NO DATE

This is where many people get upset. Providing this statement is true and it's not just an old Army buddy covering for a close friend, flying on one med evac mission does not a COMBAT MEDIC make! Does this mean if I'm a pilot that catches a ride in the back seat of an F-4 Phantom on a single flight, that I am suddenly a fighter pilot?

To whom it may concern,

My name is Keith Kerns. I proudly served with Wayne Reynolds in the 95th Evacuation Hospital at Fort Benning, Georgia in January and February 1968 and in Viet Nam from February to the end of July 1968. We were part of a company that sailed to Viet Nam on a troop ship, The Geiger, and set up a working hospital south of Da Nang at Marble Mountain. Wayne and I became fast friends in Viet Nam. We had both been to college and were not the best soldiers but we did whatever was needed to help the wounded kids who were brought into the hospital or helped out anywhere we could to relieve others of duties so they could attend to the wounded.

Prior to going to Viet Nam we were stationed at Fort Benning and spent our time training, in hospitals and clinics and cross training in areas of medicine that were not part of our MOS . We would go out into the Georgia pines for days and build a hospital and then train under combat conditions. I even spent a couple days going on a combat patrol with a squad.

After the Tet Offensive we shipped lock, stock and barrel to Viet Nam. We sailed to Da Nang and had to climb down steps and rope ladders to move to shore on landing craft. We spent some time getting used to the heat and humidity and put together a working hospital. I spent some time guarding Viet Cong prisoners who were filling sand bags we used to protect our inflatable operating rooms. We very quickly started to take wounded kids off the battlefields either by helicopter or in some cases by armored personnel carriers when the Marines down the road were fighting. For over a month the VC shot mortars and rockets randomly at whatever they could hit, which was usually the Marine air base whose runway ended where our hospital was located. We spent a lot of time in bunkers on those nights unless we had to come out and help with the wounded. We watched as napalm was dropped near us and Agent Orange was sprayed up wind in the jungle along the Da Nang River. We saw an F4 fighter plane get shot down. We were in a combat area. Most of our tents had bullet holes in them and I once was saved from a machine gun burst when it hit a jeep next to me.

It was apparent that MOS did not mean much in a combat situation. As a dental tech there was not much to do except wire broken jaws, pull teeth and assist in surgeries when kids were shot in the jaw. Wayne was one of the pharmacists. His work tent and mine were on either side of the door leading from the Emergency/Triage tent to the operating rooms. Whenever there were more casualties than the staff in Triage could handle, we would help out. We both carried litters into Triage and prepared the kids for the doctors and nurses to start working on. We cut off their clothes, baring their wounds, gathering their personal items and helped wherever we were needed. It was gruesome work to say the least. We usually ended up covered with blood. At one point Wayne was put on a med evac helicopter to replace a wounded medic and went into the bush to pick up more wounded and dead kids and random body parts. Wayne also worked in the morgue. The stuff that makes for years of nightmares.

Wayne and I also spent many nights on perimeter duty. We manned a 50 caliber machine gun together near one corner of the compound next to a Special Forces Camp. We did this with no training on shooting the damn thing. We decided that Wayne would work the gun and I would feed the belts of bullets. I wish I could remember all the whispered conversations we had about a pharmacist and dental tech being assigned to a 50 caliber machine gun.

I spent many other nights with an M16 on perimeter duty and Wayne was helping out somewhere else. It is hard to recall all details when we were in extreme situations. It is difficult for people that have not been to war to understand the chaos involved when you are working your ass off helping nurses and surgeons, off loading wounded kids from helicopters all the while hoping we would survive.

In conclusion, an MOS in a combat situation means nothing. Helping others dictates that you do whatever you need to do to carry out the mission. None of this stuff would be on our official record and nor do we care. I am proud of what Wayne and I did and was thrilled when we got back in contact with each other last year since we had not seen each other in over 47 years. Viet Nam veterans were pretty much silenced and ridiculed when we came home and just wanted to get on with our lives and not allow anybody to know that we were Viet NamVeterans.

NO SIGNATURE

This is suspicious. Mr. Kerns mentions twice that a military occupational specialty (MOS) means nothing in combat. It seems he wants the reader to believe that when in combat, someone can arbitrarily change