the operation. The next day the tunnels that we had found, my squad was going out to blow up the tunnels. I was carrying an explosive charge with me when I was injured and it probably helped me more than it hurt me because it blocked the shrapnel from doing more damage to my left hand. I mean I can still look and see the way I was holding that because that's exactly where the scars are.

[But before being injured] I can't remember for sure if I went back—I remember I was walking second in line behind the point man and I'm thinking I went back to use the radio to contact someone back in our base camp and when I walked back is when I hit the mine. I don't really remember the explosion or anything. I just remember being on my back and [not being able to breathe] because I had a lot of dirt and everything blew up in my nose. But I was conscious the whole time and I can remember one of the things that happened. They called it in immediately back to our base camp [and told them] that [we] needed a Medevac and as it turned out it wasn't really a Medevac that came in. It was lucky on my part, [that] a battalion commander had come in to visit our base camp and his helicopter was on the landing zone and they sent his helicopter out to pick me up and I can remember this. As you always did when you had a helicopter coming in you had to pop smoke and I could remember people yelling I can't find any smoke. And I either [thought] it or yelled, well please find some smoke. And they did and they picked me up and I was on my way. [And] through my platoon leader [I] obtain the records from that day and they called it in at 9:36 and by 9:44 I was on my way to the hospital.

[But I didn't realize how badly I had been injured.] No, I probably didn't realize at first. I couldn't really see [my injuries] because like I said, the dirt must have just all came up because I could almost taste dirt and I probably had dirt in my eyes. I really couldn't see anything. Because this was not a Medevac, they put me on the helicopter—they, I'm talking about my squad—and they took off. One of the things I guess I was told later is this battalion commander wanted them to stop at the base again and pick him up before they went into Chu Lai and I think it was, I'm sure it was the helicopter pilot [who said no], we don't have time.

[And I don't even remember anyone rendering first aid to me at the site of the explosion. There was no medic with our squad, and I can't remember anything.] I can remember nothing was really done. They just loaded me on the helicopter. Nothing was done until we landed at Chu Lai and I was taken into the hospital. And that's probably the first time I knew how bad [it was]. I knew it was worse than I had thought previously because they evidently started putting tourniquets on me and I could feel the pressure and I remember saying what are you doing, what are you doing. And probably shortly after that I was put out. [But they did that] in the field hospital. [And] that's the first time I remember anybody doing anything.

[I have a few memories of that field hospital]. That was the 312 evacuation hospital in Chu Lai. I was there, let's see I was actually transferred to Yokohama, Japan on May 8th. [And] what I can remember [is that] I was pretty much doped up most of the time, but I would say I was probably there about five days and I believe I was then transferred to Cam Rahn Bay. [Which] was sort of an assembly point and I spent the night, one or two nights there, and then they flew me on to Yokohama, Japan. [I don't really remember any of the treatment I received]. The only thing I really remember, they had put, of course there was bandages and everything and my arm was pretty well bandaged up. One had shrapnel in it. But it was mainly, I would just say they just tried to make you comfortable. They did do, you know, the initial stump revisions at that point. [So] I had surgery on both legs but the left leg was, there was a real problem there. They almost were not able to save that knee and there was a portion of the tibia, yeah the tibia, and I didn't know it at that time because all I could see was bandages, that was protruding outside of the soft tissue and they didn't do anything to that at that point because I don't think they felt they were qualified to do it.

[But] they definitely did the surgery on the stumps of the legs. The right stump, evidently there was more area. They did sew that one up totally. You know, there was enough skin and everything of that nature. [And I actually developed an infection.] From the notes I've got when I got to Japan, they actually had to open up the right stump to let it drain. The other thing I remember is this doctor. I had quite a bit of scabbing on the left arm and (laughing) he just went ahead and ripped those scabs off. So he said that'll keep you from picking at them and getting [an] infection. [And this was at the hospital in Japan, not the] 312th Evacuation Hospital. I would say I was [at the 312th] probably about a week [before being shipped to Japan].

[I was also at Cam Rahn Bay for a day or two, as I previously mentioned]. That was more or less just keeping you stabilized is all it was. I do remember them handing out or giving me injections of morphine and I was pretty much in that situation all the time. [And I] thought I was floating [because of the morphine]. [But] it definitely took away the pain. I do remember going back to Chu Lai. I think it was my company commander [who] came in to visit me and also I believe the Red Cross came in to make a recording for me so that it could be sent to my parents.

[And then I went from Cam Rahn Bay to Yokohama Japan.] I was probably [in Japan by] May 8th. I was there a little over a week and because of the time change I'm not quite sure. When I say time change [I mean] you're flying over the international date line but I actually got to Walter Reed Hospital in Washington on May 19th. I do have that record.

[But in Japan,] again there [were] not any revisions or anything. It was just mainly making sure there wasn't any infections. I told you that is where they had to open up the right stump because there was some infection there. [But] it was mainly, like I said, just keeping the dressings changed.

[I remember the medical staff in Japan.] They were very professional. A little sidelight I can remember is when I was taken off the plane coming into Japan one of the guys working there was sort of on I would say light duty because he had been injured but he wasn't injured seriously enough to be sent back to the States. He was just there helping out until he was able to return to full duty and the silliest thing I remember [was it was just so] cool there compared to where I'd come from. But everybody was nice. They [tried] to act like there was nothing seriously wrong with you. You know, they don't want to make you concerned. I remember saying, making a comment and I said well I always had bad feet anyhow and they got a buzz out of that. [And when we were flown out there were] a lot of people I know that [were] just on stretchers stacked up on the airplane. Sort of like being in bunk beds and we flew into Alaska just for a refueling stop and then into Andrews Air Force Base.

[So after Japan I was taken to] Walter Reed [and] I was there until the end of July. They did do the stump revisions then. This probably was the first time I [had seen] it. It had only been like a day or two and the doctor in charge came around [and] was looking at all the new arrivals and she came around and unwrapped the bandages and that's the first time I could see that [the] bone was sticking out and I'll never forget this. I mean she was just, I don't know, hard-nosed or something. She had something that I would compare to a lopper and tried to cut that off right then with me watching and you know, I was just like you've got to be kidding me. The other thing is, and I think back and I know it was done for a reason [but] when I got there she just cut all pain medication off and I understand why. You know, they don't want you to become addicted. But just to be cut off cold like that was pretty tough.

[I was in a lot of pain though.] [I had] shooting pain so it [was] not a constant pain. The other thing they had to do [is] put something on each stump. I can't remember this. Probably something like a cheesecloth, sort of tube type thing. Attach it to your skin and they put weights on it which hang down over the bed. The whole purpose of it is to stretch and bring the skin down so that when they did the stump revisions they'd have the skin available to suture up. They had to do that first before they could actually do the final revisions. I will say this and I'm digressing a little bit. On the bed next to me there was a guy there, nice guy, I talked to him all the time. He [was] paralyzed and they had him on one of those beds that you just flip over from side to side and you know, you look at that and I looked at that and I thought well I guess I'm not in too bad of shape. I also remember that's the situation I was in when my parents first came to visit me. [They] didn't show any negative emotion or anything. My brother—I only have one sibling and he's 19 ½ years older than I am—he was with them and they also brought my fiancé. I think it was my fiancé—either that or my mother. One of my favorite desserts was pecan pie and they brought that for me and I said thanks but I have no appetite. [My fiancé was] very supportive [though].

[So I was at Walter Reed, and I was healing up. I was also doing] physical therapy and it was every day. One of the things with Walter Reed was that there were so many people there, so many injured veterans that you didn't really get a lot of personal care. Once I was out of that traction and I'd had that therapy it was just a matter pretty much of me healing up. There was no plan at all for me to be fitted with prosthetics or anything at that point. It was just a matter of [going] to therapy. There [were] a number of other people in my situation. We were in wheelchairs, and we had the run of the hospital pretty much. I can still remember this. There was an elevator and there [were] also ramps that went all the way down to the bottom floor and we used to race in wheelchairs down those ramps. We'd go outside on our own and met a lot of nice people and I am still in touch with one of them—one person. [He was] another wounded vet. He was a double amputee [with] one above and one below the knee. We just tried to live a life as normal as we could. [And I saw] a lot of sights there

just made me feel like I [was] in pretty good shape. [Because other soldiers were] paralyzed or missing both legs and an arm and [suffered] facial injuries. I think being in that situation looking at other people just made me look at [my own injuries] like I'm in pretty good shape.

[When it comes to why I stayed positive instead of becoming negative, I don't really have an answer because my positive attitude existed before I suffered my injuries and] even before [seeing the other soldiers who were worse off than I was]. Even when I was in Vietnam I just felt like I'm alive and I'm going to make the best of it. I'm just not going to feel sorry for myself. [And] I had a lot of things that happened that helped me along. One of the things being that I had worked for--I had mentioned to you--this construction company, Chicago Bridge and Iron, and while I was at Walter Reed the construction manager and I had an advantage. I'm not saying he did this just because I was a veteran or disabled veteran. He was from my home town and he had helped get me the previous job working in construction. But he came to visit me and said whenever you're ready to go to work we will have a job for you. [So that was helpful].

[And also at Walter Reed when it came to interacting with the other vets] we had a pretty good time actually. [There was] a lot of joking around. We had the run of the hospital. We would go outside and just sit around and talk. I can remember at night they would say, at nine o'clock they'd say lights out and we'd say so what. We're not going to bed and I remember we'd get up around the nurses station and most of those nurses weren't too much older than us or were about the same age and they were trying to give us orders and they would call the officer in charge and he'd say well tell them lights are out and they said well they don't care. (laughing) You know, it really wasn't that bad. I seldom saw any veterans that really were down. I mean they were all making the best of a bad situation. [And being in that situation with the other veterans] was definitely [helpful for me during my recovery].

[And when I left Walter Reed] I was in a wheelchair [and] I remember [one specific instance]. I think it was the first time my brother and family came out. Somebody in the Army administration had met with them and discussed my prognosis and also had told them [not to] let anybody tell me to get a medical discharge from the Army, that I should take a permanent retirement because of a physical disability. Because it made a lot of difference regarding what benefits I would be eligible for. It was mainly my brother and me. Like I said my brother is 19 ½ years older than I am and they pretty much let him handle everything. One of the things the doctor [said was], well, when he gets fitted with prosthetics he will be able to do a lot of things. Probably one of the things he won't be able to be doing is climbing a ladder. As my wife would tell you many times and I think of it every time I do it—I do climb ladder[s]. I have even climbed a regular step, not a step ladder but the lean to ladder. But mainly a stepladder, I do climb it all the time. I have to be careful but I do do it and every time I do it I think of those words...

[So when rating the quality of medical personnel I encountered at Walter Reed] as you can tell, I was not happy with that [one] doctor... I mean I had just gotten there and [I was] pretty much worn out from the trip and the first thing she [does is] look at me and [then]she gets [this device that] I still picture [as] just looking like a lobber that you chop off branches with. [And] I believe she did the stump revision. [But the other medical staff] was nice as could be. They were busy but they treated us with respect and were very helpful. [But looking back at the care I received at Walter Reed,] putting an average on it, I would say [it was] average at best.

[Also, there was no psychological care]. The only thing they did [was have a double amputee volunteer,] a Korean disabled veteran [come] in to talk to us about our prosthetics and what we could

expect in life. [And that] was helpful. I remember one of the questions I asked him, I said when you're sitting are you comfortable? He said yeah, he said I'm comfortable.

[But I do think more psychological care would have been helpful for some of the other vets]. I think some people [were in a] different situation than I [was]. You know, I've always said I don't feel like I had it that rough. I wasn't in a firefight at the time or anything like that and they couldn't get me out. I've talked to a friend of mine. He thanks God every day that he was never injured. He says, you know, some people make it back unscathed and he said I thank God I was one of them but he doesn't talk about his day to day activities at all while in Vietnam. [And] I mean it's my opinion that somebody who's really been in it, they don't talk about it.

[But looking back on how I was injured,] I sort of would look at it that maybe I should have been more careful. I remember one thing and it was that our company commander came and talked to me in the hospital. The point man was really upset about it because he felt like he should have pointed it out and it didn't have anything to do with it but he sort of put that burden on himself. [And I] think about it, you know I had only been in country two months. If I had seen that, something like that happen to someone else maybe I would have been a little more careful. It wasn't in my mind at all that I would even be stepping on a mine.

[But fortunately I was able to recover and during the first 12 months from the time that I was wounded until the time I was at Walter Reed my greatest challenge was] learning to walk again. I got to the VA hospital in August of '69. [I] was at VA Research Hospital in Chicago. I was lucky to get sent there [because] most injured veterans that were being released from the Army into the VA care system from our area were going to West Side Hospital or Heinz Hospital.

Both [are] in the Chicago area and that's where most of them were going [but the] VA Research Hospital was associated with Northwestern School of Medicine and there were only two Vietnam veterans there in the orthopedic ward—me and another guy. The other one was a below knee, single amputee. And I was, because we were the only two there we received excellent treatment. When I got there two orthopedic interns associated with Northwestern [took over my care] and they made me a project. The doctor met with me [the] day after I got there and told me what he was going to do and my main concern at that point was when do I get out of here (laughing). I [was] ready to get out of the hospital. [I wasn't thinking about the fact that] I needed more stump revisions and to be fitted for prosthetics. I [just] wanted to go home. He said why are you so anxious to go home and I said I want to get married. He said—I'll never forget this—he said do you have to? And I said, no I don't have to but I want to. He said, well, I'll make a deal with you. If you go through what I'm proposing here I'll have you standing for your wedding. [And] he was right, [I was standing for my wedding]. [So] they did some more stump revisions and they had to put me in traction again and I wasn't too thrilled about that because you're just totally confined when that happens but I was in traction for a couple months—I mean couple weeks—and then they did this stump revision. So that was probably middle of August and as soon as I healed up they took me over to a rehab facility also associated with Northwestern and fitted me with temporary prosthetics. They were plastic tubes that they heated up and poured over the stumps and that's what they made the mold from and then they trimmed it and put the feet on it and the metal pipe for the legs, and because these were temporaries they were attached with a belt strap and they were sort of cumbersome and uncomfortable but that's what I learned to walk with. [But] it just seemed like it was something new and I thank God that I was sent there with these two doctors. They just made me a project and I received excellent care from them.

[So they fitted me for a prosthesis on both legs and then] I was given physical therapy both with and without the prosthetics on. The big thing I had to do was get my leg muscles firmed up again plus I can remember using a medicine ball a lot as far as the therapist throwing it to me for balance purposes. Then I started [to learn] to walk with these [crutches] on the handrails and I actually was discharged as an inpatient with crutches. I had full crutches and that's what I got married with—on crutches. But we got married in a Catholic church and we met with the priest and he knew us. We were both from small towns so everybody knows everybody else and I told him I can't stand a very long at a time. Can you make it as quick as possible? He married us and as soon as he got done he said 15 minutes flat. (laughter)

[But looking back at the first 12 months of my injury, I just kept myself moving and that's how I dealt with my injury]. And [that] is what I'd advise anybody [to do]. You have to get moving and try to treat everything as normally as possible.

[So I moved on, even though I was declared] 100% disabled plus additional for [an] ear problem and for the scars that I had. [And] also during this time I was given testing for vocational rehabilitation and I took these tests and because I had a couple years of college they determined I did have enough smarts to go to college. They gave me some choices of where to go and I decided on Bradley because it was a small campus. You know, in my situation I didn't want to have to be on a big campus. So they started the paperwork for me to go back to college and that following summer I started college. But even before that this gentleman had offered me a job at Chicago Bridge. So I called him and asked him if there was anything [I] could do on a part time basis. I just didn't feel like I was up to a full [time] job strength wise. But he [said] sure and [with] the job they gave me, [I] wasn't just sitting there. It was actually a useful job. It was coordinating, helping to coordinate a shipment of their construction equipment around the U.S. Because I had worked for them in the field, I knew what this stuff was so they didn't give me the job just to be nice about it. I was actually doing something useful. One thing that happened to me early in my career with Chicago Bridge and Iron was my employer was well aware of my disability and sometimes I felt like they used it for their benefit. But we had an employee who had been injured in a motorcycle accident and lost a leg and they had me go visit with him to sort of pep him up and tell him all's not lost. I think I helped him a little bit but I don't think he was buying into it. He was sort of feeling sorry for himself and I've never felt sorry for myself and I don't think you can and any veteran coming back with a disability like mine, they just have to get moving and move quickly.

[But I also give all the credit of my recovery to my wife]. I couldn't have made it without her. [My family was also] very supportive. I was worried about my parents, my mother especially. When you're in a combat zone you have to designate someone to be notified in case of death or injury and I did not put it on her. I had my brother contacted and she never let [her emotions] show or anything. The first time I came home I had these prosthetics already and I sort of wanted to put her mind at ease. So I put these prosthetics on. I walked a few steps with these, with my crutches, and I [was] standing there talking to her. I [was] trying to act like see, this is going to be okay and I had put my crutches against the wall and I fell straight backwards. (laughing) I said I'm okay. But I always remember that [because] I [was] trying to put her mind at ease and I [would] fall over... I mean I just didn't have the balance that I should have. [But when] talking about how people treated [me besides my family,] I was a little disappointed and I'm still disappointed that my high school friends [never] came to see me. [They didn't even come to see me] when I was home. My best friend and [his brother] did come to visit me. At that point I wasn't using the prosthetics or anything yet and I can remember he and his brother came over and talked to me. [They asked] does it hurt if you touch it? They were real interested and I probably appreciated it later more than then that they made

the effort to come see me. [But I don't know why no one from high school visited me]. That was the summer of my five-year class reunion and I did not hear a word from the class as a whole.

I don't know if it was a little guilt on their part that I had been in the Army and they hadn't or they had been in National Guard and I was in the regular Army or because of my injury. They just didn't think I was the same person. [But] I actually feel like I'm a better person. I had mentioned that I was sort of happy go lucky but I was more an introverted type person and I think I've become more of an extrovert. I don't know if that's because of the injury or my exposure in business. My exposure in business [through the construction company] probably had a lot to do with it.

[But my injury did affect me in multiple ways. For instance, I did struggle as a disabled veteran in the US before the Americans with Disabilities Act was passed]. One thing that just strikes me. It would never happen these days but my auto insurance company [cancelled my insurance] and I don't know how they found out [that I was an amputee]. I don't know, maybe I had filled out a questionnaire. [But] as soon as they found out I was driving with hand controls they canceled my insurance.

[My life chances were also somewhat altered after suffering my injuries in Vietnam]. I would say that because of the injury I went back to college. With the injury I knew that I had to get a college degree in order to be able to support myself and have a good chance for a regular or a full life. I'd mentioned this to one friend I had and we're still [friends but] he lives in West Virginia and I send him a Christmas card every year and he usually calls me about that time [but]—he never got a job, he never went to school. He just lived off his veteran benefits. He was active enough because he did golf but he just never went and worked. I had made a decision early [on] that I was not going to sit around and just draw my veterans' pension. [But I did collect disability pay over the years] and it's allowed us to probably live a better life financially than we would have [otherwise been able to live]. However, over the years I would hear little snide remarks and people [would] say well you can do that because you have a disability pension. Well, that is true but I'd rather have my legs.

[So after suffering my injuries] I joined the Disabled American Veterans very early [on,] probably within the first year [of being injured]. I probably joined it more than anything because they had helped me with some of the problems I'd had with getting the VA to act on things. The biggest problem [I had] right away was [that] I was fitted in November—that would have been November of '69—for my permanent prosthetics and by January I still did not have them. I wound up writing a letter to my U. S. senator about it and the next thing you know I got my prosthetics. [But] I really don't have a lot of good memories of the VA system other than those two doctors [at Northwestern]. My experience with the VA system since then is that I avoid it until I absolutely have to deal with them because you have a bunch of people there that don't care about the veterans. They're just putting in their time. They just move in slow motion. [About] every five years I need a new prosthetic and every time I apply for new prosthetics it's a hassle to get them.

[And I need the new prosthetics because of] a combination of things. They wear out and the stumps continue to shrink and they get too loose. They get uncomfortable to wear. My last experience [was] when I called the prosthetics office out of St. Louis to schedule an appointment and all [I got was] an answering machine. I told them what I wanted. A week goes by. I [didn't] even get a response. The second time I call and I talk to this person and it's some gal who [is] just putting in her eight hours a day and [told me] we can get you in in three months. Three months? I said all I need is an examination by a doctor, orthopedist, to see if I do or do not need new prosthetics. Well, that's as soon as we can get you in. We're really busy. I said I find that hard to believe. She just sort of cut

me off. She said do you want it or not. I said no. I want in sooner and I had to write to my congressman and amazingly when you get the congressmen or senators involved they start moving. And like I said I am not a person that uses the VA system. I am fortunate because of my employment. Even though I'm retired I still have health insurance through my former employer. The only thing I ever used the VA for is when I need new prosthetics. [So after writing my congressman,] I then get a phone call from the Chief of Prosthetics [and he says] we've had a cancellation. Could we get you in here tomorrow? [And] this is like a month or a month and a half sooner than they said they could get me in.

[But] I was glad to get out and be done with [the military when I retired]. If I can digress a minute. . . Something that happened to me was really interesting. It was almost like I can't believe this guy thought of this [and] said these things. My mother died a couple of years ago and after she died we were going through papers and everything--me and my brother—and I find this letter that was written to my parents by a disabled veteran from World War II. He was writing this letter sort of to put their mind at ease and ironically this guy was from Carlinville, Illinois which is where I wind up living but I didn't know it at the time and he's since passed away. But he said your son will adapt better than you are. At this point he's probably just happy that he's out of Vietnam. He will go on with his life, get married, have children, and he'll lead pretty much a normal life and that's what happened. [And I think my life turned out that way because of] my will power [that was] instilled [in me by] my parents. My mother especially [helped because she would] nag but she wanted [me] to do better. And I couldn't have done it without my wife. I mean she's put up with some tough times over the years. You can imagine going through this total change of life and you're getting married. Besides, it's not all hunky dory [because] even to this day I can get sort of cranky when my prosthetics are bothering me.

[But when it comes to the positive aspects of my life,] I would say one key thing that happened [to me] that was very uplifting [was] when that guy from Chicago Bridge and Iron visited me at Walter Reed and said whenever you are ready we will have a job for you. That was a big point. The other point was the treatment I received from those two doctors [at Northwestern]. There was never a time where I really was sitting around doing nothing. There was a plan for everything. [Unlike the situation at Walter Reed]. Walter Reed was just really pretty much they're waiting to process you out to the VA system. I don't know how it is now but that's the way it was then.

[And when looking at how the veterans of the wars of today are treated there is such an obvious difference between how they are treated now and how the Vietnam veterans were treated]. I know [this] is going to come out as sour grapes but I see time and time again the people just making over these veterans now [while I] myself I have never received any comments [or appreciation for my] service to the country other than [a few] times. I have a vehicle—I have two vehicles—one's got Purple Heart plates and one has disabled veteran. When I'm parked in a handicapped spot, you really can't tell that I am [handicapped so] most people see me get out of the car and walk in [and] they just give me the hard stare. I have had people though [look at] the Purple Heart [plate and make positive comments.] I had one guy pass me on the highway and I looked over at him and he was saluting me. Just recently [I was] coming out of a Lowe's and a guy looks at my plates and he said my hat's off to you. Those people don't know how good that makes you feel.

[Also, coming back to a country that was divided over the war I had just fought in,] you know, at the time it didn't bother me. [But] it bothers me more now than it did then. I was never exposed to any anti-war sentiment. I was sort of protected from it. I came back to the U.S., landed at an air force

base, [was] put in a military ambulance and taken directly to a military hospital. So I wasn't exposed to it at all. As far as at the VA and my dealings, I did not have any anti-war sentiment that I saw the whole time. I was a little concerned when I went to college [but] I never had a problem there either. No one ever gave me a rough time about it or anything like that.

[But being appreciated by the general public, there really wasn't much of that when we got back from Vietnam]. I was at a football game yesterday. Unfortunately I'm a Rams fan. But it's a sad situation. But all during the season they have people who have just come back from Afghanistan or Iraq. They acknowledge them at halftime. Some of the people I just sort of look at like yeah, well, maybe you were there and maybe you weren't or maybe you're in Kuwait. But yesterday they had an Army PFC there who was standing on crutches. He had one leg. And that brought back a lot of memories and I would have liked to talk to him. Because I could see he just wasn't waving like everybody else [was].

[But my injury has affected my life.] There's been some good things and bad things [to come out of being injured]. Prior to my injury I wasn't a good athlete by any means but I enjoyed [playing] baseball growing up. I miss that. Because of [my injury] I'm probably more of a spectator instead. The other thing is with my kids. [I] have two daughters and a son. [I'm] just not able to do as much with them physically as I would have liked to. However, because I do have both hands I was able to play catch with them and that type of thing and actually throw to them. That's been sort of the negative. I liked to hunt before and I now [not] able to. [So] I have a big interest in sports and I spend a lot of time going to sporting events. That's my recreation.

[My injury also effected my personal identity in some ways]. I guess I have a lot of pride about myself. It will take me a long time before I will open up [to new people] and let them know about my disability. Like I said, I get a lot of dirty stares when I park my vehicle in handicapped parking and get out and walk [because people don't realize that I'm disabled].

[Today] the most challenging thing is taking care of my stumps and watching my weight. I can see people who have an amputation and you can see that within a year they will just start gaining weight. It's a constant battle. You're not able to be very physical. One of the things that my personal doctor says is, oh, you should go swimming. He's big into swimming for exercise. I'm sure you could use flippers and you could swim and I said doc, I'm not doing that. I'm not going out in a public pool and use flippers. But it is a battle to keep my weight down.

[I was also awarded medals for my service in Vietnam.] I didn't get [them] while I was in Vietnam. I got [my medals] when I was, I'm trying to think--I think it was probably in—I'm getting my dates—it was probably seven or eight months later when I was actually out of the Army by that time. [They were] just sent through the mail together. It was a Purple Heart and the Bronze Star. The Bronze Star was for meritorious service rather than valor. And this is really strange. Being in the infantry and being in combat, I should have received the Combat Infantryman's Badge and I always knew it was out there and while I was working and everything I didn't really follow up on it [until] last year [when] I got in touch with my platoon leader [because of] my son who is sort of interested in the military--mainly because of me. He himself hasn't joined but he's interested in it because of me and his grandfather who was in World War II. He found out where I could write for my Combat Infantryman's Badge and I did write for it and it took another six months from the time I wrote to the day it showed up in the mail here. I probably would never have received it if I hadn't followed up on it on my own and that part of it sort of has irked me because if you're an infantryman and you're in combat that's sort of your badge of honor and you know for me to have to get it about let's see, 38

years later, that's not saying a whole lot.

[But I'm proud that I have those medals now...] In fact [after I] got [the Combat Infantryman's Badge] I actually made up a little collage here for myself with the different medals on it.

[And today I have advice for wounded veterans.] I've repeated a number of times, I would just advise anyone that is in a situation like mine that they can't feel sorry for themselves and they have to start moving. They have to set a goal for themselves and do it as soon as possible. I mean I was back, actually in gainful employment within about nine months of my injury. [So staying active and motivated is important].

Profile of Mr. Bob Taylor (Above the Knee)
(Original Interview Transcript 49 Pages)

Mr. Bob Taylor lives in the East and was born July 22nd, 1946. He was drafted into the United States Army in 1966 and was wounded near Dau Tieng, Vietnam, September 30th, 1967. He is a right leg above the knee amputee and currently uses a prosthesis. He is married with two children. Mr. Taylor reports his general health to be good and also reports using drugs and/or alcohol, cancer, diabetes, being overweight, back pain and arthritis in addition to phantom pain, other pain and experiencing PTSD. The interview was completed on January 13th, 2008.
This is Bob's story.

[Six months prior to entering the military] I was going to school at DeVry Technical Institute in Chicago and I was working for AT&T Long Lines at the time. [I was studying] electronics and I lived with a couple of friends of mine in Chicago. We shared an apartment. [I was] just a regular guy. I went to parties. Hung out with the guys and girls and did my studying and work and everything. I thought I would be working for AT&T Long Lines as a career but then of course I was drafted in 1966. [But] I sort of expected it sooner or later.

I took basic training at Fort Campbell, Kentucky [and] I took [Advanced Individual Training] at Fort Lewis, Washington. I was 11-Charlie mortarman. [Then] I got my orders for Vietnam in August [of] '67.

I arrived in Vietnam September 2nd of 1967. I was assigned to Bravo Company, 3rd Battalion, 22nd Infantry Regiment, 25th Infantry Division which was part of the 3rd Brigade. We were usually on search and destroy missions. I was sent out on a supply helicopter to an area called Ben Suc upon the Saigon River near the Cambodian border and we had operations in there. We were a blocking force on the river and Alpha Company was on the other side of the river and Echo Company was just west of us and they were getting hit quite a bit and we were more or less a blocking force. We saw mostly just sniper fire mostly.

[On the day I was injured] we were on a sweep to the east of our perimeter at Dau Tieng and they had information that there was an enemy force about to attack the east perimeter so we moved out the north gate and moved out to the east and then south and we were going to be catching them in a crossfire from our perimeter and then we would be the blocking force behind them and as we were going through the Michelin Rubber plantation that's when I stepped on a land mine and ended my Vietnam experience. [It was September 30, 1967].

[I stepped on the mine] sometime shortly after, shortly just before noon I think it was. Two of the guys behind me and my commanding officer [were also injured]. The commanding officer got some shrapnel in his leg and two guys behind me got shrapnel in their chests and legs.

[I realized what had happened when I stepped on the mine], I mean it seems like the whole jungle blew apart. I mean all I saw was this big orange-black flash coming up all around and I was going into the air. I thought trees were falling on me but I was being thrown up into the trees. And I come down and I landed on my back and knocked the wind out of me and I was gasping for air for several minutes I guess and was finally able to call for a medic. They got there and I'd pushed up on my elbows, looked down at my legs and I thought both of them were gone because my kneecap on my right leg was sticking up through my thigh and the bottom part was gone. My other leg, it was

actually laying up underneath me and I thought it was gone too but they saved it.

[The] medics got to me within minutes. There was a lot of confusion. Some were lifting my head up and others were putting a helmet under it to hold my head up and others were taking the helmet out saying they'd keep his head down. They finally got tourniquets on me and it was just kind of confusion for awhile. They gave me morphine. Then they finally made a litter and carried me out into a clearing that they'd prepared for a helicopter to come in. The demo guys blew a bunch of trees out and got it cleared so they could bring in a chopper. It took about maybe a half hour that I was waiting on the chopper. Finally it came and took me out to the Dau Tieng aid station and they took me in and they said we can't do anything for him, he's too bad. So then they took and put me back on the helicopter and flew me into Cu Chi which is a 12 Evac hospital and then they started giving me blood and saving my life. I remember they were asking the next of kin and all this here. I heard a pop and I looked back over my head and all this blood come flying all over me. The guy was squeezing the bag so hard it burst it. My veins had collapsed so they opened my arm up, cut it open, and found an artery and then ran an IV into the artery and started the blood [but the bag] burst and he says don't worry and I mean just a split second later he had another bag on there squeezing it in. They said I took 35 units the initial transfusion. [Then] they started, they were taking me over to an x-ray table and putting me on that to take x-rays and the pain just became so great and I was screaming and I heard the doctor say go ahead and knock him out and I guess they hit me with sodium pentothal because I went out like a light. I guess that's when they took me into surgery and all that.

[In surgery] they cleaned it [the stump] up and removed the knee and the shattered bones and everything. Then removed it at mid-thigh and debrided my other wounds and sutured me up. [I remember waking up after the surgery and] a big corpsman [was] standing above me and he said, you know we had to take your leg off and I said I kind of figured that. I thought both of them were gone. And he said you want to take a look? He lifted the sheet up and all I could see was a catheter and I just checked to see if I was all there and I was and I says huh, I'm okay, and went back to sleep.

I was there [at the field hospital in Cu Chi] for seven days. [While I was there] they debrided my wounds on a daily basis, kept me pumped up with penicillin and morphine and Demerol, and made me comfortable. [But I developed an infection] in my left leg because the bone was exposed and the osteomyelitis set in.

[At the field hospital there were] just a lot of guys screaming and crying and yelling and I was just so damn glad to be alive. [The medical staff] did a great job. [The care was] very good. They were excellent.

[After Cu Chi] I went to Clark Air Force Base and they debrided my wounds again and cleaned me up and the next day then shipped me to Japan. I was there about a month. [When I was there they] started doing skin grafts on my lower left leg and they closed my stump.

[My treatment involved] skin traction and lasted for a long time and then they had to take all the sutures out on my backside and everything. That was rather painful.

[While I was in the hospital] the First Sergeant come in and visited me in the hospital at Cu Chi and said it was probably an anti-tank mine that I had stepped on and that it blew up directly under me and that I was right in the center of the blast and they said that's probably what saved my life.

[At the hospital in Japan they did a procedure where they stretched the skin so that they could eventually put it over the end of your stump, and] they did that and they finally got it stretched out and they did close the stump up then.

[I was in Japan for a about] a month [and the medical staff there, well] they were a lot of fun. I mean they were just good people. They were lighthearted and got along with everybody. It was an enjoyable stay there. [But] there were some real bad wounds there. That why I felt man am I lucky after seeing some of the more severe injuries. You know, guys who had lost both legs and arms and just torn all to hell.

[While in Japan I had positive interactions with the other veterans]. We'd go out and have a few drinks here and there at the EM club if we could get out. They'd let us out for a little bit each time and let us go down to the movie theater [and I did all of this in a wheel chair]. [I benefited from being with other soldiers because] there was the camaraderie. We were all in sort of the same sling together and some of the guys were going to be going back to Vietnam. You know, their wounds were healing up pretty good that they were getting sent back. I felt bad for them.

[After Japan] they flew me back to the United States and I was taken to Valley Forge General Hospital which was the 106 General Hospital in Phoenixville, Pennsylvania which is just near Valley Forge outside of Philadelphia. [I arrived there] in November of 1967 [and was there for] a little over a year. [So I was there for a long time,] but I was in and out. I was taking convalescent leave whenever I could get it. In fact the day I got there the very next day was the 24th of November and the next day was going to be Thanksgiving and they were cutting a lot of us loose that could get out. And at that time I asked for some convalescent leave and the doctor says well, if you can get up on crutches I'll let you go. And it was hard. It was hard. It was very painful but I grinned and bore it and told them, oh, yes sir, I'm fine. So they gave me a special orthopedic boot to put on my foot and then I went home after that. [So I was able to join my family for Thanksgiving].

[At Valley Forge I had] a lot of physical therapy—a tremendous amount of physical therapy. I mean they worked us a couple of times a day for about an hour or so each morning and each afternoon. And they were getting us ready to get a prostheses. I think it was May of '68 I got my first prostheses. And it was a total contact suction socket that I had a lot of problems with but I continued, I'd wear it all the time anyway even though it was painful. I'd wear it home when I was on leave. Then I started having problems with the stump and I had to go in and they did a stump revision—a scar tissue revision. I had what they called a dog's ear on the side of it where they'd drawn the skin together and so they cut that open and re-did it, reformed the stump. That certainly helped a lot with the problems I was having with infections and everything. [Learning to use the prosthesis] was painful but I got through it. It wasn't painful all the time, just some of the time. [But] I was continually having ulcerations where they did the skin grafting [on my left leg, so that was a problem].

[The medical care and staff there was] was good, very good. We had a team of doctors that would come once a week and have us all together and check us all out and talk to us and say how's things going and how's the socket and how's the leg and how are you doing and all that. [And] the nursing staff was good. I mean they kept us with our pain medication and what have you and any antibiotics that we needed. They [also] had good physical therapists down there. He worked us real hard and I think he did a good job getting us strengthened up, especially our abductor muscles and our lower back muscles and everything and worked on our upper body strength. [And when I wasn't in physical therapy we did other things to occupy our time]. We hung out. We played cards. Watched

movies. Read books. They had a bowling alley there and we'd go over there. Bowl, or at least watch them bowl and drink beer.

[I got the purple heart] at Valley Forge. That's just before I was getting discharged. They came in and gave me a Purple Heart. [There was no ceremony]. [The] colonel come in and handed it to me, pinned it on me, and they took a picture and that was it.

[Once] I went down and I talked to the first sergeant one time and asked if I could stay in and they said no way. Well, okay, I'm getting out and I'm glad I am. You don't want me, I don't need you. [But I would have stayed in if they had let me, because the service was] okay.

[After all my injuries, today] I'm a right AK about mid-thigh and [I] loss the use of the left leg. I still have the major bone in it and it functions but not real well. [All my injuries were] below my waist. But no, that was the major, you know, wounds to my buttocks and thigh and then what have you in the left leg and in lower left leg. [It was mostly] shrapnel wounds. [Now] I have a prostheses and I use a cane sometimes and when I'm not wearing my leg I'm using crutches or a scooter. [The prosthesis technology has changed] dramatically. The first legs I got were, it was called a total contact suction socket that was a rigid socket and it caused a lot of sores and problems with my groin area and the upper part of the socket. I was constantly having problems with that and to get a good fit if you lost weight or gained weight, this changed everything. Then I had a problem controlling my weight. It was up and down and up and down and it just caused more problems with the prostheses. At first I had what was called a lock safety knee where when you had weight on it it locked and as you released the weight and then it would swing freely. Then they come out with a new type of socket which was a soft polyurethane socket into a rigid exo suspension system—exoskeleton suspension system and it's very comfortable. I have a latex sleeve that goes over my stump that has a suspension pin in the end of it and it locks into the exoskeletal part of the leg.

[I still suffer from phantom pain and] it sometimes gets very, very severe. I've been going to a pain clinic for years and they were treating it and helping out with some injections in my back but then a couple years ago, about three years ago, they stopped working. So now they give me morphine which I won't take. I don't like the effects of it and I just take some Darvocet whenever it gets really bad and I just keep taking it until the pain stops or I pass out.

