

Wisconsin Public Television
Korean War Stories Project

Transcript of an
Oral History Interview with
ALICE DORN
Flight Nurse, Air Force, Korean War
2005

Wisconsin Veterans Museum
Madison, Wisconsin

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Dorn, Alice M. Goblirsch, (1928-). Oral History Interview, 2005.

Video Recording: 3 videorecordings (ca. 65 min.); ½ inch, color.

Transcript: 0.1 linear ft. (1 folder).

Military Papers: 0.1 linear ft. (1 folder).

Abstract:

Alice M. Dorn, née Goblirsch, a Sleepy Eye, Minnesota native, discusses her service in the Air Force as a flight nurse during the Korean War. Dorn talks about hospital duty at March Field (California) and treating patients for frostbite. He touches on volunteering to be a flight nurse, flight nurse training, and volunteering for overseas duty. Assigned to the 801st Medical Air Evac Squadron, part of the 315 Air Combat Troop Carrier Squadron, Dorn details treating patients on flights between Korea and Japan being based at Tachikawa (Japan), Ashiya Air Base (Japan), and Kimpo Air Force Base (Korea). She recalls the types of planes she rode in and being unequipped to handle the winter cold. Dorn states the planes would also carry prisoner of war patients and supplies such as cabbage. She comments on seeing United Nations troops from India, Greece, and Australia and she tells of meeting up with a pair of brothers who used to be her neighbors. Dorn reflects on the medical advancements made during the war, including collapsible IV fluids, and describes the routes, methods, and destinations of medical air evacuations. She portrays her living quarters in a Quonset hut, having to always be escorted by an armed guard, and Saturday night dances with a live band. She speaks about the downside of flight nursing: not having doctors available to consult and not having the chance to bond with the patients. Dorn tells of two nurses who were killed in aircraft accidents and touches on the sorts of injuries and illnesses she saw. She comments on spraying the interior of the planes with DDT before every flight. Dorn reports that Korean veterans are seldom willing to talk about their experiences and relates meeting a woman from South Korea who expressed her thankfulness for Dorn's service. She discusses having her picture taken with Louis Herdt, an airman from her unit, and a patient. Dorn details a typical day and her working relationships with the medical technicians and pilots. She characterizes a civilian girl who washed their laundry in Korea, describes the sandwiches and juice they'd feed to patients, and reflects on the accuracy of the television show, M*A*S*H. While coming home aboard a troop ship, Dorn tells of a relative with the same last name getting thrown in the brig due to a mix-up involving her name on the laundry schedule. She details arriving in San Francisco, being held back all alone for a week because of some missing paperwork, and returning to Minneapolis. Dorn reflects on her feelings at the end of the war and speaks of attending Marquette University (Wisconsin) to study public health nursing.

Biographical Sketch:

Dorn (b.1928) served as a nurse with the 801st Troop Carrier Squadron stationed in Korea and Japan during the Korean War. After the war, she worked at the Wood Veterans Hospital (Milwaukee, Wis.) and eventually settled in Middleton, Wisconsin. She married Harold Dorn and they raised three children.

Citation Note:

Cite as: Alice Dorn, Interview, conducted May 4, 2005 at Vilas Hall, Madison, Wisconsin by Mik Derks, Wisconsin Korean War Stories, for Wisconsin Public Television.

Context Note:

Raw footage interview filmed by Wisconsin Public Television for its documentary series, "Wisconsin Korean War Stories." Original WPT videocassette numbers were WCKOR088, WCKOR089, and WCKOR090.

Related Materials Note:

Photographs of this narrator's military service can be found in Wisconsin Public Television. Wisconsin Korean War Stories records (VWM Mss 1389).

Videotape Note:

There are missing audio segments! The WVM copy of the interview is missing a few words at the end of the second tape. Wisconsin Public Television should have complete audio of the interview, but there was a problem during the reproduction of the tapes for the Wisconsin Veterans Museum. The missing parts are italicized as a means of identifying them in this transcript and the actual tape end and start in the WVM copy is clearly noted.

Interviewed by Mik Derks, May 4, 2005

Transcribed by Wisconsin Public Television staff, n.d.

Transcript reformatted and edited by Wisconsin Veterans Museum staff, 2010

Abstract written by Susan Krueger, 2011

Transcribed Interview:

Mik: How did you decide you needed a military career?

Alice: Well, you're asking how did my military career begin?

Mik: Yeah, and where were you?

Alice: Well, I was in high school during all of World War II and I use to read the magazines and follow the Army nurses and what they did. You know and I was, that was wonderful for me, sort of move me into nursing and then ah-- I was living in San Diego when the Korean War began. And I was assigned to March Field in Riverside, California and did hospital duty. And at that time, we used to get all of these soldiers with frost bites on toes, fingers, and we knew they just weren't well equipped with the clothing and the boots they needed, and this changed eventually. But there was so many of them that came back and they were air evac'd back. They were--they came by air, you know, there's a network from Korea to Japan, from Japan to Hawaii, to Hawaii to San Francisco. And then they would go to the bases closest to their homes. And so the people we saw, or the men we saw were living in that area of California. And I sort of thought, "Gee, flight nursing's something I've never done." And I went to the school in Alabama for two months to learn about taking care of people in planes and so on. And then when--after my school was finished in six months, there was a, I don't know what you would call it except that the chief nurse said I had two openings for the far east. It didn't mean it was gonna be flight nursing thing. It meant two nurses somewhere from the Philippines to Japan to Korea. And another nurse and I at Riverside decided we'd like to go and see where we would be going. And we did go.

