

## *Hospitalized in Vietnam*

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### 3rd Combat Security Police Squadron, Bien Hoa, November 1966-1967

***HOSPITALIZED IN VIETNAM - Looking back over all those years, I marvel at the courage of those men who were so very young, and yet so manly, for they endured so much pain and suffering with never a single complaint. "***

Early one night at Bien Hoa, a handful of rockets slammed into the Air Base. It was one of those rare nights when I was supposed to be off, but now the attack obligated me to report for duty, even though I was somewhat intoxicated. At the security police squadron area, there were day shift troops congregating for deployment or standby. Some were standing around in the dark talking with M16s shouldered, their faces glowing from their cigarette drags. Others were breaking out ammo, flares and hand grenades and loading them onto trucks.

A tech sergeant, whose name I do not recall, asked me if I had been drinking. I told him I was supposed to be off that night and that I had been drinking quite a bit. He said they would try to avoid putting me on post, and that perhaps I could soon be relieved of duty if there was no indication of sappers in the wire. For that I was grateful, but soon after found myself recruited to assist in loading ammo onto a truck. At one point, perhaps because I had been drinking and my judgment was off, I loaded a 120 pound box of M60 ammo onto a truck by myself. At the time I weighed about 150 lb., but at nineteen, I was all muscle. Soon after, however, I began to feel a burning sensation in my lower abdomen and I knew what had happened. I had ripped open my old hernia. As small child, I had fallen out of a tree while playing at a friend's house. My mother took me to a doctor, who said I had sustained a hernia, but that it was not serious enough for surgery. As I grew older, I was only vaguely aware of it, and it never hindered me in sports or any physical activity. When I took my physical exam to go in the Air Force, it went undetected, and I gave it no thought. But now, something I'll call guts continuously spilled out through the tear, and I constantly had to push them back in.

I began to experience considerable discomfort, and one day noticed that all my fatigue pants had stains in the same spot from my dirty fingers continuously pushing my guts back in. I knew I needed medical attention, but I wanted to wait until I left Vietnam. I had been there long enough to suspect that medical care in Vietnam would be no frills. As it turned out, I was right.



As the days passed, I doubted more and more that I could wait until I left Vietnam to have surgery. My greatest concern was that a situation would arise in which I would not be able to do my duty. I knew I could not lift and carry another man. I decided to seek counsel from my good friend John Pettit, another security policeman. John was an outgoing sort of guy, always quick with a joke or wisecrack. John had been operated on by an Air Force surgeon stateside. I don't know how good a job the surgeon did, but he left huge scars on the back of John's neck (photo left), which I considered less than appearance enhancing. To my surprise, John told me that he, too, had been contemplating going to a doctor. He had a cyst on his lower back that needed to be removed. I did not know what a cyst was, but he seemed to know all about it. His greatest fear was that it would have roots. That, he said, would mean they would have to cut deeper, and that could cause some serious problems. We decided to go to the doctor together, and selected a day later in the week.

After getting off duty that morning, we set out for the Air Force dispensary on the east side of the base. I still had reservations about surgery, and I anticipated that my condition would be explained to me and that I would be given time to think it over and decide what to do. We were not even sure we would be seen, since we had no appointments. But I had forgotten that I was the property of the Air Force, and little more than a tool that needed fixing. Consequently, we were quite surprised when the doctor who examined us told us he was sending us to Long Binh Army Base for surgery. I was more than a little concerned, but John Pettit seemed to take it in stride. We asked that Tech Sergeant Weeks, our Flight Commander, be notified. Sergeant Weeks was a hard drinking, hard nosed NCO, but he was fair to his troops and not infrequently showed that he had a soft spot in his heart for his men. We felt badly that we had put Sergeant Weeks in a bind, he was suddenly short two men.

Because there were beau coup VC in the area, we were never allowed off base unless it was to conduct a sweep outside the perimeter. But that was just an exercise in slogging through elephant grass and muddy water above





the knees, then returning to the base exhausted, muddy, wet and sweaty. Now, in spite of the fact that we were to be hospitalized in a war zone and operated on, we were looking forward to a new adventure.

Soon, we were on a small bus going to Long Binh, some five kilometers away. Vietnam was clearly a country at war. The road between Bien Hoa and Long Binh was abundant with our Army and Vietnamese troops, trucks and weaponry. Being without our M16s and ammo made us feel naked, but soon we arrived at Long Binh, that sprawling Army base. We drove to the hospital, passing combat and support troops of every kind. The facilities were all of simple wood construction, lined up in neat rows with sandbag walls surrounding them like at Bien Hoa, but here there was an abundance of tanks, armored personnel carriers and other various implements of war.

