

Vietnam on Tape **Episode 3: "Golden Hour" (15:29)**

[Tape recording: Huey helicopter blades whirring]

Evan: This is an iconic sound. A sound that a generation of Americans could instantly identify.

It's the rotary blades of a Huey helicopter.

The helicopter's official designation was HU-1, hence the nickname, *Huey*. Bell Helicopter in Fort Worth, Texas, developed the Huey for the Army.

Around 7,000 of these helicopters were deployed to Vietnam during the Vietnam War. Dense jungle, mountains, and a lack of passable roads in the combat zone and during the war there were few passable roads in the combat zones made them essential to the war effort. And the Huey became a symbol of the War.

For soldiers in Vietnam, the sound of a Huey could mean the arrival of fresh troops or supplies. It could mean support in the form of gunships.

And a medical evacuation mission also could sound exactly like this ...

[Tape recording: Helicopter chatter]

Evan: I'm Evan Windham.

From the Bullock Museum, this is Vietnam on Tape — a Texas Story Podcast.

[Music]

Before we get any further, I need to let you know that this podcast does contain vivid descriptions of war, audio of military combat, and strong language — so it may not be appropriate for some listeners.

[Music]

(01:36)

Evan: An estimated two hundred and ten thousand medics were inducted into the army over the course of the Vietnam War. Many received orders for Vietnam. One of those medics, Jim Kearney, was first assigned to an artillery unit in 1969.

Jim: It was like a mass hospital there where the people who came in out of the field wounded— It's like an emergency room basically. And they had me stand there and watch this parade of broken, shot up people coming in for a full week and just getting used to blood.

Evan: Jim didn't just treat combat related wounds. He treated all sorts of medical issues such as foot rot or animal bites. He also made soldier took their malaria tablets and tests drinking water. And once a week, the medical station opened treatment up to Vietnamese civilians in a nearby village.

As Jim told me about his duties, I remembered his medic's bag he's shown me when I visited him at his ranch. It's a small bag. And it gets even smaller when I consider all of Jim's responsibilities. And all the people he helped.

Jim performed these duties for months until he was temporarily transferred to the 25th Infantry Division during the invasion of Cambodia.

Eventually he was reassigned once more. This time, he went to the 15th Medical Battalion, 1st Air Cavalry. He was accepted as a combat medic on medical evacuation, or medevac, operations with the 15th Medical Battalion.

Man: The medics on the battlefield were at what we call outside the wire they've happened the fields with the soldiers only they did not carry a weapon and they would just carry their medical supplies they were very courageous members of the combat team.

Evan: That's retired Colonel Greg Simpson. Greg was assigned to the 1st Air Cavalry as a helicopter pilot. His life intersects with Jim's during a key moment in the story but we'll get to that a little bit later.

Up to this point in the podcast, I have spoken mostly with 1-A-O conscientious objectors, men who served in the military but refused to carry a weapon based on moral or religious principles. But Greg, on the phone with me from his home in Tennessee, is different.

Greg volunteered after being drafted.

Greg: One day out of the clear blue I got a draft notice...I didn't think I would be drafted because I was in college and I was also married but somehow the draft board didn't know that so I got a draft notice and I went to the draft board and I said "Hey I'm in college and I'm married, what do I have to do to get to defer?" They were probably not correct but they said "Well, you've been drafted you're gonna have to go through the process." And I said "Well are there any other options if I enlist rather than be drafted?" And they said, "Well, as a matter of fact there is. We really need helicopter pilots in the Army. If you volunteer we can see if we can try to get you in to flight school."

Army helicopters had multiple uses during the Vietnam War. But videos in flight school struck a connection with Greg on the type of support he wanted to provide as a helicopter pilot.

Greg: I was fortunate enough to graduate top of my class so I was able to select the type of admissions that I wanted to fly. And everybody was very, very aware that they would be most likely heading to Vietnam because that was at the height for that.

I saw some videos and presentations about medevac and I thought 'that's exactly what I want to do.' I wanted to try to do something beyond just supporting our combat casualties I also wanted to be a part of evacuating sick and needy civilians from their villages back to Saigon or different places where they had Vietnamese hospitals that would help them. And even evacuated enemy soldiers on the battlefield. And it was something that was appealing to me.

Evan: There was no "front" in the tradition of earlier wars. As a result, the American military had a network of combat medical centers and support hospitals where patients could be flown.

Aeromedevac crews, the teams that manned the air ambulances, had the ability to provide basic medical care en route like administering IV fluid and applying bandages.

This was a change from previous wars, when helicopter fleets were mainly equipped to just transport the wounded to medical facilities.

(06:03)

Greg: It was actually medevac helicopters that were on the battlefield in Vietnam that were credited with what they call the 'golden hour' which would mean if they could get the soldier off the battlefield back into a upscale medical facility his probability of surviving his injuries if they were survivable at all, went up immensely. And so we would have to go out on these missions because we had to protect the golden hour. Navigate to the coordinates in the jungle day or night, 24 hours a day, find a pickup site, extract the patient, and bring that patient back to the medical facility at the base camp.

Evan: The “Golden Hour” is a term used in EMS services today.

That initial hour after trauma is critical. After that, chances of survival drop dramatically.

This approach led to a decreased fatality rate from earlier wars. While these air ambulances allowed for increased recovery and saved many lives, flying into active areas to pick up patients was a dangerous job.