We went on C-54s, I think took us two days to get to Tokyo and ah--we would stop in Hawaii and then we had to refuel and stop at Wake Island to refuel, which was a thrill for me because I used to see the films on Wake Island and so on. And ah--we got to Japan and they didn't know where to put us. They couldn't quite decide were we flight nurses, or were we hospital nurses. And they couldn't make that decision and then we were assigned to the 801st Medical Air Evac Squadron, and that was part of the 315 Air Combat Troop Carrier Squadron. And the reason we were with the troop carrier squadron was because they would take supplies to Korea and come back empty on their return trip. So they decided, our chief decided, or someone did that this would be a good way to bring patients from Korea back to Japan. And ah--wherever they were going, they would usually be treated in Tokyo or there were several hospitals, big hospitals in Japan. And then ah--either stayed there and maybe they were reassigned back to Korea. But I doubt it. And otherwise they would be going home after they had enough treatment. The wonderful part about our air evacuation was that we could get the patients to the hospitals quickly instead of hours on a ambulance or carrying a stretcher and that would be very uncomfortable and detrimental, really, to the patient in many instances. But ah--we were assigned to Tachikawa, which is outside of Tokyo. It was the central location

for our squadron. But we were rotated to the southern island of Japan, Kyushu, to a base called Ashiya and ah--also in Korea. So in Korea, there would always be four nurses who would handle the flights between the air strips and take the patients to the hospital. I think it was a 121st Hospital outside of Seoul. So we were usually in rotation in southern Japan; there would be six of us. Four over there in Tachikawa would be the long flight because it was near Tokyo and the flights would go down around the southern part of Japan and across either to Pusan, or Kimpo, or Seoul. For when I came it was Kimpo unit they had the base back in order, because that had been overrun and evacuated. Nurses before me did a lot of flights with refugees with children, orphanages that had to be removed and they took them to an island off Korea, in South Korea. I wasn't in on that one, but ah--Kimpo was open again when I came back and, when I came to work there.

And ah--within Korea, we used a smaller plane, the C-47s and the--which were the goony birds of the last war and the C-46s, they were called the box cars. They were not insulated, they were very noisy, there was very little heat in those planes and ah--we would do six--seven flights a day. Because they were like four, five minutes between, I forgotten how many air strips there were, short air strips. And we would pick up patients each time and then come back to Seoul to offload at the hospital. There they were screened and treated and the decision was made whether they would stay, recover, or go back to fight. But it was very interesting and it was a full day. I was there in the winter, and I was there in the summer. The winter could be forty degrees below zero, in the summer as high as 100 degrees. It had this wide range of temperatures. Ah--we didn't have our own coats. We would trade coats, whoever worked that day would, we had two coats. And you hoped somebody was tall as I am, and somebody else in the group was short. So it was every other day and we would trade coats everyday. And I remember writing to my mother and asking her to send me some of that Sears long underwear because we weren't equipped for this.

And ah--but the flights, the flights were, they were tiresome after awhile too. Because everybody was subdued, it was a war, you know, it was difficult at times. We also carried prisoners, war prisoners who needed treatment. And they stayed within Korea. I really don't know where they went after we offloaded our patients because they were also patients. And they must've had a separate place. We'd take the flights from Ashiya, then we would be rotated to Southern Japan. They would go to Pusan for the most part, and sometimes, going over, you would just sit there and wait and wait because a generator was going. One time I went with a whole load of cabbage, the whole plane was full of this big bunch of cabbage. And it smelled like, you know, just sour kraut. Ah--then from Tachikawa would be the longer flights and sometimes those patients would go to Northern Japan and another group would take them to Northern Japan because it was hospital Sawa, I think was what it was called. But in the plane we carried, those were non-pressurized planes, and those were C-54s that went from Japan, it was a larger plane that accommodated like thirty-six people. So there was always a different--it was set up when we got to Korea, how many patients would be stretcher patients, how many were ambulatory.

And the medical technicians would set it up for us and there was some sort of a heating system they had, they had, it was like a big generator and they would have this big tube going into the plane and while we waited for our patients, they would try and warm the plane. But after that, and you know, you were on your own as far as heat. That took care of it a little while, but that was it. But at least it was getting the patients from the ambulances into the plane.

Mik: So they would just outfit the plane according to how many patients you had? Some seats, and some stretchers?