We arrived at the hospital, and not knowing what to expect, I began to feel a little anxious at the prospect of surgery. I wondered if it would be today. As it turned out, it would not be for a week. We were taken to a Quonset hut for registration, where we were issued a set of blue pajamas and a brown paper bag in which to store our fatigues, boots and personal belongings. After that we were shown to a couple of beds in a very crowded ward. Our hospital ward was just another Quonset hut with a row of beds lined up along each side and an aisle in the middle. To my astonishment, the hut was air conditioned, and really, really cool. I got into my blue pajamas and into bed. For awhile, I just lay there looking around, adjusting to my new environment. All the patients were young men. Many were like me, guys who had various ailments or injuries from accidents. But a lot were men who had been wounded in action. I was surprised at the high number of burn patients. They all had curved metal band frames over them, so the sheets would not touch their burned flesh, and which gave them the appearance of heads sticking out of covered wagons.

Across, and to the right of me was a young Hispanic man, who had been very badly burned. Even his eyes had patches over them so he could not see. The medics would spoon feed him and walk him to the latrine. It was a long, slow, painful walk for him. Another patient told me he had been the driver of an M113 armored personnel carrier (APC) that had been hit with a B-40 rocket. "Charlie always aims for the front", he told me, "That way they either hit the driver, or the engine, or both. Either way, it comes to a stop." It made perfect sense. Yet, when I had been the driver of an APC, that risk had never occurred to me.

Twice, surgery for John Pettit and me was scheduled and then canceled to treat incoming wounded. After about four days of lounging about, a doctor and a chubby faced medic appeared at my bedside. I had been indulging myself in what had become my usual reading and napping. By now, however, I was struggling through Taylor Caldwell's romance novel. I had long since lost interest in it, but in the belief that one must finish what one begins, I continued to plow through it, even though it had become laborious, if not outright penance. The doctor's OD fatigues showed he was a major, and at his direction, I stood up. He was Hispanic, with clean cut jet black hair. He poked and prodded the injured area, then told me to report to such and such a place that evening to be shaved. Surgery would be the next morning, he told me. By now I had resigned myself to accept whatever occurred, so I told him I would be there and thanked him. The whole examination lasted about 45 seconds. No frills. I went back to my reading, but my mind kept turning back to my impending surgery. Would everything go all right? Was this doctor competent? What if we had a rocket attack during surgery? What if we lost electrical power?

The next two days were a heavenly bliss in that air conditioned paradise. John Pettit (Photo, Left) and I were in awe by the luxury of it. For the first time in months our skin was dry instead of hot and clammy. There were a number of books on a table that some folks back home had donated to hospitalized troops in Vietnam. With the antiwar protests going on back home, it was good to see that there were still some folks who cared about us. I doubted any came from the Fonda residence. I picked out a book by Taylor Caldwell. It was a romance novel, more suitable for a woman, but it was a voluminous work and I anticipated having lots of reading time.

The first day I napped and read, and napped and read some more. Meals were actually brought to us in bed by the medics. I felt I didn't deserve such special treatment. After enduring months of hardship, these simple acts of kindness were overwhelming, and almost enough to make one weep. That first day I slept so much, I thought I would be awake all night. I was wrong. I slept like a log. The next day I read and napped some more. At one point, I decided to exert myself, so I got some paper and a pen, and wrote a letter home. I told my mother and father and sisters and brother about my situation, and that I was certain everything would be all right. Of course, I did not know how things would turn out, but what could I do? I was well past the point of no return. That night I slept like a dead man, like one who had been deprived of sleep for months and months, which I had.

The next day, John Pettit and I were told we were being sent to Vung Tau for surgery. We were told we had only been at Long Binh while they made room for us at Vung Tau. We were told to gather our things and prepare to move out. An hour or so later, John and I and several others were put on a bus and driven back to Bien Hoa to board a C-130 for Vung Tau. At Bien Hoa AB, I wondered if I would see anyone I knew. I began to feel guilty. Here, while my comrades-in-arms had been trying to sleep in a hot humid environment with jet aircraft taking off and landing all day, and then trying to be awake



and alert during the night in a state of exhaustion, I had been shamelessly indulging myself in the most decadent cornucopia of luxuries. I found myself slinking down in my seat and leaning away from the window. No one saw me.

[Left: Patch of the 36th Evacuation Hospital Vung Tau Vietnam 1965-1969]

We boarded the C-130 and flew to Vung Tau without incident, and were then taken to the hospital. The hospital was a long row of huts lined up end to end, with a few huts that ran perpendicular to the long row. Those huts were occupied by Vietnamese men, women and children who had sustained every type of wound and injury imaginable. Of the men, some were military, some were civilian. American amputees and those with life threatening wounds were evacuated out of the country pretty quickly. Not so for these Vietnamese. Between the row of huts where American patients were cared for, were some wooden chairs which were usually bedecked with patients in blue pajamas. Along the row of huts ran a long narrow sidewalk that led to the chow hall at the end of the row. We were taken to the hut at the very end of the row. It was quite different from the rest. Except for a row of benches on each side, it was pretty bare and empty. As I recall, there was no wall at one end. Outside, there were two helicopter landing pads. Obviously, this was a place where wounded from the battlefield were brought in to receive preliminary treatment.