[Looking at the medical care I received within the first 12 months after being injured] I think the other patients [were the most helpful to me]. Being able to talk things out with them and listen to their problems. They'd listen to your problems. I think that was probably the best part of it. I don't know of anything that was not helpful. I think all the experience I had were helpful [but] I think the physical therapy is really what did it for me. [It really made a difference for me].

[But looking back, when I was in the field hospital and they were giving me a blood transfusion,] I thought I was going to die. Well, before I went to Vietnam I thought I was going to be killed over there and I accepted that fact that if it was going to happen it was going to happen and that's why I was so glad that I lived through it...I didn't know I was going to survive until after I woke up in the recovery room. I was praying awful hard the whole time prior to that.

[Looking back, the medical care that I received was very good]. I thought it was excellent [and] I feel good for [the medical personnel who treated me because] they did a great job.

[During the first 12 months of my recovery] getting through all the pain was probably the biggest

challenge. I had no problem accepting what had happened. I was okay with that. I was just glad to be alive and I just said hey, life is here—live it. And I tried to live it as best I could.

[When it comes to my injury] I think I handled it quite well. Well at the time I was rather angry at my commanding officer. We had a bit of an argument of where he wanted me to go and where he wanted me to go was a place that really looked like bad juju and I says, no sir, I says I'm not going through there, I'll come around it and we bantered back and forth a little bit and he finally gave me a direct order to go through. I went through and I got about 15 meters from him when I hit the mine. For a long time [I was mad at him]. And I don't know eight or ten years ago I got to thinking about it and you know, hey, he was just doing his job too. He was doing what he thought was right and so I was okay with it. [But when it comes to my injury I think I learned to cope]. Now we always used to talk back and forth and say hey, if you're looking for sympathy you'll find it in the dictionary right between shit and syphilis [but my] family and friends, they sort of tried to protect me, coddle me, and everything and I didn't go for that. I know I would get into some arguments about let me do it myself. You know, they were always trying to help me do this, do that and I'd, no, I can do it myself. They finally understood. He'll do it himself. I mean I adapted to doing different things. Walking, getting up and down stairs and everything. You know, I had to adapt. When they tried to help me I'd say no, I'll figure it out myself and I'll do it myself and I've been real independent ever since. But they knew me, that I'd get through it. I mean I have an older brother that was in Vietnam in '66 and then went back again in '69. He's all screwed up in the head [because of Post Traumatic Stress Disorder].

[I suffered from post traumatic stress disorder too]. I had nightmares, hypertension. I still when I eat I have to look all around me to make sure nobody's there. If I'm in a restaurant or something I'm always checking out the exits and fields of fire. And you know, it's craziness. [But I didn't find out that I was suffering from Post Traumatic Stress Disorder until years later when the VA] wanted me to go talk to a psychologist which I did. He asked me what was going on and we talked and they decided to send me to a psychiatrist for medication. They gave me medication and it seems to have helped. [But I didn't talk to other veterans about those kinds of things] until I found out what it was about and then I started talking to other veterans and what their experiences were and I started counseling them on getting them help.

[I think it takes a while for some vets to seek treatment for Post Traumatic Stress Disorder] because they think that it's a mental disease that you're crazy and they don't want to admit they're crazy. I mean my brother, I keep telling him to file a claim. He goes over and he doesn't like the bullshit he gets—they do with him. You got to do this, you got to do that. He [would say], well screw you. I'm not doing any of it. Some of the guys are like that.

I was [also] affected by Agent Orange and diabetic now. A lot of guys that I know that are diabetic, I counsel them, hey, file your claims. I've helped a lot of guys that way. [But] I developed Type II diabetes and they determined that that was caused by the exposure to Agent Orange. [We saw areas where it had been sprayed over in Vietnam]. One of the guys over there, [said] hey, what is all this and they said oh that's herbicide they spray here to kill the vegetation. Nobody said anything was wrong with it or anything.

[But after being discharged from the military] I went to college. My DAV helped me out with that—Disabled American Veterans was my proxy and they got me a lot of my benefits. [I went to] Penn State University [and I studied] Administrative Management. Got a bachelor of science degree in Administrative Management.

I was interviewed for a job after college but I didn't get the job. Then I didn't do much of anything for a long time and then I bought this business which was a cabinetry business and I just got started in that. I don't make any money at it but it keeps me busy and out of trouble.

[Because of being injured] I think I went into a position where I didn't want to work. I mean AT&T, they used to call me all the time but that's when I was going to college and I says, yeah I'm in school or I'm going to go to college and everything. Then finally after awhile they stopped calling me but they were offering me my job back [but] I mean I was still in and out of the hospital and all that.

[Still, as far as my injury goes] I think it made me much stronger as far as my will power to do things. Maybe that's not your answer, the right answer to your question but all I can think of is I think I became stronger with it.

[But I was cautious about letting people know I was a soldier when I came back]. You sort of hid the fact that you were in the service because when people found out you were in the service a lot of them treated you badly. I know one time I asked a girl to dance. She said I don't dance with baby killers. So I tried to sort of shield that fact when I was out with strangers.

[When it comes to the media coverage of troops returning home from Iraq and Afghanistan,] I think it's great that they get the recognition. But I also feel bad for them that they're not getting the type of medical care and compensation that they deserve. I think our congress and everybody is giving them the shaft. I mean Vietnam veterans, we got the shaft when you consider what the World War II veterans got and they're continually trying to decrease benefits for them.

[I eventually became involved in local politics and began] working for the Democratic Party. In fact I ran for county treasurer one time and lost. But I worked on different campaigns for state senators and congressmen. [I also do other activities]. I hunt and fish. Play a lot of golf and used to bowl quite a bit.

[Looking back on the past 30 years I would credit] an excellent wife, great family, [and] great friends [for how my life turned out]. [Family is important]. I'm close to my brothers and sisters and what have you.

[Today I belong to] Fire Base Eagle [which is a veteran's group trying to build a history center in our town]. We've been working on this off and on since 1995 and right now we're trying to get some land from the state in Blair County. We have our state senator and state representative working on that. It's owned by a state military. I guess, it's land on the veterans' home, Holidaysburg Veterans' home, and they've got several hundred acres and we need to get about maybe 40 of it to build our project. So we've been working on that. We just got our business plan finished recently and our marketing plan and everything that went with it.

[My injury also led me to] getting involved in the disability movement with a lot of people that have disabilities. I'm pretty involved in that. I mean I started an amputee support group here back in 1988 or so and I've been involved in different organizations like that and opened doors for the handicapped. Right now I serve as the president of the South Central Pennsylvania's Center for Independent Living which is a federally funded group. So I think that it brought my awareness of the amount of people out there who had been cooped up in homes and everything and now they're getting out and living on their own, independently. I think that that's probably one of the most positive things that's happened to me because of my injuries. Got me started in to working with

these people. [The disability support group is named] Central Pennsylvania Amputee Support Group [and I'm the] co-founder.

[When it comes to my disability] you know, a lot of people ask me how do you adjust to it. I always think, you know, how did I adjust? Other than, I think I was a strong person before it happened and I was so glad to have survived Vietnam that I just went on with my life and worked at it. Difficulty? I mean every day is difficult just getting up and getting the leg on and getting around. I've had to adapt to many different situations. I'm disappointed I can't run or jump. I'm disappointed that I can't go out and hunt like I used to--trudging through the woods and stalking deer. I have to sit and wait for them to come to me now. Those are probably some of the things that are difficult for me — like I don't like it but I'll live with it. [I sometimes wonder about the men who couldn't adjust] because when I was in the hospital in Vietnam and in Japan there were guys that they just could not adjust. I mean, and I never understood why they couldn't adjust. I mean other than being big crybabies. I know they were injured severely but not nearly as bad as a lot of the people around them and they just would not accept it and they depended on the drugs and I think they became addicted to drugs. I don't know. Our population is a huge population. There were so many different personalities in the world and I think that there are just some people that can't handle it. I mean like today's drug problems. People get addicted to heroin and everything after they've tried it a few times. I've never done heroin. I did pot and marijuana and stuff but one day I decided that wasn't good for me too and I says, I quit that too.

[But you can't predict who can adjust and who can't]. No, I don't know what causes certain personalities to go the way they go. Myself, I just think I, I've always been able to accept hard times. I mean I grew up in a poor family. We didn't have the best of clothes. We had all the hand me downs and my father died when I was eight years old. I was raised by my mother and my younger brother and I. So, I've never had a real easy life. Maybe if some people have real easy lives they can't handle it but I think I was hardened when I was young.

[Today] I think I'm a pretty good person. I give back to my community as much as I can and I'm involved in a lot of different community activities. My wife is too. She's more involved than I am. I think I'm a good person.

Profile of Mr. Shawn Jackson (Below the Knee)
(Original Interview Transcript 59 Pages)

Mr. Shawn Jackson lives in an Eastern state and was born September of 1948. He enlisted in the United States Air Force in 1965 and was injured in Vietnam September 26, 1967 in the Central Highlands. He is a left leg below the knee amputee and he currently uses a prosthetic device. He is married with three children. He reports his general health as very good. He also reports back pain, stump pain and PTSD. The interview was completed on January 11th, 2009.

This is Shawn's story.

[During the six months prior to entering the military I was in school]. I was in the tenth grade. I was a high school student [and] I was [also working] at a fencing store. I built fences. [I also had a social life aside from work and school]. We had a small group of guys we hung out with and did certain things with. Did juvenile delinquent things with. [Before entering the service] I was easy going. Just, I guess I ought to explain I had kind of a rough life as a youngster. My dad was an alcoholic and stuff so life was really different for me than a lot of other kids. I went to school to get away from home and tried to stay away from home as much as possible. It was the summer of '65 [when] I joined the service.

[I joined] to get away from a lot of different things. The home life, just it was pretty bad. I just wanted to get away. I checked out some of the services. I went into the service, into the Army. I felt that was better for me. [I was only 17, so] my mother [signed for me].

[Today] I'm a BK. I have a below the knee amputation of the left leg. [I also suffered] major injuries to the leg and injuries to the back. [I had] shrapnel in the legs, both legs [and I suffered from] burns. [Today] I have problems hearing with my right ear. I can't even listen to the phone with my right ear. I have to listen to everything on my left. [That problem,] well, basically it's from my job. I mean I worked with artillery. I was an RTO [Radio Telephone Operator] for artillery and the explosions and gunfire and everything from, you know, didn't help it at all.

[But I didn't start as an RTO. When I first joined the service I was a] supply clerk. [But I didn't stay in supply]. I went airborne. I went down to Fort Benning, Georgia for the airborne school [and] I loved it.

[After airborne school I went to] Fort Campbell, Kentucky, [where I was assigned to the 101st Airborne.] [Then] I went to Vietnam in December '66. I went to the 101st Division's base camp which was in Phan Rang. I got there, spent Christmas, and we moved out right after Christmas. We went up to Kon Tum. At that time I was a RTO [and] I got sent to the 2nd of 320 Artillery. It was a gun battery and we got, and the operators got dispatched from them to any units that were going out in the woods, out in the boonies. [So I was assigned to this artillery unit as a radio telephone operator but I also could be assigned to combat patrols. And] that's what we did. We were the artillery liaisons that went out with the combat units [so] in case something happened they would have artillery support. My second outfit was with the 2nd of 5-0-deuce. I was with the recon platoon. I was still artillery. I just went out with them as a radio operator.

[I was injured in the morning, but the circumstances that led to my injury] actually started the night previous. We were out on a [patrol] and we had a prisoner. We had a captain that liked to do night patrols and we caught this lieutenant from the MVA that night and we brought him up and I babysat him throughout the night. Then in the morning he brought us down off this hill into this complex and

he was watching, you know, interrogating at the same time, finding things, and during the process the guys had spread out and they found something and they came back to tell us and the prisoner kept his eye—he was watching—and his eyes kept going up and down like every time somebody walked over or something it was like he was expecting something. It just didn't dawn on me. When they came back and said they found something and they told us to come see. I started to take a couple of steps and with that I [had a] prisoner on a rope, and he made me step back and at that point I stepped on a land mine. [There is] no doubt in my mind [that he knew the landmine was there]. He brought me onto it. I was already past it and he pulled on the rope and I stepped backwards and that's when I hit it. [And this] was in the morning. It was a beautiful day. [It was a] beautiful morning [and] to be honest with you, I think [stepping on the mine] was a godsend. It just, I don't know, I just thought it was a godsend. It got me out of the war, it got me, and it got me to where, actually yeah, I thought, I don't know, I just feel it was a godsend. [Still looking back at being injured is] upsetting [because I had one more day on the field]. You know, it's wow, you know, I tried to explain like I didn't want to leave. Well, you have to, you know. (laughter) I said nothing's going to happen, not realizing it was going to happen to me. (laughing) But I told them something was going to happen. You get these intuitions. You know, you're there for a long time, you get to know things and things just didn't seem right.

[After I stepped on the landmine] my physical body just became very heavy. Or my leg became very, very heavy and I was watching the guy in front of me. His eye got it but his face turned black from the gun powder and I was watching him and ah, and just grabbed a hold of my leg and threw it out in front of me and there was nothing there at all. Shot to shit. Excuse my French. But two men just hit me with medication and then I was Medevaced out. [Two men got to me fairly quickly and gave me morphine before I was medevaced out]. One in the leg and one in the arm. They both hit me with it.

[I didn't really realize how seriously injured I was and at the time] the thing that bothered me most was my finger. (laughter) I got a scar out of it. Where I had the man in my hand on the rope and when the bomb went off I got a piece of shrapnel in my middle finger and I guess I just concentrated on that more than anything else. Five years later I found out [that] my buddies killed him [the prisoner]. [I remember] the guy in front of me, his face was black from the gun powder, to the guy behind him. You know, they all realized what was going on and they ah, took care of us. I had asked for my 45 but they wouldn't give it to me because I was going to blow him away myself.

[I remember the treatment the medics gave me on the ground]. Like I said both of them hit me with morphine and just told me I was lucky to go home. I mean they ah, there wasn't much they could do. Everything was shredded. I don't remember if they [applied a tourniquet to my leg]. They probably did. [It wasn't long before the medevac came]. It was a short spin. Like I called in my own Medevac.

At that point [my leg] was just shredded. I mean the toes were gone and half the foot was gone and the leg itself was shredded and burnt. Both legs were burnt. I had shrapnel in the left leg in the lower calf up to the backs, the back half of the right leg. It's all shrapnel and into the back. And the radio that I had took the blunt of a lot of it. Otherwise I wouldn't be here. [When the landmine detonated I had a radio on my back and that absorbed the worst of the impact.] [So] it was mainly in the back of me that got it. Because like I say, I stepped backwards. I didn't turn around. I stepped backwards and the back got everything.

I [was medevaced] to a field hospital in Quang Tri. I was there over a week. Ah, about a week

before I went to Japan. [When it comes to the treatment I received there, there's] actually not too much of it [that I remember] because of the drugs. They kept me out a lot. I was IV'd and stuff you know, fluid replacements. The leg was all bandaged up and there was a big cast and different things. One thing I do know, when I got to the operating room just before, prior before they're knocking me out, I asked them to save what they could and they said they would. And they did do that for me but I eventually lost the leg anyway. [But they tried to save my leg]. They put it back together as best they could but the damage was pretty severe. I lived with it for awhile. I had many surgeries [over the course of several years].

[I received the purple heart while I was there too]. The commander came into the field hospital and gave us our Purple Hearts. I remember waking up. They woke me up to give me a Purple Heart. [I was somewhat upset though, because they did not give me a combat infantry badge.] I said well wait a minute. I said, you're giving it to medics. You're giving it to supply clerk but you can't give it to me? We're still fighting over it. We've got people from organizations. They're trying to get us our Combat Infantryman's Badge. We were there. We fought. I mean, how come we didn't get it. You know. They get it for three dollars.

[So I was in Japan...] ah, let's see. That would have been October--I didn't get home until December. It must have been a while. It had to have been at least six weeks. My first weeks I don't remember at all. [What I do remember about the treatment I received in Japan is that] a lot of it was bone "word inaudible." I mean I was wrapped up, I mean they changed, they changed bandages and stuff like that and tried to get you to deal with certain things. You know, you looked around and what I saw there, my injury was minor to some of the others that was there. Even though I was hurting there were guys there—one guy in particular was just a body. There was no legs, no arms, you know, all hooked up. There was a few of them actually that were worse than me [and I felt fortunate because] it could have been a lot worse, that's for sure.

[While I was in Japan they were still trying to save my leg] and at that point I didn't see anything until I actually got back to Fort Dix [that] is when I seen [it] exactly, you know, to where you really, the bandages come off and you say oh, that's not so bad. But [it] was, the leg was just like a bone covered with skin. That's all it was. There was no muscle. Just a bone covered with skin. [And while in Japan] I was still oozing out shrapnel in the legs and [they were] taking care of that. [It actually took three to four years for the shrapnel to come out completely. And they were also treating me for burns].

[When I was in Japan] I called my mother. I think it was somewhere around three weeks later when I was trying to get everything back and I called to tell her I was okay.

[At the hospital in Japan] there was one nurse that was actually outstanding. She got us to cope a lot better than what we were doing. She was very fantastic. Now she was from Illinois or Indiana. Very, very, very fine woman. [She] just talked to us and just the way she treated us [helped]. It was just something, just her personality was phenomenal and she was good at her job. You know, to get us to realize, you know, hey, it's not the end of the world. It's, you know, things like that and [she] started to wean us off of the drugs. [And I interacted with some of the other veterans at the hospital in Japan too]. Like I said there's a group of us and each one, you know, we all started [to say], oh, we're not so bad because there's guys worse than us, you know. And it was just the way she [the nurse] approached us and we approached the whole situation. We started changing. [And we were able to move around while in Japan]. Yeah, eventually we got into wheelchairs. One time they give us a weekend pass. We went into Tokyo. We had a blast. (laughing) [We] went nightclubbing,

stuff like that. All of us in wheelchairs and crutches and (laughing). We had a blast. Went into one of the local establishments. Had a pretty good time.

[After Japan I was flown to] Walson Army Hospital, Fort Dix, New Jersey. I was there till after the first of the year and then I was sent home to recuperate. I recuperated at home. [But] I was there for awhile. We were in the hospital for awhile then they put us in these old condemned buildings taking care of sick GIs. I came down with the mumps and I said that's enough of this and I went to my local VFW post. One of my buddy's fathers was a commander at the local VFW and he, in fact, we shut the barracks down. There was another kid from Connecticut. He had lost his ankle. Had a big tear in his ankle. And we shut Fort Dix, the one part down, we shut it down.

[But before being transferred to the barracks] we were at, Walson Army [Hospital and it] was good. We were on the amputee ward. It was good. There were other GIs. There was a bunch of GIs there. [The treatment I received while there was] just wound care and stuff. And then we're healing fairly well. They pulled the stitches out and stuff like that. The leg's healing pretty well. Starting to get around. At that point I think I was on crutches. I think I got out of the wheelchair because I remember walking to my mother when she come in. I said you're not going to see me in that. I walked in on crutches though. I was on crutches.

[And] they removed [my lower left leg below the knee] five years later. I had many surgeries [in efforts to keep my leg]...Then they started cutting higher and higher and higher. Now I've got just a stub that's just below the knee. I've had 12 surgeries. It comes out to 12 surgeries where we just, even with the amputation I had several surgeries. In fact, I just had one two years ago with problems from it.

[So at Fort Dix it was mostly wound care and burn care] and then getting your head back together. [While I was at Fort Dix, even in the substandard barracks, talking to the other wounded vets helped me]. Everyone was different. Everyone had a different wound. You said well mine's not so bad. Guys were worse off. You learned to accept your damage and go on.

[When asked to explain what the most helpful thing about the medical attention I received was, I say] that's a hard one. Because actually nothing, actually nothing spectacular stands out except for years later because during a certain period of time from the time I got discharged until when I actually lost the leg, there was no psychological help. There was none, nobody cared, nobody said anything. You know, hey you're going to be feeling certain things and getting back in, with my leg getting back together I couldn't do anything. And I started drinking. I drank heavy. Got into drugs. The whole time we were looking for help and we weren't getting it. You know, it was beyond a nightmare. One time I woke up and had my fingers around my wife's neck. You know, what is this shit. You know, we were getting nothing.

[In June of 1968 I was discharged and] it was finally over. At that point I started getting some counseling from the VA from this one man within the VA system that got me to go with the VA instead of the military for the disability. But that was a long hard fight too. [I needed help because] when we got back to the States [I started using alcohol and drugs just to get through the days]. There was no psychological help. Not at that time. [And I wasn't familiar with Post Traumatic Stress Disorder]. Not as much as I am now aware of it. It was almost ten years before we got any help or I got any help. [And I was also fighting to] get into the [VA] system. We were fighting them to get in. [It was] almost a year before I got my first check. You know, we kept questioning, why it is, and just fighting the bureaucracy was unreal. I have letters that we wrote. They're called letters to the

editor or something like that and there was these guys that help you where you write [about] a problem and they get in touch, and I wrote to congressman when that happened in '68 and '69. [Eventually] we got in touch with my local congressman. We went to the newspapers.

[Even facing all of those issues,] the biggest challenges didn't come until I went through the actual amputation. Then it became a challenge. That's when I really had to get it together and learn to walk and never [get] down. I'm fighting fires [as a firefighter] now so I mean I've come a long way. [It wasn't until 1975] when I went actually for the BK. But I had a good size stump at that point. But then throughout the years we just kept going back and back and back and back and back.

[But before the amputation surgery I was walking with crutches]. And then we walked with out it, you know, then we went to the surgery and then back on crutches. I still use crutches now when I don't have the prosthesis on because I refuse to hop around. I use the crutches. I refuse to take the leg off when I don't have to. I won't wear shorts. You know, I'm self conscious about it. But I do a lot. I, you know, I'm very bound to my community. Like I say, I fight fires. I mean I did. I'm getting retired from that but I go out and play in traffic now [as I am certified to direct traffic through the police department]. I tell people where to go. When there's an accident, I tell everybody you can't go this way you've got to go another way. (laughing)
I'm a volunteer firefighter but I do police work with the police department. I'm not a cop though. I'm [only] certified to deal with traffic.

[But I don't recall encountering any major challenges other than learning to walk with crutches and so on during my first year. No, there are] none that I can remember. None that stick out. I'm sure there's things there but you just grow to ah, overlook it. You know, it's just part of it. That's all I can say. You just learn to overlook a lot of different things and how you walk and how you do certain things and you just do them.

[Although during my first year home] I tried to get into the postal service. I took the test, passed it, and they offered me a job but they wanted me to walk, walk a lot, and I couldn't do that. They said well you can't have the job. I said well, that's not fair and I'm sure there's something—it was a big thing. I said no, I couldn't work. There's just too much pain involved. I was angry [because of that]. You know, I'm a war veteran and I deserve better. You know, you gave me my ten point preference and you won't give me a job to do something without walking? I said no, no, I have an amputation and I don't have what I need to do the job. Well if you don't, then you can't have the job. And I said, well I was real angry. I drank [to deal with that anger]. [And I also had problems with my first wife as I was dealing with drug and alcohol abuse]. It was a real challenge. It lasted five years with her and then we split up.

[I was young when I entered the service]. Well, I was still in, so I was a newbie in the service. So there was no after thoughts [about], what I'm going to do after the service. Not until I started getting short in Vietnam did I start [thinking] what am I going to do. I remember talking...I said what am I going to do? I says what good am I going to be back home without a, you know, I had a tenth grade education. I have combat experience but what am I going to do in the States? What am I going to do when I get out? So, it wasn't until later that I started to really [think about], what am I going to do and then I had it taken away from me so I never had to think about it. Then it was just a struggle in what to do or how am I going to survive. What am I going to do now? [My outlook on my life chances changed.] It changed a lot. I couldn't do what I wanted to do. Which, even though I didn't know what I wanted to do, I still couldn't do it. The limitations became overbearing. You know, you try oh, I'm going to go do--you can't do it because it hurts. I'm going to try this, carpentry, can't

do it because it hurts. I tried ah, you know, the limitations as you go through, and it just it stopped me. Every time I turned around I have to try something else.

[But when it came to other jobs] I tried going back to do fences. I tried different jobs. Then went till '72 where I met my present wife. She got me a job driving a truck and I'd work off and on driving a truck throughout the years. I became an owner/operator. I had my own truck. Two of them.

I loved [driving]. I went all over the country. I'd go visit all my Army buddies. [And I didn't find them,] they found me actually. I couldn't find anybody till quite awhile and I heard there was, somebody called me. Somehow I did something. I don't remember what it was. I put my name somewhere and they found it and I got a phone call. They told me about a reunion. I went to that. I signed up again and it's just been... it just swelled. [The reunion was for the 101st Airborne Unit]. [But it was quite some time after returning home from Vietnam that went by before we got in touch with one another]. It was around '85, '87. It was ten years before I heard from anybody and then come to find out I used to pass my medic's house all the time. I didn't even know it. [So he made it out of Vietnam alive, but] I never knew that until later—ten years. It took ten years before I heard from anybody to know even what happened the day that I got hurt. I had no idea what they found. I had no idea of anything because I didn't know where anybody was at. [But they told me about the day I was injured,] they put it all together. They told me that they killed the guy. They told, you know, what they'd been through after that. What they found. They put a lot together for me... They found a bunker complex—a big, tall bunker complex. It was quite big. There's been many articles on what they found.

[But originally after the post office didn't treat me so well I was able to find work elsewhere]. I got a political job. I got hired for the Middlesex County Prosecutor's Office to work with fingerprints. [But] like I say, it was political. It lasted about eight months. Then I was out of work. [And I believe I was discriminated against by potential employers] once they heard I was disabled. I was definitely [discriminated against].

[Also, coming home to a country that was divided about the war I was just wounded in was not easy either, but] I kept my mouth shut. I was bitter. I just kept my mouth shut and that was part of my downfall. I should have spoke up and I'd keep it in and so I got to the point where I wouldn't tell anybody about anything because they hated us. I mean they literally hated us. I said whoa, even my own friends. We know, whoa, where is this coming from? So I just kept my mouth shut. And I drank. I wouldn't do it in a bar. I do it in the home. Yeah, I drank by myself. Killed time and the memories [of being in combat and] just [experiencing war] overall. You know, the years, being there, the different things I had seen and done and just the whole, the way you had, just the condition. It was just everything. [And at Fort Dix being with the other wounded vets helped me adjust, but we were all drinking and using drugs]. Yeah, yeah, we were all doing the same thing.

[And after I was released from Fort Dix I dealt with other people's reactions to my injury]. Well, my family was gone. It was just me and my brother and my one brother was over in Vietnam. He went a year after, he left when I left. He went and I come home then he went. So he was gone. My older brother was gone. My other brother was in a military school because of circumstances from my mother and one of her friends there. They weren't around me to know their reaction [and when it came to my friends,] like I said, some of them started to give me a rough time. You know, how could you be there and how could you do this. You know, you're a baby killer. I said whoa. Like I said, I just stopped associating with some of them.

I totally moved out of the state. I got away from them—some of them. Actually I tried to move to Pennsylvania. I ended up moving to West Virginia. Up there. 160 acre farm out in West Virginia. I lived out there in the woods for eight years trying to hide. [I didn't have much association with other people and I tried to just hide. I was still drinking at the time].

[But in 1976 I married my second wife, so we've been] married 33 years. [And we moved around frequently]. We went to Florida then back to Jersey and then went out to Colorado and back to Pennsylvania. Yeah, we moved a bit. We moved to Florida. I was looking for help and we come back to Jersey and then my present wife told me that you go get help or we're done and I went and found help somehow. We moved to Colorado and I got help in Colorado. Big time help in Colorado. [And] that was through the VA. They got [it], ten years later. Took ten years to finally get the help. I went one on one, very intensive one on one with a psychiatrist.

[But aside from the psychological problems I had to this day] I still [experience physical pain]. I have pain. The scar tissue hurts. There's something wrong with the bone. I don't know what it is but the bone hurts. I'm constantly in pain. It hurts to walk [and the prosthesis,] it's not part of you. It's not meant to be part of you. Well, it's meant to be part but it's not part of you.

[There is also the problem of the VA system. I believe there is a difference in how the VA is treating current veterans of the Iraq and Afghanistan wars]. There's a slight difference. Alright, they're trying more now. I've met veterans here in our town that come home from Iraq and I listen to them and I says, you know buddy, you're going through the same thing I went through. I says, just keep on trying. I says, don't give up. It's a long, hard fight but eventually you do win. [Because eventually] they [gave] me 100%. It's a combination of about four of five disabilities. [So the VA rated my disability at 100%].

[And looking back, the medical care I first received from the military was good]. Originally, from the Army, yes, that part was very good. It's the afterwards. The dealing with the--now that they call Post Traumatic Stress. They refused to recognize it. [The] VA or any system refused to recognize it. They say oh, no, no. They did it to their own people. They called it shell shock. Oh, that's just shell shock, you know, from being around the mortar area. Yeah, but that has an effect on you. You've got to learn to deal with it. Help me deal with it and maybe I'll quit drinking. (laughing) Maybe this stuff will stop. But it never did. Not for ten years. [And from what I've heard about the treatment of Post Traumatic Stress Disorder today,] I don't think [much has changed in terms of treatment]. From what I've talked to these guys. When they come home I tell these guys from Iraq, the system. They're still fighting the system. They're still fighting to get in. They're still fighting to get recognized. To get their things recognized. They're still fighting for it. I tell them it's going to be a continuous fight. Don't give up.

[But it wasn't until] I met my present wife during one of my trips I stopped at my buddy's house [that] life started to change. Small turnaround started coming. Then it was a big push in '80 I guess. Somewhere in that time span there was a big push when we went to Colorado. She said either you stop or that's done and I said well, it stops. [And] by that time, time is nothing back then. It was all a blur. I was drinking a fifth of whiskey a day. It was unreal.

[But things eventually changed]. We got [my wife] to go to school under my GI. She became an R.N. and got a better job. Got a job in Westin. Started making [it], we started to change our life around. It was small changes to start at that time but they were small but it was a change. You know all the other turmoil was starting to turn around. We started realizing there's problems. Started

dealing with them. We were starting to figure out something. Because it was just things that we had to get turned around.

[I really had to change my drinking though, because] I got into the vet center [when I was living in Florida]. I had problems there. I had bled out from drinking. I just bled out and I wound up in the hospital. They said quit drinking, you know, you're going to die and stuff like that. I said whoa, okay. I was bleeding. I started hemorrhaging bad out all over. I was bleeding all over. I literally bled out. They said either you quit drinking or you're going to die. So I quit drinking and started to come around. We wound up--we went back to my in-laws house in Jersey. Spent a little time. And I moved to Colorado. Got a house. Got help. Got into the system again and got help but I had to go to Colorado to find it.

[I finally received the help I needed in 1981]. They put me--I went right to the psych people. I was not thinking about suicide, I was just down. Do you know what I mean? Something's got to change and I needed help and I was asking for help and they put me in touch with this one lady. She is a psychiatrist and I was seeing her three days a week for a long time. [I saw her for] at least three years. Took me a year just to start to talk. I'd just sit there and I would say hey, you know, but she would do some talking and we'd try. It took a long time before, you know, she started explaining things. Said well, okay, maybe I could start explaining things. But until then when I got to Colorado it became a big, big turnaround for me in my life. Oh, she was a tremendous help. And then she got promoted and I felt rejected again. (laughing) Yeah, she left. But at that point I was already well on my way to a big change in my life. You know, getting my life back together. Learning to cope with things. Learning why things happened. I quit drinking. I quit drugs. It was a big turnaround in my life.

[As I was on the road to recovery I experienced different things. I took my family with me on the road and] it was beautiful. I have no regrets in my road travels. I'm glad I did it. I took my kids with me on a couple of trips. I was able to do that. It was just great. Took my whole family on road trips in the car while we lived there. I took them all throughout the central parts of the United States. Grand Canyon, the deserts, we just traveled. Up to Utah, California and we just enjoyed life. . .we started getting it together.

[Around 1988] I actually became a volunteer fireman in West Virginia. I started my first educational point there with the fire service. I went to the University of West Virginia for my fire schooling. Learned the basics and began fire fighting. Then I took a break in Colorado and then when I got back to Pennsylvania I got back into it.

[I had to cope with my amputation while being a firefighter]. Yeah, it's had its problems. I'm not going to say I didn't. I was able to do a certain amount of things and then they would have to stop because at that point I was a BK and I explained to them and they worked with me. You know, they'd tell me do that Shawn and I did, I did what I can. I've put out a few fires. [And I became a firefighter for a couple of reasons.] My dad was a firefighter. I used to hang out at the volunteer fire department when I was a young man growing, young kid. [And also at the time] I wanted something to do. I wanted to get off the road. I wanted to be productive again and I've done that and it worked.

[I have to say that] the biggest thing that has come out [of my injuries and life] is this fire police stuff that I do. I'm very good at it. I'm a captain in it. I have rank. I have authority. I have an education in it and I enjoy it. [And I am an officer in the fire police?]. They gave me that. They're prejudiced. I have to admit that being disabled has prevented me from being an officer in the fire department. I

just can't prove it. I know it has. They've almost said it but they can't say it because then I can sue them. But yes, it's put a thing there. That's why they gave me the captainship in the fire police.

[And today] I have a good relationship with my family. My kids, like I said I've taken them all over the country with me as a driver and stuff. I have a good relationship with my children and stuff. My brothers. [But Post Traumatic Stress Disorder impacted my first marriage] and it almost impacted my second marriage. It started to, you know it was a big thing but I finally got the help that I needed. [And my second wife was quite helpful in my recovery]. Yes she was. A big, big, yes, a big change in my life.

[Today] I think my attitude has changed. I'm not as bitter as I used to be. That would be about the biggest one. I still experience the pain and stuff like that. I'm still on the medication and stuff. I'm just, I'm not as bitter about it anymore. It's just something I have to live with and I get on with it. [I used to be bitter about] the whole situation. I mean I couldn't do nothing. I was just, I don't know I just, the way people treated you. It was just a lot of different things. [And] the drinking and the boozing and the drugs [that I used because of my injury and experiences were a very negative part of my life]. It was a big negative impact on my life.

[But looking back] it's all been a challenge. Just getting up is a challenge. To say oh man, another day. It never lets you forget...It never lets you forget. From the time you get up to the time you get back. It just never lets you forget.

[One issue that really bothers me today is the way the system treats veterans of the current war in Iraq]. They're over their protecting you know, our so-called right. So it's not here. If this was here do you know what this country would be like? If we had to bomb ourselves, it would be unreal. You know, there's guys going through this every day and then they got to come back and fight for a right and that's a medical care. It's ridiculous. It's downright ridiculous. They've got to quit fighting. Give them the medical care that they deserve. Recognize Post Traumatic Stress more. You live in a war zone for 15 months now. That's a lot of anxiety that needs to be dealt with. Yeah, they're [there] 15 months. We were [there] a year. Now they're 15, 18 months. That's a long time to live with that kind of fear. If you're going to live or die-- that's a long time.

Profile of Mr. Chris Walker (Below the Knee)
(Original Interview Transcript 32 Pages)

Mr. Chris Walker was born on October 12th, 1941 and lives in a southern state. He enlisted in the United States Marine Corps in 1959. He was wounded January 30th, 1966 in Vietnam and is a left leg below-the-knee amputee. He is divorced and has two children. Currently his overall health is fair. He reports heart disease, arthritis, stump pain, phantom pain, depression, and PTSD. Chris was interviewed on January 22, 2009. This is Chris' story.

[In the six months prior to entering the military] I was a student at Fork Union Military Academy in Virginia. [This was] a college preparatory school, a junior ROTC, [with] military curriculum. I guess I thought about being in the military from my earliest memory, maybe in the early elementary grades—first and second grade. My father was a World War II veteran and I used to wear his uniforms and so forth when they would hang off me when I was six, seven years old. So I thought about it for a long time. I turned 14 years old when I went to Fork Union and into high school and of course I ate it up. I loved the discipline and the military lifestyle. I was a good student. I was a good ROTC cadet because I was promoted rapidly and fit that type of lifestyle. I liked to observe other people and the people that I looked up to were those that were clean cut, neat, military type people and achievers. I wasn't drafted. I enlisted in 1959.

I went to Vietnam in 1965...we set sail from San Diego to Okinawa, Japan and became the 2nd Battalion 9th Marines. While on Okinawa I attended the Vietnamese language school, which was handled by the United States Army. I learned the Vietnamese language basics—survival language. After that period of time we rotated to the south, which was the combat area in Vietnam. That would have been in March '65.

In December of '65 I became a platoon commander. One of the officers had a mental situation. I guess you'd call it Post Traumatic Stress Disorder got the best of him. Anyway, he wasn't a good leader so they transferred him out and so I took that job. So I commanded the platoon from whenever that was. As I say, we had daily combat patrols and nightly what we call layout patrols which is an ambush. Setting up ambushes for the enemy. We had, we were in a compound, which we had surrounded by concertina wire, and we guarded it at night with obviously troops and automatic weapons and claymore mines, which is a mine you put out in the wire, and you can trigger it from your defensive position with a button.

I was out on one of those missions on the 30th of January of 1966 [when I was injured]. I was reluctant about that patrol but of course my job as a Marine leader was to follow orders. But, I'll never forget the hesitancy I had about going into that area. We had to cross a river and make a patrol route to see what was going on, was there any enemy there. It was a search and destroy mission. If we found the enemy or any supplies -- kill the enemy, destroy the supplies, etc. It being right after a cease fire, you know, and of course the bad guys, the Viet Cong and the North Vietnamese were also supposed to observe it but they never played fair. That's why I had that bad feeling about that patrol on that day because we'd been in that little base camp for a couple of days. They sniped at us at night and things like that. They did not keep the letter of the law on the cease fire. So it was my feeling that we were going to run into some trouble. I didn't realize we would run into what we did run into but that gut feeling I had was right.