Alice: Yes, four high. And the lowest one would be on the floor of the plane. And then they would be about like this, sort of like--I think the Navy always said their bunks were like. And ah--we would do whatever we needed to change dressings or plasma, some of them were on IVs. Ah--I had one load I remember that it was all head injuries and I don't think many of them responded. They were really critically ill. And ah--usually, it was always a full load, because they wanted it to be up to capacity. We carried, we fed them lunch. There were always some sandwiches from the Korean mess hall and juices and they'd always ask for milk. There was no milk, but the young men wanted milk. But we had fruit juices, and we carried water. I don't know what else I could add in with the, you know, sedatives and the medical kit. The ones you see in that picture, had the dressings and things we needed for flight. It was like a ten hour flight to Tokyo, I'm sorry, it was five hours to Tokyo, round trip would be ten hours. And it was noisy, I think the noise, when I think about it now, I consider the noise and the seats were bucket seats, for the men who were ambulatory, but they were all, it seemed to me, very subdued. I know some were probably medicated so that they would be able to manage the flights. And ah—and then we would offload them into Tokyo at Haneda, and they would be put on ambulances and there was a large hospital in Tokyo.

And we had UN patients. How many countries were involved, that was one war, we had UN soldiers and ah-- there was one load I can remember really because no one spoke English except one spoke English and could speak German, I could speak a little German. To another patient, I wanted to know what was wrong because he seemed to be having a problem and he was able to interpret for me. I can remember, this was aside from nursing, I can remember seeing the UN troops coming in, it was the most beautiful sight I have ever seen because the Indian forces had the turbans, the beautiful colors, the dress uniforms, they were in one area and the Greeks with the green and the gold and so on, were in another area, the Turks, the-- trying to think of all of them, the Australian with the hats, I've forgotten what are those called. You know, the wide brim hats and ah--I should also say that Australia had their own air evacuation planes and so did Egypt. Egypt was there too. They flew for us once in awhile, we were on their planes. But it was, it was quite an experience to see all of the units.

Mik: Were there some South American countries too?

Alice: Columbia, Columbia. The United Kingdom, France, let me think, Ethiopians were another group, beside the ones I had mentioned. I'm probably missing a few, but ah--they can speak English and it must, I don't know how they worked out. And then there were the ROK, Korean soldiers who were working with our men. I had a nice experience one day when I went to one of the strips. When I was stationed in Korea, two men said, "Hey Alice." I look and they were my neighbors, they were two brothers who were stationed together and they said, "We've been meeting this flight line everyday. When a, you know, when a plane has come in, hoping we'd see you." And I thought that was just great. And the next time I went, they were gone. They've been moved to the front. And I was surprised that they hadn't been separated, which they would do now. But ah--it was, I think of those boys, I think of that loss, the loss they've had. Well, the helicopters brought them from the front because the terrain was terrible. The terrain was like what you see in MASH--and the mountains around Riverside or LA, and it was just steep. And there was no greenery. And the ambulances, the roads, there were no roads in most parts and that would've been really difficult. But this was the beginning of the helicopters coming to get the patients and it could carry two. It would be on the outside and I think, I don't know if that was a scary experience for those patients. And then they would land them at the ah--first aid or the MASH hospital and then we would pick them up from there after they had been treated. But some good things had come out of this war. Collapsible fluids, IV fluids came out of this war and a clotting factor, which I can't explain to you.

Mik: What is a collapsible IV?

Alice: You know, they use to have bottles. Now they have these packs. I don't know what they're similar to. Say a hot water bottle, you know, they collapse and you can pack them. There's no breakage. And it's getting the patient through to the specialized care he needs or medical care that he really needs is what I think, saved a lot of limbs and whatever, but you know, to save lives. Because if there was--oh an abdominal wound or something, that patient probably would've died if it was punctured and they would get them there in a hurry.

Mik: Would you fill the plane every time?

Alice: No.

Mik: So you would just pick up a few and would you go to another strip and pick up a few more?

Alice: Yes. And maybe go back. It depended on where it was. It was, the main hospital--the Army hospital was near Seoul. And we would take them, always take them there, so I suppose, if we were east, see these flight lines were called K-9, K-10. I really don't know the names of all of them, and the Korean names. And then we would go back and, and if we were near the hospital and then we would continue to go out and sort of pick them up. How would you put it? Hopscotch practically.

Really--and it would take time to load them and they were always screened very well so that they could make that flight. And the flight within Korea was, I don't know how many thousand feet. It wasn't very high.

Mik: So the doctors wouldn't put them on the plane?

Alice: No, no they would be kept at the hospital, until they were ready to go. Um--there was also a hospital ship in the harbor which came over later. I think it was the *Constellation*. And many of the helicopters took them to the hospital ship, so they could be treated right away too. Now I wasn't, I saw the ship, but I wasn't aware of just how they managed that. You know, who went to the hospital, who went to the ship. But ah--

Mik: Where were you quartered?