We were told to sit on the benches along the wall and given pencils and a form to fill out for registration. I sat next to a young man who cradled his right arm across his stomach. His slender frame and freckled baby face made him look not a day over fifteen. When he got his form, he casually told the medic. "I can't fill this out." "Why not?" asked the medic suspiciously. "Because," said the young man, "I got shot in the chest. My shoulder blade's shattered." "All right" said the medic, sounding a little annoyed, "I'll fill it out for you." In response to the medic's questions, the young man gave his branch as "Army" and his age as "eighteen." After we completed our forms, I asked the young soldier, "How'd you get hit?" "Awww," he said, "We were on patrol and went up to this village. It was supposed to be friendly, but VC had moved in and they ambushed us. I was one of the first ones to get hit." He went on to describe how he took an AK round in the chest that knocked him down and stunned him. It took a moment to realize he had been hit and that those red things flying above him were tracer rounds from his own unit returning fire at the VC. At any moment he anticipated being hit again, either by his own side or the VC, but it never happened. Later, as he was being med-evaced out by helicopter, he passed out and came to several times. He said "Every time I came to, I could see the helicopter blade going whup, whup, whup, whup over my head." After about the fourth time he asked himself, "Is this going to be the last thing I see in my life, a helicopter blade whirling over my head?" Many units had a young guy whose youthful face made him look even younger, and was often called "the kid." This brave young soldier was one of those "kids," but he was as manly as any man I've ever met, and more so than many.

After registering, we were assigned beds in a ward, or should I say hut. To my disappointment, the huts were not air conditioned. But Vung Tau is a beach town, so it was a little cooler than Bien Hoa, but not as cool as those heavenly huts at Long Binh. I was just settling in, when another patient came over and asked me, "What unit you with?" He was an old guy, probably around twenty-eight. He had a wiry build and his brown hair was combed in a slight pompadour, which made him look a little like a garage band rock star. I identified my unit and he told me he was in the Army. I do not remember the unit. He said he was a cook, and had been in Vietnam for four years. As my mind struggled to understand why a cook would want to spend four years in Vietnam, he asked me "What you here for?" "Hernia operation" I said. "You're here for a hernia operation?!?!", he asked wide eyed. "I had a hernia operation!" he said, and pulled his blue pajama pants down exposing a fresh, hideous incision with black surgical thread hanging down and tied in a knot. "It only hurts when you laugh," he said. "Oh, and please, please," he added, "don't sneeze." "I won't" I promised, and for the first time, regretted having sought medical attention.

That day, I began to get to know the other guys around me. On my right was a young Marine who had taken shrapnel from a hand grenade in the buttocks. "I ran past this NVA," he said with childlike wonderment. "I thought he was dead and he threw a hand grenade at me." A couple of guys down from him was a young Army troop whose hand was burned. During a fire fight, he had grabbed the barrel of his M16, popped out an empty clip, popped in a fresh one and continued firing. The web between his index finger and middle finger was completely burned away. The palm of his hand and his fingers were also badly burned. I had always wondered what kind of burn one would sustain from a hot M16 barrel. Now I knew, and it was not a pretty sight.

There was also the usual array of burn patients, their heads sticking out of their covered wagons. I was to learn that there are a thousand ways to get burned in a combat zone. Across from me and down to my right three or four beds, was a young Army troop whose finely chiseled facial features gave him an aristocratic appearance. He was a perfect candidate for a recruiting poster for any branch of the service. He had shot himself in the foot with a .45 auto to avoid combat, and was facing charges under the Uniform Code of Military Justice (UCMJ). I never heard anyone criticize him or what he had done, but whenever he was discussed, it was always in hushed tones, signifying his disgraceful conduct. I do not believe there was a conspiracy to ostracize him, but not one single time did I ever see another patient speak a single word to him. He spent his days lying in bed staring at the ceiling, not even making eye contact with anyone else. Only the medical staff conversed with him, and then only briefly, as they were always too busy to give any of us any more attention than the bare minimum we might need. I now wish I had spoken to him. We were wrong to have judged him.

One day, a young Catholic priest came into the ward. The young Marine next to me who had taken shrapnel in the buttocks, was Italian-American, and like most Italians, Catholic. The priest stopped to chat with him. Early in the conversation, the Marine told him flat out that he did not want to go back into combat, and asked if there was any way he could get out of it. Several of us turned our heads toward the priest to see what he would say. It was an awkward moment. We understood how the Marine felt, but knew his request was a dishonorable one. But what the nineteen year old Marine had seen and experienced diminished the importance of honor. He was asking that his life be spared. The young priest's mouth fell open just a little, and his furrowed brow reflected the sympathy he felt for the young Marine. Another sense seemed to tug at him, reminding him of his obligations as a military

officer. "Well, yes," he said at length, "but not in anyway that you would want." The Marine cast his glance downward. We all felt his embarrassment. The priest's message was clear. He must go back and do his duty. I have no doubt he did.