Greg: In the Vietnam era medical evacuation helicopters were painted with red crosses and under the Geneva Convention, enemy combatants were not allowed to shoot at medical evacuation helicopters. Turns out they did. They did it all the time, that completely ignored it. But the units that flew those helicopters, Dustoff units, which were non first Cavalry Division, they were not armed they were not able to provide cover fire for themselves. It had to rely on attack helicopters known as Cobras.

They weren't just shot at. Medevac helicopters were shot down at more than three times the rate of other helicopter missions during the war.

Greg: The 1st Cavalry division commander made it very clear that his medical evacuation helicopters would be armed. Because we operated so far forward there

were times that we did not have attack helicopter support, it wasn't available to us. Sometimes we had to go out and provide our own security. And all of our helicopters were armed with M60 machine guns, you know, we would use those machine guns to defend ourselves. Not even once did we ever fire machine guns unless we were fired upon. We'd go out there and pick up these patients in combat scenarios and sometimes we would go in and we would take intensive automatic weapon fire from a perimeter that was only 50 meters in diameter. It was a very hostile situation, very dynamic, very frightening. Sometimes the rounds with it would hit our helicopter would come up between our legs and go vertically straight up between our legs. What that means is that the enemy has penetrated the defensive perimeter and the soldiers down below us are fighting hand-to-hand. And that's heavy... the bullet would penetrate the Plexiglas it would go right past your face for example and you could literally feel the pressure the vacuum pressure then you can sometimes feel that Plexiglas spew up against your face.

Evan: One air operation in particular, the hoist mission, exponentially increased the danger.

Greg: The jungle was so dense that we would hover over the trees maybe a hundred feet and lower the cable of the hoist to the ground and then we had to sit there and hover. And then the ground soldiers and ground medics would hook the patient to a device we had on the hoist and the medic would hoist the patient into the helicopter. So for a very few minutes on this type of these missions, the medic was an easy, easy target for the enemy to shoot at because he's right there at the open door of the helicopter, leaning out, looking down, controlling the hoist as it goes up and down on the hoist cable. So he was in a very precarious position it takes a lot of concentration to do that So you really have to keep your mind on what you're doing. It's heroic.

Evan: A hovering helicopter and a medic exposed in the doorway were extremely vulnerable.

(10:45)

I said earlier that Jim had been accepted to be a medevac medic with the 15th Medical Battalion. From Jim's explanation, accepted was the key term.

Jim: At this time I say to myself you know "I'm not going to leave it to the luck of the draw this time and I'm tired of being out in the mud and the boonies. I'm going

to volunteer to be a medevac medic." It was all volunteer unit and they didn't take just anybody, you had to be a seasoned medic

Evan: They were experienced high-caliber soldiers trained to perform their roles as a member of a team.

As I'd learned from military historian Jean Mansavage, around 7% of the medics inducted during the Vietnam War were conscientious objectors. I asked Greg about serving with conscientious objector medics. How could he tell that a medic was a CO? Or could he tell it all?

Greg: You couldn't distinguish them quite frankly very easily, how they spoke or what they said, but yet everybody knew and so it a little mysterious on how everybody would know. Word would get around, there were more than one in our unit, but to be honest with you? You really couldn't tell that they were conscientious objectors they would they were just crew members on the ship. They flew their missions and did their jobs and blended in with the crew very nicely there's no animosity, no acrimony nothing of that nature they were well trusted and just very solid members of our team."

Evan: Greg had known about the existence of COs as a child. Greg's father had been in the military, and Greg remembered seeing movies about COs, but his instructors at medevac school had openly spoken to the possibility of a conscientious objector medic being on his crew.

Greg: They were just very clear that these people, in most cases not all cases, but the vast majority of conscientious objectors were very loyal soldiers. They were very determined. They want to serve their country in a positive way, they wanted to do their duty as they saw fit, they didn't want to take a life... We were taught that in medevac school that they are they could be very trusted loyal people not to be denigrated in any way.

(12:57)

Evan: A medevac crew in the 15th Med was comprised of a medic, a crew chief, a door gunner, and two pilots.

While one pilot was flying the helicopter, the other served as the aircraft commander. I assumed that one crew would stick together but individuals would

actually rotate in and rotator out. Because of this, a crew could be put together at a moment's notice.

As soon as a call came through.

Greg: It was just routine routine routine, nothing would happen, and then all of a sudden chaos. Just utter, absolute chaos.

Evan: In the peak years of U.S. involvement, a single mission averaged about fifty minutes roundtrip.

That left ten minutes of time within that Golden Hour.

On one such mission, Greg was the aircraft commander. Jim Kearney was the medic.

Jim got that mission on tape.

[Tape recording: Helicopter chatter]

[Music]

Evan: In our next episode of Vietnam on Tape, we'll hear the mission that started this podcast.

Evan: This Texas Story Podcast is produced by the Bullock Museum in downtown Austin. We tell stories through people, places, and original artifacts, so everything we do is because of people like you who help keep Texas history and culture alive. This podcast episode is no exception and we'd like to thank Jim Kearney and Greg Simpson for being a part of it.

This episode was edited and mixed by David Schulman.

Visit us online at the story of Texas dot com, where you can also share your Texas story in the Texas Story Project. It could be the next season of our podcast. And if you're ever in Austin, be sure to stop by and visit the Bullock Museum.

For Vietnam on Tape, I'm Evan Windham.

[Music]