The company commander and the battalion commander briefed me and said this is where you go and

gave me an overlay, which is a patrol route on a map. At certain checkpoints, I was to call in and let them know what was going on. So we proceeded on that patrol. [Eventually...] we were beginning to come into a cane field, which means you were blinded. Cane is quite thick and it's probably eight to ten feet tall. The only other way I could have gotten to the next checkpoint was to get in the water, in the river. I didn't want to. So the options were either get in the water, which was a no-no, go through the cane, which was also a no-no but the only other option. So I said I got a gut feeling about this thing. I call up my 60 millimeter mortar squad and have them fire six rounds into that area. The mortar being lobbed in so I had some go short and some go long to try to bracket the area to see what kind of reaction I would get. No reaction. So the next move was to say let's go. We're going to the next checkpoint.

About ten minutes into that cane field they ambushed us. The only thing that they did wrong was they triggered the ambush on the point element rather than waiting as we were taught. You wait until the main body gets in the ambush area. But I suppose that firing of those 60 millimeter mortars in there got them a little antsy and they triggered the ambush early. I don't mean that was a blessing but it was in a way because I would have had more men killed or wounded had they waited and done it the way it's supposed to be done.

At any rate, they cut down on us with automatic weapons fire, rifle fire and grenades and rocket propelled grenades. Of course old dummy here, as soon as we start drawing fire, I run up and move up further to guide -- had a machine gunner on the right flank and I called him up and had him put down fire and moved an automatic rifleman and an M-79 grenade launcher man over to the left to start trying to beat them off which we seemed to be successful at. Well, somewhere along in there, I got hit in the upper left leg and that hurt but I was able to keep moving and keep going. Then I got hit in the right hip and that slowed me down some more but I was still able to move and issues orders and that kind of thing and then I got hit the third time in the left lower leg and that shattered the tibia and the fibula. Yeah, the big bone and the little bone in the left lower leg and I went down. It was like a freight train ran over you. If you can envision one of these CSX trains going about a hundred miles an hour hitting you in the leg, that's what it felt like. So I was incapacitated. I did not lose consciousness. Wish I had because you can't even describe how it hurt. The other two gun shots hurt but nothing like that one.

Anyway, I was down so I had to call for my platoon sergeant to come up and he, every time he'd try to move they'd zero in on him. Then I see this little Viet Cong guy over there. He looked like a child, a teenager. Anyway he was aiming at me again to finish me off and I had probably one or two rounds left in my .45 and I was able to roll over and I blew him away. That might have saved my life because had he got off that round before I did mine, I imagine that one would have finished me. But I hit him and he died on the spot.

I was out of ammo by that time. So I said well by god I'm going to lay here and die. So, I had the strength to pull out my Ka-Bar, which is a Marine fighting knife. Now this sounds a little John Wayne but I'm telling you how it went down. So I pulled it out and I said well they're going to come over here and get me but I'm going to rake as hard as I can with this knife before I go out. I started praying and I said good Lord I know they're going to kill me but if there's any way that you will let me get out of here and let me get home to die. That was my prayer and of course here I am so that prayer was answered. But anyway we managed to beat them back and by that time I'd been on the radio. So they garbled the frequency on my radio meaning the Vietnamese picked up our frequency and all you could hear was Vietnamese on my radio. So I couldn't even get a Medevac in. So I called the aerial observer up there and his frequency was garbled. Called the 81 up there. His was

garbled. So we kept switching frequencies. Finally got a radio clear and I called it for a Medevac because I'd already seen one of my men dead and another one of them I went in there and pulled him back before I got shot down to where I couldn't move. He was badly wounded. So I needed Med evacuation and we got a Medevac helicopter in there and by god they shot it out of the air -- the enemy. Big red cross on the bottom of it, red crosses on the side. Geneva says, convention says, you don't shoot those but that's not how the Vietnamese play ball.

So they shot the first one down. We got another one in and by then the little old company corpsman had come up and he put a tourniquet on my leg but he put it between the gunshot wound and the upper leg and the lower leg and I said doc you're going to finish killing me. I said I got a wound here and you're putting the damn tourniquet between the upper leg and the lower leg. I'll bleed to death. He moved it up, got the tourniquet up. He'd already popped me two or three times with morphine by then. If it helped I don't know, I was hurting so bad. But he did the best he could. He was up there, he just flew over me with his little old body trying to protect me so he was a hero himself.

Anyhow, Medevac lands and they're trying to get me on there first. They made a stretcher out of two bamboo poles they cut down and a poncho. But I said, I'm not going on that helicopter until everybody that's wounded or dead gets on the helicopter. Load them first. They were arguing with me and I went to raising hell. I said no, they're all going to be loaded and then I'll get on there. So ultimately I went on there and that leg, left leg was dangling off. All of a sudden we start getting more fire. They're rushing to get the helicopter out. Those guys want to live, don't want to get shot, and we don't want them to get shot, don't want the helicopters to get shot. So they're throwing me in the helicopter as gently as they can while trying to keep from getting hit and they closed the cotton picking helicopter door on what was left of that leg. You talking about coming back to life with pain. It was just dangling there. That door is like closing a door on a van, you know. You know how those doors slide and close. It hurt. So I knew I wasn't dead because if I could hurt I was going to make it.

I went back to the Da Nang field hospital and I was out of it then for awhile. But I remember waking up during or prior to the surgery. They gave me a spinal to start doing surgery and by golly that hurt. I said to myself, I still got feeling but I was raising the devil with them for it hurting so bad. Then I remember waking up some time during surgery and it felt like my leg was on fire. I could see the surgical team. I didn't recognize anybody of course but I saw them and I said what in the H are you guys doing with my leg? Are you trying to burn me alive? That was all I remember until the next day. Sometime that next afternoon my company commander and a couple of the guys came over to the hospital to see me. Of course I was trying to be brave and tough and strong but I was weak and sick and all that sort of thing. I had a long leg cast on this left leg then.

[But the day I was injured and what followed with my men,] I live with it and I don't get down and out of sorts about it but I do blame myself for it. I was as cautious as I could be because when I fired those mortars I was suspecting something, I didn't ask for permission, you know, on the radio, so the company and battalion got excited about it and I acted like my radio was down. I didn't answer them. I'm glad I did because it might have saved five or six of us had they waited. Had we not damaged them some and thrown them off balance then they might have waited until the main body got in there and killed many more. I had five killed and five wounded that day from my outfit. I was one of the five wounded. [And knowing that, well,] it concerned me. It worried me. It bothered me. I don't know how to describe it exactly. It still does. You know, the story I would tell to make light of it is I zigged when I should have zagged. Sure that bothered me some but it didn't break me

down. I had to concentrate on healing and that kind of thing.

I was flown from that Da Nang field hospital to Travis Air Force base, no Clark Air Force base in the Philippine Islands. There I had two surgeries over a period of two, three days and they put a long leg cast back on. There I was able to call my mother. I told her I was doing fine. I'd be home in a few days. You know, making it sound not serious. So I guess after two or three days at Clark and the surgery and so forth I was flown from there to Travis Air Force base in California. Spent a night in the hospital there. The next day I flew from Travis to Montgomery, Alabama. I can't think of the name of that Air Force base and the hospital. But by then I was eat up with fever. But I wouldn't complain because if I complain they'll hold me here and I won't get home. So when the doctors would come around and check me out. How are you doing? Oh, fine, fine, no pain and of course I was popping morphine. Every time the nurse came by, whether I wanted it or not, I got it and sometimes I'd call for it. But the care during that period of time, the Air Force nurses that were on these aircraft were super. I mean they were kind and nice. That was a very caring experience because they knew more than I did about my condition. And I noticed the same thing with the other wounded that were on those flights, that they were real good to them.

After I left Clark I did not have any more surgery. That trip back was a bad thing. I should not have played the role. I was trying to, I didn't want to be sick because I thought they'd leave me somewhere along there. But I was eat up with fever. By the time I left Montgomery, Alabama the next day—this disappointed me. I've looked back on this in retrospect. They should never have sent me from that base in Montgomery, Alabama. But I look at it in retrospect. I thought what the devil did they send me from there for because they should have been able to tell I was feeble and high temperature and the cast was hot. You could feel it through the cast. Of course I wasn't complaining but I feel like they should have said wait, we can't keep this guy flying around through the air just to get him to the closest place to his home. I'm not bitter about it but logically it makes sense to me that they should have kept me at that hospital in Montgomery.

[Because] I knew I was losing it. I knew I was getting weaker and all this sort of thing I was so sick that I said well I'm going to die. I said I don't believe I'm going to make it and I gave up in a way. The only thing that kept me hanging on, was knowing that I couldn't fly another 45 minutes or an hour from South Carolina to Seymour Johnson Air Force base, which is right here at my home in Goldsboro. I got to Goldsboro and they put me on an ambulance to Camp Lejeune. All this time I'm burning up with fever. I finally make it to the Naval hospital in Camp Lejeune. Well there's my mother and my daddy and the whole crowd. And I saw them and I perked up a little bit then but I was really straining to do that because I was sick as a dog. Gangrene, had set in on that leg so I was out of it for several days after seeing my folks.

They immediately got me into some sort of surgery, intensive care, and they debrided the bone and flesh that had gangrene. That was about the fifth of February and I remember coming out of it. They beat the fever and stopped the spread of infection and I started feeling better. I had a fine orthopedic doctor there, getting back to treatment. He was a Navy doctor, a lieutenant commander and I had another doctor that I guess was his assistant. Both orthopedic surgeons. Both of them, one more serious than the other, but both of them fine guys and fine surgeons. So about the time I get to feeling better, and feeling like a human again he takes me down to this operating room. I was too weak to stand, sit up or to turn around. But he gets this big round mirror and puts it in front of me laying on a gurney and showed me my leg. Well there was bone coming out of the top part of it and bone coming out of my foot at the heel. That was the femur, the big bone. I'd say 24 inch section of the femur was gone. And the tibia was intact but it was chipped. He said well I wanted you to see

this because I want to tell you what I think and tell you what your options are. He said we may be able to re-fabricate this bone and do this leg and do this and that and the other he said, but you'll be in and out of the hospital for years and then I don't know whether it will work or not. He said, the other option is to amputate your leg just below the knee and we'll have you walking on a prosthesis in four or five months. I took another look at it and I said let's get rid of it. [I was] absolutely [glad that I was able to make that decision myself].

[But after all I had been through I still] wanted to stay in the Marine Corps. Believe it or not I fought to stay on active duty in the Marine Corps. Got congressional help on that. I healed and got well at Lejeune and used crutches and a wheel chair initially. Of course I didn't have the strength for crutches and then I did physical therapy and I got the crutches and did well down there because I wanted to heal and was doing all the things that I was supposed to do to heal. But it was not all pleasant because I had a lot of pain with that leg and I had phantom pains unbelievable that hurt as bad as real pain. I still have phantom pain. In other words, I feel foot and leg down there and it's not there obviously but those are real. But like I say I don't have them day in and day out. Sometimes I won't even notice it for I don't know how long. I might be standing up or I might be sitting down and pain will go into that foot and that lower leg and I mean it will almost take your breath. Even 43 years later. Can you believe it? But it's amazing. If people think that's junk then they don't know what they're talking about. I've studied it and read a great deal about it and all of those scientists and physicians, agree that it is real. It's not something someone fabricates.

Yeah, I was getting well, doing good, and I came home from the hospital in April on a weekend and my father built a ramp so I could go up the ramp on the wheelchair and get in the house and I enjoyed that and had lots of visitors. Of course I had too many visitors at Camp Lejeune because I was getting well and I was weak and people would come in with good will but they would wear me out. Of course I was trying to play John Wayne and entertain them and be strong and tough acting and looking and all this sort of thing. But boy when they'd leave I broke down. Totally out of energy. Wet with perspiration and whatever and I said I don't need to do this. But anyway I got well.

Then I went to the Philadelphia Naval hospital. My mother went with me, family went with me up there and took me in and the ward was full of amputees. Many of them in there were fresh wounds. You could smell the death in there and the wounds and the blood and the rest of it and hear the young guys in there moaning and hurting and crying and that was not good. But I only stayed there overnight and then they sent me out to a ward where the healed folks were and were getting fitted for their arms and legs, etc. I was there only about five weeks. I was walking well. For years I had a barely perceivable limp. Many people that didn't know me never knew I had an artificial leg. I'm a little older now, a little heavier, so the gait's not as good but when I got back to Camp Lejeune people that were there, just remarkable, they couldn't believe it. Some of them recognized me and they could not believe that I had an artificial leg. I took pride in that.

The injury itself I don't think changed me [as a person]. I can't deny that I've never given the outward image, to anybody about the problems other than my mother or former wife. So nobody really knows except myself. Sometimes over the years I've been ill about it because some days I have infection in it, couldn't wear the prosthesis, won't go out in public on crutches. So I'd have to wait and let it heal. So I've been ill about that a few times and things I want to do and I'd get in a hurry and can't do them. I'd get a little angry about the whole situation with it. But not bitter or mean spirited. But sometimes I say what the hell am I doing in this fix anyway. That kind of thing. I've dealt with it well. I mean that's not bragging it's just the realism of having lived with it for 43

years. But I've been disgruntled about it and of course I miss being able to run. I've had the urge to run. I still do. Even at 67 years old. I'd just love to take off and run but I can't do it and I live with that. Sometimes I've thought about what I missed because when I got wounded I was 24 years old.

[But...] as I say I wanted to stay in the Marine Corps. I was that gung ho and that eat up with the Marine Corps and I wrestled with that for a long time and then I came home on convalescence leave. Well, let me go back a minute. When I went back to the hospital at Lejeune I had the run of the place. Then they assigned me to an administrative company. Well the governor came to see me and the general fell in love with me so I had it made in the hospital. I got great attention. See, this was early in the war. There was only one other Vietnam casualty at that hospital. It wasn't like I was at Oakland or somewhere where there were hundreds of wounded. Of course later at Lejeune more and more came but this was in '66. So the atmosphere was good. I was treated like a hero and got great care. I had excellent care. In fact my wife got jealous of the nurses down there. She was just a jealous person anyway. I got so much attention when she'd come down there she'd get aggravated and I wasn't happy about that. I thought that was a little narrow minded considering I just come back to life. But yeah, care was just great at Lejeune.

At Philadelphia Naval hospital it was excellent. They had not had such an onslaught since the Korean War and of course the number of amputations and all from the Korean War percentage-wise were way lower than Vietnam. Vietnam was that kind of a war, you know, booby traps, mines and so forth. I was blessed I didn't get the mine business. But I had many of my troops wounded up prior to this date, from booby traps and mines that got maimed up terribly. That was always a bitter pill to swallow.

Now, life changing. You were asking me did it change. Well, I was gung ho. Thought I was going to stay in the Marine Corps. Even got the opportunity a year later to go visit the chief of staff of the Marine Corps and discuss it with him and the secretary of the Navy was going to change the policy and my son was born and was already working. I was working while I was on convalescent leave. I was an insurance agent. I liked that and then finally in March of, February of '67 I got orders that I was going to be medically retired from the Marine Corps. Well I didn't give up the fight because I was called back to the headquarters of the Marine Corps in '68, talked with the chief of staff and we talked and I couldn't make up my mind. He said take your time and think about what we discussed. So I wrote him maybe three or four weeks after I got back and declined the opportunity to go back in.

I have family support from my mother and my father and other family members. Some from the wife—not exactly what I would like to have had from her. Plus I just felt like it was my job to get out and do it and start getting back in the mainstream of life, whatever I was going to do. So I got involved in the JCs, veterans' organizations, the church. I think I left out that I said if you'll let me die at home I'll be a good boy the rest of my life. Of course I didn't do that but I started doing it. I was active in the church and was the president of the Methodist Men's Club and president of the Young Adult Sunday School class and on the board of the church, for several years. When I say several I'm talking from '67 on through about '71 or two and then my wife nagged me so bad about things because I would drink some. She said I was a hypocrite so I said well hell I'll give up the church. I don't mean give it up by I gave up leadership and responsibility.

[And around that time I was suffering from PTSD]. I didn't know I had any symptoms. I went to the VA in April of 1967, about a month after I was medically retired from the Corps and they called me up to Winston-Salem, North Carolina for an evaluation. I went and they checked the leg and the gunshot wounds and then they sent me to another doctor. I didn't know it was a shrink but it was.

I'll never forget the guy. So I went in and I tapped on the door. A voice said come in and I went in, the guy was looking out the window with his back turned toward the door. He was at his desk but his back was turned to me and he asked me maybe a half a dozen questions. So I said what's wrong with this guy? I didn't know he was a shrink. So I had a friend that worked up there that was the VFW service officer. So I went down and said Bill, who is that guy I just saw. He laughed. He said don't worry about him. He commits himself to Salisbury--which is the mental hospital in North Carolina for veterans--every year for six months and then the other six months he practices up here. I said well okay, now I understand.

That was my first brush with anything like that so they rated me for anxiety reaction out of that examination—those six questions he asked me. Of course he had looked at my file. Somehow or another he determined that. It was rated 10% and then they rated me for all sorts of things. In other words, I got much more money than I got from just the retirement in the Marine Corps. But money didn't mean anything. I was so naïve that I didn't even know what the VA was when I went in. I thought that to get a retirement check you had to spend 20 or 30 years in the Marine Corps. I didn't think about what happened, you know, what people did that got wounded or broke down. I didn't realize they got paid. How naïve is that for a pretty old guy considering the age of the rest of the people that went in there and bound to be unknowing about it. But anyway I got more money there from the VA.

Several years later my family doctor kept telling me I needed to go to a psychiatrist and I said why. He said well, you know, you drink too much sometimes and you do this and you do that. Never got into the drug situation, thank God. But I drank and that wasn't a daily thing. That was an occasional but I'd tie them on and that was not a good thing. So finally I went to the psychiatrist. First time my wife and I broke up in '74, Momma convinced me to go to a marriage counselor and I went, myself and my wife, and we went in and talked with the guy separately and trying to see if we could get back together. He called me back in later and he said you've got some other issues that I wanted to talk to you about. I said, oh you're going to talk to me about Vietnam. He said, well, I think you need to talk to somebody about it. I said well I'll make an appointment with one back home. I just didn't want to see one. Had a time getting convinced to go to that marriage counselor and that was useless. All we did was take a test and the guy asked us a couple of questions according to my wife. We got back together again for three or four years. Long enough to have another son who was born in 1980. My first son was 13 years old when he was born. But that was not a mistake. The getting back together lasted until '84.

I've been going to a psychiatrist for about 11 years now. I really waited a real long time because I needed the guidance and the medication and things way back in the early years. I didn't realize that, wouldn't admit it. It's just like you hear about the stigma in the military that was going on for centuries and they're trying to override that now and trying to do something about it, correct it, so that people don't feel like the stigma to go see a shrink or a psychiatrist, psychologist, whatever it may be. I think that's a wonderful thing because when I was in the Corps you didn't even go to sick bay unless you were about dead. Much less if you mentioned going to see a psychiatrist. You were worried about your promotion. You worried about the chiding from the other troops or everybody looking at you with a jaundiced eye and that sort of thing. I had the same attitude. You hear about somebody going to a shrink you said uh-oh, we've got to watch this guy he may kill us all or something. So that stigma has transcended many years and up until recent years and I think it's getting even better.

These troops that are coming back now with TBI, Traumatic Brain Injury, and PTSD are encouraged

and they have officers and senior NCOs and medical people assigned to put them at ease to go and they're assured that nothing will be detrimental in their records if they go and get these things handled. See this will prevent murders, beating up of spouses and children, and all that kind of conduct that has gone on in the past. You probably know that these recent wars in Afghanistan and Iraq, there have been a number of those kind of things happen. So they're making it easier for guys to get treatment without fear of ruining their records. That's a good thing.

Matter of fact everything is going better about this war. I think it's because we're smarter now. I think generally the population is smarter and some of these things that were unheard of 20, 30, 40 years ago now are not world ending things like well you're going to a psychiatrist. Something's bad wrong with you. Plus we've got these wounded warrior programs at Pendleton and Lejeune where these guys can get in there and exchange stories and adapt and adjust and get back into the mainstream. I did all this by myself. I didn't have any help because we didn't have those programs. The military nor the VA didn't have these programs that they have today and I'm proud of that. I think it's wonderful because they're going to help these young men and women and they're going to make life better for them and they're going to prevent a lot of injuries and deaths, broken marriages, broken homes, and all that sort of thing by making this an open policy for that type treatment. A mental problem is just like having a broken foot. If it needs treatment you need to see about it.

[Looking back, even with being injured...] I feel thankful and grateful for being given these 43 years. Thankful that I survived. I have had all good intentions of doing everything perfect but I of course realized that's not possible but you can strive. I've been a good father even though it's been a broken up situation for the guys but I love them and they love me and I know that I've been as good as I could be to them as far as being the father and materials things.

The most challenging [aspect of my injury] would be the aggravation of having to go get new legs. They get ill fitting after awhile and they break. Because if you use them they just don't hold up and I've always been active. That's aggravating. But it's a routine thing. That always aggravates me. In fact I've got a guy now out of Charlotte, North Carolina. He comes down and fits me at the house. Well I've got a leg right now that's ill fitting. I've needed a new one for a year and I procrastinated on that when all I've got to do is call him and he'll come at my convenience. Before I always had to go to Raleigh or Winston-Salem or somewhere to get the leg and make a trip there for the initial fitting, a trip back for the temporary fitting, and a trial fitting, then another trip there. Then a trip to the VA for the VA to say okay and all that sort of thing. So that's been the aggravating part of it. It's not that terrible. It's just that I'm busy. I have been busy all of these years.

But that's it. The aggravation and the limitations it puts on you. Even though I'm thankful that I'm able to go and do what I've been able to do and still am, I still get those days when I wear out quicker and have to sit down, have to slow down, because of that leg. I'm not happy about that and have been right along.

[Today when I think of the veterans coming home from Iraq I believe] that the care and the attention to detail and the type of treatment and all that this generation of warriors are getting is so far above what we had and I'm happy for them. I wish that all of these things had been available 40 years ago. I think I would have done pretty well but I think I would have done better with that type of concern and genuine concern for making sure everything fits right. Are you getting this, are you getting that. Half of the things that were available to me then I didn't even know about until after I'd been a veterans' officer and learned about it through study and seminars and continuing education, that kind of thing.

Profile of Mr. Keith Lewis (Above the Knee)
(Original Interview Transcript 40 Pages)

Mr. Keith Lewis lives in the Eastern US and was born December 21 1950. He enlisted in the United States Marine Corps in 1968 and was wounded April 3rd 1969 in the I Corps portion of Vietnam. He is a left leg above the knee amputee and currently uses a prosthesis device. He is married with three children. Mr. Lewis reports his health status as good. He reports heart disease, stump pain, phantom pain, phantom sensation, other pain, depression, PTSD and other unspecified mental health problems. The interview was completed on February 1st 2009.
This is Keith's story.

[During the six months prior to entering the military] I was in high school. I went from high school right into the service. In 1968 when I joined the Marine Corps you could enlist in the Marine Corps or the Army if you had written permission from your parents. I was 17. [I was living at home and] I was probably a typical 17 year old. I was growing up, turning into a man and that kind of thing. I wanted to go to college at the time—[but] I came from a family of five kids so there was not a lot of money for us to go to college. So my ambition at the time was to go in the service and either have a career in the military or perhaps a military-related career like the FBI—that kind of work is what I was interested in. [It was also] a family tradition. [So I joined the military, and I was sent to Vietnam]. [And I] went right into combat. [I was in combat during the four months prior to suffering my injuries and] . . . It was intense. [And at the time] I was a radio operator.

[On the day I was injured] we were on a search and destroy mission. We were moving in a platoon sized formation. [The terrain] was pretty rough. It was mostly hilly. Mostly rice paddies, sugar cane and elephant grass so you couldn't see very far. You couldn't see more than a few feet in any direction. [And I was injured when] we were moving towards this position that we were going to attack across a river and we were walking down a hill and that's when I stepped into what they called a box mine [or] an artillery shell that was unexploded. It was actually set to be tripped by a tank but I had the misfortune of stepping on top of it.

[R]ight away [I realized what had happened]. When I stepped in it I told the guy behind me to get down. It had about a two to three second delay before it went off. I knew right away what I had stepped on...and it blew me through the air. I landed on my back. I knew my leg was gone. I never lost consciousness throughout. From the time I stepped on the land mine until the time they Medevaced me out I never lost consciousness. They put me to sleep when they got me to the first Naval Air Station in Da Nang which is where they took me to. They Medevaced me and that was about an hour after I stepped on the land mine. It took about 45 minutes to an hour for me to be choppered out. [Others were injured in the explosion]. One man was killed in front of me and one man was wounded behind me.

[So] I have what's called a left AK. On my left leg, above [the] knee, I have a three inch long stump. [Also] my left hand and arm were full of shrapnel and they had to do a lot of debridement. I had like 300 stitches in my arm and hand. I came pretty close to losing a couple of fingers. Pretty close to losing my arm actually. And then shrapnel in my right eye. And shrapnel in my lower body and mostly in my buttocks on the left side of my body, because that's where I stepped on [the] mine. There were some burns associated on the arm but most of it was where the skin and the muscle tissue were torn apart from fragmentation. I [also] sustained tinnitus in my left ear. So I have a constant ringing in that ear which was a result of the land mine explosion. [And today] I wear a prosthesis.

[But treatment for my injuries began on the field]. They put a belt around my leg right in my groin area—of course to stop the bleeding--and gave me a couple of syrettes of morphine and pretty much that was all they could do for me. They wrapped what they had for my arm. My arm was kind of blown apart. But the leg of course was the most life threatening thing because of bleeding so they cinched a belt around my upper leg and that stopped the bleeding sufficiently enough that I didn't bleed to death. [During this time I remember thinking] that I was going home. That's pretty much all I was thinking at the time.

[But I don't remember the treatment that I received in the hospital near Da Nang]. I remember being received at the hospital and I remember waking up a couple days later and being told that they were sending me to Japan. That's about it. [Initially there were things I remembered about the whole experience]. I guess to sum up what I remember most about it except of course the explosion, was the smell of cordite and blood.

[Also, at the time] I guess initially I felt there was blame [that should be placed on someone for what happened to me]. We were actually supposed to come out of the field that day to go back and resupply and our commanding officer decided to keep us in the field. So initially my thought was that he was to blame. But in retrospect, this is part of what combat is. So no, I don't blame anybody including whoever set the bomb up there. You know, this is what happens in war. I think that they don't realize the effect it has emotionally on people afterwards and for many years. For me the war is not over. Every day I have a reminder. Leaning up against the wall when I go to put my leg on is the result of combat and when you're 18 like I was when it happened, there's a more fatal feeling about it. I pretty much thought my life was over and considered suicide many times afterwards because I didn't think that I would want to live that way. Since then of course, I was one of the lucky ones I guess. I managed to find reasons to live and fortunately had a lot of help from friends when I initially came home that helped me to change my mind about whether I was going to be able to live with this or not. But yeah I guess in any situation you can blame being in the wrong place at the wrong time or the company commander who decided we were going to stay in the field and all that. But the bottom line is that this is what combat's all about.

[After the field hospital near Da Nang I was then taken to Japan. And I don't remember anything about the flight there]. I was pretty much out. They had me pretty well doped up with morphine. [But as far as treatment in Japan goes it was mostly] debridement....It was actually bad enough that when I got to Bethesda Naval hospital they wanted to do a hip disarticulation and I refused that. I wanted to save as much of my stump as possible.

[I had also suffered injuries to my eye due to the explosion, but I didn't receive any treatment for it]. No, in fact, they looked in my eye. I told them I had blood in my eye and unfortunately it wasn't probably until I was at Bethesda Naval Hospital almost two months before that anybody actually found anything wrong with my eye. It wasn't until later that the true injury was discovered and what it was. That took a long time for them to find that.

[Prior to being in Bethesda Naval Hospital, I was still in Japan and] I was in an Army hospital. I remember dealing with one nurse and one doctor and it wasn't pleasant for me. I smelled bad because of the infection I had. I didn't really want to be around people. The nurse would come over and try to talk to me and stuff. I pretty much alienated the medical people there. By that time it was starting to sink in what had really happened to me. Yes, I was going to live and yes I was going to be this crippled person the rest of my life, you know, and probably mostly what went through my mind

is [that] I'd never have any kind of relationship with a woman. That kind of thing. Because when you're 18 that's what goes through your mind. That's what you're thinking about.

[So I was feeling rather depressed about my circumstances, but I didn't receive any counseling there in Japan. And I don't think the medical staff recognized my psychological problems because] I think they were so used to dealing with so many people in the same situation that they didn't have time for that, to be honest. You know, it took me a long time to think about that part of what I didn't get. I didn't have that at all until the time they finally sent me home. I had no counseling. The only counseling I might have been given was by medical personnel there and it was pretty much, you know, if you complained they would kind of tell you look around. There's people in worse shape than you and it was true. So in that respect I guess they helped me stop feeling sorry for myself a little bit but they were too busy trying to deal with the infection and all that stuff to have time. I guess maybe a couple of evenings [later on in my treatment] when I was at Bethesda [and] a couple of nurses actually sat down and talked to me but they were young women themselves and I'm not sure they were emotionally equipped to handle that aspect of it. You know, they were so much more involved in the medical part of it. And I know it was tough for a couple of those girls too because I'd see them cry. I knew it was an emotional thing for them.

[And I was there in Japan for about two weeks. After I was flown out of Japan I eventually ended up at Bethesda and] I was there six months. [And at Bethesda] I was on a ward with three other guys. We all had bad infections. I was on that ward until I didn't have a bad infection which took about four months. During that time they just performed more debridement operations on my stump. I think I went through four of those. And they basically made me work with my arm and my hand to try to bring that back. I'd lost a lot of feeling in it and there was atrophy from not using it. When I finally got to the point where I had little infection left, they started putting me in a whirlpool with Betadine solution to help clean out the wounds and everything and finish up the infection part. Probably the therapy I had for my arm that was the best was when I was in the whirlpool because it was hot—well it was heated water with air blowing through and Betadine and it seemed like every day I went through that--and that was about three weeks of that—my hand and arm improved dramatically during that period of time. With my leg there wasn't much they could do about it except wait for it to heal and that took a long time.

[And] they had performed like four stump revisions on me and basically as soon as [I had] no more pseudomonas infection they let me go out on the main ward. So...some time in August I went out on the regular ward and I went from being bedridden to a wheelchair and then from a wheelchair in short order to crutches and the crutches was to help me strengthen my other leg to prepare me to wear a prosthesis. They moved me along pretty quickly as soon as I started getting up out of bed and was able to clean myself, go take a shower, do that kind of stuff. I was in a wheelchair most of the time but that was because I still had a small drainage area in my leg. It had pretty much healed up. In fact, they sent me for my first fitting and when I went for my first fitting they sent me back to the hospital without doing a fitting because the guy said I was a little bit swollen and he said we don't want to take a cast of your stump until you're completely healed and your stump has been wrapped for awhile to get it down to the size that they wanted it to be to work it into a socket. I was a very difficult patient because like I said, they wanted to just do a hip disarticulation. They didn't think I would be able to handle an AK because my stump was so short.

[But they fit me for a prosthesis at Bethesda before I was discharged,] but you know I hadn't really gotten my leg. I think I probably wore my leg maybe a week before they were ready to cut me loose and send me home. So I had very little time walking with my prosthesis and of course I had to use

crutches to do that. In fact, it was months after I was actually discharged that I walked with a cane for the longest time. It took going to work for UPS for me to get away from using a cane. But I kind of progressed from the wheelchair to crutches to sometimes wearing a prosthesis using the crutches and then to walking with the assistance of a cane and then eventually without the cane. But they had to make a locking knee for my leg in order for me to do that. [And then I was discharged from Bethesda when] I was still 18.

[Before being discharged, when I was at Bethesda I had family and friends come visit me]. Yeah, I had family and friends. Most of the friends that came in I really didn't want to see...because of what I was. I just had a low self esteem at that point. I really didn't want to be alive at that point to be honest with you. Didn't want anybody seeing me like that.

[I also received my purple heart at Bethesda]. They sent a general up there to the hospital one day and he pinned it on me and we talked a little bit. He apparently had served pretty much in the same area that I was as in a more junior officer at the time. I guess he would have been a full blown colonel at the time he was there. But there was no formal ceremony. I was on my hospital bed and he came over and pinned it on and we took a picture and that was it.

[In the end I had psychological needs that were not being taken care of, but other than that the treatment at Bethesda was very good]. It was the best. I mean other than the psychological part of it. The medical part of it—probably the best. I never felt like I wasn't getting the best treatment that was available. [I also interacted with the other wounded soldiers much more than I did during my stay at the hospital in Japan]. Yeah, after I was allowed to be on the ward [I had a lot more interaction with other soldiers]. There was like close to 40 people on the main ward. It was like family.

[And interacting with the other wounded soldiers was both important to me and beneficial]. Some of it was sad because you know, I saw guys come in there who lasted maybe a week or so before they finally died. That part wasn't very good but again, you know, I guess at that point in time I was toughened to the idea that I was one of the lucky ones that was going to make it and that there's a lot of people they brought in there that were in worse shape than me.

[So the psychological aspect of my recovery was difficult, but there was something that occurred during my stay at Bethesda that helped me]. Just before I was discharged I met a beautiful girl. I'll never forget her. She came up to me and wanted to talk to me because she had a friend they had just brought into the ward. He had one of his legs blown off. The other one partially blown off and his arm and hand were somewhat like mine. Only I think in the long run it ended up being worse for him. He had more damage than I did. At any rate, she came up to me at the hospital there and said she wanted to talk to me because I was one of the few guys on the ward that was an amputee and I think that's probably when and where I started to see myself differently. That here was a beautiful girl that wanted to talk to me who was not put off by the way I looked and whom I dated for well over a year after I got discharged. She probably gets most of the credit for making me feel like a man again. Because of the fact that she associated with me. So that might have been the best therapy I ever got.

[There were other challenges that I also faced during my recovery]. I missed out [on] a lot of [experiences because] while I was away a lot of my friends were getting jobs and [had the] we're not in high school attitude anymore lifestyle and I guess I missed out on some of that so I was trying to make up for some lost time there. That was probably the biggest challenge because I was still trying

to mend my mind so that I could be normal. If there was a normal anymore. The next biggest challenge was of course going to work and I did manage to do that and after I managed to go to work then things continued to get better for me. The first job I had was at United Parcel Service [where] I was a payroll clerk. [But learning to walk with a prosthesis was also difficult]. Yeah, that was the biggest problem and when I went to work at UPS I had to be able to carry packages and move them around and do that kind of thing. The biggest challenge at that point was getting a leg that suited me.

[And there were a lot of physical and psychological consequences to being injured, but when it came to the responses of my friends and family to my injury, I don't remember there being that much of a response] because to be honest with you I think they were afraid to talk about it. Probably afraid to ask me questions about it and to be honest with you I'm not sure I was ready to talk about it. It was something I was trying to push aside or leave behind. So it wasn't until maybe years later that I had people who had known me before I went in the service who would even attempt to ask me questions about what was going on with my leg or how it felt or anything like that.

[So after I first got out of Bethesda I went home and lived with my family] for a while. I moved back home [with] my parents and probably stayed there about nine months before I found a friend that had an apartment and I moved in with him and that was better for me because like I said, I was trying to make up for my social life and my mother (laughing) being a mother, she worried about me all the time so of course it was easier for me to live away from home where she wouldn't have to deal with that every day. [And making up for my social life entailed] running around, drinking, carrying on with my friends. You know, not having a care in the world. Not working. I mean I tried going to college even early on and I was not successful right away with that.

[And for the first few years prior to working at UPS] I wasn't even worried about finding a job. I was living off of my VA disability [and] I wasn't sure what kind of a job to even work in because all I had was my high school background and my military background and there weren't a lot of jobs that I could apply for that I could utilize most of that to get a job. UPS was the first job that came along [that] I could do. [Also, my disability was rated at 80% by the VA and I had a difficult time getting into their system]. It was six months before I got anything out of them. My records were lost, the whole thing was a major screw up from start to finish. It was at least six months and I guess if there was something that really should have been done before I got out of the service [it should have been] to have all that in place before I was discharged because I can't really describe in words the difficulties and how I felt about all that. Here I was clearly disabled, and applying for VA benefits and was being told things like your records from Bethesda Naval hospital have been lost or they never got here or we don't know what happened to them. And I feel like that's one thing the military could have done better for me before they even discharged me is make sure all that stuff was in place and happening. Because technically I was living at home off my parents and unable to even pay them rent money which didn't help my self esteem very much.

[But at this point my self esteem was helped because I was dating the young lady I had met at Bethesda hospital]. Yeah, I dated her about a year but she was just graduating and I had met her parents and her dad was an Army man and her mom was a snob. (laughter) I think she influenced her daughter and rightfully so. I'm not trying to be smart about it because she always treated me nicely but in her defense I could understand why she didn't want her daughter, who was just getting ready to go to college and get a career, to be involved with someone that had little or nothing going for them like the person I was. [And at that point I was basically socializing with my friends, just hanging out and drinking and things like that].

[But] I was out of control. I still believed that I probably was trying to kill myself. Some of the stuff I did was typical of what you would expect of an immature kid instead of a man who had been involved in combat. I'm not particularly happy or proud of those days but that's who I was and that's what I was doing. It wasn't until I left UPS and went back to college before I started to feel like I was heading in the right direction. And strangely enough, I was a veterans' counselor...at Hagerstown Junior College for six years and I had to help other veterans get their VA bennies and to be honest with you that is probably when the clouds really started to lift. I had self esteem. I would have worth. I had value. I meant something to the people I was helping and in turn that helped me because that was maybe the biggest obstacle of all in looking back on it. It wasn't the physical part as much as the mental part of it. That was the part that really took awhile and that was the part I was running from when I came home and I was running around with my friends and drinking and partying and trying to forget my problems. What I was really doing was running from my problems more than anything. That's what I would say.