And about five minutes before the appointed time to be shaved, I left my hut to go to the appointed place. I knew it was about a five minute walk. On my way to the appointed place, I decided to take a shortcut through a Vietnamese ward. I passed by the bed of a young soldier who had a large wound on the left side of his torso. It looked like much of his skin had been blown or burned away. Like most Vietnamese, he was skinny, and I could see exposed ribs in some places. A Vietnamese nurse was working on him and she seemed to be cutting away dead flesh from his ribs. People of different languages express pain differently. Americans tend to say "OW!!!" or "OUCH!!!" The Vietnamese say "Ooo Yaiiii!!!" This soldier with his face distorted in pain kept saying over and over again "Ooo Yaiiii!!!, Ooo Yaiiii!!!"

I found the room in which I was to be shaved and subsequently operated on, and the medic who had accompanied the doctor earlier in the day told me to lie down and pull my pajama bottoms down. I did as he said, and he proceeded to sharpen a straight razor on the inside of a leather strap. It reminded me of how my dad used to shave when I was a child. He squirted some Physohex surgical soap on me, and like a fencer wielding a sword, shaved me in just a few seconds. He handed me a roll of toilet paper, told me to wipe myself off and go take a shower. No frills. He told me they would come for me in the morning after I had been given an injection. I took a shower and counted fourteen nicks and cuts where I had been shaved. No frills.

The next morning, a medic came and gave me a shot, and shortly thereafter he and another medic came for me with a gurney. I could not understand why I could not just walk, until I stood up and felt the effects of the drug. They told me to leave my pajama shirt. I took it off and threw it down. It seemed to float endlessly and beautifully before it landed gently on the bed. I lay down on the gurney and they floated me away to the operating room.

The medic who had shaved me the night before was making preparations. "What side is it on?" he asked. Even in my drugged state, I was surprised by his question. "It's right here," I said, pointing to the spot. I visualized myself waking up to find two incisions, one on the left side, where they had opened me up and found everything okay, and one on my right side, where they had opened me up and found the hernia. Then I visualized myself waking up and finding incisions all over my body. Deciding the medic needed supervision, I propped myself up on my elbows. "Hey!" he said, "Lie down, you're going to pass out any second now!"

Far, far away I heard an angel's voice softly calling my name through a misty fog. "Ernest...Ernest...Ernest." As I struggled to pull myself out of my drugged stupor, I felt I was coming back from death itself. I opened my eyes and saw a nurse holding my hand and calling my name. She was no stone fox, but it had been months and months since I had heard a round eyed girl call my name, and now it was so wonderful. When she saw I was awake, she got up and walked away. No frills.

The operation was over, and there was a dull but growing pain where my hernia had been. I was taken back to my ward and put in bed, where I promptly fell asleep. When I awoke it was dark outside. I was hungry, in pain, and I had to urinate. I didn't feel I could get out of bed, let alone make it to the latrine. I felt as though someone had cut me open, sewn up some muscles inside, and then sewn me up on the outside. I pushed the sheet off myself and examined the incision. It was a fresh cut with surgical thread hanging out and tied in a knot. After a while, a nurse came walking by. I knew she would have an answer to my dilemma. I called her over. "I just had a hernia operation today," I said, "and I need to go to the latrine." "Oh..." she said hesitantly, as though pondering my comment, "Well, go ahead" she said and walked off. I reminded myself that thousands of wounded had come and gone through this hospital. There had been burn patients, and patients with shrapnel wounds and high velocity bullet wounds. There had been amputees and many deaths. There was no sympathy to be wasted on someone who had merely had a hernia operation. I made a mental note to ask for nothing unless I absolutely needed it and absolutely could not get it myself. That never happened. I began to raise myself up slowly, testing my strength and measuring my pain. I felt extremely weak. It took a while, but I finally got out of bed. I could not straighten up, so bent over, I slowly walked out the door. After walking a few feet from the hut, I broke out in a cold sweat and had to stop and lean against a sandbag wall. I began to doubt I could make the other seventy feet to the latrine and I felt my strength seeping out of me. After a few minutes, I walked off to the side where I was certain no one would step and relieved myself. I made it back to my bed and fell asleep. The next day I was brought meals in bed. John Pettit came by a couple of times to see how I was doing and poke fun at me. I was feeling pretty weak and John very considerably didn't stick around long when he saw I was not up to much conversation. After that first day, it was up to me to walk to the chow hall about one hundred yards away. For two days I limited myself to lunch only. The other two meals were not worth the pain and effort. There was an Army troop who took to hanging around with John Pettit and me. I do not remember his name or nature of his wound, except that it did not affect his ability to walk. He and John would walk ahead of me to the chow hall and then John would stop and say "Awww..., let's wait for Grandpa, COME ON GRANDPA, HURRY UP." I would come walking up bent over and when I caught up with them, they would turn and start walking at their normal pace and immediately leave me behind again.