Alice: It was really--in Korea, we were quartered in a, not in a tent, we had ah--a building that was put up very rapidly, I think, you know, with the thin boards because you could hear the sounds and then--the men that were with the medical area were, and were also, uh our--medical techs were quartered on the other side of the wall and you could hear everything that was being said. And we slept in sleeping bags on like a stretcher or a--we had a stove that was always going out and then some old Korean men would bring us wood to fire the stove. It was always out in the morning. Because the water we were using was always frozen. This was in the winter. It was always a thin layer of ice on top. And we used to have to use the facilities with the toolmen guarding us and we always were--who would protect whom here. And they had their guns, we really couldn't go anyplace without a guard. So we stayed on the base, there was nowhere to go to. Because I went into Seoul and that was just level. There was very little going on, except markets in the streets where they put the Kimchee or whatever on the pavement or whatever it was on the road. There were four of us who were very close and we still are. We, I just lost one of them, we just lost of one of them in the last month or two. But we were always very close, and we worked things out very well together. But then in the summer when I was there, it was very dusty and dry. And the dust would just blow into our quarters, and we had different quarters then. We had some kind of a metal-framed quonset. But the Army nurses lived in tents and they lived, and the hospital was a tent hospital. And they use to have, they use to have a band of some kind on Saturday night, and they were in their fatigues and their boots and they were just dancing up a storm. But I mean, I think they needed that, they were--that was a tough duty.

Mik: Why was it a tough duty?

Alice: Well, they were there all of the time. I don't know what their length of time there was, for us it was a year and probably, probably for them too. Ah--there was no place to go. There was nothing to do but work, and I'm sure they worked long hours

when the fighting was going on. We had less flights in '52 because the talks were beginning, but we were still there.

Mik: Was it a constant flow of wounded or was it sometimes--it was not as much, and then it would be overwhelming?

Alice: No, in the beginning, I think it was overwhelming because they brought nurses from the states for temporary duty. They were doing three flights a day and they were just exhausted when they were overrun by the North Koreans, but in '52, I'd say about summer '52, we weren't working very much. There was still flights everyday, but not the way it was, because the peace talks started, maybe even earlier I don't know. And the fighting--it was a terrible war. You know, I don't know what the--I've tried talking to some of the men sometimes and I, they just don't wanna speak about it. I did meet a Korean lady last summer at the Y and ah--I asked her where she was from, and she said, "You would not know my country." And I said, "What was your country, I'm interested." And she said, "Korea." "I know it very well." And the parts I was in and she bowed and she said, "Thank you, thank you for coming to save our country." And I was so pleased and I'd see her throughout the summer, she was here temporarily visiting her daughter who's a student at the university here. And I've heard this before that other men have said that when they've gone back for reunions in Korea, they are always very grateful to them for helping them.

Mik: What's the difference between caring for patients in the air as opposed to in the wards or something?

Alice: As opposed to--

Mik: Just the care?

Alice: Oh, there's no doctor available. That was always a little--you hoped, there were no cell phones. You couldn't call. You couldn't say, "My patient is doing this, I need some medical advice." You were really on your own. And hoped you made a good decision. I should say on the C-54s coming back to Japan, there were always two nurses and two medical technicians. And in the other flights, there were--there's one nurse, one medical tech. Ah--in that sense, we didn't know the patients well, we did have records and we were told about the patient as we left. But you didn't get to know him. I'd like, I always like the idea of people getting to know them for a long period of time and so on, but here they came on, they were your patient, you checked the records, you change dressing or gave IVs if it was necessary, or a sedation. But you didn't see them after that. That was a part that I did not like. Where as at the hospital you've had--you have more technology, if something goes wrong, you have medical advice, at least the doctor takes the responsibility of his own advice. Ah--I'm not a doctor, so you do the best you can. I don't remember ever having any problems. And I think that's because it was screening that was done before they were loaded on the planes. They just wouldn't send anyone that we

might lose. Ah--we lost some nurses, we lost a couple nurses with pilot error and ah--one was an Egyptian, or Egyptian C-47, I think, was going to leave Seoul to come back to Japan and our nurses were staffed, we had two nurses staffed and two techs and ah--he was confused about the signal to leave, to take off and a fighter pilot came. The fighters used the same air strip and they just--they were gone. And then we lost a nurse off of Ashiya because the flight would take off over the water. I think Tokyo did the same thing. He would go off, you would fly, take off over the water and ah--I don't know what happened. The plane just dropped. So we lost one of our nurses there in the--it was a mechanical failure. And attack in the--

Mik: When did you say you first got there?

Alice: In the middle of the war, it was really, it was December of 1951. The war began in 1950, December of 1950.

Mik: So by the time you got there, had they pushed the Chinese back out?

Alice: Yes, yes they had.

Mik: Seoul was pretty stable.

Alice: Well, the bridges--I think the bridge had just been repaired and ah--what was the other one? The flight lines. They had to do a lot of repairing as you see on the picture that's kind of a metal ah--flight line that they put down. I think they had to do a lot of soldering and putting those back together. But ah--[**End of Tape WCKOR088**]

Mik: How old were you?

Alice: I think I was twenty-three. Um--one of the, there were two groups of nurses. There was a group who had been in World War II who went first. And then they started recruiting. Really recruiting. And we were the other group. And you should've been there when you would hear this so often.

Mik: What were we talking about?

Alice: Age, twenty-three.

Mik: The war stories those nurses were telling you.

Alice: Yeah. You know, it's always worse when you've been in it and the new group that's coming up--I wouldn't have the war right now for any money. I shouldn't be saying this probably, but I wouldn't want to be in that one. It's experience. I think it's experience, you know, you know what can happen, and what is happening, and so on.