[So my injury did influence my understanding of myself as a person. And] well, at this stage I'd have to say that I am the person I am today because I'm a better person for having to have to learn how to deal with that. I was one of the lucky ones. I was lucky that I lived and I was lucky that I learned how to live with my disability. [But when it comes to how I actually learned to live with my disability...] there's no real quick answer for that other than like I said self esteem, friends who treated me no different than they had when I had two good legs. Probably went a long way in helping me accept what had happened to me and moving on.

[And there were other things I had to accept, such as how the nation was divided about a war that I had just fought in and was injured in]. Like anything else I learned to accept that. I was spit on when I landed in LAX to go to Camp Pendleton. Called a baby killer and of course I hadn't even been overseas at that point. Was not even 18 yet... [But after I returned from Vietnam], I wasn't particularly happy about [the anti-war sentiment in our country,] but you know, I recognized the fact that part of what I believed in was the right for people to freely stand out in society and say what they thought about the war and then things like that. So whether I agreed with them or not wasn't really the point for me. It was the fact that I just wanted them to have respect for me as a person...[But] whether Vietnam was a good or bad thing, you know, only history can tell. For me I'd say it was good and bad. It made me the person I am today which I probably am a better person than I would have been if I had not gone in the service and had managed to do some other things. I don't think I would be the person that I am.

[Becoming who I am today was difficult though, and my injury definitely affected my plans for the future because] when I was still at Bethesda Naval hospital they sent the Under Secretary of the Navy around for a visit one day and I wanted to stay in the military. He came up to me and asked me if there was anything he could do for me and I said is there any way I could stay in the military. I'd like to make a career of it. And of course at that time if you were an amputee there was practically no way they would even consider it. So I guess that hit me like a ton of bricks because I felt like, physically I couldn't have done what they expect but mentally I could have with the right education and training I could have still been a successful career military person. And that was like the last brick. When he told me that there was no way that could be done I guess that maybe that was the worst part for me. It was like, not even the military wants me now. So what good am I? That's the way I felt. That's the way it hit me. [So it was also difficult when I was officially separated from the service in October of 1969.] That was pretty difficult also because like I said I was part of a big family. It was strange. I wanted to get out of the hospital and as soon as they cut me loose I wanted to be back in the hospital with people I felt comfortable with, who accepted me every day with my

leg missing without question because that's who and what we were. That was my family. Doesn't that seem strange to you? It does to me even hearing myself say that and knowing how badly I wanted to get the hell out of the hospital it was like this is strange you know. I couldn't wait to get out and when I did I felt like I wanted to go back [because the other soldiers there understood me and accepted me]. Yeah, it was the acceptance. I was part of a family there. [So when I got out, acceptance was] absolutely an issue to me...Absolutely. [I actually tried to find acceptance through different ways after I left the hospital]. I started hanging out with some people who were still around who hadn't gone off to college and still lived in Hagerstown and had jobs and in these weekends we partied and so that became my new family, the people that I was partying with and I guess I was gaining new acceptance in that way. But it certainly wasn't helpful or beneficial for me. At the time I didn't realize that but I didn't care either. It seemed like the right thing to do. Like I said in retrospect I was spinning my wheels badly trying to make up for something that was never going to be made up for and that's why having a job and doing that kind of thing and trying to get back to college made me feel a little bit more like I was at least trying to be normal again. But I was still struggling with the acceptance thing. Yeah, that was a big part of it.

[And while at the time,] it never even occurred to me, [but PTSD was playing a major role in what was happening in my life]. I did [suffer from PTSD]. I had dreams. All the stuff that I learned about later on, I had a lot of that happen to me initially. [I had bad dreams] all the time. Constantly. Yeah, it was at least two or three years down the road before a lot of that let up and I think it didn't really let up. I just hid it well. When I went through my first divorce I came crashing down again and I had probably had never gotten the full measure of the steam that I needed to continue on. It was just another failure and I was to blame and I think that was part of my, what they would call, PTSD. I had no one to talk to. I had no one to relate to. I was alone and so alone [and I] contemplated suicide most of the time.

[And this continued into the early 1970's] even when I was working at the college. I don't know, I was never really mentally settled but I was doing something that meant something to me and was helping other people. So I delayed that reaction to what would be commonly referred to as PTSD. I dealt with it. I drank. I took drugs. Whatever was there to make me forget about it, that's what I did. Never really dealt with it in the open until my first marriage went down the drain and then the reality of it was that I had a bigger problem I needed to deal with and that's where the PTSD thing really kind of came out for me. I would say that would be in the late seventies to early eighties when I finally made that transition to recognizing I had a problem. [But I ended up spending a lot of time drinking and using drugs to self medicate]. [And my state of mind at that time] absolutely [affected my first marriage]. I won't say it was 100% of the problem. I'll just say that it affected my ability to carry on a normal relationship.

[There were other issues besides the psychological ones as well. My injuries changed my life chances because...] to put it bluntly, I've always been a very physical person and the physical limitation of having one leg was extremely difficult for me to accept. I've always been an outdoor person. I was always active. Always. And I think that what hurt me the worst was the fact that I couldn't physically get out and do a lot of the things that I really wanted to do. Now some of that changed as time went on and I got better physically, that I did learn, yeah I could still go. I went canoeing. I went fishing. I waded in the Potomac River fishing before with an artificial leg on. Not a lot of people would even try that. In fact, for a long time that's all I did was fly fishing but I call myself more of an all around fisherman now. But those kind of things were difficult right away because like I said the first year I got out and I still had all the physical limitations that I had pretty much when I was in the hospital. None of that really changed that much until maybe I attempted

college. The job at UPS—the guy hired me because he says you seem to be qualified in all these areas but one and I say which is that? He said I need you to go over and pick up this package that's laying in this bin and carry it over here. If you can't do that I can't hire you. So with my crutch I went over and did this but that's when I realized that I had to do something else about my leg. It wasn't working for me. So maybe that was the biggest turnaround after that initial first year when I finally got a leg that was locking and I could throw the cane away that I started making some leaps and bounds in my physical recovery. I started discovering I could still do some things that I had pretty much given up on [like fishing and so forth. I began to do different things.] I remember going hiking with friends of mine up in western Maryland and they helped me climb up these rocks and everything. Those were the kind of things probably that were most healing to me and that I had friends that bore with me even though I had physical restrictions. I think they helped me get over a lot of that and start saying hey, maybe I can do this stuff and I'm not restricted. That's why I started working construction, believe it or not. The last job I had before I retired pretty much is construction and people were always amazed when I'd tell them I did that. You climb ladders and yeah, I do all that. I finally had gotten to the point where I took all that for granted. If I'd have been able to learn that the first year I was out of the service—wow—it would have been quite beneficial.

[And today] I'm hoping that maybe some of the things I say will influence people to understand that it's really critical to take care of a person mentally and physically and yes, the third part would be to make sure they don't have to worry about where the money's coming from so they can kind of start getting back on the road to healing. [My road to healing was long, as I was improving psychically the first year or two, but] not mentally at all. I was just partying too much. [And I still dealt with contemplating suicide but] in those days I didn't dwell on it very much. It was like always in the back of my mind but I was being successful running around with some of my friends and getting positive feedback from them even though...the only thing we had in common was we were partying. [And accepting my injury was difficult for me because] I didn't want to be a one-legged person anymore which was so obvious when I wasn't wearing my artificial leg. Once I learned how to walk with my artificial leg, most of the people that met me [said] oh, you hurt your leg but most of them didn't guess that I had a prosthesis.

[But today, looking back at the first 12 months of my treatment, I can say that the medical care] was great except for the fact that they didn't find the eye problem right away. The rest of it was great. The doctors, the nurses, the corpsmen, I can't say enough good things about them. Like I said, maybe it is because I accepted them because they accepted me. So that's the way I felt. I have nothing bad to say about any of it [except] maybe one time. Yeah, I was addicted to morphine right away and probably one time I had a negative thing with a nurse who basically came back one day and announced to me that I was a drug addict and that they were going to take me off of morphine...[And] I was addicted. They helped me get there and then I had to go cold turkey off of morphine. Do you know how difficult that is? [And because I was addicted to morphine I didn't abuse opiates once I got out of the hospital]. No, I learned my lesson the hard way with that. No, I was smoking pot. I was drinking. That's about as far as I went with it. I had friends that were doing other things. I didn't do what would have been called the harder drugs back then because I didn't need to. If I smoked a joint or got drunk I was happy and you know, I didn't feel like I was taking some risk like some of my friends did.

[But looking back on all of my experiences, well,] you know, to be honest with you I haven't thought about a lot of [the things I went through] until today because I pushed a lot of that so far back in my memory that I learned a long time ago to think about the good things that were happening back in those days and the bad things that were happening I kind of try not to even think about them or dwell

on it because they don't help me. [Throughout the years I have done things to try and help other people, though]. Of course I had been a veterans' counselor and I had been through encounter groups and all that during my time at the junior college but most of it was not from a point of view where it was helping me. I was helping other people. I was the one helping form these encounter groups and back in those days the VA, if they were involved in it, they only had it in certain satellite areas so it wasn't available in the area I was. Veterans that I knew came together pretty much on their own and did it for each other. I guess some of the guys recognized that they needed some help in that area so we had these encounter groups. Most of it didn't benefit me because it wasn't about me and I'd never made it about me. I could have but I guess the way I dealt with it for so many years was to just put it in the back of my mind. When my first marriage came apart that's when, I couldn't hide from it anymore. It was there staring me in the face every day and I had to learn how to do something about it and it wasn't until just a few years ago that I got any professional help from the VA and that was because I went there and asked for it. You know, I recognized finally that there were some things that I wasn't dealing very well with and I needed some help.

[But it was finally recognized by others that I was having problems when] I went to a satellite of one of the hospitals and one of the girls there, a nurse, said you were in Vietnam, right? And I said yeah, and she said do you mind if I ask you a few questions and I said no. So she took me in this room and we sat down and talked for about a half an hour. Most of it was questions she asked me about did I ever do this or feel this way and after we were done she says, you know, I'm not trying to be smart with you and I need for you to understand but the way you answered all these questions, you probably have PTSD. And of course I knew what that was and she said to me I think that if you want to talk to somebody about this or seek help then I can make an appointment for you with the mental clinic and I said okay. I'm not really sure why I did that other than it was probably because of her. She showed genuine concern at a time when I just felt like yeah, maybe she's right. Maybe this is something I need to try. [And] this was probably five [or] six years ago. [So my actual treatments for PTSD, which I have been suffering with ever since my experience in Vietnam, didn't begin until relatively recently].

[But along with PTSD I also suffer from] phantom pain. That's an interesting subject. I've had that ever since day one. They call it phantom pain but I can feel my foot and all that right now. It feels like it's partially asleep. It would cut the circulation off in your leg or your foot, that's what it feels like. Tingles, itches sometimes, but mostly a tingling sensation.

[Even with the phantom pain and PTSD there were some positive changes that I can attribute to my being injured]. Probably the biggest one is just being aware of trying to stay healthy. I wished I'd have started a lot sooner and not done some of the things I did. Made me aware of how blessed people are when they're not disabled and then what you have to deal with when you are. [I can't ignore the] negative changes [though]. [M]y PTSD is probably the worst, depression, feelings that it would be a better world without me in it. But I don't deal with that as much now as I used to. I guess the worst part of it, like I said, really started after my first failed marriage. [There were some great challenges in my life because of my injury]. The most challenging thing really was the physical thing. [My current wife has been a positive influence on me though]. Besides my kids, she's the best thing that ever happened to me. Yeah, she's had to put up with a lot. Being married to a person that has physical limitations is quite a challenge in itself and that's just dealing with the physical limitations. When my depression kicks in or whatever, she's got to deal with that directly and it hasn't been easy for her. She deserves a lot of recognition. She's helped me a lot.

[But as of right now, I just hope that] from this point on anything that I might have said could

possibly have a positive influence from the perspective of the people who are trying to provide medical treatment to people that, as you said, veterans coming back from war with physical wounds or mental wounds that they have to carry the rest of their life. I really hope that something more can be done. Like I said, I was one of the lucky ones. I struggled through it. I had friends who didn't make it through the same kind of struggle that I've been through. Anything that could help that, especially in the first year probably when most of the good things could be done, anything that could help that, definitely needs to be seriously considered because obviously if they're like I was at that time, that's when you're most vulnerable. It might not be the ideal time to make progress but it is the ideal time to recognize what a person's going to have to go through and to try to do the kinds of things to make that transition a little bit quicker and a little bit easier than it may have been for me and some other people that have already been through this. It is a life altering situation that is going to be the biggest challenge everybody ever faces. That is, trying to be a normal person again but you really technically can't be a normal person anymore. You're in a different situation. Anything that could help people with that needs to definitely be done and studied and yeah, I, there's times when I wish I could. I have a friend that goes to Germany and visits with soldiers they're bringing home. There's been a couple times I wish that I could have gone with him and talked to, specifically amputees who are like me, and try to explain to them that there is hope. That they can't give up.

Profile of Mr. Jason Clark (Double Below the Knee)
(Originally Interview Transcript 40 pages)

Mr. Jason Clark lives in a Northern state of the Midwest and was born November 6th, 1947. He was commissioned in the United States Army after graduating from West Point in 1970 and was injured in Vietnam, June 2nd, 1971. He is a double below the knee amputee and currently uses a prosthesis. (Note: Mr. Clark is only missing part of his foot on one leg). He is married with three children. Mr. Clark reports his general health to be excellent. He also reports being overweight and experiencing stump pain, phantom pain and phantom sensation. The interview was completed on February 2nd, 2009. This is Jason's story.

I graduated from the United States Military Academy at West Point and at the time everybody got a Bachelor of Science degree in nothing. (laughter) My concentration was in Aerospace Engineering but we all had general B.S. degrees. [And I graduated] in June of 1970, [so] that's when I got my commission. I enjoyed [the military academy] very much. The whole four years was a blast. Mostly because of the classmates that I had and the things we got to do. [And I was commissioned as a Second Lieutenant in Artillery in 1970 upon graduating]. [I wanted to fly in the Army.] Helicopters, [or] whatever. I had my orders. They said well you have to have a year in Vietnam or two years of troop duty. Since I was going to be career military I chose the year in Vietnam because that was, at the time was one of the tickets that we needed to get punched. But I would say on the flight between Hawaii and Vietnam I guess, we'd learn in school in combat the best attitude to take is you're a dead man before you go in. If you make it out you're just lucky but there's no sense thinking, you know, planning beyond the next 15, 20 minutes or a day or something like that. And I fully accepted my job as to what I was supposed to do. I had been training for it for almost five years. So we were well prepared for what we needed to do. [And I saw it as a step towards what I hoped would be a career in the military].

[And back then my personality was a lot similar to how it is now. Yes, I was] pretty much the same as I am now. Pretty reserved but hard-working I guess. You really didn't get much chance to do anything else but I got good friends there. I was in a lot of activities. I was in both the Glee Club and the Choir at school which was very nice because that let us get off post quite a bit. Didn't do anything at the college level as far as sports was concerned but very active at the intramural level.

[But I was sent to Vietnam as a Second Lieutenant in April of 1971.] [On the day I was injured] we were sweeping a suspected NVA base camp and you're trying to get down to take a look. It looked like somebody, a helicopter flying supplies in or something and it seemed what looked like to be a bunch of bunkers and it was in a valley in-between two ridge lines and they put five infantry companies down there—three American and two ARVN and the Army, the Republic of Vietnam, and the company commanders drew straws and we got the short straw and got picked to go down into the base camp and so we started going down into the valley to sweep the area and like I said that's when we just started stepping on booby traps right and left. I'm not really sure how many kids got hurt but I think there were three or four the first day, five or six the second day and I was the first one the third day but there were eight or 10, 12 kids that got hurt before I did and there were more afterwards from what I talked to some of the other guys that ended up at Fitzsimons with me.

It was really early in the morning [when it happened]. We were just packing up to go and I stepped on a booby trap that turned out to be a head off a B40 rocket or an RPG round and set up with a blasting cap and an old battery and just contacts to step on. It was the head off a B40 rocket which

is, I guess most people now would think of it as a RPG round, a self propelled rocket designed for penetrating armor and that's probably what saved my life. If it had been an anti-personnel mine I'm sure I wouldn't be around because it was all blast and big chunks of metal rather than blast and a lot of little bits of shrapnel. So I'm sure I stepped on the device with my right leg and then the blast took all the muscles and skin off my left leg and I'm not sure what took my left foot—the left forefoot—and then there were the chunks in my thigh and forearm were nice and big. Fortunately there wasn't anybody else hurt with me. There was one guy that suffered from the concussion, just the blast, but he didn't have any physical wounds from shrapnel.

[And as a result of the explosion] I lost my right leg below the knee. I have about a two and a half inch stump below the knee. My left leg was mostly blast injury. All the muscles from basically about an inch above the knee all the way down to, well my boot protected the bottom part of my foot but all the muscles were blown right off my leg. I had about six or seven inches of tibia showing. No broken bones although it did take my forefoot from the mid-metatarsals forward. So it disrupted the knee quite extensively. Although I still have my whole leg because the surgeons did an amazing job. I didn't appreciate it much at the time but they were able to, despite all the injuries to the left leg, they saved it and had continued to be saved all the way through the process and so on.

[So today I have] a right BK amputee and then what's called a left show part. [My other injuries included] mostly shrapnel [wounds]. I have multiple shrapnel wounds to my left thigh and also two pretty good shrapnel wounds to my left forearm. [And] I [currently] use a right below knee prosthesis and I wear a prosthesis on my left foot. I'm not really sure what they call it. It's basically of my own design. That was one of the nice things about being at Fitzsimons. You could participate in the design of what they ended up giving you and it's been refined over the years.

[But looking back I remember the day I was injured as] a beautiful day. Yeah, this was spring, you know, so it was not the rainy season. The weather was beautiful. It got pretty hot during the day but not real hot. The humidity wasn't too bad. Clear blue skies. No wind where we were since most of the time we were down in the jungle or pretty deep in the bush.

[The circumstances surrounding the explosion were pretty random...] I was attached to the company commander's right hip the whole time [so I was in the center of all the action. But it was pretty much just chance that caused me to step on the booby trap]. But like I say the stuff that they were using was not designed as anti-personnel stuff. They just took evidently whatever explosive devices that they had and set them up as bobby traps.

[Looking back I don't blame anyone for what happened to me.] No I [see my injury as an] expectable outcome of combat. It was our job. I remember consciously taking that attitude from the time that I actually chose to go to Vietnam. I was actually on orders to flight school because that's what I wanted to do in the Army was fly.

[But when I stepped on this booby trap I knew what was happening]. Absolutely. Yeah, like I say we had been stepping on them for the last two days so I knew immediately what had happened. [And I also realized how badly I was hurt right after the mine detonated]. When I first, you know, my legs were twisted around underneath me and my left arm was laying across my chest and of course there were the two big pieces of shrapnel in it with a lot of blood on my chest. So the guys were sweeping my chest for a chest wound but it turned out I didn't have anything. I could see what I was missing and it hurt like hell.

[I remember being cared for by some medics]. Basically they tourniqueted everything off. Gave me some morphine. I asked for water and they said forget it. I was very fortunate in that the chopper that picked me up was coming out to get me anyway to go back and get promoted to First Lieutenant. The next day was going to be my year since I'd been commissioned and at that time we were getting promoted to First Lieutenant in a year so I got picked up within 15 or 20 minutes after getting hurt. And it wasn't a Medevac chopper (laughing) but they had me on a poncho and they just slid me onto the floor and flew me back to the MASH unit. [And that] was at Camp Eagle but the only really thing that I remember vividly about it, I remember landing--I don't remember the flight at all—but I remember it landing. I remember being lifted out of the chopper and put on a gurney and I remember a nurse looking over me and I said can you give me anything to put me to sleep. She said, if we do that you'll die. So that shut me up right then and there. The only other thing I remember was being wheeled in and knocking through some doors evidently on the way to x-ray or something like that. I don't remember anything until the next day when I woke up in the recovery room.

[I] vaguely [remember how long I was there]. I think it was, well I think it was the next day that I woke up but I really don't know for sure or even what time of day it was. Pretty well bandaged up, casted up, and I don't know how long it was but they had me on a C141 to Japan. To me it was within a couple of days but whether it was or not I really don't have a clue. [And I don't really have any recollection of the treatment I received while in Vietnam.]

Like I say, except for that initial contact with the nurse--told me to basically to shut up--and that wheeling through the big double doors and waking up. I remember a guy coming, giving me my First Lieutenant's bar and a Purple Heart and a Bronze Star and I vaguely remember that but after that I don't remember anything except the trip between the MASH unit and the main airport to get on the C141.

[And] I think [they mostly did] just debriding surgery from what I remember [about the field hospital]. I really don't remember being there long enough for them to do anything extensive. Like I say, a couple of days at the most. [Then I was put on a plane and sent to Japan]. I went to a hospital in Yokohama, Japan and spent about three weeks there—three and a half weeks. Then I had I think three or four surgeries while I was there.

[While in Japan the care I received was] excellent. I was put in the ward with probably 30 kids. I met every one of them because you had to walk by my bed to get to the bathroom. But I'd say it was a typical, what I remember as a typical Army hospital as a kid. There was two or three stories, great big wards, long hallways, miles and miles of hallways type of thing. I remember getting there. I don't remember the flight at all between Vietnam and Japan. I remember arriving in Japan but then I remember wheeling, I don't remember anything between the airport and the hospital. I remember getting into the ward and getting transferred into bed. I remember they needed to take all the bandages off that they had put on me in Vietnam. So they started cutting away all the casts and all that kind of other stuff and that was probably the most painful time that I had during the whole, well actually the whole time I, or whatever had been in. Since I got hurt the whole 37 years because they, all the bandages had dried onto the wounds and although they used water and Betadine and everything up to try and soak the four by fours and the bandages off the open wounds. I had some of the other kids in the ward crying I guess because I was yelling so loud because it was so painful for them to take all those bandages off. Then like I say, I had three or four surgeries there. They did some split thickness skin grafts and stuff like that to try and cover up the areas that they thought they could save on my left leg. Hanging weights off of my right stump to try to pull the skin down around the end of the stump and get closure that way but it works just about half-ass. The skin was too

adhered to the lateral distal side of the stump down where the fibula is and it pulled real well on the medial side of the skin. I've got full skin all the way down to the bottom of my stump on that side but on the lateral side, on the outside, I ended up with probably about a three or four inch circular area that is open that they ended up just covering up with skin graft rather than trying, going through and I guess surgically releasing that skin so that it could pull down towards the bottom of the stump.

[And] as far as I'm concerned [the care I received for my wounds] was superior. It kept me alive and gave me the opportunity to build on what they left me. Like I say I can't say enough for the guys in Vietnam for at least giving the guys in Japan something to work with. You know, for not just out of hand taking my left leg above the knee which would certainly have been justified with all the damage that had happened and then for the guys in Japan that decided that there was enough to save and decided to, rather than doing the amputation above the knee, to saving what was there and going through the skin graft process and stuff like that.

[But in Japan, I didn't interact with the other soldiers a lot]. Like I say I spent 99.9% time in bed. There wasn't anything to get up and ride. Towards the last week I was able to get up and in a wheelchair so I could push myself around. But pretty much stayed to myself I guess. [And that wasn't because I was an officer and they were enlistees]. No, no, that had absolutely nothing to do with it. We were all in the same boat and in fact, I don't even know if there was another officer in the ward. I mean all the people that I kind of remember were enlisted people. No, that had absolutely nothing to do with it. I was just fighting my own battle and I figured I wanted to do this on my own more than anything else. I should tell you, one of the things that really helped me through this whole process, especially initially, was that probably a year before I went to Vietnam I had read a book about Douglas Bader--B a d e r. He was a World War II pilot with the Royal Air Force who had lost his legs, both of them above the knee, in a flying accident in the thirties but had still gone on to be an ace in the RAF during World War II. So not only did it help me realize that there's life beyond losing your legs—although I remember the day before I got hurt thinking that with all the other kids that were getting injured I said I'd just soon be dead as messed up—as soon as I got hurt my attitude changed 180 degrees. But like I say, reading that book really gave me a good attitude. Letting me know there was something beyond losing your legs.

[And my family was notified of my injuries but] I didn't talk to them until I got to Japan and my mom wanted to hop on a plane and come right over to Japan but I told her it wasn't necessary. There wasn't going to be much to see and there wouldn't be much for her to do. So I talked her out of coming but Mom kind of wanted to come to Japan.

[I received very good care at Fitzsimons when I arrived back in the US.] [The care] couldn't have been better. I was up on Five East which at the time was the lower extremity ward. There were like 510 kids up there when I got there. I mean so many that there were beds in the hallway type of thing. But it wasn't the day I got there but the next day they had me in a cast room and they were casting me up for a temporary prosthesis to get me up and going. That really impressed me. I thought I was going to lay around for awhile and not have to do anything. (laughter) But they right away had me casted for a temporary and put a pylon on that foot and was trying to get me up and going and I thought that was really neat.

[But by the time I got to Fitzsimons] there were surgeries that had been completed. I had another three surgeries while I was in Fitzsimons. There were two more for skin grafts and then, well actually four I guess because two of them were for skin grafts. The third one was, my knee, left knee was so disrupted that the patella tendon was starting to drift laterally down towards the outside of the

knee so that my patella tendon and my ability to straighten my left leg was going to be impaired by that tendon. Instead of going over the top of the knee it was going to go around the side of the knee so they decided to take out what was left of my patella--it was cracked into three pieces—and then re-routed the patella tendon so it was more over the center of the knee and that is the one infection that I got out of the whole deal. I remember getting woozy and the temperature spiked. So they took me back to surgery. They didn't put me to sleep. I was more sitting on the operating table because I was up on my elbows watching what he was doing and he just took his fingers and spread the wound open and it ran from about four or five inches above the knee to about four or five inches below the knee. It was just a great big open wound. It hadn't healed enough so he just took his fingers and spread the wound and then took his finger and started scooping out what appeared to be tapioca pudding. I guess it was the infection and they cleaned it out as much as they could. But then rather than sewing me back up they left it open to heal. So I spent the next seven or eight months changing dressings. It started out at four times a day and it finally got down to just one a day.

[I was at Fitzsimons] from late July of '71 until November of '73. Quite extensive, like I say, that one surgery that took so long for that knee to heal and like I say didn't really start getting up very much. I was in the wheelchair although they had a prosthesis for me. That left leg was such a weight on me that I really didn't do much walking until late fall of '[7]2 and by then I could get around. I used what was called a bent knee pylon and that is the most amazing piece of equipment in the world. Because although I had a hard time fitting a leg, I could still get around because of this bent knee pylon. And of course I was used forearm crutches, and that bent knee pylon and I could really move out, you know, when I wasn't in crutches. But couldn't do much until that knee healed up. And that took several months and then once it did heal up we started on a more definitive prosthesis and we tried several just the standard PTB socket with a cuff suspension and I never really did feel stable on it. Then one day I saw a guy that was a bi-lateral BK and he was wearing thigh lacers and I thought damn that's what I need so I went to them and so we added thigh lacers to my BK prosthesis and that made all the difference in the world. That made my leg stable. Up until then all my weight bearing was on that two and a half inch stump and that was always breaking down from that skin graft on the area, the stump that didn't close from the traction. So with the thigh lacer I could really tighten up the thigh lacer really tight and take a good 30 or 40% of my weight on the thigh lacer.

I wanted to go back on active duty. I had several classmates down at Fort Carson, Colorado in Colorado Springs and I went down there and visited them quite often and got to know the battalion commander and some of the other people that were in the artillery brigade. There were a couple of times they let me go out on the field and I found out that I could drive a stick shift without any problems. So I decided that maybe I should try to go back on active duty and get into flight school again. And of the two, I was able to get back on active duty. I got everything waived for flight school except for the ability to dorsal flex your foot. In other words to point your toes so you could work on toe breaks. They didn't waive that but in all this interim time I went to school at Metro College in Denver and I went to a full year up at the University of Colorado mostly taking medically related stuff. There was another guy there. We both decided that we liked this medical stuff so we were going to medical school. I petered out but he didn't. He's currently a doctor in Washington. He went to Marquette University and got his medical degree. I also learned to fly. I got my private license and my commercial estimate and multi-engine rating during this whole time.

[And this would have been in] 1972. Because they were trying to get me to go to PT which I never did but they were also trying to hook me up with a leg brace since I really didn't have the ability to lock my knee except with my quads but it wasn't really stable. So they were trying to work with a very famous prosthetist/orthodist and went out to his house many, many times trying to get an over

center lock knee brace to work so when I stepped on it would lock but when I took weight off it it would unlock. We never could get it quite down so that it would work all the time. Then that's about the time I decided I wanted to go back on active duty too so that threw a wrench into things as far as getting out of Fitzsimons.

[I was accepted for active duty even with my injuries] as an artillery officer. I was in Battery B the 1st of the 29th Artillery at the 4th Infantry Division in Fort Carson as an executive officer in B Battery. [So] I went back on active duty in November of '73 and like I say I served as a battery executive officer and then also as a battalion liaison officer until August of '75 and that's when I decided to get out of the military.

[I decided to do that because,] well like I said, when you graduated from school you had a five year commitment and I felt obligated to complete that five year commitment and that was part of my reasoning for going back on active duty but then I also decided then that the legs were going to be too much in the way if I wanted to stay on in a combat arm and by then I was really interested in the flying part and I'd gotten involved with some other guys as far as starting an airplane business and this kind of other stuff. So I had other things besides the military that I was interested in--mostly in the flying area.

[But I do think it] absolutely [helped my personal state of mind to be back in the service for a while.] Actually the biggest part of it was when I realized I could drive a four-speed. You know, clutch and the whole thing and I didn't really even try that until I was down at Fort Carson and I had to drive a Jeep and it worked. (laughter) And so up until then, ever since until I got married and had three sons, I had a four speed all the way up until that time and then after that I've had automatic transmissions.

[Looking back at the first 12 months after suffering my injury I believe that] the volunteers or the extracurricular activities that we did at Fitzsimons [were the most helpful]. I had great volunteers. We went to the University of Colorado for football teams. We went to the Bronco's games. Well they were the Colorado Bears at the time. Winter Park was in the infancy as far as its adaptive skiing program. So we were up there going skiing. [But I didn't do downhill skiing]. No, I didn't. I didn't have the courage to do it. My left leg was so tenuous and I wasn't stable enough on my right leg to do it that I didn't do it then. Later on, about '93 or '94 when my sons were old enough to go skiing, the VA has their winter sports clinic and I went down and I did that. I didn't ski, I used a sit-ski. And that really worked out really to the point where I bought one and I skied with the kids all the way through high school and that worked out really well. But I didn't do any while I was at Fitzsimons. But actually I used the automobile adaptive equipment program and bought myself a Blazer and so we were up there tooling through the mountains all over the place and had a very good time doing that. Like I say, the last year that I was there I was in an apartment, going to school at the University of Colorado, drawing a First Lieutenant's pay and social security disability so I had all kinds of money and I was flying. I got my my private and commercial and multi-engine and instrument ratings out of the way on the GI Bill. At the time you could do that. So I was really having a blast.

[So I had made a psychological adjustment to my new circumstances]. Very much so and like I say, Denver really, I mean I felt pretty stable anyway but Denver, the people there and the programs they had. Like I say, they did such a good job. The doctors were great. The nurses were good, but especially the volunteers, I mean the Montana National Guard came down and got us the summer of '72 oh, summer of '73, and took us up to Bozeman, Montana and there were a bunch of families that took us in and we went horseback riding. We went four wheeling. We went fly fishing or you know

fishing in the streams. And it was like for a week or ten days.

[And] I, and I guess I really can't say whether there was any [psychological counseling] or not. I never participated in any. Maybe there would have been some if I needed it. But there wasn't something that I had to go to see if my head was screwed on straight. [And I came out of this so well compared to some people because,] like I say, partly I blame it on that book just because I knew that there was something on the other side of losing your legs and then the other part of it was my family-like my Mom and Dad and my brothers. I have three brothers and got fantastic support from them and so on. Then like I say the people at Fitzsimons. It was really fantastic.

[And I don't really remember many negative experiences in the first 12 months of my recovery]. No, the only one I might classify as a negative is one of my docs said, he pointed out the window and there was a field out east of Fitzsimons and it was really rough. It was not well kept. He said with your left leg and knee you'll never be able to walk over ground like that. And that was the wrong thing to say. I don't know if he was saying it because it was giving me some impetus to do something about it or just because he really thought I never would be able to do it but my left leg is really strong and so mainly the quads, like I say, because that's where 80 or 90% of my knee stability comes from when I'm walking but that would really be the only thing that I would really count as negative, except for the infection but that kind of stuff happens. That's really not a negative thing. That's just part of what happens. [But other than that I was very satisfied with the medical treatment I received in those 12 months and saw it as a] very positive experience.

[I faced some challenges in the first 12 months of my recovery though]. Well of course the infection and having to change the, bandages. That really restricted where I could go and what I could do. As far as, I mean you know, you could wheel onto a bus and we'd go to football games and that kind of stuff so it really didn't hamper it that much but the ability to go out and do things on my own was really limited. [Also,] finding a prosthesis for my, well for both feet that were, that would give me the stability that I wanted [was difficult, because] like I say I didn't do real well on the standard BK prosthesis until I learned that there was such a thing as a thigh lacer. Up until then I was very frustrated in the inability to—I could walk fine but I couldn't walk very far and it was painful all the time. Then finding a good prosthesis for my left foot. It was breaking all the time—not breaking down just breaking. Then going through the process on that long leg brace, you know, with the knee joints and stuff. That was more, because he lived way over on the west side of Denver so I'd drive to his house and we'd work in his garage. And I tried it for six or eight months before I finally just said the heck with it. I'll just rely on what I've got to make it work.

[And it was somewhat difficult to relearn basic things such as getting dressed, etc.] but I mean those are the kind of things that you had to do anyway. You just made adjustments. I still remember, we were sitting over in the cafeteria and—one of the kids that was a right BK— we were sitting there getting a hamburger and he wanted the salt from the next table so he just got up and stepped, you know, and was going like you would normally to, just reach over, and to get the salt off the next table but he forgot that he didn't have a right foot. So he just fell over and cracked his head right on the edge of the table. I mean we were laughing for the rest of the day over that, although he had this great big gash in his head. But you developed, I mean my upper body strength is still real good from having to walk around on crutches and I still, at night when I take my legs off I go to and from the bathroom on my hands. I just scoot along the floor. So I've got good arm strength, good shoulder strength. But it was really good when I was working on forearm crutches. Going up and down stairs. You know, you'd go, probably want to go up maybe one at a time but down two at a time but you're basically swinging like on monkey bars going up and down the stairs.

[And when it comes to how I was able to handle the way I had been injured, well,] I just did. There wasn't really any handling to it. There were things that you needed to do and so you did them as far as handling it was concerned. I usually tried to do things on my own rather than getting help to do it. But there was always help there if I needed it until I moved into an apartment, then I was on my own. Or even when they had an outpatient ward it was a separate building from the hospital. Here I was in a room by myself so if I needed something I had to get it. If it was on the other side of the room and I didn't have my legs on I had to either put my legs on and go over and get it or just get down on the floor and scoot over and get it and then bring it back and then hop up back up into bed. But as far as handling things I felt like I needed to do something I went out and did it.

[And in general my family and friends were] very supportive [of me when I returned to the States injured]. I didn't have anybody that turned around and walked the other way. I think I went home once during the first 12 months but then I was home several times after that. Once I got my car and got hand controls then it wasn't any big deal getting around as far as place to place was concerned. I never did haul a wheelchair around. [It] was a pain so I just said well I'm not going to haul that thing around so I just, you know, get on my legs and crutches and do it that way. And having hand controls in the car made a big difference. But as far as my family is concerned, they were always very supportive. Like I say, Dad was in both World War II and Korea so he had certainly seen injuries like this before. Mom worked for the Red Cross and then worked for JAG in Germany after the war so she'd seen injuries like this before and I don't know whether she'd prepared my brothers or whatever. So they all handled it really well. If I needed help I got it, if I didn't I got left alone. They did modify, Mom and Dad have a cottage, a lake cottage in Devlon Lake. It's about 50 miles east of here and they modified that a little bit so that there was a ramp up into the kitchen door. Then if Mom did some remodeling and she said well how high should we make the stairs and I said well make them pretty short and wide. Don't make them that typical nine inch. Make them four or five inch step and a little bit wider than normal and she did that and it makes it a lot easier for me to get up and down those. And then at their house here in Fargo they put like there are steps getting up into their house but they put some grab bars so that I would have something to latch onto as I was going up or down those stairs. I don't remember anybody acting negatively, they either ignored me or supported me I guess. I don't really remember anybody being actively negative about what happened to me.

[And when it comes to how my injury influenced my thinking of myself as a person,] oh, I think it probably enhanced it because I was overcoming things that I thought maybe some other people wouldn't have done as well as I could have. So I'd say if anything it enhanced my, I mean I can do this, you know, kind of. But like I say that book, I really had something to lean on there or that I knew that there was something beyond being hurt. Being hurt was not the end of it. It was just one more step along the way. That you can do things after that. [I didn't consider my life chances to be over after I was injured in Vietnam. No,] they were just changed. I don't think they were diminished any.

[It was also different coming back to the US as a disabled veteran.] Well, like I say, I wasn't in a wheelchair so that made a big difference. Actually the biggest obstacle I had was doors. Steps weren't that big of a deal but doors, especially the heavy glass doors—getting in and out of buildings—was probably the biggest pain. But I guess it wasn't their responsibility to make it easy for me. It was my responsibility to just get it done. You know, I didn't feel like they really owed me anything to make it easier for me because, you know, even now with the automatic doors there I don't use it. (laughter) You know, I just pull on the door handle and open the door.