Over the next few days, John Pettit and I and our Army buddy would sit and relax in some lawn chairs outside. We whiled away the days, lounging about, engaged in idle chatter about the war and what life would be like when we got back home. We soaked up the sun, while above us huge fluffy white clouds hung in the air just beneath a deep blue sky. It was during this time that Pettit and I fell into a habit which to this day humbles me with shame.

There was a Vietnamese boy about nine years of age who had been severely burned by napalm over his entire chest and stomach. His nipples were completely gone, and it was impossible to discern where they had once been located. Considering napalm's adhesive and self-igniting qualities, it was a miracle he was alive. Looking back, I realize that some Vietnamese must have exerted a super human effort to save this boy from death by fire. Napalm burns are different from other burns. Most burn patients had a smooth sheet of bright red where their skin had once been. But napalm burns craters and valleys and crags in the skin, which can only result in ugly scarring. That's how this boy was. He never wore a stitch of clothing and he was the pet of the head nurse, an Army captain whose husky build and short cropped blond made her look like a German battle-ax. Pettit and I would summon the boy over. "BABYSAN, BABYSAN!!! LAI DAE, LAI DAE!!!" (come here, come here)." We would signal with a downward movement of the hand, for to call a Vietnamese with an upward movement as we do, is an insult, as that is how one summons a dog. We could see that he was afraid of us. Nonetheless, in spite of his fear, or perhaps because of it, he would come over. We would then look at him up and down frowning and say "Oh babysan, oh babysan, napalm numba ten, huh babysan?" We would then burst out laughing.

I am ashamed of my behavior of thirty years ago. I feel as though it was another person who did that. All I can say is that after months of witnessing pain, suffering, death and mourning, we were inured to what one considered low level suffering, and a small boy with a hideous wound covering half his body, was but one more casualty and hardly worth a second glance. In such an environment, one either adjusts, even if it means becoming numbed, or goes insane. Most GIs instinctively opted for the former. Others could not or would not and suffered the consequences. Most of us are probably somewhere in between.

About six days after surgery, two doctors appeared at my bedside and asked me to stand up so they could examine my incision. I stood up and pulled my pajama bottoms down. "What the heck is that?" one doctor asked. "Oh..." said the other. "That's Doctor *so and so's* mark, he always ties his surgical threat in a knot like that." For the first time, I realized my doctor had artistic qualities. After a few pokes and prods and questions about pain and my ability to walk, I'm told that I'm being sent to Cam Rah Bay for recuperation. The next day I gathered my things and went to say good-bye to John Pettit. I found him in a chair with our Army buddy, his bright blue eyes twinkling through his tanned skin. He seemed to be thoroughly enjoying his vacation and went on and on at great length, telling me how terribly sorry he was that he would not be returning to duty as soon as I. He told me to say hello to the SPs back at Bien Hoa, and to tell them how much he regretted not being able to be with them, struggling to stay awake all night and struggling to sleep during the day in a hot, humid noise filled environment. I told him I would pass his regrets along and bid him and the soldier farewell, then went to join some other patients boarding a bus that would take us to a C-130 at the airport.



Those of us who could walk boarded the C-130 first and sat on the web seats on the side of the fuselage. The heat inside the aircraft was intense, and soon we were all perspiring. The medics then began bringing on the stretcher cases one at a time, four men to a stretcher. It didn't look like they did this every day, and I wondered when they would drop someone. Each stretcher was locked in place in a rack. At one point, as they tried to maneuver a stretcher in place at head level, one medic began to lower his side before the others. The patient began to slide out and reached up and grabbed the rack, his face contorted in pain. I found the exercise strenuous on my incision, and I could hear an occasional grunt or moan from other patients whose wounds were

being aggravated by the movement. Others winced or grimaced as they moved or settled in the web netting. At no time however, did a single man complain. As always, we accepted our situation. Most of us were just kids. Many, like me were just teenagers. But in some ways we were like old men. After every one was aboard, the ramp was lifted and closed and we rolled out to the runway.

Once there, the engines were shut off. We were all wet with sweat. An eternity later, a crew member informed us we had mechanical trouble and that a maintenance crew was coming out to fix the aircraft. Mercifully, the ramp was dropped and those who could walk were allowed to deplane. I was in pain, but the heat drove me out of the aircraft, and we sought shelter from the sun under the wings. The occasional breeze was pure luxury. I felt sorry for those still inside the aircraft, the stretcher cases and those whose pain would not allow them to move.