Mik: What kind of things did you see? What kind of injuries did they have?

Alice: What did I--gun shot wounds, for the most part I think. Some were, they were not connected to the war. Forgotten what the title for that was. Um--you know, everybody gets sick I guess and ah--abdominal, head, chest, ah--just anything and everything I guess. Ah--let's see, for the most part at least, that's what I remember. The stretcher cases were always, you know, quite serious, even though they were leg injuries maybe and the rest of the body, upper body injuries. But as I said, you have them for a short time, and just hope to get them to their next destination.

Mik: What kind of illness was there?

Alice: There was an illness beginning, what was it called? We called it some--

Mik: The hemorrhagic fever?

Alice: Hemorrhagic fever, started. I think that started then because we got it at March Airbase. We had patients and no one knew what it was--or what was happening. But we do now and we have some of it, I think--Southwestern United States, there's quite a bit of it. And it's ah--contact with a rodent, you can't pass it to each other, but there always has to be a rodent or something like that to infect you. I didn't have, can't remember much of that, but I did at the hospital, so those men were sent straight home and ah--they do make better recoveries when they're near their families, and their families can come visit. And ah--otherwise, what some of the others with the head injuries, those were the most serious, in my way of thinking. And ah--

Mik: You said you thought they were really happy just to be getting out of there?

Alice: Oh, I do, yes, yes. I often wondered was this your first plane flight, but they couldn't have because they came over on troop ships, I think to begin with, but then they were air lifted in at times, but ah-- we tried to make them comfortable and so on, but they really didn't speak unless they were spoken to. And the noise is a factor, a big factor, it was just this vibration and ah--it was hard to hear. I remember we were required to DDT the plane mode before we left on every flight. And I think about that today. I even worry about it a little bit. Because, you know, for myself, not only for the patients, at least my immune system was where it probably should be, but not the patients.

Mik: Describe that process for me.

Alice: Well, we had a little container and it was, it had a spray and you would just walk to the plane before you left and you would spray the plane and walk down the aisle and do it to the back and then we all. But I thought, you know, what we know now and didn't know then, it could've been serious. Some of those patients probably had the one flight, which was good. But some of them, I don't know, they were picked up

often. You know, when you look at the statistics, some of those patients were flown more than once. And they become part of that statistic. So I think when they say it was a three hundred thousand patients were airlifted, some of those were more than one time. Because they were going back home, and also going to Japan.

Mik: 300,000?

Alice: Yes, I think it was 311,000 and some hundreds. Ah--then before the air evac went over there, they were sent on trains to Pusan, hospital trains. It didn't work out really well because there were so many patients and they were back logged at the harbor. There, wasn't enough transportation to get them across the sea to Japan and so that became a problem. And Lieutenant Colonel Allen D. Smith who was our commanding officer for the unit, did a lot of talking to them, to the Army about air lifting. That was a time when the Air Force, when I went in, the Air Force was just coming into it's own. We still wore Army uniforms. That's an Army uniform. Because the Air Force would just, what was it, 1948--1949 maybe. Ah--we didn't have blue uniforms until I left. The uniforms they wear today. So there was this competition between the hospital trains and the planes. And ah--I think it was until the end of the war--it was 1953 that the Army decided the Air Force was responsible for air lifting patients. Sad isn't it?

Mik: Yeah, so many things get in the way of--

Alice: The way of human beings, yeah.

Mik: Tell me about that photo. Do you remember the day that photo was taken?

Alice: That photo was taken because I happen to be there and so did Airman Herdt. That's Louis Herdt, H E R D T. He ah--he and I worked together, we were usually assigned a medical tech that we used in Korea, otherwise it was whoever's name came up. And ah--a Navy pilot had crashed on the Eastern coast of Korea, I can't tell you where. And our medical doctor in our unit happened to be over and doing some flights with us. It was kind of ah--to see how things were working out. And he went with us. And ah--so, it was just the one patient and he was not in, he was pretty good. He probably had some leg injuries because he was sitting up, he didn't need a, a stretcher or anything like that and I don't know if--he probably went to the hospital ship after we got back. I can't recall. But it was just ah--something that happened and they wanted him to come back so the helicopter did into some, one of the flight lines near wherever he was. And then we picked him up.

Mik: So that's why in there you're cleaning him up.

Alice: Yes, yes. That was the end of the mission. And there was a photographer with the medical man and ah--he took the picture. And it came back to my little hometown out in Sleepy Eye, Minnesota. And my uncle took it to my parents, "Here's your daughter at work." [laughs].

Mik: What a workplace! What are you looking at on the clipboard?

Alice: Ah--the records, we use to have to, you know, a situation like that was different. That patient was on screen and we just didn't have the records we needed. But he said, "Pose for us," and we did. Yeah.

Mik: So is that what you did when you would pick people up? Would you and the other nurse or the technician, would you go over the records and familiarize yourself with who was on that flight and what you needed to do?