[And when it came to our country being divided about the Vietnam war I handled it somewhat well.] [A]t West Point we were totally insulated from that [kind of opposition] except for the news reports and basically from the time that I got out of West Point and then until I got out of the military in '75, I was in a military environment that whole time and so by the time I got out in July of '75 the Vietnam War was gone by so I really didn't get exposed to, except for my brother Jim who went to Stanford and got a law degree there. I got some grief from him but not much. At least he was very supportive but we would get into conversations about that stuff and he said well why did you do it. And I said because I wanted to, you know, I love this country. I want to do this and I was of the opinion that if that's where they told me to go that's where I went. I didn't really have the option of questioning my orders.

[I felt okay when it was time to leave treatment]. I didn't have any problems leaving. I was ready. Like I say, the only reason I was hanging around there is because wanting to go back on active duty threw a wrench in what would normally have been normal out processing. Again, you were talking about one negative comment. There was a guy, we both applied to be air traffic controllers. We went for a physical and we had a doctor who did the exam and he failed both of us by saying that there was no way that we could stand the stress, you know physically be able to perform the jobs and that upset both of us quite a bit. I didn't pursue it but he did and ended up working for the FAA as a flight air traffic controller until he got fired with all the other guys that went out on strike in 1981. [But] we've both since proved that doctor totally wrong. I mean he's back flying helicopters. That's how he got hurt. He took a 51 caliber round through his leg. But he's above knee amputee and still flies helicopters. But you were talking about negative things in the first year, that was one of the, I just kind of shrugged it off and went someplace else. It obviously upset Lyle more than it upset me. [And this happened] while we were at Fitzsimons, yeah. That's probably the only time that I can remember right now that that happened to me where I felt I was being discriminated against because I was missing my legs.

[Looking back at the first 12 months of my recovery, I just haven't really given much thought as to what factors I would give credit to for how my life has turned out.] I really hadn't really thought about it very much. I just, you know, I was brought up to get it done.

[And interacting with the other patients at Fitzsimons was helpful]. I would say they had a positive impact on me because most of them came out of it just fine. And I got a chance to help some kids and I got some help from kids but mostly we just kind of supported each other and rooted each other on. But there wasn't anything overt about it. It was just, you knew if you needed help you could get, that kind of stuff. But it wasn't any rah-rah stuff or anything like that. I made a couple of close friends there. Like I say, when I first got there there were five hundred and some kids on the ward.

[I don't even think that my injury has influenced the course of my life]. I'd say probably 80% of the people I know don't know that I'm missing my legs. There's no reason for me to tell them that I'm missing them. So I just, you know, I do my job and I limp a little bit and so people know that there's something wrong with the way I walk but they don't realize that I'm missing both my legs. Probably the biggest thing is that as soon as my kids could walk I couldn't keep up with them. So it was hard running them down when they got away from me. [But] like I say, I've actually made a conscious effort not to make it a big deal.

[I have three children and I was involved with] everything [when it comes to their lives]. I mean [I was] involved their school, Cub Scouts, sports, you know, hockey, football, baseball, basically

everything that they did, I did. Like I say they wanted to go skiing so I would take them skiing. I found out about the winter sports clinic and I thought I'd give that a try and see, maybe I can do that and then I could go skiing with them rather than just going out there and sitting and reading a book while they're outside having fun. That worked out really well. So basically whatever they did and they would let me participate with them I did. [I also participate in civic activities]. I'm a charter member of the, they started a new Optimist Club back in '85. I was a charter member of that then a charter secretary for three or four years. I'm still a member [but] I haven't been very active. Work takes up 98.9% of my time and so although I might get more involved now that I'm retiring. I'm not really sure. But that's really about the only civic organization thing I did. Like I say, I got involved, I was on the board of Babe Ruth baseball for about 10 or 12 years and was very active in that. Just mostly as a coach for the first three or four years and then once I did coaching then I was on the board for like I say for that.

I [even] coached all three of [my son's teams] at one point or another. You bet. As far as me missing my legs from that standpoint I didn't have any negative experiences.

[One positive aspect I attribute to my injury is] the fact that I don't have to worry about having a job. I mean I've got a solid income that will always be there until Congress changes its mind and that is actually a big relief. Like I say, I feel no pressure in that area whatsoever and I've got a lot of friends that aren't that lucky I guess. Of course, you're not lucky to lose your legs but in some respects it is.

[Today] I work for the U.S. Department of Veterans Affairs at the VA hospital in Fargo. I am the Chief of the Prosthetic and Sensory Aid Service at our hospital. [And today working at the VA I interact with veterans. I don't counsel any of them, at least] not in an overt way. I mostly do it by example. I don't sit at my desk—I mean I do but I get up and I'm walking around a lot. I'm up and down and all over. For the first probably ten years that I was there I was on crutches a good portion of the time when I did any long distance walking. Then in '94 I got this new prosthesis for my left foot and that's made a big difference. I don't use crutches except when I'm missing either one or the other's in for repair since then. But mostly it's an advantage at work because a guy that can't tell me well, you don't know what it's like, you know, if he's missing a leg or getting stuck in a wheelchair. So I don't get any grief from anybody. It helps me in my job in that respect. Like I say, it's mostly by example. The guys see how well I do or how I'm able to move around and may be something for them to work towards. But I haven't ever done any overt counseling, talking. I mean I, I shouldn't say—yes I have done some. People come to me for advice or I notice some guy and his attitude and I tell them what they're going to be getting themselves in for if they have an amputation or, but it's mostly hard-nosed stuff. I said, I tell them it's 95% attitude and how much work you put into it is what you're going to get out of it.

[I don't know of any] negative things I attributed to my injury. [I just don't believe that any exist].

[When it comes to Post Traumatic Stress Disorder,] I didn't used to think [that I suffered from it] and I thought it was a cop out and I would, you know, this is a personal opinion of course. I would say 90% of the cases it is a cop out and I think the VA has a lot of guys drawing disability for Post Traumatic Stress now that don't have a clue as to what it is. But here again this is personal opinion. But of course I've never been real good at making friends or having close friends but I don't know if that's been emphasized since I got hurt or is just the way I was. I don't socialize a whole lot. We don't go to parties and don't, like New Year's Eve we don't go out or like the Super Bowl and stuff like that. And I don't know if that's due, like I say, to Post Traumatic Stress or if it's just the way I am. I think it's more just the way I am because I keep coming back to that book that I read that I've

always had pretty much a positive outlook on what I got myself into.

[The most challenging thing that I've had to deal with because of my injuries is] just getting comfortable on my legs. You know, finding things that worked so that I would feel comfortable on my legs. I haven't had a whole lot of prostheses on either side. I mean the one I have now got built two or three years ago but the one prior to that got built in 1989 and the one prior to that was built in 1977. I have some guys that they change legs every five or six months or maybe a year and I don't understand why but maybe they're searching for a leg that works. I don't know, I mean I wore the same leg at 165 pounds or when I weighed 220 pounds that I did at 165. I just made accommodations with the socks in the socket. I used to be a fan of hard sockets but the new gel ones out now, I'm a big fan of those.

[Right now, looking back on it, and] I guess[,] maybe I mentioned this a couple of times or actually just once when I think about it and it's what I tell everybody else is that having a disability like this is, the physical part of it is really pretty easy. It's having the right attitude to do the things you want to do that really make the difference. That's why, you know I told you it's 95% attitude and the rest is just physical type stuff. To me that's the biggest thing. I think I've always had a real good attitude about it and it's not something I've really gotten down about. But I think, you know, the things that I leave with guys or maybe that I want to leave with you that I feel that having the right attitude or having a good attitude or a positive attitude about the situation that you're in will get you out of or help you a hell a lot more than other people helping you. That's why this Americans with Disability Act I think was a good idea but it's other people trying to help you when you really need to be doing the work yourself. Sure you need some help along the way in certain areas and I certainly have gotten that and appreciated all the help that I've got but I've still mostly done it, I feel like I've done it on my own although like I say, I get a lot of help from [my wife]. I get a lot of help from the kids. I get a lot of help from my mom and dad but I don't think I would get as much help from them if I didn't have the attitude that I've got.

Profile of Mr. Troy Baker (Above the Knee)
(Original Interview Transcript 48 Pages)

Mr. Troy Baker lives in the Midwest and was born November 4th, 1947. He enlisted in the US Army in 1966 and was wounded near Saigon in July of 1968. He is a left leg above the knee amputee. He currently uses a prosthetic device. He is divorced with three children. Mr. Baker reports his general health as very good. He also reports phantom sensation. The interview was completed February 9th, 2009.

[During the six months prior to entering the military I was working] two different jobs. [I was a] machinist and [I] worked for Chrysler. [At the time I was living in] South Beloit, Illinois [and I was living away from home and not attending school]. [Prior to entering the military I would describe myself as] oh, just a normal [teenager] I guess. Work and party on the weekends I guess and nothing out of the ordinary. [And] I enlisted [in] October of '66. [I enlisted because] I didn't want to put two years in and not come out learning anything. I thought it was a good time to—with the draft hanging over my head—had to do one or the other so I went in to learn something. [I was interested in learning about] heavy equipment. [And with the 86th Combat Engineers, which is the unit I was assigned to, I was able to learn about heavy equipment].

[As far as my current physical state, today I have a] high AK, left leg. [I sustained other injuries beyond my leg though. I have shrapnel wounds on my other leg, lower body and upper body. So today I have] a lot of different scars. [Also] part of my right arm is gone I guess. I don't even know how they describe that I guess. [I also had] burns all the way up [my] right side. [I suffered a] broken eardrum and [I] lost a tooth and lost a finger. [And today] I've got a prosthesis [that I use for my left leg].

[But I suffered my injuries while serving in Vietnam, which I was sent to at the] end of January of '68. [So I was sent to Vietnam in 1968 with the 86th Combat Engineers and we were stationed] within 20 miles of Saigon.

[When serving with my unit,] we went out with the 11th Cav, 1st Infantry, several different outfits and we cleared jungle. Wherever they had problems is where they wanted us to clear jungle. It could be alongside roads or it could be jungle, actually we got rubber plantations. [So we would clear the jungle with] dozers [and] heavy equipment [to] prevent ambushes so they could go up and down the road without getting shot at. We'd clear back, I don't know, 300 yards or something from the road a lot of times and a lot of times we'd do for clearing bases or different projects. Just a lot of clearing. Cleared cover that the enemy couldn't use, I guess. [We didn't encounter much combat or hostile activity while out on these missions to clear the jungle.] No [we didn't encounter] a lot. We'd catch some mortar rounds and sniper fire but not a lot.

[I don't remember many details about what happened the day I was injured or what took place after I suffered my injury. Most of what I recall I am getting from an action report that is from the Army or from other soldiers]. I don't remember any of it actually and I just found this out two years ago at a reunion exactly, pretty much what happened. Yeah, we were out. See we'd go out and then they'd make another base camp. From Bearcat we'd go out and set up another camp out in the middle of nowhere or something and just us and infantry for protection. Then we'd go out, what they call go out on the trace during the day and come back to this second base camp at night. Well I was a mechanic and they'd always send a couple of us mechanics out with the dozers. We had 30 dozers

when they were running and they'd send us out—the two mechanics—to make repairs or to keep them running. I was one of those mechanics out there, you know, following them around or whatever happened to fix. The day it happened we were out, this was early in the morning I guess so I'd almost guess that these booby traps are set up overnight. But it started out one dozer hit a booby trap and there seems to be some disagreement. Like I said, they were just talking about this two years ago. This is the first I had known of this. And another dozer hit another booby trap. Of course as mechanics we were coming up there and I just happened to get off first and head up toward the second dozer that hit a booby trap and I hit a mine.

[I can't recall what the day was like, no I] don't know any of that. The only reason I know it was early in the morning I was just reading my narrative on the, from the Army. I didn't know about these dozers and all that until, like I say, two years ago. [So I really don't have any memory about the incident. All I know is that I stumbled onto a wire that tripped this mine off]. [And then] I, the first I woke up it was three days later I guess. [So I woke up in] the evacuation hospital in Long Binh. [And as far as how long I was at Long Binh,] again, I'm reading the thing here. It was four days. But I did wake up in that third day and there was a few of my friends who just happened to be there. I don't know if they woke me or what happened but I asked them if anybody else got hurt. Then I asked them, I looked down and I seen I was missing a leg and I said it looks like I'm getting out of here before you guys. And that's about all I remember of that.

[I was seriously injured as a result of tripping the landmine, though. According to the Army's report when] I arrived [at the hospital, I had] no blood pressure, no pulse and what they did, they cleaned wounds and finished the amputation of the leg and took some shrapnel out of the eyes and said I had 51 units of blood during that period I guess. Fifty units in one day there--24 hours. [T]hen there [were also] pieces of shrapnel in my eyes [and] I guess they took [them] out.

[And according to the Army report] that's pretty much all [that they did for me there] I think. [But my injuries were severe because] I had one VA doctor read [the report] and she said you were DOA [when you arrived at the hospital]. [T]hat's the way she put it, [so it was serious].

[Then the report] says I went to Japan on the 20th [after receiving initial treatment at the field hospital in Long Binh]. [O]n the 20th it says I went to the 249th or something like that which I'm guessing is Japan. [And I was there for] about a month. [When it comes to Japan,] from what I remember is I woke up, it had been ten days after everything and I was awake for good then I guess. I remember patients that were there. Some hurt pretty bad and some whining pretty bad and whirlpools and changing dressings. It really hurt pulling that gauze off the burns and stuff.

[And there the medical staff was basically treating my wounds and] just getting me on my, well not on my feet. [But] I guess I was on my feet before I got out of there because I'd hop back to the treatment room anyway on one leg. I think I was the only one that did that. [I wasn't interested in using a wheelchair like some of the others because] I was independent I guess. [Even today I am an independent minded person.] I don't look for any help.

[And when it comes to the care I received,] well, the quality of care had to be good because [I had] no infections. [I don't] remember anybody. Not from there. [I don't even remember interacting with other wounded soldiers on the wards.] I don't, I guess the only person I can remember talking to now is the Red Cross lady that wrote a letter home for me because the damage was done to my right hand. So I know she wrote a letter home for my folks.

[So I was in Japan for about a month, and then after that I was taken to] Walter Reed. [And I was still in a lot of pain at that point]. Yeah, I was still on pain shots. I had woke up in—I'm not sure where it was but I'm thinking it was Alaska. They had me out for most of the trip I guess probably intentionally and I know I panicked or I woke up and it seems like I had about six, eight inches above me to the next stretcher or something like that which there could have been a hell of a lot more, I don't know. So anyway there was a nurse there and [they] gave me another shot so they kept me out for most of this trip. [So they were giving me morphine, or] some kind of a shot.

[And then I went to Walter Reed] the 20th of August, I think it said in that thing I read today. [So in late August of 1968 I was taken to Walter Reed, and I was kept there until] Christmas. [And] I can remember quite a bit from there [as I was there for a few solid months].

[When I was there I received treatment for my wounds. They did] skin grafts on [my] arm and then on the stump to close the stump. They didn't want to close the stump yet because some of that muscle mass come back a little bit and they were trying to. . . but anyway they were in no hurry to close the stump so they put a skin graft on it and then a skin graft on my arm and tried to fix my ear but it didn't work and they pulled the rest of my tooth by the root. I guess that was most of them I think now.

[I don't remember having any more surgeries at Walter Reed either]. No, I don't think [I had more surgeries]. I don't think. Not that often out there anyway. I guess the plan was to get me to the VA really. [I think the whole time they were just trying to get me well enough to transfer me to the VA hospital]. Yeah, I don't know why I had to stay there that long I guess but that's kind of how it turned out and then they, instead of working on that ear again after the first skin graft didn't take to fix that ear drum so they said well we'll just leave that alone and you can get it done at the VA. Now whether they tried to get me out by Christmas I don't know. [And during this time at Walter Reed] I was on crutches, wheelchairs, you know, we got all over the hospital in wheelchairs and stuff. Yeah, we were up and down the hallways and I can remember the big inclines or whatever I guess you went from floor to floor and we'd go down them, you know, 100 miles an hour or whatever. [But other than roaming around the hospital] we never had anywhere to go but on the ward [and] we ended up, you know, this ward was packed and they were all amputees and they had like a veranda or a porch off that second or third, second floor--at least it wasn't the bottom floor--but there was like a veranda out there and they had beds out there. You got around and you felt good and you weren't sick and you weren't bedridden or anything so we had a guy that came in from, a civilian, and brought in sandwiches and drinks and including alcohol. That's where our recreation was--right there. [But we really didn't do anything] out of line I guess [and] I don't know, the nurses had to be looking the other way I would imagine.

[I also remember that I was at] Walter Reed [when I received my purple heart]. I don't remember for sure [if there was any purple heart ceremony though]. I know there was a problem with it because I didn't get it for a long time and that got me right back to what did I do, what did I do, how come I didn't get a Purple Heart here and then I think I figured that out years later. I got the Purple Heart orders here and my name spelled wrong on it. And I, then finally it got corrected and it come back with my right name and I got the Purple Heart.

[Then I remember a nurse from the medical staff at Walter Reed because she] was really good. They were all good but the one I can recollect though is a colored lady and she was exceptional. She [was] just friendly and she cared for you I guess. And what I guess I remember the most is when was I was leaving and she was there to say goodbye and everything and she was just a really nice lady. [But as

far as the other medical staff went, they were just] okay. I had, the ear doctor, I thought he was kind of a cool guy. I don't know. I asked what the hell he was doing when he was digging in my ear there one time. But other than that, I don't remember too much about, of course there weren't that many surgeries I guess.

[But I can remember interacting with the other soldiers on my ward and how that helped me somewhat.] Well, they were, that's what gets you going I guess because there were so many a lot worse off than I was. Once you see that you don't feel sorry for yourself anymore. We had guys that had no legs and, well the worst one I guess had no legs and two broken arms and then he's blind too. Then his mind I think went too and he'd end up screaming at night. So compared to some of them I was in pretty good shape. [So I was in pretty good shape and I think being exposed to the more seriously wounded soldiers helped me realize that]. [So] I never did get down or I never had a problem with what am I going to do or why me or anything like that. I suppose I had those episodes but I didn't dwell on it. I wanted to, just wanted to get out and get going.

[But looking back after all these years, I never blamed anyone or felt angry about what happened to me because,] well, you know, as I said I just found out a couple of years ago what really happened and I know all those years that I didn't know, instead of being angry I was more worried that I did something and screwed up. Because I didn't know. It was an unknown to me that I worried more about that someday. I'm going to run into somebody and they're going to say that we tried to keep you out of there or something. See that's never happened. These guys have told me what happened. So I kind of eased my mind on that. I was more worried along that line than anything that I did something stupid. But I guess I didn't.

[But when it comes to the treatment I received, thinking about it now, from the field hospital in Vietnam to Walter Reed, there was] probably nothing out of the ordinary. You know, back then I guess because they're just waiting for you to heal up some I guess. But you're well taken care of, you're fed and everything. Just never had any episodes or anything, you know, any problems. [There isn't anything that I would describe as least or most helpful at any point in my treatment].

[But when it comes to the medical staff and how they treated my injuries,] I'm appreciative. They got me back on my feet or going again anyway, yeah, saved my life. I'd say [the care I received under them was] excellent actually.

[There were some challenges I encountered during the first 12 months of my recovery, such as] the disappointments I guess when the skin grafts [didn't] take and you got to go do them again. I guess that's what [challenged me the most], other operations. I guess I should have mentioned that. I think we did skin grafts probably three times before they took. There was more, the ear skin graft again and then all the operations on the stump after that. Now in the year's time I suppose finally getting to the point where you're healed up enough so they start talking [about getting a] prostheses for the high point.

[But I didn't even have problems with re-learning things such as getting dressed or eating], in fact toward the end at Walter Reed they sent us out of the hospital and we were on our own for awhile there. We made our beds, we had to sweep up, clean up, just like we were in a barracks.

We [even] went to New York City, the World War II amputees have a club I guess out of White Plains, New York. They took us up to New York City for a show at the Waldorf Astoria. Red Buttons, I can remember him and I can also remember we were out standing on the street right

outside the Waldorf Astoria and some hippy come up and spit at us. He was a long haired guy and we were about a dozen guys. I don't know if there was a dozen of us or not—10 or 12 amputees there waiting for our bus [and I think we were in uniform]. [And] one of the guys, in fact a colored guy, took after this here guy and if he would have caught him he probably would have beat him to death, I don't know.

[So coming back from a war into a country that was divided about it was a difficult process]. Well, it was probably the toughest part I guess, you know, you come back and actually I kind of went into hiding I think. I couldn't get myself to go to college because colleges were kind of a hotbed, even though the one locally or not too far away, wouldn't have been near as bad but UW Madison was especially bad and it's, you know, just down the road. But that was almost like having baby killer tattooed on your forehead. So I went farming. I went out in the country and started farming and stayed there for 11 years before I got too far.

[When it comes to encounters I experienced like the one in New York, I recall one instance when I was with someone and] This is a foggy one anyway because I had too much to drink and he had too much to drink where he made a wise remark. In fact it was a guy I went to grade school with and something about you know, just because you went to Vietnam you think you're just, you know, better or whatever or something like that. I don't remember. Like I say I had too much to drink but that was the only other time that I thought that somebody was trying to get a dig in or whatever.

[So I basically retreated from the situation and started] dairy farming. [I got into that because] I was born on a farm, yeah. This farm opened up, I don't know, a mile and a half from my dad so he says you don't know what you want to do so why don't you buy some cows and start milking cows and I did.

[So my response to the controversy was to get away from it and I felt] mostly angry I guess that [that] kind of stuff happens. Or you know, that I guess we took the blame, the vet took the blame for it really. I don't know. You didn't have a lot of choices. You went to Canada or you went in or you tried to get into the Guards I guess or something maybe. You can enlist or you can get drafted and you can enlist and learn something supposedly but it didn't do me any good. But it, you know, it was tough. It was tough.

[And when it comes to how the veterans returning from Iraq and Afghanistan are treated today I think] that's good. They should get that [kind of respect and treatment]. That's the way it should have been back then too but it wasn't. No, I don't begrudge them anything on that. In fact, when they first started talking about amputees coming back I wrote my congressmen and senators and told them, take care of them guys and I told them who I was and what happened to me. And [I said] make sure that these guys have the option to stay in the Army, you know, with the disability instead of, they just send them home. That's what they did to me I guess.

[So for the first 12 months when dealing with my injury and what was happening,] well, like I say, I stayed out of public a lot, just in the small town where I live. I had problems going into restaurants or anywhere. You know, you're a 20 year old with a bad limp, you know, a real bad limp and you're noticeable and I guess I'm a little bit on the shy side anyway which didn't help any. [Even with my prosthetic leg I still] got a pretty noticeable limp, yeah.

[And I came back as an injured veteran before the Disabilities Act so it was somewhat difficult to adapt]. Well you limit yourself I guess. You just say well I can't do that. But most things I can do.

It's then where you see where something's going to be a problem and I guess you avoid it so it really don't stick out maybe as much. I can't come up with anything that I always thought should be a little different or something like that.

[And after Walter Reed I was in the VA hospital in Madison, Wisconsin] till May of '69. [I was] inpatient [and] like I say there were several skin grafts and then working on the stump different times to close it, patching that eardrum. I supposed most of it was basically waiting for me to heal. It seems like there was an awful lot of surgeries but I suppose when you take two or three on the arm and a couple, three on the ear or whatever it took to get those skin grafts to go. [And I do remember some of the medical staff at the VA...] Dr. Rogers was a man of few words but he was good and he was you know, once I got to know him he was good. He's just a little rough at the edges I guess you'd say maybe but definitely a good surgeon. [And when it comes to the other medical staff and care, well] I was treated good. There's no problems. PT, they started me on PT stretching those muscles and stuff. [That was] somewhat [of a challenge, but] [it was] not [that] bad. [But] I was glad [when I was finally discharged from the military while I was at the VA]. That was great because I'd been in the hospital then for about 10 months. You know you're 21 years old—20 and 21 years old—and tied down for that long it's, and not doing anything, it's too long.

[I only remember a couple of the other veterans I met while in the VA hospital]. I think there was only a couple actually [there]. Another guy lost a leg below the knee and another guy lost a hand right at their wrist. They're the only two I can recall right now anyway. [But it was mostly] older vets [there and we] played cards [and] they'd come and go and I'd still be there.

[My family came and visited me back when I was at Walter Reed, but I] don't remember a whole lot about [how they responded to my injuries]. [I] just [remember], you know, a little hug and that's about it I guess. Nothing too emotional or anything like that. [And even at the VA hospital in Madison I didn't have visitors too often.] I was inpatient but I could go home every weekend.

[And when it came to interacting with civilians and others when I was home, I didn't have too much of a difficult time adapting.] No [it was] not too bad except I couldn't, I wouldn't do much with them. I was on crutches and no leg or anything so I just stuck with my real close friends or whatever. That's about all I did. They'd come pick me up or whatever, you know. Hauled me around and we didn't just do a whole lot of things I guess.

[As far as my life chances and opportunities changing after my injury] I didn't worry about [that] I guess too much. I guess I really didn't know what I was going to do by any means but if I stop and think about it now how many kinds of things I've been limited all my life. Really, if I would have thought of them all then I probably would have made sure I went back to college or went to college. I should say not back to college [but], going into a different line of work I guess or something.

[When I think of what I wanted to do with my life before I even entered the service,] well actually when, I think, it had to be right before I went to Vietnam when I was on leave I guess my dad and I went and looked at another farm so I was really probably thinking about farming at that time and then the other option would have been the heavy equipment that I was into and do that when I got out. So it would have been outside, outside work I guess is what I would have hoped to have done.

[But when I got back from the war and started farming, I had difficulty adapting to some of the physical aspects of farming]. Well, yeah, that's probably why I quit in the end run. I had a brother who helped me all the time, and I hired man, so I certainly didn't do it by myself. I probably quit

farming because it's just plain hard getting around, up and down off of tractors and after so many years you get tired of it. But then I was drinking too much at the time though too so that had something to do with it no doubt.

[And I don't know if I can attribute my drinking to Post Traumatic Stress Disorder]. I don't know if I can do that or not. Ah, there's a frustration there for sure. [As to why I was drinking, I don't know if it was related to my experiences in Vietnam or not.] I [just] don't know that. I don't know that. Like I say there's a frustration and you just get started on it I guess and then you drinking more. Whether I, would have the same problem without Vietnam? Probably. Maybe. I don't know. [But I started drinking] pretty much after I got out of the VA [in Wisconsin].

[I also went to junior college when I returned from Vietnam...] I went to the VA. You know, they do the testing or whatever. What I remember is that they pretty much told me that accounting is what you're going to do or something like that. There's a lot of different things you can do but accounting. Anyway, that's what I ended up getting is an accounting degree and of course I don't like accounting or bookkeeping. It's just too boring. I did it for about six years I guess and that was enough of that. [So after farming I did some bookkeeping for a few years but eventually quit that].

[My injury definitely influenced my understanding of myself during the first year after being wounded]. Oh yeah, yeah it was, I don't know. There's a million things in that I guess. First are you supposed to be ashamed because you went to Vietnam? Are you supposed to be a hero? You never do find out where you fit in there. I guess it's kind of what it leads you to, you just don't get anywhere. You just sit back and wait for things to happen. One of the biggest mistakes I've made is not sticking my neck out somewhere and going for something or having a passion I guess they'd call it which I've never had. And I think that my disability is what really done me in because like I say I was a physical laborer, work, go, go, go type of person and that kind of ended that I guess. Unless I fought it real hard like with the farming and stuff. [But after coming home from Vietnam that feeling of not knowing whether or not I should be ashamed or think of myself as a hero has remained over the years.] Oh, yeah. That's a constant. That's a given I guess. You run into other Vietnam vets and you don't even want to, don't even want to ask them, you know, where were you or anything. You know, I just don't even want to start a conversation about it. So I generally avoid it unless it's there all of a sudden or like with this union, you know, it's a little different. But just to go up, some, you know, somebody says well that guy was in Vietnam, you know, did I know him or something like that. I'd go talk to him but I'd never bring up Vietnam. It's just, it's kind of a subject that I don't approach I guess.

[There are some things that I think happened because of my experiences in Vietnam. There are some things, such as my divorce, which I don't know what to attribute to]. [But], probably the drinking is [related to Vietnam], you know, the frustration that you never get to a point where you're satisfied in life. You know, if I was going to really have been able to get into the farming and did the whole shebang I probably wouldn't have had as much time to drink and on the marriage part I don't know quite what happened there. She just decided that she wanted to be single again and she started partying and that's kind of where that one went I guess.

[When I was actually separated from the service it was] not eventful really because I was still in the VA hospital and just a piece of paper I guess. But I suppose I was glad to be out but as I said before they ought to give them a choice to stay in if they want to but I think I probably wanted to get out. [But today they do let soldiers with amputations stay in the service after they are wounded and] well, I think that's great. That's what they should do. Of course these guys are in there as volunteers too

so a lot of them want to make it their career. I don't think the Army should be tossing them out then. You certainly don't have to be 100% able to sit behind the desk and the Army certainly got enough different jobs where they should be able to accommodate the disabled, is my thinking on it. So that's why I wrote these congressmen and senators. I told them give these guys a choice anyway.

[Looking back I see that my injury] definitely affected [my life's work and plans] because, like I say, I would have liked to have farmed all my life or handled heavy equipment or [have done] anything that's you know the physical labor thing whether it be carpenter work or mechanic work or anything but pushing a pencil and that's what really took me out of my game plan there.

[But I don't think my injury effected my relationship with my family that much]. I guess I don't talk about it or I never did talk about it much. My kids never seen me without a leg until I had some surgery here maybe three, four years ago. They come up to the hospital. Well, in fact I was home for a month too I guess without the leg on so they had actually never seen me without it before. [And with my grandkids today I do the same thing in terms of always wearing a leg so they don't see my amputation]. I don't want my grandkids to see me without [the prosthesis,] but they only see the odd shape and in fact, my grandson here yesterday seen all that and wanted to know what's going on there. [And] they've got ballgames and stuff now they're getting to that age. [And I don't really go to them because of my leg]. I did go, my wife used to get mad at me because I wouldn't go to them because I can't get up into the bleachers or, then if you go to a football game you stand for the whole thing. But I guess that's not as bad as getting cramped in the bleachers. So when she started raising hell I guess then I started going to the kids' ball games. It was hard for me. There's only one or two seats like in a gymnasium you can sit in that are comfortable. Now they're inviting me to come watch the little kids, which the gym is not going to be near as packed or anything like that so you've got pretty much a pick of your seats so I guess there's no excuse why I shouldn't be going. [And throughout my life my disability has influenced the decisions I have made in various ways. It even effected my education.] Well it got me going back to college right away probably. But there again it was the political situation at the time on the college campuses that I shied away from that. But the disability should have made me realize that that's what I had to do.

[And my injury effected my friendships in various ways because it led me to meet] some real good vet buddies that were either in Vietnam or in the service anyway and that's, in fact that's my social circle right now I guess is them guys basically. [And I even started going to reunions with the soldiers I served in Vietnam with. I was a bit hesitant at first, though.] [I] actually [enjoyed going to the reunions] because I was leery of going, here again because of that I didn't know what happened and I was afraid to find out what I would find out. Then I ran into these two guys there. One guy was behind me and one guy was beside of me when that happened. Then they start putting pencils here and pencils there where everything was and where the people were and where they were and where I was and so then I could finally figure out what actually happened that day. Until then I didn't know and that was a pretty emotional deal there. [But even though they remembered me and what happened, I didn't remember any] of them. Still, there's only one guy that I've seen that I remember and he lives 15 miles from here. There again, he wasn't there that day when it hit that mine so he didn't really know. He'd only have hearsay too of what happened. So I never did talk to him and there again, I didn't know if I wanted to find out either [because] I know I was really afraid to find out that I had done something stupid because I had such a blank memory or no recall of what happened. So I had no idea. And that was always in the back of my mind, you know, that you probably did something. Now I found out. [But there's another reunion coming up soon and] I'm not sure [if I am going to go because I still have my worries]. I'm thinking, you know, this one in West Virginia and I think it's in June. I haven't decided yet whether I'm going or not. But I think I

might. I don't know why I would be leery. I guess I'm waiting for that guy to jump out of the woodwork and say you screwed up. [I'm still bothered somewhat by not knowing what happened to this day]. Well I think I keep going back to the [fact] that I didn't know what happened and it just kind of keeps a damper on your life. You know, you're waiting for this to come out and you don't want to hear it and I think that may affect me more over all these years than a lot of things really. The injury, yeah, no doubt, I like to get out and you know, you just watch somebody walk across the rough ground or the field or something. Boy I wish I could do that. You know, you think back to them kind of things. There's just so many things you can't do especially if you're active or whatever or try to be, is one of the biggest effects I guess. That's kind of me.

[So I worry about what really happened and today I suffer from Post Traumatic Stress Disorder]. Yeah, I'm going talking to the--that's over drinking too, you know--talking to the shrinks up here a little bit now and they call it mild PTSD is what I got. This was several years later though. There again I was up there because of drinking and I talked to this one doctor. You know, I read something about the PTSD. He said no, no, there is no such thing. This was probably about 1975, somewhere in there probably. [And I was up at the VA because of drinking and I asked about Post Traumatic Stress Disorder and the doctor I talked to said it didn't exist.] It was a new thought I guess at that time and he apparently didn't agree with it maybe. I really don't know when the term was coined or anything like that, how far back that goes, but you would think he would have been one of the first ones up on it, up to speed on it. But he, of course maybe he was trying to tell me your drinking is—well actually it was not so much for drinking. I guess it was for panic attacks come to think of it, is what we started out with. I'd go down the road with my truck and I'd panic and I'd have to go home. That's what I actually went up there for. I guess that's what he was trying to treat me for more than the drinking was panic attacks. I'd wake up in the middle of the night and I'd have to get up and then my wife would come out. I'd just have to settle down and then I can go back to bed. I've had them, I still have episodes and that's why I'm going up there again now because I started getting them again. I couldn't even get in the barber's chair. As soon as he threw the cloth over me or whatever I'd panic. Can't take the enclosure. Couldn't take the church pews. I couldn't take the dentist chair. So now they got me on a drug and it's, maybe it's a little bit too heavy but that's a current thing we're working on right now. [And my panic attacks, they attribute those to Post Traumatic Stress Disorder]. Well, I think that's what they call that mild PTSD I guess. I keep mixing this alcohol in there all the time and I still ain't got that whipped. So you know one makes it worse than the other. [And] I think the panic attacks are about the only [symptom I have of Post Traumatic Stress Disorder]. I don't have any recollections. I used to have some dreams that I couldn't get away you know, because I was disabled but I haven't had those recently either.

[I don't see any positive changes that occurred during my life because of my injury]. Nothing too positive I guess other than I'd say my good vet friends, you know, and this reunion thing is a good thing too. But the rest of my life, it's not [positive], it's hard to come up with anything positive about it. [And as far as negative changes as a result of being injured,] well, I guess [I have] covered a lot of them. Can't do what I want to do. I'm limited to what I can do. You can't, you know, even enjoy entertainment. You can't even get in a movie theater unless you get the pick of the seats so you can get that leg out of the road or whatever. Anything where there's any activity involved. Of course I can golf and stuff like that. But there's a lot of limitations. [And as far as the most challenging thing I dealt with because of my injuries,] well, I suspect it was probably that farming. That is a physically demanding job and I did that for about 11 years and I got tired of it. That was probably the biggest challenge. I don't think it really affected too much, my getting married or anything like that.

[The panic attacks and drinking have definitely affected my relationships with other people]. Oh,

yeah, yeah. In fact right now I have a lady friend that wants to go to California, you know, fly to California and I said I don't think I can get on a plane. Too enclosed. So that's affected me there.

[But at the VA hospital they've only recognized my psychological problems] in the last few years. You know, it was before then the VA was terrible. In fact my dad ended up getting some high priced medication. He's World War II so he's eligible but yet at that time I told him stay away. Pay for it. Don't even get involved with them up there at the VA because it was bad. But the last few years now it's really changed and they ask you now and if you even give a hint of, you know, you've got a problem. You want me to schedule this? You want me to do that? You know, they'll come right out and ask you. So it's, a 100 degree turn or 180 degree turn or something here. [And] I think, I always got the feeling that when I was up here that they treated you like you were getting something for nothing so don't expect too much is my way of looking at it. You had people that are indifferent and downright rude. I had one doctor, I got, it ain't cancerous but some skin marks and he says oh, don't come back until you need me or something like that. So you remember them kind and then you got the other ones that are real helpful. But the real helpful ones, they weren't there a few years ago. [So I think it has changed because, well,] it's got an awful lot to do with this Iraq. I think actually, before Walter Reed became an issue out there with the treatment out there, I think it was actually changing already then. But I'd say it's been since Iraq though that things are really a lot better up there. [Its better because,] well they're helpful, they unless I just happen to be running into some good people now or something. I don't know, but they take an interest. You know, you want to see a dietician? Do you want to do this? You need this or something. I had a infection in my stump and I was saying that for a month I was off my leg and I went down to PT after that and they say do you want a new leg. Just like that. Years ago you'd have to go up and wrestle for it. [And they just weren't helpful]. That's why I say I told Dad stay away. I told different people that too, to stay away. You think you're getting such a great thing up there for treatment. There was a time there it got so bad that I was actually going to look into what would it cost me to buy insurance. [But in the last few years the treatment I have been receiving at the VA has improved and helped me deal with some of the issues I've been struggling with, such as panic attacks and drinking.] Yeah, it's been exceptional actually.

Profile of Mr. Nick Rogers (Above the Knee)
(Original Interview Transcript 49 Pages)

Mr. Nick Rogers lives on the east coast and was born April 24, 1948. He was drafted into the United States Army in 1968 and wounded in Vietnam March 1st, 1969. He is a right leg above the knee amputee and currently uses a prosthesis device. He is married with four children. He reports his general health status to be good. He reports smoking. The interview was completed on April 19th, 2009. This is Nick's story.

[My injuries include] an above the knee amputation—the right leg and I also had some other wounds to the chest, some shrapnel to the chest and to the rest of the stuff but the major wound was the leg. [Today] I have a cane that I seldom use. I get around pretty good on just the prosthesis and I use the cane sometimes when I get a little sore and have some problem which happens. But other than that I get around basically without the cane, without crutches.