After awhile, a pickup truck loaded with half a dozen well tanned, hatless and in some cases, shirtless mechanics came out at high speed and screeched to a halt next to the aircraft. Jumping out of the back of the truck, they cracked jokes and made snide remarks to each other. They seemed like a wild bunch. Tools in hand, they went to work on the aircraft, and after just a few minutes jumped back in their truck and with hardly a word to the crew chief, took off again at high speed. I hoped their appearance was deceiving, and that they were really very competent mechanics. Apparently they were, for we took off and landed safely.

At Cam Rah Bay the hospital was not air conditioned. I concluded Long Binh was the exception to the rule. I was assigned a bed and I climbed into it. The strain of the day's travel had increased my pain considerably and I spent the rest of the day in bed. After I had been there a couple of hours, they brought a fat black Army sergeant and plopped him in the bed next to me, face down. All the skin on his back had been burned off, and he had a urine bag attached. He had a roll of fat on each side above his waist, and I could see that the skin in the folds had not burned. For two days he was so drugged, he was hardly conscious. A nurse would come over, and with what looked like a large Popsicle stick, apply a white paste to his burn. After two days he got out of bed, and still heavily drugged, stood at the foot of his bed holding his half filled urine bag by the handle. To my amazement, he stood there for a long time with his eyes closed rocking back and forth. I wondered if he would fall. I hoped he would fall forward rather than backward onto his wound. After awhile, he got back in bed, and I asked "What happened to you Sarge?" "Oh..." he said, "I'm, in artillery, and we put some powered charges in a hole to burn them." He went on to tell me that the powder ignited prematurely and everyone turned and started running. The blast of fire hit him on his back and he was not wearing a shirt. He was in a lot of pain. We chatted a bit, but he was still doped up and soon fell asleep.

This hospital had the usual array of wounded by bullet, shrapnel and fire, and I have to admit, at times I felt my hernia was but a scratch. Looking back over all those years, I marvel at the courage of those men who were so very young, and yet so manly, for they endured so much pain and suffering with never a single complaint.

While not immune to rocket attack, the area around Cam Rah Bay was patrolled by the ROK White Horse Division, and everyone knew it was the policy of White Horse to take no prisoners. Consequently, I felt quite secure. I had seen these Koreans at Bien Hoa with their big, square, shaved heads, and I knew immediately I would not want to be left to their mercy, for there was none to be had.

By now, I knew my days of hospitalization were dwindling and that I would soon be back on duty, so I took it pretty easy, giving my injury as much opportunity as possible to heal. Little did I know what awaited me my first night back. After about five days I was examined by a doctor, who cut away my surgical thread. He had a grandfatherly appearance about him and a cheerful disposition. He told me he was discharging me the next day. "Don't lift anything over five pounds for two months," he said. I thought of my ammo laden web belt, pistol, M16, flak vest, canteen, helmet etc., and thought there was no point in discussing it. "Yes sir," I said. He gave me a cheerful smile, nodded and walked off.

The next morning, I dressed in my fatigues for the first time in three weeks and was discharged from the hospital. I was told where I could catch a bus to the air terminal, and I walked over and stood there. It had been two weeks since I had had surgery, and even though I could now stand erect, I felt as sturdy as an egg. Off to my right, a few thousand feet in the air, some airborne troops were jumping out of a C-130. I don't remember why now, but

something told me they were Vietnamese troops. Judging by their proximity and the absence of gunfire, I concluded it was a practice jump. Watching their parachutes unfurl in the blue sky reminded me that a war was still going on, and that I would be joining it that night

I arrived at the air terminal, which as I recall was like other terminals in Vietnam, that is a slab of concrete 150 feet by 150 feet with no walls and a tin roof supported by thin columns. The floor was covered with GIs, mostly Army troops. They were standing, sitting and lying about, many smoking cigarettes. They were all in fatigues, and most of them were laden with various types of weaponry, gear and ammo. Most were engaged in conversation creating quite a din.

I caught a C-130 to Bien Hoa and walked to the Law Enforcement area where I informed the day shift desk sergeant that I had just returned from the hospital. I wanted to make it up to Sergeant Weeks for my abrupt departure, and planned to report for duty that night, even though I knew I would be dog tired and in pain. I went to my hut where most of my comrades-in-arms were sleeping or trying to sleep. Trying to not make noise, I was selecting a clean uniform for the night, when a day shift SP appeared at my bunk and said, "Govea, Sergeant Weeks says you WILL work tonight!" I was annoyed that I was being ordered to work before I could volunteer. Without turning around, I replied with a quiet "Of course." The airman stood there as though expecting me to say something more. When I didn't, he left. I guess Sergeant Weeks was still a little sore.