Alice: We were told before, we would get there, ok, typical day would be leaving Tachikawa about four in the morning and we'd be at the flight line two hours earlier and then we would leave and we would get outside of Seoul about lunch time because maybe we picked up equipment along the way and the--we would have lunch and our patients would have had lunch. And then we would go meet the doctors. There were two doctors. This is what their job was, to screen patients coming and going. And they would tell us about each patient. We would see each patient in a tent. And we'd have their records, so we were familiar with that person. And ah--so, we had the records and we knew about them before they came on board. And if there were any specifics, or anything to watch for--ah--any treatments that might be needed, bleeding and so on. And ah--this was how that worked out and ah--it takes a long time to load a plane. Even thirty-six people. And we would probably leave about two and maybe get back to Tachikawa four--five, 55 hours, so it would be later, we'd get in. And then they were off loaded there, and they were out of our responsibility. The hospital took them by ambulance.

Mik: That's a long day.

Alice: It is a long day. We didn't usually do two days in a row. I mean that was impossible. There were like, did I tell you, there were probably 25 of us in that unit. Nurses, that is, and I think there were twice as many medical technicians. Because when they were picking up, I read this in, I've been studying, in ah--the US Air Force in Korea from '50 to '53, I didn't realize this, but there were medical technicians that did the work toward the front of the lines, and nurses were not permitted to be on the planes because of the gun fire and so on. So they always had more technicians because they could do almost anything. They were very good, well trained. And ah--good friends.

Mik: What about when you were doing the smaller hops? Tell me what that typical day was like.

Alice: Oh it usually started, probably eight--nine o'clock and it ended about that same time because there was always waiting. You always hurried up and waited some place. And you'd land and usually the patients were ready to come on board, but there was not a doctor who would tell us. We more or less were told by medical

technician and then we would, if we were going on to the next base, it takes awhile to take off and to land again and ah--up and down, it was just up and down and back to off-load patients and I hated the winters. The winters were just too cold. Even coming from the north country as we are here. Ah--and I worried about the patients being cold because they were wrapped in an Army blanket was all they--and wore their pajamas probably, but within Korea they wore their uniforms. If they could, you know, they had their uniforms on. And ah--pajamas, they were not dressed very warm. So it was good to get them back.

Mik: And would you grab some lunch somewhere on that?

Alice: No, no, oh this was the--to Japan. We had the sandwiches. Yes, we would always stop or have lunch at one of the bases where we were picking up patients at the mess hall. And ah--I think it has something to do with pilots and their rules and regulations that they needed to stop after so many hours. And the pilots were well trained men. They were mostly pilots who had flown the Berlin Air Lift. And they would tell us about those experiences and how proud they were. And they have ratings and they had to have special ratings to fly patients and to ah--they would be retrained, not retrained, but they would be checked out again after so many flights or so many months. I don't know how that worked out, but they were senior pilots and they had flown a long time. But they were so proud to be ferrying, not ferrying, but flying patients back and forth, yeah.

Mik: So was that a regular pool? You got to know the pilots as well as the general people?

Alice: Yes, not always, there were always two pilots. Ah--no not always because they also rotated. They were there a year. We were there a year or five hundred fifty hours. It was something like that. So which ever came first, you went home. We were sent home. Which was wonderful.

Mik: 550 flight hours?

Alice: I think that's what it was. My year came first because, you know, the war kind of, or the injured, there were less injured. And ah--they would fight and then they would stop and they would talk and it would go like that.

Mik: Seems like a lot of hours in the air, 550. Did you ever get tired of flying?

Alice: No, I really liked it. I still do. Ah--because, well, with the prop, these were all prop planes, you could see more, we didn't fly very high within the country, you couldn't fly ten thousand feet or nine thousand because there was no oxygen supply except what we carried. So they had to be careful going to Japan. It was always the beauty of seeing Mount Fuji. Ah--you know, passing Mount Fuji, a beautiful mountain. But the terrain was interesting. That's always been interesting to me.

Mik: Did you have any--much contact when you were stationed in Korea with the civilians?

Alice: Some. Oh and the prisoners. Just the prisoners. We had a girl who did our laundry. And ah--one day we realized she was washing our clothes in the Han River and we put an end to that--because it was really contaminated. And so we taught her how to do things. We taught her how to wash clothes, we taught her how to ah--do things the way we do--to clean, and so on. And everyone we've ever had has always wanted to come back. "Take me home with you, take me home." Because I, you didn't know very much about them. They were probably without family at that point. I don't know if they had family. But it was pretty miserable for them. I tried to talk to this lady I told you I met here at the Y, and her husband, I met her husband later. They start their conversations with "after the war." Not "during" or "before." It had to be a miserable, miserable time for them. With the North Koreans overrunning them and fighting them and going back and so on.

Mik: Yes, Seoul was in pretty bad shape.

Alice: Yeah, it was. We did go driving in there one day. We had a, we were allowed a Jeep and some guards, and they took us around to show us. Ah--some of the sights, we took pictures, and they're all at the museum too. But ah--it's all done, you know, things are shot at, shot up, no windows, walls with bullets and ah--the Han River had been rebuilt, or the bridge had been rebuilt. But I don't remember too much about it other than just seeing that part of it.

Mik: You must've turned a few heads, four American girls riding through.