[Before entering the military] I had a job. I worked for Blue Cross of New York. I was doing clerical work in the data processing department and I had been working there since I left high school. [I was expecting to be drafted.] [It was just] a matter of time [since I had] friends who had gotten drafted who had birthdays around my area....[And at the time] I lived at home. My mom had passed away when I was in high school. My dad was still at home and we had an apartment in Brooklyn. And my brother—in fact, I have a twin brother who got drafted the same day so we were just typical, I guess 19, 19 year olds going out on weekends and stuff like that. But we lived in an apartment...Looking at my son who's 19 now, it sort of brings back what I could remember I was like. It was typical that I would spend money. I had a job that wasn't a great job. I earned a paycheck. Didn't save money. Spent a lot of money. Went out drinking, you know, bars in Manhattan and stuff like that. Sporting, going to sporting events and stuff. Just, not a long-term plan at that point when you're 19. [I didn't have any sense of what I wanted to do with my life at the time.] Not really. I had gotten a scholarship to City College of New York but I decided not to go, instead of going to college at that point I decided to get some pocket money—some money to buy a car and stuff. But I really had no clue as to what I wanted to do long term. [So I was basically waiting around to get drafted]...

I think it was early '68, I'm guessing [when I actually entered the military]. I went overseas at the end of '68 and I had advanced training, I went to NCO school, and basic, so that would have filled up most of that year. So I'm thinking it was the beginning of '68 that I actually got drafted. [I completed my training] at Fort Jackson. I was Infantry and I knew that the unit I was going to or the class that I was going to at Fort Jackson, each succeeding class, or each class ahead of me had, you know, like I would say 80% of the folks got shipped to Vietnam. So I knew where I was going. But before I went we took some tests and I actually qualified for, they had something called NCO school, similar to Officers' candidate school, so I went to that. That was a longer course. That was at Fort Benning, Georgia. [But] what happened was I went through about, I think it was either a 14 or a 16 weeks course, I quit in about the 14th week because I didn't want to go over as NCO, a Sergeant E5 and start telling people what to do. So I came out of the school with a Spec 4 rank, Specialist Fourth Class. [So then I was sent to Vietnam and] after about a week of acclimation down in Biên Hòa I got picked up by the 101st Airborne...

[Our activity in Vietnam included going] out maybe three, four, five days at a time into the Highlands. An awful lot of hiking up and down mountains. Then we also went to the lowland areas

where they had rice paddies. It was just basically going out looking for the enemy. [So we were on search and destroy type missions]...

We had been choppered to an area that was hot when we landed and we were there about one full day and we had been going up and down mountainsides and we got into a rather large fire fight and that's when I got wounded....We were out and our platoon, I was in the machine gun unit which meant one person carried the machine gun and we carried cans of ammo. So we were usually at the rear of lines. So it's really like no plan. You just hear a lot of shooting going on in every which direction. There's not really a front line or a rear line and I got wounded. I actually took a round from an AK-47 in the leg. It was going on all day, this action, and they tried to bring in choppers to get us out—the wounded and those who had been killed. We had a few people killed. And they couldn't bring in the choppers at night time so I spent the entire night out in the field and that's what caused me to mostly get—the wound became infected. So, it wasn't like an explosion or anything like that. It was basically a round from an AK-47....[So] we were in the process of blowing up the enemy bunkers with grenades and stuff like that and the enemy was still there. They managed to leave their immediate area but with the tunnel systems that they had they could show up just about anywhere and that's what happened....I think I was hit towards the evening as it was getting dark and we had a medic. Everybody calls their medic doc and he gave me a couple shots of morphine and I had some water and that was about it. To tell you the truth I didn't feel a whole lot of pain. When I got shot I didn't feel pain either. It was just a very intense feeling of heat and you really don't know you're wounded. You look down and you see you're bleeding. But I guess the adrenalin flow takes away a little bit of the fact that you've actually been hurt. But I did get, I think that evening just to get me through the night—then the Medevac'd me the next day—I think I had a couple shots of morphine and that was it.

I don't think about [the day I was wounded] a lot but I can still picture in my mind when I actually got shot, when I actually got hit, and it was, it was very much, we hadn't, we'd seen some combat prior to this but this was a very, rather large firefight and I don't think it was decisions that led us to get trapped or in an ambush. So I don't really feel, I think it was just the first time you get in such a hot fight it's like mass confusion. Gun fire all the time. You're not quite sure. Like I said we were in the gun crew so we were at, not at the very front. Had no idea how far the actual front and the real firing was going on—how far away that was. You could hear it. But I don't believe it was anybody's decision that got us into this. Because we had spent a couple of hours, like I said, examining their tunnels, blowing up the pieces of the base that they had, and they evacuated as soon as they knew we were coming but they hung around enough to start a fight. But I don't think there were any decisions that led us to something that was a mistake of any kind.

[I remember the helicopter ride out]. It was very quick to the hospital and because we basically traveled all the time by helicopter. That's how we got to the areas where we were supposed to do our search and destroy type of thing. We sometimes walked to an area. Most times we got choppered. Sometimes in the evening they would drop you off in an area and once in awhile we'd get a chopper ride back to our base camp but we traveled basically like you take a taxi cab today. That was the way we got around. [But they took me to] Quin Yon in I Corps. [As far as how long I was there for,] you know, I know I was at one of the hospitals for quite a stretch because they had done the surgery on me and I still had my leg but I was in a lot of pain and there was a lot of infection. I think I was in and out of consciousness for awhile. And I'm thinking that that took place still at Quin Yon. I think that was the only place that I was at in Vietnam. [And I think that is when an infection set in.] I mean I don't know but my guess would be yes. They treated the wounds. I had some shrapnel in the chest. I had a couple of pieces in my wrist and then they treated the leg wound as well. They removed the bullet. In fact, they gave it to me—a souvenir. I don't [have it anymore though].

[But I was at the field hospital for quite some time and] when I say quite a bit of time, I'm guessing more than seven or eight days. That's why I think Quin Yon was the place I was at and I think it was the first place I went to because I do remember when they put me in for the surgery and I think I was there about seven or eight, nine days. And I guess conditions were getting worse and stuff because they had mentioned to me about the infection and would give me a lot of antibiotics and treatment and stuff and then I think it was probably four or five days when they decided to actually do the surgery [to remove my leg] above the knee. [So they made the decision to remove my leg because of the infection.] [But] I think probably I wasn't totally aware of exactly everything that was going on. I used to sort of wake up and not have [memories]. I mean I have memories of being there. I think I have memories of them telling me what they were going to do and I went in for another surgery and I'm pretty sure they told me ahead of time what they were going to do. And I think I was mostly out of it. I wasn't totally aware maybe of what was going on unless I've just suppressed those memories. That's the other possibility. [Then as far as the rest of the care goes] I think it was mostly getting [me] ready to be shipped out to another hospital to come back stateside—to make sure that I had no infection and that I was okay and well enough to be transported to stateside. I believe the next stop was Camp Zama, Z a m a, in Japan and that was just a place where an awful lot of the wounded went before finding out where they were going to get shipped stateside. I think I was only in Camp Zama maybe three days at most or something like that. [I don't remember] a whole lot [about the care or interacting with the other soldiers there]. I really don't [remember], unfortunately. I know that there were some, they actually had some veterans who had wounds that were not totally severe working there and helping you out to, you know, change the bed sheets and do stuff like that. But unfortunately, I think I was there maybe two or three days but I don't remember a whole lot about it. [But once they thought I was stable enough they sent me to] Walter Reed. [I don't really remember much about the flight there]. I think I do remember being put in a big transport plane sort of stacked up with other folks and not being able to sit up. Just, all I can remember was at most very uncomfortable and that's the only memory that I have of it. You couldn't really move around a lot. You couldn't sit up.

[Then] I remember spending the whole summer [at Walter Reed] before they shipped me to the VA hospital in Brooklyn. So I would think I came back toward the end of the summer then I got shipped to Fort Hamilton. There's a veteran's administration hospital at Fort Hamilton in Brooklyn. I was there basically from the spring I would guess, all through the summer. [But at Walter Reed] most of [the treatment I received] was physical therapy, getting people up to walk around, because I think I must have weighed all of 120 pounds by the time I got there. So they tried to build up your strength. You'd have physical therapy every day, they'd take care of your wounds, check your wounds and stuff. And I knew that I was scheduled not to be treated at Walter Reed that I was going to get shipped out. Some patients I think they actually kept at Walter Reed and did the rehabilitation there. But I knew that I was destined for the VA. But it was, physical therapy, having you up on crutches, getting you to walk around, get your balance back because, you know, your center of gravity changes and stuff like that. So it's mostly physical therapy every day.

[At Walter Reed I remember that] after I was able to get around on crutches and wheelchairs, you know, they try to keep us busy. They had entertainment. They had movies. They had celebrities coming to do shows and stuff like that. It was a quick summer. It was a relatively quick summer plus my folks came down a couple of times from New York by bus “word inaudible” and stuff. You know, on different weekends and stuff. My dad would come down, take a bus ride down. But it was basically just to build up your strength and get you ready for rehabilitation and there was nothing about getting me sized for a prosthesis or anything like that. It was just to get you back in shape. [And by that time] I was getting around very well on crutches and the wheelchair. I have to use the

wheelchair. I had physical therapy—I think it was once a day. You know, three meals a day. Used to maybe get one meal served to you and then when you were well enough to get around you'd go to the cafeteria. And a couple of times, a buddy and I, we made some friends there, you know, we'd go into DC and see a movie or something like that.

[At Walter Reed] I'm not sure if I remember seeing doctors very often but I know that we saw the nurses at least two or three times a day and they were very good and very caring, very interested in your welfare and stuff. [But nothing in particular stands out about the medical care] other than that the nurses really seemed to try and talk to you a little bit when they came by to make you feel a little bit better. They were pretty compassionate folks they had working down there then. And they give you pretty good treatment and care there. I can remember when we used to do the physical therapy and you would have somebody with you for about 45 minutes helping you out, they were very helpful. They'd try to reinforce that you were going to be okay and they knew what they were doing. It was as much for the spirit as the body. It was a very good experience with them. But it was mostly nurses. Like I don't remember seeing an awful lot of doctors there who would come to see you and stuff. I guess they did every so often when they did their rounds. But I do remember the care from the nurses was excellent and same when I was in Japan too.

I [also] made some good, close friends and some from the Midwest, some from all over the United States. A lot of them were amputees. They were pretty severe injuries. Guys who couldn't walk without assistance. But I made quite a few good friends. We had some people who were, could make you [feel better] when you're feeling a little bit down, and some people who were, believe me, in a lot worse shape than me, who had some of the best attitudes in the world. Who sort of could brighten you up or cheer you up when you were sort of getting down on yourself. [And I felt down on myself] quite often. Especially when I first got to Walter Reed. I didn't even want my parents, my dad, to visit me. I didn't want him to see me, you know what I mean? I just felt, you know, I didn't want him to see me in the shape I was in. It was kind of [bad], and then after he came down and we talked and we spoke and I had visits from my sister and her husband. At first I didn't want to even see anybody but that was just me personally. You know, it was a difficult thing.

[Then I was in treatment at the VA in 1969]. I mean and I think I was there all through the summer and the winter and the spring and they had assigned me to a place—I think it was in Whitestone Queens—the company that was actually going to make the prosthesis for me. They didn't do that at the Brooklyn VA. I think I had a second surgery there, some more corrective surgery, to my stump by the surgeons who were there and then I would go to Whitestone Queens to be fitted for the prosthesis that I had. So I think I was there, I know I was there through that winter and I used to spend, some weekends I would come home and on Fridays, I mean they'd let us go out in the evenings. We'd go to a bar and stuff like that and hang out and stuff. I didn't have the leg then so I was getting around on crutches and stuff. But I think I was there throughout that entire winter—'69 into '70. [And] the doctors were great. I did get to talk to the surgeon quite a few times. He was a very experienced and older guy and he also had a younger surgeon there. The nurses were fantastic. They could be tough on you when you wanted your pain medication but the service was excellent and we had quite a few older veterans there too who were not from Vietnam. I was with a couple of guys who I actually made very good friends with from World War II. They were there for I don't know what various ailments and stuff but the nurses and the doctors and I did get to talk to the doctor, the surgeon. They had the surgeon there quite a bit. I thought it was excellent. [They also took me off the morphine eventually.] I mean you would get shots, you would get shots after surgery for a certain amount of time and then if you needed something like Darvon or whatever, they would give you that but you didn't always get it every time you thought you wanted it. But they cared for

you. It was very busy. I would say we had on our ward maybe five or six other Vietnam veterans who were from Philly or from Queens or other parts of the city and we had some older veterans and the nurses were tough but you could tell that they cared for you. And we spent a lot of days just, you know, you have your meals brought to you, you go down to the rec room and watch the television and stuff like that. But I think the care was excellent at the Brooklyn VA. [But] I took a lot of the walking and learning how to use the first leg from the place that was in Whitestone Queens. I think they were, I forget the name of the outfit there but they were one of the places where they'd send you to get fitted for the prosthesis and then they would teach me there how to walk with it and stuff, you know, properly. So that you balance yourself correctly and stuff like that.

[I remember how I felt about some of the medical care I received after being injured]. The care at the hospital in Vietnam, I'm not sure I remember a whole lot of it. I'm sure it was good with the surgery. When they said they were going to, that they had to amputate the leg I think they might have told me it was a possibility but I think the surgeon's care was good there. In Walter Reed for the few months I was there, for basically the physical therapy, I thought the care was excellent and I think also that the surgeon that I got to meet and know a little bit at the Brooklyn hospital was excellent as well. Dealing with the VA the last few times has been a little bit more difficult when I've needed stuff done.

[But] I would rate [all of the medical care I received in my first 12 months of recovery as] excellent. I know Walter Reed at that point was, I know now they've had some problems with the veterans from Iraq coming back to Walter Reed and I know that we had more personnel wounded in our war than in this war, but it was like class A. It was a class A place to go and the people was excellent.

[I was also rated for my injuries and] I think for the injury to the knee, it was 60%, the above knee, and for the other injuries, the combined injuries it turned out to be 70% disabled. That was for the shrapnel to the wrist. I have a limited amount of motion in my left wrist. So when they combined the two I think they, I think my rating, yeah, my rating is now 70% disabled and that doesn't change. It's not like I can go back in a couple years and they knock it down.

[Sometime when I was in care I also received a Purple Heart but] there was definitely not a ceremony. I'm not sure if I got it presented from an officer and I think it might have been when I was still in Vietnam that they gave me the Purple Heart. I think an officer may have come by and given it to me. I had it before I think I got to the States. [I also received] the normal things for unit citations for your unit and the Combat Infantryman Badge for serving overseas and during the time of war.

[When I was at Walter Reed my family came to visit me and I was reluctant to see them because] I didn't want them to see me in the state I was in and it was almost like a little bit of embarrassment. Hey Dad, you know, I'm laying in bed. I can't do anything. You know, it was sort of like a little bit [embarrassing], I don't know if it was guilt for being hurt or being in that situation but it was more or less I just didn't want anybody to see me in that kind of shape. And that was probably the roughest part psychologically when I first got to Walter Reed. When I had been in Vietnam or Camp Zama and all those other places I still felt I was part of the Army or whatever. But when I got there and then we finally got cared for and we could get out on our own it was almost a little bit of like I don't want people to see me like this without a leg. In fact, right now I work at home like five days a week. I'm in the process of getting a new prosthetic device and I don't even want to use the cane sometimes because I don't want people to see me as disabled or handicapped. I mean it's embarrassing when somebody comes up and says, offers you a seat now on the subway. Do you

know what I mean?

[My friends' responses to my injury were] pretty good. [They were] kidding me on, joking with me about my problem, you know, and not giving me an easy time. But eventually as I think I got more used to the fact that I have one leg, and that my folks saw me like that and my family saw me like that, I accepted it a little bit more. I think I accepted it, I just didn't want anybody else to see me like that and I got over that and it was nice to have the folks come down and I think I probably made a trip back to New York for a weekend one time to spend some time but I wasn't too comfortable getting around on crutches. That was before I had the prosthetic device. I didn't really want to get around a whole lot and be out in public with a missing [leg], somebody missing one leg.

[But I remember how it felt when I finally left the VA hospital]. It was sort of like you had all these people to look after you or to have a little bit of a compassionate people to talk to you and whatever. When I was back out of that and I finally got done with the VA and got my prosthetic and they approved it and stuff, because it was done by a private firm. Yeah, so being out on your own was a little bit difficult feeling and then having to go back and look for [a job], well I got my old job back. I didn't have to go looking for a job. That was a little traumatic going back to work the first day. [So I was apprehensive when I had to leave treatment]. Big time. I was, because then I thought like gee, suddenly it's like leaving your family and you're out on your own again. And I mean I did have my dad and we had the apartment so I had a place to live but it was more psychological [because] I'm out on my own now. You know, I had these people taking care of me for a year or so. [And] I think I still had my doubts [when I was leaving treatment as I was thinking] why me and you know how could this happen and stuff like that. I don't think I was totally over that. I'm not sure how long that took. But I thought about it quite a bit when I was back outside the hospital system because now I'm out in the world and on the streets with people who can get around and do everything they want and suddenly I can't do all these things.

[But after I was injured I was] not sure where my plans were long term. I don't think I had them before I went in but I knew when I came out that I don't think I could just do, I mean certain things, certain jobs, certain things I couldn't do. So I knew basically that if I wanted to try and be a success or successful in life that I had to go to school and have an education and stuff. [And those first 12 months after being injured I think I realized] the error [I made] when I got out of high school and took a job—I said I had the opportunity to go to college and I didn't take it—I knew that I had to do something if I wanted to have a career and be a little bit more successful. When I got out of school you could actually go to a company, start in the mailroom, and work your way up. I knew that I had to do something. Go to school and try and get a bit of background education so that I could actually get a decent job. So I knew that that had changed. I mean when I was, before I got drafted I think that was just an intermediate job. I knew eventually I was going to get drafted but when I got out I knew I had to make some decisions to improve myself. [So after being injured my educational goals also changed as] I definitely took advantage of the VA [paying] for my college education. They gave me some testing to see what I would best be suited for and I took some of those tests and I thought, I talked to one of the counselors at Ohio State. In fact, he was a friend of our brother-in-law's buddy. He was a counselor at Ohio State and we set up some tests, I took some tests, and they were very good getting me into school and the veteran's administration paid for everything. They paid my tuition. They paid living expenses. So I really took advantage of that. It took me awhile to do it. Like I said, I was off work for about three-quarters of a year not doing anything because I had money in the corps by that point in time.

[The summer of 1970 I was just basically] riding around, hanging out with people, spending a lot of

time on my own in the house, you know, not getting a whole lot accomplished. I was really leery about going to work and then I think when my brother came back home, since we both worked at the same company, that was the incentive to go back to work. I don't think I started working until he actually came back from overseas. [It helped] big time [to have him with me]. I was really very leery about being out on my own and I think when he came back from the service from Germany that was in maybe September or October—because that would have been two years. You were in the service for two years when you got drafted. So I don't think I went back to work until he came home from overseas and then he wanted to get a job and he had to go back to his old job and I think that was the incentive for me to go and it made it a lot easier to have somebody to be there with you.

[I think I was able to eventually adjust to my injuries because of] my background. I'm a Catholic. I don't practice anymore but I went to parochial school, a Catholic high school, and I think the fact that it was driven into you, this is what you're supposed to do. You don't do a whole lot of questioning and I knew that at some point in time I had to get a job, get a career, and do the right things. I didn't really question that I was going to fail at that. I knew that that's what I had to do and I think the support of my brother and my family really helped an awful lot as far as knowing that I'm not going to question what I do. I'm just going to do this. I mean we all have our doubts and this could have been different and that could have been different but when [I] got drafted I wasn't pro-war. I was probably more anti-war. But I went because I knew that that's what we were supposed to do. You did what you were supposed to do. Years later you can say that, you didn't always have to do what you're supposed to do. You can question stuff. But I think that the background that I had growing up between the parochial Catholic school, I mean parochial school and the Catholic high school just do the right thing and I think that's what got me through most of the stuff. I would say [the faith did] not [have] a whole lot [to do with my adjustments]. I think it was more the training and the reinforcement and the things that you do by rote. You just do this on Sundays, you do this on Fridays, and whatever. The faith, not so much a big part I don't think. Definitely not a big part anymore.

I think [the care I received in the first year] helped me to get through an awful lot. I think since then though the psychological things that I've encountered or have had to overcome that was something that couldn't have been taken care of the first year. Physically I think that was fine to prepare me for this but psychologically over the course of times like [this], you know, your kids were young. I couldn't play baseball or do sports with my kids. When I got married, I had children and that's when I had more of the thoughts about, you know, how do I handle this? All the other dads, all the other kids have their dads out there playing ball with them and stuff. I mean I tried to participate as best I could and I think that really hurt me an awful lot. Physically, I think they prepared me fine to get to what was coming down the line for the next 20, 25, 30 years or so. But psychologically over the course of time I've dealt with a lot of different things and some of them have been things that I wish I could have done or how do I handle this and stuff like that. I mean when I was on my own, going out, people always, they made an effort to help you out and take care of you but when it was my turn to take care of my kids and stuff that's when I really felt it an awful lot. Raising a family, being a dad, especially if you have boys. That sort of hurt quite a bit too and I realized that, you know, nobody can prepare you for that but, you know, it was kind of a difficult adjustment there. [And] I think I dealt with [the psychological part of my injury] okay but I don't have anything to measure that up against and I know there's been some severe cases in the papers now from Vietnam era and even from the kids who are over at Iraq but that never even came up and I thought well I guess I'm doing okay unless somebody else tells me otherwise. But there were times when I think I could have used something like that and I was never forthright enough to go out looking for that kind of help. I didn't think I was that bad off but I think there could have been times when I could have used that

kind of help, that kind of counseling.

I was 19, 20 I think when I got wounded. I really didn't know what I was going to do in the future. I was really worried about, you know, I was with another veteran who, another amputee, he lived at the other end of Brooklyn from where I live and he took it, he made me feel better because he was taking it so hard. It was really like what am I going to do when I get out of here. At some point in time the system's going to send me back out to the real world and that's mostly what was on my mind [because] at some point you get discharged, you're out on your own, and what are you going to do? You're only 19 or 20 years old. You can't participate in sports anymore. You can, you know, not do the things that people accept every day as part of what they can do. I mean sometimes I have dreams at night that I can still run, you know, and I wake up and find out I can't run. Mostly I was worried about my future. You know, what I was going to be doing.

[So there were challenges along the way.] I think it was mentally the adjustment of once I left, you know, the practicing and whatever just to be out on the streets and taking, walking up steps, getting on trains, and just getting around. That was the biggest challenge. [It wasn't easy] to be out in public when there's crowds and there's people, you know, I mean even if you learn how to walk it still takes a certain amount of concentration and when you're out in public and stuff like that it can get a little bit scary sometimes the first couple times you're really out on your own. When you go up a flight of stairs to get the L or the train and you're on the train and you're standing on the train and stuff. So it was always a little, being a little bit super careful. You don't want to fall down. You don't want to embarrass yourself and whatever.

[Looking back] I'm not sure I learned how to handle [being injured] too well. I just know that I wanted to walk. I was tired of being in the bed or in the wheelchair or on crutches and I think that's what drove me to [get out]. I just wanted to get out and be able to walk again. To not consider myself a cripple. Do you know what I mean? If you can get up and go out on your own and walk around, the fact that you're handicapped, so you can push in the background a little bit. So that was the biggest drive to be able to get up and walk around on my own [because I never really thought of myself as a handicapped individual]. I mean I kid around today with my kids and stuff saying you know, don't beat up the cripple and stuff. I think about three years ago I went and I actually got a handicapped parking permit for my car. What's this, '68, this is 40 years. So for 35 years I never even went and got a handicapped parking permit. I would park where everybody else parked, walk where everybody else walked. So in my own mind I knew I had limitations but I never had that identity that I'm handicapped. As I got older I figured, save me a little bit of walking at the malls and stuff like that so I actually did do. But for 35 years I don't think I ever, you know, I considered myself as normal as you could having lost a leg.

Profile of Mr. Adam Nelson (Above the Elbow)
(Original Interview Transcript 35 Pages)

Mr. Adam Nelson lives in the South and was born July 5, 1944. He enlisted in the United States Navy in November of 1964 and was wounded in Vietnam September 6, 1967. He is a right arm above the elbow amputee and he currently uses a prosthetic device. He is married with three step children from a previous marriage. Mr. Nelson reports his health as good although he does report several health complications. These include smoking, using drugs and/or alcohol, heart disease, being overweight, stump pain, phantom pain, depression, PTSD and other unspecified mental health problems. The interview was completed on April 20th, 2009. This is Adam's story.

I lost my right arm and the initial injury, it was below the elbow but in order to fit me for a prosthesis, after I got [injured], you know, after I was in the hospital. In order to fit me for a prosthesis the surgeons decided that, you know, if you can picture on the end of your upper arm there's like a nub and in order to fit me for a prosthesis they had to take that little part off. So in the hospital I had that operation. They took that off and once I got healed up I got fitted for a prosthesis and oh, I guess the rest is history so to speak....[I received two Purple Hearts] in the hospital in Philadelphia. I got there on the 16th of September and it was some time between that, the 16th of September and like December or something like that. And then there was the Vietnam Campaign ribbon and a couple of others. I can't think of the name of them now [though].

When I got out of high school I had a really close buddy of mine and we disagreed. I was working a job in a hospital. I was a dishwasher. I worked in the cafeteria and my buddy wanted me to go into the Air Force with him. And I was just working a job out there just making a little money just enough to pay for my car and just to keep me going at the time. I worked a full time job and I refused to go in the service with this guy. I said look, let's hang out for a whole year and then we'll go in the service. But my best friend, he decided to go into the Air Force like oh, within six months after we got out of high school. So that left me out on the street by myself and so I, you know, I was working at the hospital and I worked in the cafeteria. I worked in the food department and you know, feeding patients, taking up trays and stuff to the floors, and stuff like that. That's all I did. [So] when I got out of high school I ended up, like I said just hanging out for about a year and not wanting to be drafted into the Army. I said to myself I'm going to go and join the Navy and that's how I ended up in the Navy. [So my] attraction [to the Navy] was, I didn't want to go, I didn't want to get drafted into the Army. So I figured well go in the Navy and that way you join up. You won't get drafted into the Army so that's what I did. But I didn't want to be a so-called grunt in the field but as it turned out, as luck would have it, that's where I ended up at. I joined the Navy and about a year and a half, two years, within two years I was studying to be a corpsman and the Navy provides corpsmen for Marine Corps and that was something I didn't know at the time. So I became a corpsman and spent six months training in Philadelphia Naval Hospital and the next thing I know a bunch of us guys was, we were shipped out to California for another month of training and we ended up going to Fleet Marine Force School and after that we ended up shipped out to Vietnam and then we were assigned to certain divisions of the Marine Corps.

[So I joined the Navy and was eventually sent to Vietnam to serve with] the 3rd Battalion 26th Marines. That's where I ended up at. [And] I was scared, I hope this don't offend anybody but I was scared shitless. Yep, and I had to, in my head I had to do some readjustments and the only thing that really saved me when I got there was the Marines that I got assigned to they, for some reason

whatsoever they just kind of took me under their wing and they taught me the ropes and I paid attention to whatever they told me and whenever we went out on a sweep, we went out on an ambush or whatever, I was, I made myself invisible, I became one of them. Instead of being a corpsman, I became a Marine and in that sense I mean that when I went out I dressed like them, I looked like them, and I carried weapons like they did. The medical [bag] that I had, I would put it behind me on my belt. I would put it in my back, right on my hips so that anyone who was looking for a medic, they wouldn't see it.

[I was wounded near Con Thien and] by the time we got to Con Thien, we were getting set up and we were getting, we went out on a sweep and that evening all I remember now is that we were getting ourselves situated for the night and everybody was digging foxholes and things like that and getting ready to settle in for the night and to the best of my memory all I remember was all of a sudden it's like the whole sky started raining like mortar rounds and we got hit so bad that I got hit by shrapnel, a piece of shrapnel in my left hip and there was injured guys all around. There was guys who had got hit and they were dead and there was a young guy from Georgia, we called him Georgia boy, and I think that he was like 17 when he joined the Marine Corps or something. All I remember is he had blonde hair and he had got hit with a piece of shrapnel in the side of his skull and it just, it made like a just totally clean wound. Just went right through his skull and it didn't even bleed and as my memory serves me that's all I remember seeing [about] him was seeing that little hole in the side of his head right before the hairline above his eyebrow. He had got hit and that's where he died at and that was, that was on the 6th. No I think that was on the 5th of September and that was in Con Thien and that was the same day that I got hit in my hip and I remember that we couldn't get out. They tried to bring helicopters in to evacuate the wounded but the enemy firepower was so strong that the helicopters couldn't land. So they had to leave us out there all night and the next day, the next morning, I believe the next morning was the 6th of September and the Army was somewhere in the area and they was coordinating this particular mission with us. So the Army had tanks and I remember the tanks came out to evacuate the wounded and I got on a tank. I remember the tanks were taking out all the wounded. They were taking us to the road, the nearby highway, and they was going to put us on those trucks—the military trucks they had that was going to take us to the hospital. [It was a truck that was about] a ton and a half or something like that. Anyway, they got us on the road. As soon as the tank came out of the rice paddies and it went up on the road and it was heading toward the damn truck. All of a sudden we got hit again. As soon as we got up on the road we got hit again and the last thing I remember was I stood up on the tank and I was trying to jump off. When I jumped off the next thing I knew is when I hit the ground I looked around and I was so scared that I didn't know at that time that my arm had been hit. My arm had been blown off and I didn't realize it until I looked at it. When I looked at it I saw my arm was hanging off by a piece of skin. That's when I saw it and that's when it started hurting. Other than that, I didn't even know that I had lost my arm. A corpsman from somewhere came and at the time that I was trying to get off that tank there was a corpsman there who was trying to help me or something. But like I said the next thing I remember I was on the ground and I was trying to crawl back underneath the tank. I remember that there was a sergeant who was in charge of that particular tank, an Army sergeant, and when that round hit that tank he got hit. When I saw him again, I think it was a couple of days later, I was in a hospital bed and this guy was in the bed next to me. Yep, and I never got to talk to him or anything like that because he was in so much pain and all I can remember was his moans and groans and the next time I heard about him they told me that he had passed away.

[But] all I remember [about the initial treatment I received on the field] was some guy hit me with a shot of morphine to help me with the pain. I remember that much. The night, that evening when I

got hit in the hip, I think it was a Wednesday evening and we had to spend the night out there in the field and there was blood all over the place. I remember the bugs and the mosquitoes and the flies, they was attracted to the blood and whatnot. It's like me and the guys, it seemed like we spent a whole evening out there just swatting flies away and stuff like that. We got, someone said we was going to get hit from some guys coming from behind us and everybody panicked and everybody tried to pick up a gun or a rifle or whatever. This is the only time that I can remember that I actually saw something to shoot at and like I say it was a panic situation and all the guys that was with me they was screaming at these guys who seemed like 50 yards away. It was a lot of brush and high grass and reeds and whatnot and we were trying to get these guys to identify themselves and all we done was, it seemed like they was moving towards us but they wouldn't say who they were. All I remember was everybody that was with me, everybody that I was with, we just opened up fire in that direction and we just emptied our carbines, our M16s shooting over there. I don't know to this day, I don't know if I hit somebody or I killed somebody or whatever and I often, I've wondered since then [because] we don't know [if they were friendly or not]. We really don't know. All of a sudden they were there and they didn't identify themselves so we opened up and start shooting. After that things settled down, it got quiet, and we were out there for the rest of the night. Everybody just kind of tried to make sure that everybody was comfortable and I tried to do whatever I could for the guys who were around me who was wounded but I was wounded myself so there wasn't much I could do. But, we got through the night and the next morning, like I said, the Army tanks came out there, we got on the tanks, and they was taking us to, they was taking us out to the road to put us on these transports to go to a hospital and that's when we got hit again. [But] after I looked at my arm, to be frank and honest, I think I passed out because when I woke up I was in a hospital ward somewhere. [I don't know how long I was there either]. The next time I woke up I was, let's see, I think I was on a plane, I think I was on a plane heading for Okinawa or heading for Alaska or something like that and it's blurry after that. I was in a stretcher, I know I was on a plane, and they had, it was like four or five tiers of wounded guys on each side of the aisle in this doggone plane. Maybe it was a C-130 or something like that. Like it was a hospital transport for wounded. And I remember that and. . . I think I went to Okinawa. From there I think we flew to Alaska. I know we went to Alaska because I remember the door of the plane opening. I was in bed. I was drugged and everything but I remember that cold air coming in and that didn't last long. I was in and out. But I remember the cold air coming into the plane and somebody must have said we're in Alaska or something like that. And from there we went to, I think we flew to either Seattle or we flew to McGuire Air Force base on the east coast of New Jersey.

[But I don't remember much about being hospitalized in Vietnam because] I was in and out. I was drugged and there was, the clear memory that I have, that I, when I woke up, like I said, the sergeant who was in the tank that I was riding on and he was standing up in the chair and he was exposed. You know, his upper torso was exposed. And I remember seeing him when we got hit. After that the next time I saw him he was in the hospital bed next to me. Now as far as what they did to me medically, I have no knowledge of that whatsoever. [And I eventually ended up at] Philadelphia Naval Hospital. I remember I got there on the 16th of September and I was discharged, let's see, I was discharged in March of '68. [And] the only surgery I had in Philadelphia was, like I said, after they had to fit me for a prosthesis, a right arm prosthesis. Like I said the bone on my left arm, the total bone, you've got that little nerve on the end and they had to take that off and that's the only surgery that I had and that's the only time that I got high. I tell people right now. I really understand how people on drugs like the feeling because when they put me under, whatever the drug was that they gave me to put you to sleep—you know you start counting at 100, 99, 98—whatever that drug was. . . I remember they was rolling me down the hallway and I remember it was like I was floating on a cloud and all I could see was the stars and it was just a great feeling. But that's as close as I

ever came to getting hooked on drugs....[And] The people that took care of me, I have the greatest respect for them. Especially the physical therapist. I had an experience with a physical therapist in the hospital and the lady told me, I reported to the physical therapy unit and the lady told me right off the bat, she says tie your sneaker. And here I am a guy with one arm and I'm, you know, I'm trying to figure out what she's taking about. And she said do it just like I'm telling you to, you know, light a cigarette or whatever. She said it just like it was, you know, it was automatic and it was no problem. I'm trying to figure out how in the world am I supposed to tie my sneaker with one hand. The lady said, did you ever try it? I said no. She said, well try it. So I tried to tie my sneaker with one hand and I ended up tying my sneaker, a double bow with one hand, I ended up doing it and I was totally shocked. That was the beginning of the end of physical therapy for me. Yep. That was it for me. After that, you know, it was like the sky is the limit. You know, I did it and I shocked myself and after that it was no looking back. You know, I just felt that wow, I had learned something that I never would have thought was possible in a thousand years. [So] I give those people the highest credit that I could give anybody because something as simple as that, what that lady told me, it just flipped me out. It turned my head around and after that you know, it's like you say to yourself well anything's possible.

[And] I think it was right after New Year's in '68 when I left [the VA hospital] and I went home on leave and I was home until I got discharged and that was in March. But, I don't know if I, I didn't regret it or anything. I was trying to really look forward to dealing with the rest of my life. You know, I was trying to look forward to dealing with life on the street—every day life. Trying to get adjusted to, you know, doing all the normal things in life. And the hospital, I kind of feel like I just kind of left that behind. I didn't hang onto the memory or nothing like that. It was, okay that was yesterday. Today is today, you got to move forward and that was my feelings towards leaving the hospital. Leaving the hospital to me was a step in the right [direction], you know, that was a step forward for me.

[When I think of the treatment I received during my first 12 months of recovery]. I can't remember anything negative about it. The most negative things that I remember about hospital treatment is what I see now on television. At the time that I was involved and I was in the hospital, I can't remember what I'm seeing on television now. That's what's happening to the veterans who are coming back from overseas from over in Iraq and Afghanistan. I can't remember that in my case, you know, in my case I don't remember anything negative. I remember people, you know, I've got the most highest regards for them. I can't say anything bad about them. If there was something that was happening, I was not aware of it.

I [also] had a shrapnel wound in my left hip—my upper leg on my left hip I got almost like a one inch scar. It's a piece of shrapnel that hit me there and it killed a nerve in my leg and for six months to a year after I got out I was wearing what they call oh, I guess it was a shoe with kind of a strap on it with a spring-loaded something that when you stood up if you lift your foot up it would lift your toe up. I wore that for six months to a year after I got discharged from the hospital. And it got to be so aggravating that I just got disgusted with it one day and I took the thing off my leg and I threw it in the garbage. [But] every now and then, whenever I need to I go back to the VA and they will make me another [prosthesis]. If I wear it, whenever I wear it out, you know, I beat up on it or whatever, they're right there for me. They give me a new one with no questions asked. [But] I remember I got mad at [my prosthetic] and I said to myself I am tired of putting this thing on and then having to put my arm on and so I took the thing off and I threw it in the garbage. Now when I walk I've got to try to lift my foot up mentally. You know, I try to make my brain tell myself to

look, lift your toe up so that you won't drag it. And I did that. I did that for six months to a year and all of a sudden my foot got better. All of a sudden I got feeling back in my foot and I was able to lift my foot up as I walked. Once that happened, [I] ended up going back to the VA, so they re-evaluated me and they cut me by 10%. [But as to whether or not I thought that was fair] all boils down to like I said. I've got this thing about me where it just keeps saying to me, it's like would you rather be alive here in this condition or would you rather be dead in Vietnam. And that's the one thing that, you know, it just made me look at things in kind of a different light and I didn't put too much weight on what happened to me. I've ran into veterans since then and you know, because they knew what happened to me, they've been trying to get me to go back to the VA and get my 10% back. But, I can't do it. You know, it's like going down to the welfare and lying about something to get an extra ten dollars or whatever the case may be. Anyway, that's the way I feel about that part of it. I just take my life as it's been handed to me and I take it with the blessings that I've been blessed with and I just feel like I've been blessed with what I've ended up with and I just try to live my life with what I've got.