After a while, I undressed and got in bed. I kept my knees bent to minimize the pain, and tried to sleep, but the anticipation of going on duty that night kept me awake all day. That evening, I got up and socialized with my fellow SPs. I gave them John Pettit's message, and some chuckled but others saw little humor in it. I told them about some of the wounded I had seen in the hospitals and some of them shook their heads. Even those who had not yet seen dead and wounded close up had been through many rocket attacks, and seeing a rocket explode made it easy to surmise what hot metal moving at high velocity could do to soft flesh and tissue. As for the Vietnamese patients at Vung Tau, they had all seen spookies and cobras pouring fire from the sky. They had seen, heard and felt B-52 raids, and had watched napalm burn. It was not intellectually challenging to imagine what effect that weaponry had on human bodies, and what they had seen fit well with my descriptions.

Early that night, I reported for duty (as ordered) and Sergeant Weeks, perhaps wishing to express some sympathy for my condition, assigned me to vehicle patrol so I could "sit down." For this I was grateful, for it meant it would be easier to stay awake. My patrol partner was Staff Sergeant Phillips, a big guy, some six foot three. Phillips and I had worked together on the Security side and knew each other quite well. After Guardmount, we climbed into our jeep and took off. (Photo, right-left: Tom Trombly, Don Lee, Sgt Phillips)



Phillips had a weakness for the beauty of the Asian woman, and everyone knew the best looking girls worked at the officers club. I'm certain it was mere *coincidence* that they all ended up there rather than the NCO or Airmen's Clubs. We knew when they got off work, and Phillips decided we should go watch them to ensure their safety. As they were coming out, we received a call from the Law Enforcement desk, telling us that an intoxicated Army troop had a medic cornered with a broken bottle at the Army's dispensary on the other side of the base.

We knew we had to get there fast. Phillips started the jeep and we took off at high speed. Too high as it turned out. It had rained that day and the roads were slick. As we traversed a wide curve, our jeep went out of control. We began to turn to the left and go sideways. Those jeeps had no seat belts, and accidents tended to result in serious injury or fatalities. At some point Phillips hit the brakes, locking the wheels. I grabbed the sides of my seat, determined to hang on no matter what. I prepared to bend my body forward when the jeep flipped over to avoid being crushed. I accepted the fact that my injury would be ripped open.

The jeep did a complete 360 degree turn, but did not flip over. That old reliable workhorse had served the GI well again. We ended up way off the road. I took a moment to thank the Big Commander upstairs, then jumped out and ran back to pick up our fatigue caps that had blown off by the force of the turn. I ran back to the jeep, gave Phillips his hat and put my own on and we took off again at high speed.

Upon arrival at the dispensary, we jumped out of the jeep and ran inside. There, we found not a drunken soldier holding a medic cornered with a broken bottle, but rather, a drunken soldier wearing nothing but fatigue pants, standing in a corner, holding a bottle of glucose in each hand over his head, and threatening to smash anyone's head who approached him. His shaggy blond hair made him look more like a derelict, than a soldier in Vietnam. Seated on a stool in the center of the room was another soldier with a badly infected and swollen index finger. Further back were two Army medics standing with their arms folded across their chests, calmly observing the whole thing. Phillips turned to give me instructions, but I was already charging forward. Phillips came up behind me. We each grabbed a bottle out of his hands, dropped them down and grabbed the soldier by his arms. We pushed him forward on top of a table and twisted his arms behind his back and handcuffed him. We pushed him back up against a wall where there was a long bench. His back hit the wall, he slid down and hit the top of the bench which fell forward and turned upside down. He crashed down on top of the underside of the bench and just lay there.

We turned our attention to the medics, who informed us that the two troops had come in seeking medical attention for the infected finger. The drunken troop suddenly, and with no apparent reason, became disorderly and grabbed the two bottles of glucose, threatening to kill anyone who approached him. Sergeant Phillips asked the two medics if they would come down to the Law Enforcement office to make statements, and they said they would.

Phillips and I got the drunken soldier to his feet and began walking him out of the building. I reminded myself that if anything happened, my first priority would be to protect my injury. As we walked out the troop began cursing us, calling us *Air Force wimps* (or some such word). As we walked him down a hallway, he continued calling us every vile vulgarity his brain could conjure up. When we got him to the jeep, Phillips turned him around and pushed his back up against the jeep. He then began pounding the soldier's midsection with his large fists. I unsnapped my club holder, and

gripping my club at both ends, used it like a battering ram, striking the right side of his rib cage several times. Each time the soldier fell forward, Phillips pushed him back up and we resumed our work. The soldier's curses were replaced with grunts and groans. Phillips then pushed the passenger seat forward and literally threw the soldier into the back. It was not a very neat job. Somehow, his head ended up between the two front seats.