Alice: Oh! No, there were just two of us, I think. Yeah, and two guards. No, I think there were no dependents there then, and there were the Red Cross workers there. Um--but they lived in a different village so I never really got to know them. We sort of stayed with our own unit and ate at the mess hall, and that was it. But I remember those sandwiches that--the sandwiches the mess hall men prepared for the patients. They bake their own bread and so the one slice of bread would be like this and by the time they put a big slice of ham, usually it was ham, look like this, you know. And we wondered how, we didn't have knives or how would we feed them, you know, but they managed all right. But we always carried and I haven't been able to look at it since, this grapefruit juice, canned grapefruit juice. And it's so tart and it's so acidic and, and that was with the ham sandwiches.

Mik: When Kimpo was really busy, that was quite a place wasn't it? Didn't all those jet flights taking off and everything--must've been busy all the time.

Alice: Oh, they went, they flew how many times a day? Four times a day, maybe. Their flight line was off on the other side of ours. So we, we were not involved with them at all. They had their own community. I'd call it a community today, their home base I should say. So you know, the mess, everything was, was across the field, but

we would hear them. And Bed Check Charlie was always coming every four o'clock. You know, you'd see that plane coming over and nobody seemed very concerned about them, but I think they, they dropped leaflets. That plane did, and I think we did the same, did we not? In North Korea, drop leaflets?

Mik: I think so. But I've heard of Bed Check Charlie dropping more than leaflets.

Alice: Yes, I've read about that and I hadn't realized that.

Mik: Like mortars or--

Alice: Yeah, yeah. Oh life was really dull [laughs]. It was, it was, you know, and it was drab, it was ah--when I use to watch the MASH shows and to me, the ah--stories and things are more Vietnam. The men, you know, the stars in it, they're, it's Vietnam to me. This is not Korea. The terrain in Korea, but and probably the patients and so on, but ah--the speech, what am I trying to say?

Mik: The attitude?

Alice: The whole attitude. I can't, didn't recognize it, but I mean it's very entertaining cuz there's always something you can pick out as, "Oh yeah, I knew that."

Mik: Well, Hollywood has never been too good at depicting the past accurately. But tell me about when you came home, when you left Korea.

Alice: When I left Korea. I came back on ship. You, you had a choice of times. It seemed to me, I don't, not personally did I have a choice, but the unit either you flew home or you took the ship, and I took the ship. I was on the ship from Yokohama and all these bands out there and streamers and it was full of, then I realized that it was full of men who were going to Okinawa. They had, they had stopped at, it's beginning duty, they had stopped at Yokohama to, to offload people going to Japan and the ship was on its way out to Okinawa and so we replaced the people apparently who came over and I don't, in Okinawa. They offloaded there and more people went home. It was typhoon season, it was a miserable trip. And it was worse for the, for the enlisted men because they were down in the hole and I would look over the side and I'd see them just sprawled out sick. They, they were really miserable because the weather was, you couldn't walk outside on the deck for most of the time because the spray would just hit you. So I had a lot of Dramamine, I slept a lot of it because I am prone to sea sickness. And ah--I got, my name was, before I was married, was Goblirsch. It was tough name to spell. And there was laundry on our deck and you would post your, your time and laundry when you wanted to do your laundry if there was a slot there for you. And one day, a man came up to me and, or the military police came up to me and said, "Who are you?" and all this, my identification and so on. And I can't understand this and later on, a non-com, an enlisted man came up to me and said, "You're Alice Goblirsch?" And I said, "Yes," "I'm Richard, I'm Richard Goblirsch." "Oh, where do you live?" "Monterey, California." Well, I

couldn't believe this, but what had happened to him, and he is a shirttail relative from my part of the country. What had happened to him was, he was a Marine and the military police had passed the laundry and seen the name up there and they assumed it was Richard. And they put him in the military, and they put him in guard, whatever it is on the ship. Whatever it's called.

Mik: The brig.

Alice: The brig--and for two days until his, until the military officer bailed him out, and he said, "That's not my man. That's not Richard." You know, so that's why they were doing this. But it was funny, haven't heard from him for years, and in the last two years, the name in Germany, we've had a contact with someone I've never met and he has been in contact with Richard, so I've had contact with Richard again. And ah--he just, we just can't figure out how we're related, but we are. That was, that was funny because I couldn't understand why are the military police asking me about my identification. It was too bad for him.