[There were challenges on my road to recovery too]. Well, the challenges was they were enormous in a sense but if I thought I tried to put them in a different perspective so that they would not seem as dire as they might have been to someone just looking at me from the outside. I tried to tell myself, you know, one of the most, like I said, one of the most motivating things that kept me going was. . . I might have mentioned the story that I mentioned about this soldier that I met and he was in the hospital in Philly and he had lost, he lost both of his legs and he had been blinded and this was the guy who wrote this letter, typed this letter on this typewriter and it was a business form letter and [included] dear sir and all this stuff. I remember reading this letter and I could find no mistakes on this letter at all and it was typed by a blind man. So, I don't know how you look at someone under those circumstances and you look around and complain about your circumstances. You know, and you say that, I just didn't know how to say that I've got a right to complain. It was things like that that kept me going. Things like that and I've ran into people who, you know, I felt they was worse off than I was. I was in the VA hospital one day and I'm talking to my doctor and he's asking me, how are you doing Mr. Davis, blah, blah, blah, and I'm trying to tell her I'm fine, I'm fine, all this all that and she was trying to tell me I had high blood pressure. So, I'm trying to tell her I don't know what you're talking about because us black people, we have high blood pressure and we don't know it. So, you know, at the end of the day I'm telling my doctor, I says doc—she's a lady too—I says doc, you see that guy over there on that wheelchair. It looks like he's about to fall off the chair. I says to me, that guy has got a problem. Me, personally, you know, it's like I'm good to go. I'm trying to put a positive spin on my life and you know, I'm trying to like deal with the positive side of life and not trying to do, I'm not trying to deal with the negative side. And I have no regrets. I mean there's been a lot of mistakes I've made but I have no regrets. I've, you know, I've tried to like just get out there and just deal with life and face it straight up every day. I'm not mad. I'm not mad about losing my arm in Vietnam and because of the situation of the black Americans here in this country, honest to God, when Barack Obama was elected president, that's when I finally felt like okay, now I know why I lost my arm. As God as my witness, that's the truth. Yep. That's when I finally felt like, okay, now I know why I lost my arm and now I'm good to go with that. But I'm not here crying the blues about being sorry about this, that, or whatever. There's numerous races of people who have went through discrimination and all kinds of being downgraded and being, oh, wow, genocide being committed against them. As a black man here, I can't dwell on that because there are so many other races of people who went through the same thing. But I'm just, really to make a long story short, I'm glad to be talking to you and telling you what I'm telling you.

[But learning to get around in the real world was a challenge]. I can remember was one time I got on

the bus in Philadelphia—but this had nothing to do with the driver or nothing like that—when I got on the bus I had a cane, I was walking, I was struggling, and I remember once I paid my fare I was trying to find a seat and the bus driver took off and almost threw me down to the floor. I remember saying to myself, welcome to the world. They guy looked at me like he didn't know I had almost like one and a half legs. I was walking with a cane. I had an arm and a half but he didn't know that. But he just took off just like I was a normal person that got on the bus and I said to myself, welcome to the world. But I didn't feel discriminated against or nothing like that. I just, you know, I said to myself hey, get yourself together man. Get ready for the real world...And you know, you have to take it like day by day and step by step and it's like a learning process and you know you take a step at a time and every time you make a step that works you lock it down in your head and say okay we'll do this next time or whatever. But it's not something that you learn overnight. It's a learning process and if you're not right upstairs in your head, you know, if you're scrambling your brain upstairs you're not going to make it. I think [my being able to keep myself from getting scrambled in the head] had a lot to do with the people around me, family, friends, my job was a big part of my rehabilitation, getting out there in the world and earning a paycheck—it's not the amount of money—it's just having a job to go to every day and you're like doing something that makes you feel like you're worth something or that you're responsible for something. The one thing that I remember that was, I think, the hardest for me to learn was to—I was right handed, I lost my right arm—and I had to learn how to write with my left hand. I felt like I was 24 years old or whatever and I was in kindergarten. That was, it was a serious psychological blow. All I know is I used to sit down with a newspaper and a blank sheet of paper and I would just start copying whatever article that was on the front page or whatever and I'd just start writing it. That was the beginning of my learning how to write again and to this day the only time that I write something is when I write my name, I sign my name, but other than that I print. Yep, other than that I print everything.

[So I began to adjust to my injuries and I've met quite a few other wounded vets and if you were to ask me why some are able to adjust to their injuries and others are not I would say that] it's all about how, it's all about our makeup inside. It's all about what we're made of. I don't know whether it's in the genes or what but some of us have, you know, we have those qualities that it takes to deal with adversity, that kind of adversity, and some of us don't. It's a part of human nature I guess that, I really don't have an answer to other than to say that there's things that you can succeed at. If you and I were given the same task, I couldn't do it. And it's not something where I don't think you can just nail it down. [Really] the only thing that I remember about my circumstances was I had this thought in my mind way back from the beginning and it stayed with me all of my life since then and that thought was this, as I've mentioned before, the thought always came to me, it said to me, would you rather be dead in Vietnam or would you rather be alive dealing with these so-called problems that you have here now. That thought always made my mind flip and it always made me turn the page and go on. It's, I don't know how to say it other than it's not a simple thing. I can't spell it out any simpler than that.

[So adapting to my injury] was challenging in that it really made me take myself to another level and I really found out that because you have one arm you can't dwell on the fact that you just got one arm. The possibilities are endless for a person with one arm. I mean you watch Wide World of Sports and you see a guy skiing down the hill at 70 miles an hour on one ski. You know, a person like me when I see that I say to myself well what are you complaining about? Now that's my take on the whole thing. My feeling about my condition is I found out that if there's ten things that I thought that I couldn't do because I lost my right arm and I've got one arm, I've found out that there's 20 or 30 things that I can do. If you don't get yourself into that frame of mind, personally, I think you're lost. [I'm not sure as to how my injury may have impacted my personal identity]. My opinion of

myself is I don't know. I don't know how to narrow it down other than to say that I try not to get involved with feeling sorry for myself and I try to stay positive and try to be thankful for being alive and if I keep my thoughts there it seems like it helps me to get through to the next day. I think that if I get involved with feeling sorry for myself or thinking that someone or somebody owes me something, to me that's bad for me.

[Another challenging part of being injured is that] you know you don't feel normal because you've got one arm. You feel kind of odd. You feel kind of left out. You feel that something's missing and that you don't really fit, I guess you feel like the guy that's riding down the street on a wheelchair. He has a certain feeling about him because he's in a wheelchair and everybody's walking. I'm walking with everybody but I've got one arm and there's a feeling that you, it's hard to describe it when someone looks at you and all of a sudden they look at your my right arm. They look at the tip of it and they see this hook. It's kind of disturbing or it comes to the surface when, well especially with kids. You know, you've got a little six year old kid that's sitting across from you on the subway or they're sitting across from you on a bus or whatever and all of a sudden they see it and they hunch their mother or their father and they point. You know, that feeling is, I mean it's there and no matter how you try to fake it or hide it or act like it don't bother you, it does and it's just, ah, that one is kind of hard to put into words.

[But] there was so much happening in the first 12 months of my life after I left the hospital. I got married, I went back to my job, I got the VA help me get a car, and so I was so busy, it seemed like I was so busy I didn't have time to sit down and you know, moan or cry or feel sorry for myself or anything. I just, I was so busy and I was moving so fast that I, you know, like I said I didn't have time to sit down and worry about anything or sit down and feel sorry for myself or anything. I was so busy doing stuff and back in that day I remember, I remember I was trying to be as normal as I could. I was trying to fit in. I was trying to be an everyday person with no injuries or no disabilities or nothing like that. It really took my mind off of what, you know, what my disabilities really were. As far as my memory of my first year after Vietnam, that's what I remember the most. It's not sitting around and feeling sad or, you know, getting the blues about this, that or whatever. All I remember is I was very busy and was going straight up. I was out there running every day and I was trying my best to fit in to society. Yep, and that's, it kept my mind off of what was really wrong with me. That's the best I can describe it. Educationally, I tried to, I was trying to figure out, I didn't know what a person with one arm could do or what a person with one arm was supposed to do. That was one of the things that I tried to figure out so to speak. I was trying to figure out where does a person with one arm fit in to society. Where do they have a place that a person with one arm is supposed to be? I spent a lot of time trying to figure out where that was for me and so when I started thinking about college and whatnot, you know, I started thinking about education, a career in education, or sociology or something like that. Something where a person would not quote/unquote need two arms to deal with it and a place where I thought that well, if you've got a few brains you could fit in. So in that sense, that's where my head was at that time. But as it turned out I was totally wrong. You know, after a couple of years of trying to attend school or trying to attend college, you know, I found out that hey, if you wanted to be an automotive engineer that's what you should have went for. But I didn't know that you could be an automotive engineer with one arm and it's crazy because four or five years later I took a motor out of my car, switched it, and put another motor in by myself.

[There are positive things I attribute to my being injured]. I guess [there are] the positive changes I would have to attribute to [it], with me it was some kind of coming to, certain things coming to light. I mean the realization that there is, I don't know, there's more to life than what that was all about. I

mean the realization that you can't, you know, you can't dwell on that part of your life and put your whole being into it. You have to turn the page and look farther. There were certain things that happened to me that made me realize that what happened in Vietnam was like, I remember when I got back it was like getting back to the world and where I had been was, it was like I might as well have been on the moon or something. Getting back here and trying to start over again was what it was all about for me. I'd left something behind and when I got back to the States and got around quote/unquote normal people again and got into the, you know, to the every day routine of life, of trying to provide for a family, going to work, and trying to go to school, blah, blah, stuff like that. Those are the things that I grabbed onto and I [held] on as tightly as I could and I put everything that I had into it and in the long run it worked out. I was lucky. [So] I don't know [of any negative things I can attribute to my injury]. It's hard for me to think in terms of the negative. I don't dwell on the negative that often but I don't know. I don't know how to dwell on the negative. [But] I think it's [a challenge just] getting up every day and putting on this prosthetic arm. It's like when I was at the dentist several years ago and he fixed me a partial. He did all that work and got the whole thing together for me and I tried to wear it and I think I lasted less than a week. And when I talked to him again I told him it was because I've got to get up every day and I've got to put this prosthetic arm on and I says that is enough for me to deal with. I told him, I can't deal with putting on this partial that you fixed for me because it's another piece of prosthetic equipment and putting on this arm every day is enough for me. Psychologically, it's enough.

I think [I also suffered from psychological problems caused by being in combat] but I think I overpowered them with, when I got hired in the Post Office and I was settled in with, you know, the wife and the kids and whatnot, I think that I made my everyday goal of getting up and going to work. I think I made that more important than my memories of what happened in Vietnam. And I think that I put that first in my life and I think that's what, you know, pushed the psychological effects of Vietnam in the background. And they would just pop up every now and then. Even right now when, you know, when I think about my circumstances and my condition and whatnot it's a few minor things that come to the surface but they only stay there for a hot minute. I don't want to allow myself to dwell on them because I'm scared of getting hung up and grieving and whatnot. I have to like tell myself no, you can't stay in this zone. You got to take a step forward and you got to get back to over there and you got to get back to thinking about something else or whatever. A lot of it has to do with people, friends who I know and friends who we communicate on the Internet [with] a lot and they have a lot of positive things that they tell me and people who make me feel like, you know, I'm glad you're my friend and I'm glad I know you and I'm glad you email me and stuff like. Things like that, it helps keep me focused on something else.

[I contacted some of the men that I served with on the internet.] I did it because I was just trying to get in touch with some of the guys that I was with that I had lost contact with and almost forgotten. But the negative part of that was, like I say, I found out that in reading between the lines with these guys, I found out that they were, they were, how can I say it. They were of the mind that it's like I couldn't connect with them because I couldn't understand why they had been there and seen what we had seen and they were still gung ho. I mean they were still ready to go back again. That's the one thing that kind of made me back off and kind of made me take a couple of steps backwards because my mind was not there. To this day I don't understand how, like I said, anybody who has been there and seen that that kind of death and destruction, it's like why would you want to go back to hell and that's the part about my relationship with these guys that, you know, I didn't let them know [about] but I had to kind of like back off a little bit. I kept my relationship, it's at a distance really. But I can't get too close to them because like I said I don't understand that part. I'm not ready for that and I don't think I ever will be.

[And] I remember [coming back to a country that was divided about a war I had just fought in] was kind of hard for me to [to do]. I had to separate the two. I think that I had to try to concentrate on, you know, what my immediate situation was. I really couldn't put myself out there and get involved with what was being said about the war and the soldiers who were coming back or whatever. I remember seeing on TV a soldier who got off a plane and somebody spit on him and I remember it hurt me but I had to focus on trying to get my act together. I had to focus on doing what I had to do to get out of the hospital and get my life together. So I did not spend a lot of time dwelling on those issues but I knew they were there. I knew they were there and they were, it was a hurting feeling to see those soldiers, white or black, to see them going through what they were going through. But it was, it was a tumultuous time and there was so much going on and plus there was, there was a lot going on that I didn't understand. There was a lot going on that I didn't understand until 20 years later. You know, it was, oh man it was, I didn't want to, I really didn't want to stop and deal with it because I just had my immediate things to deal with and that's what I really was trying to concentrate on at that time because I didn't have time or the energy or the strength to get out there and try to deal with the rest of the Vietnam protest and all that stuff.

[But when I think of the circumstances that led to my injury] I think that the only thing that I remember about the whole situation was, I look at it as if, I think I say to myself, you know, I say to myself would you rather be dead in Vietnam or would you rather be alive here back in the States, you know, with the loss of an arm, with an injury on your leg. I think that I put it in that perspective so that that's the way I can handle it. That's the way it helps me to get through the next day. I don't, you know, I don't say to myself, you know, somebody did you wrong, somebody steered you wrong or whatever like that. I look at myself as being lucky to be alive and I think that's what helped me to get through the rest of my life after Vietnam.

Profile of Mr. David Anderson (Double Above the Knee)
(Original Interview Transcript 59 pages)

Mr. David Anderson lives on the Northeast coast and was born February 22, 1950. He enlisted in the U. S. Marines, February 1968 and was wounded in Vietnam June 28, 1969. He is a double-above-the-knee amputee and he does not currently use a prosthesis. He is married with one step-child. Mr. Anderson reports his general health status as very good. He also reports stump pain, phantom pain, other pain and other unspecified mental health problems. The interview was completed on April 27th, 2009. This is David's story.

[My injuries led to the loss of] both legs above the knee. [I was also injured in] the left arm, got also nerve damage in the left arm and stuff like that. Shrapnel all over it. [And] I used to [use prosthetic devices but] I haven't had a set since '85 because they just got too cumbersome, as I put it, because the way they—no, I'll put it this way. I took them off because they just got too hard to walk with anymore and I wasn't working. I retired in '85 so I just didn't, and then the last set I had they didn't make correctly and they just bothered me a lot so I quit wearing them.

[The six months prior to my enlisting in the Marines] I was in high school [and] I was easygoing, easy to get along with. [I actually] went into the delayed entry program. I got sworn in February, '68, or actually, yeah, February of '68 and I left for boot camp June of '68. [So before enlisting I was] just working and going to high school. [I was] busing tables at a restaurant and being a meat cutter. [But I wanted to be in the Marines]. My attraction to the Marine Corps was my dad was in the Marine Corps and our neighbor was in the Marine Corps and I'd known all my life I was going to go in the Marine Corps when I was in the sixth and seventh grade. [So] this wasn't something I just decided to do. This is what I wanted to do my whole adolescent and to teenage years. [So] I went into the delayed entry program and got sworn in and accepted in the Marine Corps in February of '68.

[I went to boot camp in] San Diego [and] I enjoyed it. It made yourself more positive in yourself. I'll put it that way. After boot camp was over, we went to ITR, Advanced Infantry Training [and] that was at Camp Pendleton [in California]. [Then] we came home on leave and after leave we went back to, reported in the staging battalion. Staging wasn't processing at the time so they put me in the 5th Marines for about a month and a half, two months before I went to Vietnam. [And then] I got in country February 28, 1969 [and] I was assigned to 2nd Platoon, 2nd Squad, 1st Fire Team [of the] 3rd Battalion, 1st Marine, 1st Marine Regiment. Our mission was just to go out and search and destroy, search and clear, run patrols, ambushes, stuff like that. I was there exactly four months. Got in country the 28th of February and got hurt the 28th of June. [On the day I was wounded] we were on a search and clear mission to find a VC bunker and with 3rd Platoon coming around as a sweeping force, 2nd Squad and 1st Squad of 2nd Platoon went around as a blocking force and I was walking point like I did all the time I was there anyway. I just misplaced or mis-pointed to, whatever you want to call it. I spotted three booby traps. I missed the fourth one. So, that's the one I pushed and then went the wrong way. [So] in other words [I set the booby trap off]. I pushed two bushes and it cut me from the left. I didn't see it. I didn't realize it at the time. It was an 81 mortar booby trap. [I realized what had happened] after I turned over and the smoke cleared away and [I] tried to get up. I never passed out if you want to call it that or went unconscious until I went into surgery. I stayed awake through the whole thing. [And I knew how seriously I was hurt] because I turned over and the left arm was bleeding, the left leg was gone completely and the right leg was mangled up from the

knee down. [And] I had a corpsman instantly come up with three tourniquets on and a shot of morphine. [And] I wouldn't say [it was] more than 30 minutes [before the Medevack came in and picked me up]. It was almost like instantly. As soon as they called them they were there. [So they loaded me into the helicopter and] I went to 1st Marine Medical Battalion in Da Nang. I would say [I was there] about two weeks maybe? A week? I don't know. Because the only thing I know I got hit in June and I left in July, probably early part of July.

[As far as the medical care went] I got good care there to my knowledge. I don't have any recollections of being treated badly no. They took the right leg off and cleaned up the rest of the wounds and stuff and left it open until I left. [I had a problem with infection too]. After I left Vietnam they dropped me off on the way, supposed to go to Guam, Okinawa and one other place but they had to put in the Philippines because I was bleeding so bad. So they dropped me off a week at Clark Air Force Base and they had to clean the wounds up because of infection and gangrene setting in. [So they treated me and stabilized me there. I remember the medical personnel that treated me]. The people that were, that I remember talking to and the nurses, they're always polite and courteous and stuff. Then the doctors seemed okay. I don't remember having them a lot come over and talk to you a lot because they had a lot of people to work on but I can't complain. I mean I'm here so they did their job.

[But they got me stable and then they] put [me] on a C-13- transport to go to Guam because it's a better hospital facility but my infection and blood, losing blood too much, they dropped me off in the Philippines to be taken care of there because I needed urgent care. [And] I was there for about a week, two weeks, because I had to have 10 units of blood when I first got off the aircraft. They cleaned out [my wound]. Give me a spinal. Cleaned the wounds out and you know cleaned them all up because they were still open and bleeding and real bad and stuff like that. [I was in a lot of pain.] Thank God for morphine.

[So after that] they took me to Travis Air Force Base in California. Dropped us off there, put us in the hospital at Travis overnight. Give us their, your shot of morphine and food if you wanted it or whatever then put us on a bus the next morning and took us to Oak Knoll Navy Hospital. [And] I was there from the end of July to December. [And while I was there] they cleaned the wounds up and closed them finally. They just finally closed the legs, amputated them a little bit more on the right side. Took the right leg up above the knee, closed it, closed the left one and you just started healing. [So basically at Oak Knoll] you go in there, be evaluated, and they look at you and they treat you according to their schedule—the wet dressings until it starts healing and then they take you back in the surgery and they clean you all up and they close your wounds then you just get, the rest of it, general care until you're well enough to get fitted for prosthesis and rehab and you leave the hospital.

I was fitted for [a] prosthesis [there] probably in August, September of '69 or something like that. Then you learn how to walk on them. They put you in rehab and put you on parallel bars and learn how to walk. Walk on Canadian crutches and you get well enough to do that and strong enough to do that they send you home...[But] we didn't have actually physical therapists work with individual patients. You were put into a room and told to do stretching exercises and sit ups and stuff. That's it. We didn't have anybody physically working with you.

My Purple Heart got pinned on me when I was in the hospital in Da Nang. Some General come over and give it to me but the certificate I didn't get until I'd say late eighties/early nineties because you have to send away for it and I was going through some of my paperwork and I got the order that says

if you want the certificate you got to send back the headquarters of the Marine Corps. So I filled it out or I actually wrote a letter and sent it in and they sent me my certificate then. Now with my Bronze Star now, they mailed it to me in the mail. I didn't know I was entitled to it until it came in the mail.

[As far as the personnel there went] I have no problems at all with no Navy personnel. They treated everybody well. They're just, good nice people. I mean the nurses and the officers were there. We had a nurse commander come over and talk to all us kids. She says, realize that when you leave the hospital you have to realize that when you're in here you ring a bell or push a button, someone comes and waits on you and helps you. When you get out in the life, no one's going to be around to do that because they're going to shy away from you because you're different, your body is different and that's the best advice I ever got because she was true. [And that helped] because it sets you to a point that when you get out and have other people look at you and knowing that it's just not you, it's them that makes you different.

[So] I had to adjust [to my injuries] but I had a good mentor. My dad had one arm. He lost his right arm above the elbow in 53-54 [in a] civilian construction accident. So I knew, in a way growing up, what he had to go through with his one arm so I looked at it, my dad, I told myself when I was in the Philippines, if my dad could do it with one arm and live the good life I can do it with my legs and prosper and go on and have a good, functional life and I have....

[During my first year of care, the most helpful aspect was just] the care that the people shows you—the nurses and the corpsmen, and the Air Force personnel nurses—because they're all, the Navy nurses and doctors are different from the Air Force doctors. You know, they're two different branches. The Navy had great care and the Air Force had better food, you know, stuff like that. But they all were concerned about the wounded personnel. I mean they did their job 100% of the time and I didn't see anybody really being mistreated....

[As far as positive care experiences go] like I said, I got hurt, I'm laying on a gurney, a priest is giving you last rites, the next time you know when you wake up you're laying in the hospital bed getting good care and you realize what happened. You know, you're not the same body that you had a day or two before. So then after that your whole life is changed and the people you meet, some are good, some are bad, you just weed them out. The hospital care that I got all through this was good. I met some good people and I met some good patients. But I can't complain. [I didn't have any negative care experiences]. I mean when you first get your first set of prosthesis and you're standing up for the first time after months from sitting down or laying and the blood flow is different it hurts like hell. Then you're falling and you're 19 years old and you're falling because the pain is so traumatic. That's really the only thing that stands out is the first time you get, I got fitted for a prosthesis. After that it was a piece of cake. So, it was the very first time. But no the care was good. I liked [the medical personnel]. I met a lot of them on a social basis and when you're in and walking around the hospital they were nice. And any activities they had and you ran into them everybody was polite and courteous to everybody.

[And as far as the other soldiers]. They were good. I mean everybody was going through the same problems, our wounds and rehab, that everybody had to go through and we got along well. We went out to, when you had leave, when you got well enough to have leave, and you went out on the town or you went to restaurants, we all got along well. Because you're there for one reason, is get better. [So] we supported each other. We were a network of people that worked together. It's like what they're doing today with the wounded warrior barracks. It's the same procedure we had at Oak

Knoll in one of the World War II barracks that you lived, you slept, and you worked with people going through the same problems that you did so you heal better and you have someone to talk to about your wounds. [And that was beneficial because] you're there all, you're amputees, your arms, legs, gunshot wounds, whatever, you're there in a holding facility until you're well enough to go home. So you have to communicate and you talk about your experience and you talk about girlfriends and wives and moms and dads. So you become a family.

[My injury] made me think of myself different. It makes yourself grow as a human being and makes you more positive that you have to prove yourself and I had no problem doing that and that comes back to what you learn in the Marine Corps about what you can do with your life. [So] I realized [my life opportunities had] been altered dramatically but change, I think you know, you make it for the better so you try to improve yourself so it's on a positive level. I came out, got a job, then I got a better job, then I got a better job, then I got a better job than that. So I kept improving myself because I wanted to do better with my disability. [So] I knew what I wanted to do altered, I mean changed, because I couldn't stay in the military so I just went and figured out other things I can do and says I like what I'm doing, this is not a bad job, and I stayed with it. Plus at the time I was still drawing, well actually I still am, drawing VA compensation and working. So I learned a long time ago how to save money and invest it correctly.

[But even after my injury] I knew I had the future I wanted to make for myself. It was there. I mean you've got every opportunity in the world to succeed or fail and it depends on how you looked at it. I looked at it on a positive light that everything I'd done is a learning experience and if you take what you learn and make it better every time you'll succeed. [And I never had any concerns about functioning on my own] because I had a good network of people and like I said I lived with my mom and dad until I was, I don't know, well enough mentally and physically, if you want to put it that way, to move on and I did. I had no place else to go anyway. I didn't have a house of my own, at the time anyway. So when I saved enough money up and bought my own house, my first house at 20, then I bought another house at 28, moved into that. And I never went back. So I knew I was functional and physically able to do what I wanted to do. [And as far as personal relationships go you worry a little about dating] because you look at yourself as you're a double amputee, who's going to be interested in someone with no legs. And you have that in the back of your mind but eventually you meet people and you dated. I dated up until I was married at 33 for the first time. I was married for 10 years and that didn't work out and when I met my second wife back in 2000 we've been together for 10 years, been married for five. You just learn that there's people out there that don't care about disabilities.

[I would say I adapted during the first 12 months of my injury because of] the people and your family support and not letting you go one way or the other way too far without, you know, getting yourself in too much trouble. Or depending on if you were going to go end up drinking way too much or else you're into the wrong type of people and you're doing drugs or whatever. I just stayed around people that were focused on, of life, not feeling sorry for themselves. I'm a social person anyway and I just hung around with people who weren't into one bad thing or another. I never got into drugs and I didn't get that much into alcohol or anything like that. I just made myself friends and had fun and do what I wanted to do. I wanted to be independent. I wanted to have a house of my own. Eventually I wanted to settle down and be married just like any normal man would be and I made that happen.

[Also, my] mom and dad were very supportive. It was great [to have them visit me in the hospital]. It was one of the best things in the world because as long as you, if you've got a loved one, a family

member there, your spirits are higher and they help you go through what you're doing because they can, they're there to comfort you so it makes you feel better.

[All of the medical care I received during the first 12 months beginning with the field care and ending with the care I received in the US was] excellent. I can't complain. I mean like I said before the best advice I got was from a commander, a lady commander, in the Navy that told me, says, you got to learn to take care of yourself. Because in here we do it, when you get out in the world people don't care about you. So learn to take care of yourself and I took her words to heart.

[During the first 12 months there] was a lot of psychological challenge. How are you going to overcome or adjust to your disability. Learning to do things on the prosthesis. Learning how to walk. What kind of job are you going to get? How is society going to accept you? And you learn how to function in that society. It was more, I think it was more psychologically than a physical challenge because the physical part healed then you've got to accept that emotionally and mentally to go on and I think a lot of veterans had that problem but when you got that worked out your life fell in and you got jobs, you met people, you had relationships with girlfriends, ex-wives, or whatever and you live a normal life the best you can....[But It may have been useful to have some kind of psychological counseling] to some of the veterans. The ones that could not accept their wounds or they had other reasons for their nightmares or whatever you want to call it. I even, when I first got back I'd wake up in the middle of the night thinking about what happened and dreaming but that finally eventually went away because you got other aspects in your life that took it over. But it, as I tell kids today that come back from Iraq and he says well I'm having problems sleeping or whatever I said then go get some counseling. Go talk about your problems because if not it'll be there the rest of your life and that's what I tell them now. Matter of fact I just told a colonel that came back from Iraq last year the same thing when he retired. I'm having problems. Go talk to somebody. There's help at the VA. Go talk to them. [So I did have some mild stress issues]. You have to. There's no way to go through what I did or anybody in my position without having some Post Traumatic Stress if you want to call it that. But to a point that it's debilitating? No.

[And] I've always look at it as I have never blamed any person, government, or enemy for my injury because injuries happen in war. You've got to learn to accept that to be able to move on with your life. And this is the way I've always thought. I don't blame anybody. You went into a war, you got hurt, you come back, you adapt and you move on. You don't let it bother you. It's part of what happens in war. You've got to be positive because something good will come out of it. You can't be bitter. [And] I didn't [become bitter] because I wouldn't let it because it's just part of what happens in war. I was a casualty of a war. I came back and I adjusted quite well the way I looked at it because I went on to function. I worked for a lot of years. I was successful in my job and I'm successful now as retired, working with other veterans, and you can't really complain about that. [Some veterans who are wounded don't go on to lead a productive life] because they sat back in self pity and felt sorry for themselves and you can't do that. [I didn't fall into self pity because I had] will power and knowing that you have to move on and accept what happened. If you don't you're going to feel sorry for yourself and end up being a drug addict or an alcoholic or anything like that. You got to learn that you can't change what happened so you got to accept it and move on with it...[When] I left Oak Knoll on a leave to come home before I got discharged and we had people scream and yell at us and throw stuff at us and stuff like that and I just looked at them. You guys don't have a clue to what we did so if you can't walk in my shoes don't say anything. That's the way I looked at it. I ignored them because they didn't have a, they didn't understand. Personally, they will never understand. I mean I set up tables in different places and talked to guys that protested the war and they still can't get over that thing 40 years ago. And I says well then you haven't matured in

40 years. You're hating the wrong people and ask any Vietnam veteran today at 60 years old, we would go back and do the same thing if we were able to do it and they would. It was our time and now it's their time and you guys that didn't go don't understand it because you weren't there.

Profile of Mr. Owen Miller (Below Knee and Above the Knee)
(Original Interview Transcript 26 Pages)

Mr. Owen Miller was born November 10th, 1949 and currently resides in the Southwest region of the US. He enlisted in the US Marine Corps on December 10th of 1966 and was injured on April 16th, 1968. He is a right leg above the knee and a left leg below the knee amputee. He currently uses a prosthetic device. He is married with two children and reports his general health as being fair. He also reports heart disease, being overweight, experiencing back pain, stump pain, phantom pain and phantom sensation. The interview was completed on September 15th, 2009. This is Owen's story.

[Prior to entering the military I had] enrolled in college at Jackson State University in Mississippi. I had completed one year of college and then I was off for the summer. I entered the military during that summer. [At the time] I was 19. I wasn't very well focused. I was very athletic [though and] everything I did revolved around sports. And I was shy. I didn't speak very much and I really didn't know what I wanted to do [at that point in my life]. I [just] didn't really have a focus on life [and] Mississippi wasn't exactly the greatest environment to be in. I was looking for something different and so I said [I will] take a shot at the military [and I joined the Marine Corps].

[I was initially stationed in] Washington DC prior to [being sent to Vietnam]. [Once in Vietnam, however,] I was in the 1st Marine Division, Alpha 1/7 infantry unit located outside Da Nang. [When I was injured] I was squad leader and we had a major operation going on that we had a sweep. It was a battalion sized sweep and it just so happens that my platoon was up front and my squad was in front of the platoon so I got the opportunity to be up front. We were setting up a patrol base...[and] I hit a mine. [The enemy] had booby trapped [the] area that my squad had gone into and I hit [the] mine. It blew up and that was basically it. [So after I stepped on the mine,] I basically handed my material over to the...assistant squad leader. [Then] I basically waited for the medevac process and I talked to the guys there on my squad and gave them encouragement and so forth. [I told them] they would be fine without me and [then just waited for the medevac].

[The medevac came and] it took me to the naval hospital in Da Nang. [I think] I was there for about three or four days. And they did the amputation and all the initial surgery and everything along those lines there in Da Nang. And after that I was sent to Yokosuka, Japan for about another three or four days through July 3rd and I remember it was on July 4th, 1969 when I arrived at Oakland Naval Hospital in California. So it was a fairly quick turnaround from the time I was injured until I was back in the United States. [And today, as a result of my injuries, I have a] right leg above the knee [amputation]. My left leg [also] received injuries [and] the most serious injury I had was to my right hand and arm. I lost the part of the support bone structure behind my small finger on my right hand and I had a pretty substantial scarring up my right arm. [I also] use [an] artificial leg [today].

[Looking back on it I don't see my injury as the result of a mistake]. [Injuries happen in combat]. You have an enemy who's trying to injure you and you're trying to do the same to them. Although when you're in combat you assume that you're going to be okay [and that a serious injury won't be afflicted upon you] but occasionally [one is]. [It is just] one of the risks that you take and [happens to be] the situation that [I found myself in]. I don't assign any blame to anyone [for my injury]. [But it was a] challenge to move forward.

[After my injuries] I was looking forward. [I thought] what are my next steps? What am I going to

do and things along those lines. So I just started looking forward. [I thought] how am I going to live through this and so forth. Obviously when I found that I had lost my leg above the knee in Da Nang, that took some soul searching. [And then] because [I had been] an athlete all my life and all my social interaction had revolved around what I could do physically it took some reflection [in order to] move forward. [It was] another challenge to move forward. So I took it on from that perspective.

[As far as US care goes,] I think a combination of things [such as the doctors, nurses and other patients were the most helpful]. At Oakland Hospital there were four guys in a room and there was constant conversations and the corpsmen and nurses were polite and the doctors seemed first rate. And there were volunteers [like] the candy strippers and ladies of the community that came though and visited and everything was positive from that perspective. [I also] went through a number of surgeries. They gave me pain medication and I actually took myself off [the] pain medication. [Because] in my mindset, I believed that not taking the medication helped me heal faster because I am assuming that the brain is telling the body there's an injury [and that it needs] to do something about it if you feel it. [But my hand was a problem for me] longer than my leg. Even after I left the military hospital I had four surgeries on my hand at the VA hospital. They did some reconstruction work.

[At the hospital in Oakland I was just trying to recover]. I [had] skin grafts and things along those lines and they had to clean up my stump and sewed that up and things like that. [And then] it was a matter of training and exercising and getting prepared to move around on our prosthetics. [Being fitted for a prosthetic was an exciting time] in a sense [because] it gave us mobility and [has to do with the] ability to move around and [having independence]. [But] there was a lot of pain associated with it. There was discomfort. So that was a challenge. [But] the focus wasn't at that time looking back, it was looking forward to [taking] the next step and [improving]. One thing I always joked with folks about is I was always the guy that found the dollar laying on the sidewalk because I was always looking down because if you didn't you would trip. So I found the coins and the loose dollar bills that were dropped. So that was my advantage.

I [was] separated in November of '69. [It] was fine [that I was discharged,] the only part that tok me aback a little was not the separation but that [I was discharged as "unfit" for military service.] Just that statement, you know, was a challenge. They could have used different words. I didn't like the words unfit. It was so cold and to the point. Not that I wanted to stay in the military, but being told that I was unfit was [upsetting]. The part that sticks with me [is how I was] called up in front of some officer and [he told] me that I would be discharged because [I was] unfit. [But] other than that, I had no other issues with the process [of being discharged].

[After I got out of the hospital] I wasn't sure [what I was going to do with my life]. [It was a challenge] just getting accustomed to the limitations. I learned to walk very well for an amputee and that was a challenge. I took everything on as a challenge of sorts and that was a challenge to do that...I had to regain control of my life and that was my focus. [And after I was discharged from the hospital] I felt that I would have better opportunities to recover [in LA] than in Mississippi. But I also knew that I needed additional work on my hand and I felt more comfortable going to Los Angeles than Jackson, Mississippi. That was a big factor [concerning why I stayed in California and did not return home]. Also, I did have a couple of brothers in LA and a couple of sisters here too. So I felt that was my best option. [My injury was also a] challenge for [my family] but they responded well. When I arrived at Oakland my mother flew out and spent time with me. My brothers and sisters came up from Los Angeles [too]. [But] I never talked to them about what happened. I never had any conversation with anybody about what happened. The conversation that I always have [is]

about what am I going to do now and what do I need to do to move forward. So my family was there for support and the discussions were always [about] moving forward.

[I think my experience in athletics helped me heal faster too] because, again, I took [my injury] as another challenge. [I thought things like] how do I overcome this and how do I deal with this. [So I just] took it as another challenge and I proceeded that way. And that worked well, especially in the beginning when you're there with other injured veterans and you're working to advance. You have to demonstrate what you have accomplished and what you can do now. So I think that was a positive thing for me and I think I was well-conditioned [which enabled me to] recover from the injuries quickly and so forth.

[I was] never uncertain about looking [to] the future. I was always positive [even though I] never knew exactly or hadn't really decided what I was going to do. [But while living with my injury] I am not nearly as active [as I was prior to the amputation]. When I was at Washington DC and [wanted to I would] walk over [to the city and] Arlington Cemetery all in one day. [It was hard not being able to do those types of things. It was especially hard when my kids were born because I wasn't really] able to carry them around. [So my injury] definitely affected my ability to enjoy certain things. [Keeping my] weight down and exercising [are still challenges for me today].

[I credit the way my life turned out to] primarily interacting with the family and friends and just [my having] a desire to be able to succeed in something. [The biggest challenge I've faced in light of my injury is] probably my weight and being able to exercise. [Also,] the limited mobility [is a challenge]. Again, sports had been a way of life for me. To all of a sudden have that come to an end at 22 years old [is] a big deal. And that was a challenge. [Sports constituted] my social interaction with other men. It was a matter of let's go play some basketball or football. Or let's go jogging or whatever. [And suddenly] that was a thing of the past. Now what's the social interaction and things along those lines? It's got to be something different. [So] the biggest challenge was just how [to] handle [the physical limitations]. [But] it's always been a challenge and still is. The challenge now is how do I move into my older years dealing with this physical disability. And that's always been a challenge and it doesn't get any easier with age.