Just then another security police jeep came pulling up. "Go get the other one," Phillips told me, and went to talk to the other two security policemen. I went back into the building, my adrenaline still going. When the soldier saw me come in with my club in hand and fire in my eyes, I saw a wave of fear sweep over him. He might not have been so scared if he had known I had just had surgery two weeks earlier. I grabbed his arm and said, "Lets go!" As we were walking down the hallway, I clutched his left shirt sleeve and pushed him with my club stuck in his back, still mindful of my injury. Suddenly, he tried to duck into a latrine. "GET OUT OF THERE!" I shouted, and pulled him out. I pushed him out of the building and over to the security police jeep."

Phillips and the other two SPs were still standing there talking. I lifted the passenger seat forward and told him to get in the back and stay there. He climbed into the back seat, but left his feet too far forward. "PULL YOUR FEET BACK!", I shouted. To my amazement he did not move. "PULL YOUR FEET BACK!", I shouted again. He did not move. I slammed the seat down on his ankles and he jerked his feet back. I walked back to our jeep, and Phillips and I climbed in and we took off. The soldier's head was still between the seats. All the way back the soldier shouted mindless nonsense.

When we arrived at the Law Enforcement office, Phillips got out and said, "Bring him in." I wanted to remind him that I had just been discharged from a hospital twelve hours earlier, but, not wanting to appear like a whiner, I bit my tongue. I pushed the passenger seat forward, grabbed the soldier's pants cuffs, and being careful to stay out of kicking range, swung his legs out. I pulled him out of the jeep and took him inside.



Upon walking in, I saw Tech Sergeant Weeks and Captain Brown, our OIC, leaning against the counter, behind which sat Sargeant Costa (photo left-right: Unknown, Sgt Costa, Tom Trombly), our desk sergeant and A3C Tom Trombly, our desk clerk. As soon as we walked in, Sergeant Weeks rushed forward and pushed me out of the way. He grabbed the soldier by his right arm and began pounding his stomach. I assumed Phillips had told them what the guy thought of us Air Force wimps. Captain Brown remained in the same position, arms folded, legs crossed and eyes half closed. After several blows, the man was taken to a cell. By now Phillips *had* told Trombly what the soldier thought of us, and Trombly decided to take a turn at him. Although Trombly was the desk clerk, his responsibility was to subdue the rowdies we arrested, and he was flawless at his job.

At nineteen, I was young and aggressive, unafraid of a fight. But I knew whom not to fight, and there was no way I would have ever fought Tom Trombly. It was not that he was a little bigger and huskier than me--size comes in third, after willingness and ability to fight. Rather, it was because Trombly had plenty of the first two qualities. Tom went in and removed the handcuffs from the soldier. Even from the desk area, I could hear the sounds of fists smacking against bare flesh followed by grunts, groans, feet scuffling and the sound of a body hitting a wall. By now I was beginning to feel that enough was enough. Phillips then went in for a discussion with the soldier. The objective was to get him to admit he was the wimp (or some such word). "I guess I am a wimp," I heard him say.

At this point, the two medics arrived with a friend of the soldier. We allowed them into his cell, and I could hear the prisoner raising his voice: "THEY BEAT THE TAR OUT OF ME!!!" "Well, if you were acting the way you are now," said his buddy, "I would have done the same thing."

"I doubt it," I said under my breath.

Sometime in October, two or three weeks after my 20th birthday, I received a letter from John Pettit that left me shaken. He had had his cyst-surgery, and things had not gone well. They had not gotten everything out, and were going to have to cut him open again. This was not the same John Pettit I had left at Vung Tau: that John Pettit was laughing, joking, smiling, enjoying himself, his blue eyes twinkling in his tanned face; this John Pettit was confined to his bed, and unable to walk. He needed help in going to the latrine. He was depressed, in pain, and fearful of the future. I wrote him a letter back, admonishing him for behaving like a school girl. I told him that of course he would be okay. The doctors would go back in, remove what was left, sew him up, and he'd be up and around in no time. In reality, I had no idea how things would turn out for him. But in those days we needed things to believe in, and had only each other to lean on. I tried to give him courage to face the future so he could survive psychologically, at least.

In early November I rotated out of Vietnam, a very different man from the boy who had arrived a year earlier. After a short leave I went to RAF Bentwaters, in England. There, I pushed everything that was Vietnam into the deepest recesses of my mind, where it stayed relatively undisturbed for many years.

I never heard back from John Pettit. I have never known what happened to him.

#### Photos of an impromptu barbecue:



**TSgt Weeks and Airman Don Lee**



**Tom Trombly, bellowing a country tune for his dinner.**



**Airman Don Lee, enjoying the fried chicken and pork'n beans.**



**Left-right: Tom Trombly, TSgt Weeks, Don Lee, and Sgt Costa, relax after the barbecue.**





G. Ernest Govea,

**3rd Combat Security Police Squadron, Bien Hoa, November 1968 - Nov1969**

*We*

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