Mik: And then you came back to--

Alice: And we spent two weeks on this terrible sea. One of the highlights for me was the whole fleet was refueling near where we passed whatever the shipping lane is. I've never seen so many Navy ships in my life. I've lived in San Diego and I knew what, some looked like and so on, but there was everything. There were cruisers, air craft carriers, battleships, I don't even know all the names of those ships, but it was just a sight to behold and they were all refueling. You'd go a couple of miles and still there, you know. It was wonderful. But getting into San Francisco, the tug boat, the tug boat situation is, we don't bring your ship in after a certain hour. Like maybe four, let's say four. And we got there a little late. And everybody on board, the men, we could smell America. We could smell the grass because in Japan, there's an odor. There's a definite odor and I don't know what it is, sometimes I think it was like leather, or was it the, they still had the honey wagons then. Was it that? Was it the sewage, you--it was in your clothes, it was in your baggage, it was always there. And you got used to it. But we noticed such a change, we smelled fresh air. It was different than the sea, the ocean. And we sat there, we sat outside on the deck and we just sat and looked at San Francisco. I'll never forget it. And everybody had their plan. They were gonna go to this hotel, or I've forgotten the hotel is that everybody likes so well. It is not today. Was it some hotel where you could sit out on a, well, anyway--it's not important. And then I learned that when we went in the next day to our, to the air base, everybody was going home, but me. All the men, all the nurses, all whoever they were. And I couldn't understand it. And they said, "Your orders, there's something wrong with your orders. There's something missing." And I would sign up at that time, nurses were in such demand, the recruiting officer asked me, "How long do you wanna be in?" I said, "A year." Sure. So I signed up for a year when I left Riverside to go to Japan and then I signed, and then that was the end of my tour. Plus the end of my time and service. And he said, "There's something wrong here." And I realized I was one night, I was

in this dorm, which was a huge dorm and I was all by myself and there were no locks on any doors. And that was it. And I asked the Master Sergeant at the headquarters, could I please move out of there. Oh sure, go into San Francisco, stay there and we'll let you know. So for another week, I spent in San Francisco, just bored cuz I didn't know anyone, and you know. And tried to do some shopping and so on, waiting for those orders. Things were slow then. I don't know how they came back, but they did, they finally had the missing piece of paper and I could go home from San Francisco. And I took a flight home to Minneapolis.

Mik: So how long was that before the treaty?

Alice: That was in 1953, I got back, my discharge papers--say December 30, or was it 31st, the end of December, but I had some, I had some time, not time, what is it called? I'd say, I had some weeks, some leave, I had two or three weeks of leave due and so actually my discharge state is **[End of Tape WCKOR089]** *the end of December and I think the treaty was signed was it July of 1953. I think. Yeah.* **[Start of Tape WCKOR090]**

Mik: I would think you would have been a pretty mature twenty-three—twenty four year-old after that.

Alice: Oh yeah. It, I think so. Um--but you were asking me how I felt.

Mik: Do you remember hearing that it was over?

Alice: Oh yes. I, and that's about the time we lost those last nurses--plus all the patients that were on that plane and the crew. Um--oh I was, but then, you know, you've been hearing about the peace talks and hoping, hoping it would end soon. I had a brother who was coming over, was going overseas when I came back and was he going to be in Korea and so on? I worried about those things, yes. And ah--I was relieved and I, we never gone back, I have no desire to go back. I don't know what it is because so many people do, but I remember it the way it was. And I don't think--I know I wouldn't recognize it now. Too many sad things with patients and gosh, these guys were eighteen years old, some were even seventeen and a half. And they're laying there and missing limbs and so on and that was, that was a real tragedy for them, their families. I often wonder where they are now. No, I was ready for peace, the kind of peace we have and that's another story, really.

Mik: Where were you at that time?

Alice: I was at home. I grew up on a farm in Sleepy Eye, Minnesota. Ah--Laura Ingalls Country for and ah--I think I was, I getting ready to go, I had worked in Minneapolis at the veterans hospital there for about three months and my colleague, the, one of the nurses who I had been in service with, we both decided we'd like to go back to school and work in public health nursing. So I was starting summer school at Marquette in Milwaukee in public health nursing. That's about July of '53.

Mik: Was there any kind--sense of celebration or relief?

Alice: Oh no, no. Oh relief, yes, but celebration, no. The people wouldn't understand because I was around the military people that I knew. Many of them were still in the service and were glad it was over. In fact most of the nurses were reserve in the reserves. And they were, they had to stay. And I don't know how long that lasted. Maybe a year or more. But I was able to get out.

Mik: Did you think that the general population was very aware of Korea and what was going on or?

Alice: I think so. I think so more than, I don't know, maybe it's the people I was with. You know, at Marquette I was with a lot of older students who had been in the service. Most of the men who were older were all Korean veterans. Um--we really didn't talk about it too much, but well, I don't know. I don't know how to answer it.

Mik: But you, of all people, appreciate what it meant to you.

Alice: Oh yes, oh yes yes. I think we were, we were discouraged by how long the peace talks were taking. How, how North Korea could just keep, keeping, keeping us from getting there. You know, just dragging, I guess the word is drag it out and keep going like this. And we were always concerned about the--of the ruler. The father of the person who is ruling it now. We always heard about him, you know. Whatever, wherever it came from. Kim su something?

Mik: Kim Il-Sung. That's his name.

Alice: Yeah, no, well, anyway, they're probably not too different.

Mik: What'd you think of Syngman Rhee?

Alice: I'd hear both sides and ah--did I--I was some place and at one time and they said Syngman Rhee is coming, but I don't think I was able to be around. Ah--no they, they were for him, and they were against him. I can't tell you, I have no feelings at all, but I like the people, I really like the people. They were, they still are wonderful.

Mik: This has been great, thank you.

Alice: Well, I appreciate you having me.

[End of Interview]