[Looking back] the one complaint that I had about the military or naval hospitals was [that] no life counseling [was made available] when I left the military. There was never any counseling or discussions. I always considered myself to be pretty strong and able to work my way through things but I knew that was a challenge for a lot of guys. [It just would have been nice to discuss things like how] to move forward and what the challenges are. [It would have helped to have] some preparation for moving forward. I see the same sort of things now with the guys. Folks come into the military, they do the service, and then the [military] basically [says] well, we're done with you now. Let's bring in a new set and send them out and then discard them too.

[My injury ultimately] taught me that I could deal with challenges pretty well. It showed me that I could deal with challenges and extreme challenges and keep moving forward. [Even when] I didn't know exactly which direction I was going [in in life I] always looked to the next step. Whether it was career wise or whether it was where I'm going to live or what am [I] going to do this weekend. I [just] keep looking forward and I've never had any doubts that I would continue to do fine. I was always positive from that perspective.

Profile of Mr. Greg Brock (Above the Knee)
(Original Interview Transcript 19 Pages)

Mr. Greg Brock was born January 27th, 1946 and currently lives in the Western region of the US. He enlisted in the United States Marine Corps in 1965 and was injured in Vietnam in April of 1969. He is a right above the knee amputee and does not currently use a prosthesis device. He is married and has two children and two step-children. Mr. Brock reports his current health as good but does report some health issues. He reports being overweight, experiencing back pain and arthritis, stump pain, phantom pain, other pain, depression, PTSD and other unspecified mental health problems. The interview was completed on August 25th, 2009.

This is Greg's story.

[Prior to entering the military I had] enrolled in college at Jackson State University in Mississippi. I had completed one year of college and then I was off for the summer. I entered the military during that summer. [At the time] I was 19. I wasn't very well focused. I was very athletic [though and] everything I did revolved around sports. And I was shy. I didn't speak very much and I really didn't know what I wanted to do [at that point in my life]. I [just] didn't really have a focus on life [and] Mississippi wasn't exactly the greatest environment to be in. I was looking for something different and so I said [I will] take a shot at the military [and I joined the Marine Corps].

[I was initially stationed in] Washington DC prior to [being sent to Vietnam]. [Once in Vietnam, however,] I was in the 1st Marine Division, Alpha 1/7 infantry unit located outside Da Nang. [When I was injured] I was squad leader and we had a major operation going on that we had a sweep. It was a battalion sized sweep and it just so happens that my platoon was up front and my squad was in front of the platoon so I got the opportunity to be up front. We were setting up a patrol base...[and] I hit a mine. [The enemy] had booby trapped [the] area that my squad had gone into and I hit [the] mine. It blew up and that was basically it. [So after I stepped on the mine,] I basically handed my material over to the...assistant squad leader. [Then] I basically waited for the medevac process and I talked to the guys there on my squad and gave them encouragement and so forth. [I told them] they would be fine without me and [then just waited for the medevac].

[The medevac came and] it took me to the naval hospital in Da Nang. [I think] I was there for about three or four days. And they did the amputation and all the initial surgery and everything along those lines there in Da Nang. And after that I was sent to Yokosuka, Japan for about another three or four days through July 3rd and I remember it was on July 4th, 1969 when I arrived at Oakland Naval Hospital in California. So it was a fairly quick turnaround from the time I was injured until I was back in the United States. [And today, as a result of my injuries, I have a] right leg above the knee [amputation]. My left leg [also] received injuries [and] the most serious injury I had was to my right hand and arm. I lost the part of the support bone structure behind my small finger on my right hand and I had a pretty substantial scarring up my right arm. [I also] use [an] artificial leg [today].

[Looking back on it I don't see my injury as the result of a mistake]. [Injuries happen in combat]. You have an enemy who's trying to injure you and you're trying to do the same to them. Although when you're in combat you assume that you're going to be okay [and that a serious injury won't be afflicted upon you] but occasionally [one is]. [It is just] one of the risks that you take and [happens to be] the situation that [I found myself in]. I don't assign any blame to anyone [for my injury]. [But it was a] challenge to move forward.

[After my injuries] I was looking forward. [I thought] what are my next steps? What am I going to

do and things along those lines. So I just started looking forward. [I thought] how am I going to live through this and so forth. Obviously when I found that I had lost my leg above the knee in Da Nang, that took some soul searching. [And then] because [I had been] an athlete all my life and all my social interaction had revolved around what I could do physically it took some reflection [in order to] move forward. [It was] another challenge to move forward. So I took it on from that perspective.

[As far as US care goes,] I think a combination of things [such as the doctors, nurses and other patients were the most helpful]. At Oakland Hospital there were four guys in a room and there was constant conversations and the corpsmen and nurses were polite and the doctors seemed first rate. And there were volunteers [like] the candy strippers and ladies of the community that came through and visited and everything was positive from that perspective. [I also] went through a number of surgeries. They gave me pain medication and I actually took myself off [the] pain medication. [Because] in my mindset, I believed that not taking the medication helped me heal faster because I am assuming that the brain is telling the body there's an injury [and that it needs] to do something about it if you feel it. [But my hand was a problem for me] longer than my leg. Even after I left the military hospital I had four surgeries on my hand at the VA hospital. They did some reconstruction work.

[At the hospital in Oakland I was just trying to recover]. I [had] skin grafts and things along those lines and they had to clean up my stump and sewed that up and things like that. [And then] it was a matter of training and exercising and getting prepared to move around on our prosthetics. [Being fitted for a prosthetic was an exciting time] in a sense [because] it gave us mobility and [has to do with the] ability to move around and [having independence]. [But] there was a lot of pain associated with it. There was discomfort. So that was a challenge. [But] the focus wasn't at that time looking back, it was looking forward to [taking] the next step and [improving]. One thing I always joked with folks about is I was always the guy that found the dollar laying on the sidewalk because I was always looking down because if you didn't you would trip. So I found the coins and the loose dollar bills that were dropped. So that was my advantage.

I [was] separated in November of '69. [It] was fine [that I was discharged,] the only part that took me aback a little was not the separation but that [I was discharged as "unfit" for military service.] Just that statement, you know, was a challenge. They could have used different words. I didn't like the words unfit. It was so cold and to the point. Not that I wanted to stay in the military, but being told that I was unfit was [upsetting]. The part that sticks with me [is how I was] called up in front of some officer and [he told] me that I would be discharged because [I was] unfit. [But] other than that, I had not other issues with the process [of being discharged].

[After I got out of the hospital] I wasn't sure [what I was going to do with my life]. [It was a challenge] just getting accustomed to the limitations. I learned to walk very well for an amputee and that was a challenge. I took everything on as a challenge of sorts and that was a challenge to do that...I had to regain control of my life and that was my focus. [And after I was discharged from the hospital] I felt that I would have better opportunities to recover [in LA] than in Mississippi. But I also knew that I needed additional work on my hand and I felt more comfortable going to Los Angeles than Jackson, Mississippi. That was a big factor [concerning why I stayed in California and did not return home]. Also, I did have a couple of brothers in LA and a couple of sisters here too. So I felt that was my best option. [My injury was also a] challenge for [my family] but they responded well. When I arrived at Oakland my mother flew out and spent time with me. My brothers and sisters came up from Los Angeles [too]. [But] I never talked to them about what happened. I never had any conversation with anybody about what happened. The conversation that I always have [is]

about what am I going to do now and what do I need to do to move forward. So my family was there for support and the discussions were always [about] moving forward.

[I think my experience in athletics helped me heal faster too] because, again, I took [my injury] as another challenge. [I thought things like] how do I overcome this and how do I deal with this. [So I just] took it as another challenge and I proceeded that way. And that worked well, especially in the beginning when you're there with other injured veterans and you're working to advance. You have to demonstrate what you have accomplished and what you can do now. So I think that was a positive thing for me and I think I was well-conditioned [which enabled me to] recover from the injuries quickly and so forth.

[I was] never uncertain about looking [to] the future. I was always positive [even though I] never knew exactly or hadn't really decided what I was going to do. [But while living with my injury] I am not nearly as active [as I was prior to the amputation]. When I was at Washington DC and [wanted to I would] walk over [to the city and] Arlington Cemetery all in one day. [It was hard not being able to do those types of things. It was especially hard when my kids were born because I wasn't really] able to carry them around. [So my injury] definitely affected my ability to enjoy certain things. [Keeping my] weight down and exercising [are still challenges for me today].

[I credit the way my life turned out to] primarily interacting with the family and friends and just [my having] a desire to be able to succeed in something. [The biggest challenge I've faced in light of my injury is] probably my weight and being able to exercise. [Also,] the limited mobility [is a challenge]. Again, sports had been a way of life for me. To all of a sudden have that come to an end at 22 years old [is] a big deal. And that was a challenge. [Sports constituted] my social interaction with other men. It was a matter of let's go play some basketball or football. Or let's go jogging or whatever. [And suddenly] that was a thing of the past. Now what's the social interaction and things along those lines? It's got to be something different. [So] the biggest challenge was just how [to] handle [the physical limitations]. [But] it's always been a challenge and still is. The challenge now is how do I move into my older years dealing with this physical disability. And that's always been a challenge and it doesn't get any easier with age.

[Looking back] the one complaint that I had about the military or naval hospitals was [that] no life counseling [was made available] when I left the military. There was never any counseling or discussions. I always considered myself to be pretty strong and able to work my way through things but I knew that was a challenge for a lot of guys. [It just would have been nice to discuss things like how] to move forward and what the challenges are. [It would have helped to have] some preparation for moving forward. I see the same sort of things now with the guys. Folks come into the military, they do the service, and then the [military] basically [says] well, we're done with you now. Let's bring in a new set and send them out and then discard them too.

[My injury ultimately] taught me that I could deal with challenges pretty well. It showed me that I could deal with challenges and extreme challenges and keep moving forward. [Even when] I didn't know exactly which direction I was going [in life I] always looked to the next step. Whether it was career wise or whether it was where I'm going to live or what am [I] going to do this weekend. I [just] keep looking forward and I've never had any doubts that I would continue to do fine. I was always positive from that perspective.

Profile of Mr. Eddie Foote (Above the Elbow, Below the Knee)
(Original Interview Transcript 25 Pages)

Mr. Eddie Foote lives in the Western region of the US and was born in 1950. He enlisted in the Army in May of 1969. He was injured in Vietnam in August of 1970. He is a left arm above the elbow and a left leg above the knee amputee. He currently uses a prosthetic device. He is married with three children. Mr. Foote reports his general health as very good. He also reports arthritis, phantom pain and phantom sensation. The interview was completed on October 9, 2009. This is Eddie's story.

My left arm [was amputated] right above the elbow and [so] was my left leg right above the knee. I [suffered other various injuries, including] a little nerve damage in my right hand [and some] traumatic tattooing on my right hand. [Today] I have a prosthetic arm and leg.

[Before entering the military I] graduated from high school. [After graduating I] went to Denver to work with my cousin and then he went to college and I wasn't ready to do that, so I helped my dad with harvest. We were in the fruit business—pears and apples. Then in the spring of 1969, I was going to get drafted because I wasn't going to school. So I volunteered before [I could be drafted].

[After training I was eventually sent to] Chu Lai in South Vietnam. I was with an infantry unit and we were airlifted up in the central mountains...we landed and hopped out and found our squad...[The day I was injured] we were pulling security. Booby-traps were a big thing there. I mean somebody would step on one or hit a trip wire at least once a day. [So] it was raining and we were beginning to set up the perimeter and there was kind of a hedge row with a path through it so I walked through there and I turned around and came back. It's always a good idea when you're walking on a path [to] walk in your footprints coming back. Well, that's what I was doing and apparently I loosened this booby-trap when I stepped on it the first time. Then the second time [I stepped on it] it went off. Luckily we had just gotten resupplied at the company perimeter when I stepped on it, because I remember [the last thing I heard was the] helicopter taking off. It was just a resupply chopper, [but] it sat down and the guys picked me up in a poncho and put me on the chopper to take me to the aid station. [When it comes to treatment in the field hospital,] I don't remember anything. I just remember bright lights and I got cold. [At the hospital I was in a] daze and I was burnt all over. I was screaming and yelling. But after the aid station, all I can remember is [waking] up in Japan. [And then] I spent about 30 days in Japan. I remember I spent Thanksgiving there and they had these Asian pears. I used to raise pears with my parents. [But] these pears were the best things I'd ever tasted.

[Looking back upon the circumstances of my injury, I feel as though] it's just one of those random things. I mean somebody planted a booby trap and I just happened to be the one that encountered it. I never blamed anybody. I didn't blame myself for not seeing it. I mean it just happened. It's kind of like if you're driving down the freeway and somebody goes to sleep and veers across the median and slams into you head on. [But even with the other patients in the hospital in the US,] there were quite a few of us that didn't spend much time in Vietnam. [I do believe that] we were better off getting hurt and coming home than having to spend a year over there. [I feel that way after having seen] what people looked like after a year over there. PTSD and that kind of thing.

[As far as treatment in the US, interacting with patients was the most beneficial aspect of it]. I mean when I came out, it was more [of a] peer counseling [kind of thing] that I remember as opposed to

clinical things. I mean with rehab you go down and do exercises and things like that but the real rehab of dealing with things was more your peers. When I got into Denver I remember it was nice because it was cold and that felt good. [And we were] coming off the elevator on the fifth floor which was the orthopedic ward. There was a guy with one arm, both legs [missing] and he [had] a patch over one eye. He [came over to my gurney and] grabs my blanket and throws it back and he said, "I'm just checking to make sure you've got enough missing or I'll send you back." (Laughing). And he said, "Ah, he's okay. Let him in." So it was that kind of thing that was the most helpful. Everybody had either a limb that was very injured, a high degree of injury or it was missing. You know, it was slow but we're all just talking and it was the peer thing that was the most helpful because we didn't have any psychological counseling or anything like that.

[But it was a challenge the first 12 months after being injured because of the] embarrassment of looking different and [having to learn] to walk. And learning how to write with my right hand and getting stronger [was difficult]. Basically the biggest challenge was to get out of [the hospital] and go home...But I had so much wrong with me, and [suffered] so much trauma. I think [the ability to live with my injury] just more or less osmoted into my psyche so to speak. It wasn't like one morning I woke up and [thought] "Oh, man. I'm a double amputee." It was kind of a gradual thing and I was glad to be alive. It was just [like], you're going to live your life like this, and that's how it's going to be. And I accepted it. [Because] you can't go back. I can remember laying there going, "Wow, I'm glad I'm alive." At that point you're willing to trade your injuries for your life, so that makes it pretty easy to [move on].

[People responded positively to my injury.] The people in my hometown were very positive. [Also,] there was always somebody you could consider hurt worse than you. So you couldn't really feel sorry for yourself. [Learning to live with my injuries was a] very gradual [process]. At first you can't do anything for yourself and you have to have all kinds of help. And then it's a big thing when you can go to the toilet by yourself. [But] I've always thought of myself as being optimistic and wanting to work through challenges. Challenges are fun to have in a sense. [And] I don't think I ever thought [my life chances] were altered [by my injury]. They were altered in the sense that it was going to be a little more difficult to do some things, but I had no qualms about if I, or we [my wife and I], wanted to do something that we could. And I had a good support group. My dad was pretty handy with making stuff, so if I needed something built he could help me. And the townspeople [always] treated me like a person. [So] I credit my family [for helping me throughout my life]. They were all very supportive. The community was very supportive. I was very lucky [to meet my wife, Sharon].

[Challenges did arise, however]. When we lived in Colorado the kids liked to go swimming and I haven't got the gumption to go to a public pool and go swimming so we decided to build one...And that was a difficult thing to do. [It was hard] to go swimming with your friends for the first time. Once I had done it then it was fine. But the first time that was probably the most difficult thing to do. [Another challenge was] probably just the process of getting a leg that fit and [then] learning how to use it. And that can still be challenging [to get] one that fits right so you can be on your feet for eight, nine hours a day and not hurt yourself.

[Of course my injury has affected different parts of my life.] I mean I'm a little slower. I can't run but I can ride a bicycle. I can't pick up my grandkids with two hands like some people can and throw them in the air. [But] I pick them up by one arm and throw them in the air. So I still have great interaction with them. [But my injury has] slowed me down in some sense, and who knows what might have been [had I not been injured]. But I've had a very fulfilling life and I've got to do pretty much everything I wanted to.

APPENDIX 1: BRIEF DESCRIPTION OF PARTICIPANTS

Participant	Description
Roberto Garcia	Born September 1, 1947 and currently lives in the Southern Part of the United States. He was drafted into the US Army on June 5 th , 1967 and was injured in Vietnam, September 5 th , 1968. He is Hispanic of Mexican descent. He is a left leg below the knee amputee who currently uses a prosthesis. He is married and has one child. Mr. Garcia reports his health as fair. He has several health complications. These include diabetes, back pain, arthritis, stump pain, phantom pain, phantom sensation, other pain, depression, PTSD, and other unspecified mental health problems.
Pete Smith	Born October 2, 1949 and currently lives in a Midwestern state. He served in the U S Marine Corps, enlisting on March 15 th of 1968. He was wounded in Vietnam December, 7 th 1969. He is a left arm above the elbow amputee. He has been married twice and remains married to his second wife. He has two stepchildren. He reports his overall health as fair. He also smokes and reports using drugs and alcohol. In addition, he reports currently having back pain, stump pain, phantom pin, depression, PTSD other mental health issues. He does not currently use a prosthesis.
Adam Nelson	Born July 5, 1944 and currently lives in the South. He enlisted in the US Navy in November of 1964 and was wounded in Vietnam September 6, 1967. He is a right arm above the elbow amputee and he currently uses a prosthetic device. He is African-American. He is married with three step children from a previous marriage. Mr. Nelson reports his health as good although he does report several health complications. These include smoking, using drugs and/or alcohol, heart disease, being overweight, stump pain, phantom pain, depression, PTSD and other unspecified mental health problems.
Bob Taylor	Born July 22 nd , 1946 and lives in the Eastern part of the US. He was drafted into the US Army in 1966 and was wounded near Dau Tieng, Vietnam, September 30 th , 1967. He is a right leg above the knee amputee and currently uses a prosthesis. He is married with two children. Mr. Taylor reports his general health to be good and also reports using drugs and/or alcohol, cancer, diabetes, being overweight, back pain and arthritis in addition to phantom pain, other pain and experiencing PTSD.
David Anderson	Born February 22, 1950 and lives in a state on the Northeast coast. He enlisted in the U S Marines, February 1968 and was wounded in Vietnam June 28, 1969. He is a double-above-the-knee amputee and he does not currently use a prosthesis. He is married with one step-child. Mr. Anderson reports his general health status as very good. He also reports stump pain, phantom pain, other pain and other unspecified mental health problems.

Eddie Foote	Born in 1950 and lives in the Western region of the US. He enlisted in the Army in May of 1969. He was injured in Vietnam in August of 1970. He is a left arm above the elbow and a left leg above the knee amputee. He currently uses a prosthetic device. He is married with three children. Mr. Foote reports his general health as very good. He also reports arthritis, phantom pain and phantom sensation.
Frank Robinson	Born April 10 th 1945 and lives in the Midwest. He was drafted into the US Army in 1967. He was injured March 29, 1969 near Plei Trap, Kontum Province, Republic of Vietnam. He is a right leg below the knee amputee and currently uses a prosthetic device. He is married with three adopted children. He reports his general health status as fair. He reports multiple health complications including heart disease, back pain, arthritis, stump pain, phantom pain, phantom sensation, other pain, depression, PTSD, other unspecified mental health problems and a neuro-disorder.
Gary Thomas	Born March 26 th , 1949 and lives in the Midwest. He was drafted into the US Army July 1 st , 1969 and was wounded in Vietnam, 1970. He is a double below the knee amputee and does not currently use a prosthetic device. He is divorced and has two children. He reports that his general health is very good. He reports smoking, arthritis, stump pain, phantom pain and other unspecified pain.
Greg Brock	Born January 27 th , 1946 and currently lives in the Western region of the US. He enlisted in the US Marine Corps in 1965 and was injured in Vietnam in April of 1969. He is a right above the knee amputee and does not currently use a prosthesis device. He is African-American. He is married and has two children and two step-children. Mr. Brock reports his currently health as good but does report some health issues. He reports being overweight, experiencing back pain and arthritis, stump pain, phantom pain, other pain, depression, PTSD and other unspecified mental health problems.
Willy Wilson	Born June 13, 1944 and lives in the southeastern US. He was commissioned as an officer in the US Army and served in the 101 st Airborne in Vietnam. He was injured near Cu Chi, Republic of Vietnam July 21, 1968. Mr. Wilson is a right above the knee and left below the elbow amputee. He also has a left hip disarticulation. He currently uses a prosthetic device. He is married with two children. Mr. Wilson reports his health to be very good and also reports other pain.
Jason Clark	Born November 6 th , 1947 and lives in a Northern state of the Midwest. He was commissioned in the US Army after graduating from West Point in 1970 and was injured in Vietnam, June 2 nd , 1971. He is a double below the knee amputee and currently uses a prosthesis. He is married with three children. Mr. Clark reports his general health to be excellent. He also reports being overweight and experiencing stump pain, phantom pain and phantom sensation.

Keith Lewis	Born December 2, 1950 and lives in the Eastern US. He enlisted in the US Marine Corps in 1968 and was wounded April 3 rd 1969 in the I Corps portion of Vietnam. He is a left leg above the knee amputee and currently uses a prosthesis device. He is married with three children. Mr. Lewis reports his health status as good. He reports heart disease, stump pain, phantom pain, phantom sensation, other pain, depression, PTSD and other mental health problems.
Liam Hall	Born May 16 th , 1949 and lives in the Midwest. He was drafted into the US Army in 1969 and was injured June 20, 1970 near Quang Tri in Vietnam. He is a left-leg below-the-knee amputee and currently uses a prosthetic device. He is divorced with two children. Mr. Hall reports is general health to be fair and also reports smoking, heart disease, back pain, stump pain, phantom sensation and depression.
Mark Johnson	Born December 3 rd , 1948 lives in an Eastern-Midwest state. He enlisted in the US Marine Corps in the summer of 1967 and was wounded in Vietnam September 3 rd , 1968, near a place known at the Rock Pile. He is a left leg above the knee amputee and does not currently use a prosthetic device. He is married with two children and two step-children. He reports his general health as good and reports being overweight, experiencing back pain, arthritis, stump pain, phantom pain, other pain, depression, PTSD and other unspecified mental health problems.
Owen Miller	Born November 10 th , 1949 and currently resides in the Southwest region of the US. He enlisted in the US Marine Corps on December 10 th of 1966 and was injured on April 16 th , 1968. He is a right leg above the knee and a left leg below the knee amputee. He is African-American. He currently uses a prosthetic device. He is married with two children and reports his general health as being fair. He reports heart disease, being overweight, experiencing back pain, stump pain, phantom pain and phantom sensation.
Nick Rogers	Born April 24, 1948 lives on the east coast. He was drafted into the US Army in 1968 and wounded in Vietnam March 1 st , 1969. He is a right leg above the knee amputee and currently uses a prosthesis device. He is married with four children. He reports his general health status to be good. He reports smoking.
Troy Baker	Born November 4 th , 1947 and lives in the Midwest. He enlisted in the US Army in 1966 and was wounded near Saigon in July of 1968. He is a left leg above the knee amputee. He currently uses a prosthetic device. He is divorced with three children. Mr. Baker reports his general health as very good. He also reports phantom sensation.
Ian Moore	Born November 26, 1946 and lives in the Midwest. He was drafted into the US Army May 13 th , 1968. He was injured April 30, 1969 near Chu Lai in Vietnam. He is a double below the knee amputee and currently uses a prosthetic device. He is married with three children. Mr. Moore reports his general health as very good. He also reports stump pain, phantom pain and sensation pain.

APPENDIX 2: INTERVIEW GUIDE

APPROACH TO INTERVIEWING FOR VETERANS AMPUTEE PROJECT

Uses the questions developed by Seth Messinger.

I. Introduction.

Begin by asking a series of questions that gathers basic demographic information.

Current Demographics

1. In what city and state do you live?
2. When and where were you born?
3. What is the highest level of your education – high school? College?
4. Are you presently employed? Where?
5. Are you married, widowed, or divorced?
6. Do you have children? How many? Boys/Girls? Ages?
7. Do you belong to any veterans' or unit associations?

Past Demographics

8. Can you describe what you were doing in the 6 months prior to entering the military?
9. What was going on in your life then?
(Probes – Working? Going to school? Living at home? Away from home, Etc.)
10. Were you in a relationship?
11. How would you describe the person you were then?
12. When did you enter the military?
13. Did you join or were you drafted?

Amputations and Assistive Devices information

14. Can you describe the extent of your amputations?
15. Can you describe any other limbs or parts of the body that are also still affected by the injury but were not amputations?
16. Can you describe the kinds of assistive devices, if any, that you use now?

II. Circumstances of injury and care experience

The purpose of the first set of questions is to gather information about the kind of injury received, the circumstances under which it occurred, and then to develop a careful timeline of care over the first 12 months. We will tell the narrators the first series of questions addresses the circumstances of your injury and treatment during the first twelve months.

1. To what unit were you assigned to when you were injured?
2. Where were you based?
3. What were you doing when you were injured? (patrol; ambush; defensive position; accident)
4. What happened when you were wounded?
5. We will question them about the location, time of day, weather, and so on.
6. Please provide a timeline of your treatment – medic; field hospital, and so on.
**Can we ask them to provide a list of the places they were treated during the first

7. If it has not already come out in conversation, we will ask them to talk about the way in which they were wounded (expectable outcome of whatever operation in which they were engaged at the time of injury; accident; someone made a mistake; someone unnecessarily or unreasonably put you in a dangerous situation)
8. Did the way in which you were wounded or the circumstances of your injury influence your care and recovery in the first 12 months following your injury?
9. Can you describe what you thought about the care you received at the different places?
 - a. Probe: who or what was most helpful? Least helpful?
 - b. Probe: any really positive care experience and what made it positive?
 - c. Probe: any really negative care experience and what made it negative
10. How did you feel about the medical personnel you were treated by? (Probe for both positive and negative perceptions)
11. What challenges, if any did you encounter during your recovery in the first 12 months of injury? What do you think was the source of those challenges?
12. During the first twelve months of injury, tell me about how you learned to handle being injured to the extent that you were.

III. Psychosocial Consequences of Injury.

The purpose of the second set of questions is to develop a sense of, what can be termed, the psycho-social (subjective is a preferred term) consequences of the injury—the invisible co-morbidity. Despite the popular perception of the “red badge of courage” evidenced by the “combat wounded” bumper stickers and Purple Heart license plates, many veterans may have complicated ideas / experiences about the consequences of their injury. Amputation, in particular, has been linked to depression, anxiety, and fears about performance of traditional social roles associated with gender.

We will remind the narrator that these next several questions still cover the first twelve months after their injury and that we seek information about the ways in which their injury influenced their view of himself as a person.

After you returned to the United States, when you were treated at

1. Can you describe how people responded to your injury?
 - a. Probes: (girlfriend, wife, other family, friends, etc.)
 - b. Probes: How did that make you feel?
 - c. Probes: Did you have visitors?, If so, Who visited you?
Did anyone stay with you?
Did you have a purple heart ceremony? Who came?
2. Tell me how you went about doing daily routine activities during the first twelve months of your injury (i.e., going to the bathroom, eating, going to bed, etc.)
3. How do you think your injury influenced your understanding of yourself as a person?
4. Can you describe what it felt like to be disabled in an era before the American’s with Disabilities Act and before there were accommodations such as cut sidewalks etc?

IV. Stages of Recovery

The purpose of the third question explores the 6th stage of the Amputee Coalition of America (ACA) stages of recovery—a stage not all people with amputations are expected to reach. These questions look at how the course of life may, in the mind of the interlocutor, have been influenced by the injury. The ACA webpage describes the stage in these terms: “Being more than before; trusting self and others; confidence; being a role model to others; this level of recovery is not attained by everyone.” (<http://www.amputee-coalition.org/military-instep/recovery-process.html> - accessed 27 January 2008). The answers to this question are an important set up for the final, 5th question.”

Remind the narrator that these questions cover the first twelve months following the injury.

1. During your first twelve months following your injury, how did you feel your life chances or opportunities were changed or altered?
2. How were your educational goals or opportunities changed or altered?
3. How were your career goals or opportunities changed or altered?
4. How did you think that your “life chances” were change or altered?
 - a. Look at intro question and use current marital status, association memberships, hobbies, employment etc as ways to probe for memories of pre-injury goals in any domain of life (personal, professional, social, family, community).”
5. What do you remember about the experience of leaving treatment?
6. How did you feel about leaving?

V. Explanatory Factors for Life Outcomes

The purpose of this question is to both collect data on all the factors that the interlocutor associates with the outcome of the 12 months after injury. Data should be collected on how the interlocutor viewed the clinical care he received (which can be reviewed from Q 1) but the emphasis is on what non-clinical factors the interlocutor relied upon. The “for good or ill” idea is to remind the interviewer and the interlocutor that stories of affliction, suffering and “failure” are as important as stories of recovery and success.”

Again, stress that these questions cover the first 12 months:

1. What kinds of factors (psychological, social, family etc) do you credit with how your life turned out in the 12 months after you were hurt (for good or for ill)?
 - a. Have the narrator talk about factors that he experienced during the first 12 months that had an impact on the way his life turned out. (probe: Wife or girlfriend, Family, Friends, Other wounded patients, Medical staff)
2. How would you assess the care you received in the first twelve months following your injury?
3. How would you assess the outcome of that care?

VI. Long Term Care Experiences

This is the only question that leaves behind the 12 months after injury schema. It is a chance for the interlocutor to place his / her injury and the 12 months following it within the context of an entire life. In a sense Q5 is a restatement (and compression) of the previous 4 questions. Tell the narrator that this final set of questions addresses his life following the first twelve months.

1. What kind of influence do you think your injury and the year following it has had on the course of your life since then both in terms of your work, family, but also in terms of how you experience yourself?
(probe: Work, Education, Hobbies or interests, Family, Relationships, Friends
Colleagues, Veterans Organizations, Unit Organizations, Personal identity
 - a. Probe: What positive changes, if any, occurred in your life that you might attribute to being injured?
 - b. Probe: What negative changes, if any, occurred in your life that you might attribute to being injured?
2. Can you describe the most challenging thing, if any, you have had to deal with because of your amputations and what makes it challenging?
3. How about the second most challenging thing, if any?
4. Is there anything else that you would like to share about your care and recovery experiences during the first 12 months of your injury?

APPENDIX 3: INFORMED CONSENT FORM

IUPUI and CLARIAN INFORMED CONSENT STATEMENT FOR “Vietnam Amputee Oral History Project, Part I”

You are invited to participate in a research study, Part I of “The Veterans’ Amputee Project,” which will record and transcribe twenty interviews (about two hours each) with veterans of the Vietnam War who lost one or more limbs as a result of combat service. Part I, which will run from April to August 2008, will permit us to field test a number of key components of this study, to include questions and equipment; techniques for recording and transcribing responses to several open-ended questions; and, methods for analyzing information contained in the transcripts. You were selected as a possible subject because you have already registered with the data base maintained by the Indiana-Ohio Center for Traumatic Amputation Rehabilitation Research. We will incorporate information from the interviews into a report for the Indiana-Ohio Center for Traumatic Amputation Rehabilitation Research.

We request that you read this form and ask any questions you may have before agreeing to be interviewed for this study. Dr. David Bodenhamer, Director of Polis, will be the Principal Investigator, and Dr. Philip V. Scarpino, Professor of History, will be the project’s director. Scarpino and Ms. Janna Bennett, a Masters’ student in the public history program at IUPUI, will interview twenty veterans for two hours each. Dr. Carrie E. Foote, Director of Graduate Studies, IUPUI, Department of Sociology, will be working with two sociology student assistants, Sarah Lynn Babb and Jodie Atkinson, to develop a system for coding the transcripts and analyzing them to identify major topics and themes that stand out. The purpose of Dr. Foote’s analysis will be to identify key issues and data regarding the care and post-war quality of life of Vietnam veterans whose wounds resulted in the loss of a limb. Results should shed light on the lives of the veterans involved and provide useful information to the Department of Defense in undertaking the long-term care of veterans wounded in more recent conflicts. The project is paid for by the U.S. Department of Defense (DOD) Telemedicine and Advanced Technology Research Center (TATRC) and conducted by the Polis Center, on the IUPUI campus, on behalf of the Indiana-Ohio Center for Traumatic Amputation Rehabilitation Research.

STUDY PURPOSE: The purpose of this study is to test the following hypothesis: The quality and effectiveness of care provided during the first year of treatment after the loss of a limb in combat is extremely important. That first year of treatment has a significant influence on outcomes produced by subsequent care and on the quality of life experienced by veterans for the rest of their lives. Approximately three-quarters of each interview will focus on the twelve months following the infliction of your wounds. We will talk to you about how your injury happened, about post-evacuation care and recovery, and about factors that influenced your understanding of yourself and the direction and development of your life. About one-quarter of each interview will cover the period between the end of year one and the present. We will ask you questions about the impact of your injury on the whole course of your life, including its influence on work, family (e.g., parents, spouses and significant others, children), identity, social and clinical relationships, religion/faith, and so on.

NUMBER OF PEOPLE TAKING PART IN THE STUDY: If you agree to participate, you will be one of twenty subjects who will be participating in this research.

PROCEDURES FOR THE STUDY: If you agree to be interviewed for this study, your participation will be as follows:

(1) Your name has been randomly selected by Indiana-Ohio Center study personnel from the list of those who have registered for the data bank of the Indiana-Ohio Center for Traumatic Amputation Rehabilitation Research. We will provide you with an informed consent document, an authorization form (similar to when you registered with the Indiana-Ohio Center originally) and a brief questionnaire to list where you received treatment after injury and during rehabilitation. We will also provide you with a summary of the project protocol.

(2) With your consent to participate we will schedule a two-hour recording session and will talk to you about your military service in Vietnam and its aftermath as described above. Sessions will be recorded. You can expect that the interview will be done on the telephone. Interviews will be scheduled at a mutually convenient time. We will ask you to sign all consent forms prior to beginning the first recording session.

(3) We will transcribe the recordings. The transcripts will be analyzed for information that will allow us to draw conclusions about the significance of the first year of care, as well as treatment and your general quality of life following the first year. Neither your name nor any identifying information will be incorporated into the report we will produce from these transcripts.

RISKS OF TAKING PART IN THE STUDY: While there are no significant risks associated with your involvement in this project, there is a possibility that some questions may make you feel uncomfortable. You do not have to answer any question(s) that makes you feel uncomfortable or that you do not want to answer.

BENEFITS OF TAKING PART IN THE STUDY: You will receive no direct benefits from participation. The recorded and transcribed interview(s) will provide important source materials that will permit researchers and the Department of Defense to better understand the long-term care and condition of wounded veterans

ALTERNATIVES TO TAKING PART IN THE STUDY: If you elect not to be interviewed, or if you decide to leave this study, your name and other information will remain in the data base maintained by the Indiana-Ohio Center for Traumatic Amputation Rehabilitation Research. You may elect not to answer particular questions, and you may withdraw from the oral history interview at any time.

CONFIDENTIALITY: Efforts will be made to keep your personal information confidential. We cannot guarantee absolute confidentiality. Your personal information may be disclosed if required by law. Your identity will be held in confidence in reports in which the study may be published and databases in which results may be stored.

Organizations or individuals that may inspect and/or copy the recordings or transcripts for quality assurance and data analysis include, the Primary Investigator, Dr. David Bodenhamer, and his research associates; the IUPUI/Clarian Institutional Review Board or its designees; the study sponsor, Indiana-Ohio Center for Traumatic Amputation Rehabilitation Research; and (as allowed by law) state or federal agencies such as the USAMRMC Office of Research Protections Human Research Protections Office.

COSTS: There should be no costs to you associated with participation in this study.

PAYMENT: You will not receive payment for taking part in this study.

COMPENSATION FOR INJURY: It is extraordinarily unlikely that you will be injured as a result of your participation in this study. The study has no provisions for compensating you or your insurance company in the event you are injured as a result of your participation in this study.

CONTACTS FOR QUESTIONS OR PROBLEMS: If you have questions at any time about the project or its procedures, you may contact the project's oral history director, Dr. Philip V. Scarpino, at 425 University Blvd., Indianapolis, IN 46202. Phone: 317-274-5840/3811. Email: pscarpin@iupui.edu. If you cannot reach Dr. Scarpino during regular business hours (i.e. 8:00AM-5:00PM), please call the IUPUI/Clarian Research Compliance Administration office at 317/278-3458 or 800/696-2949. For questions about your rights as a participant or to discuss problems, complaints or concerns, or to obtain information, or offer input, contact the IUPUI/Clarian Research Compliance Administration office at 317/278-3458 or 800/696-2949.

VOLUNTARY NATURE OF STUDY: Your participation in this study is voluntary. You may choose not to take part, or you may leave the study at any time. Leaving the study will not result in any penalty. Your decision whether or not to participate in this study will not affect your current or future relations with any department or program at Indiana University/Purdue University at Indianapolis.

SUBJECT'S CONSENT: I have read and understand the above information. I have received a copy of this form for my records. I agree to participate in this study as follows:

** My interview may be recorded and transcribed.

** The recordings and transcriptions of my interview may be analyzed in order to identify important issues and data regarding the care and post-war "quality" of life of Vietnam veterans whose wounds resulted in loss of a limb.

** Results will be provided to the Indiana-Ohio Center for Traumatic Amputation Rehabilitation Research and the Department of Defense, and may be used for further research and publication.

** My name and other identifying information will not be associated with the final report.

Narrator's Printed Name: _____
(Study Participant)

Narrator's Signature: _____
(Study Participant)

Date: _____ (Must be dated by the narrator/study participant)

Printed Name of Person Obtaining Consent: _____

Signature of Person Obtaining Consent: _____

Date: _____