

809 MEDICAL AIR EVACUATION SQUADRON

MISSION

LINEAGE

809 Medical Air Evacuation Squadron

STATIONS

ASSIGNMENTS

COMMANDERS

HONORS

Service Streamers

Campaign Streamers

Armed Forces Expeditionary Streamers

Decorations

EMBLEM

EMBLEM SIGNIFICANCE

MOTTO

NICKNAME

OPERATIONS

The 809th served in the Pacific with the 7th A.F. from 1 Nov. 1943, the beginning of the offensive, to the end of the war September, 1945; from Hickam Fld. Hawaii to Okinawa, Japan. And from Hickam Fld to San Francisco. The 7th wrote their book in 1946, "One Damned Island After Another". For every island that they took, we were right behind them picking up the wounded, flying them back to well-established hospitals in the U.S. On long difficult flights,

there were some close calls, but also a lot of fun along the way covering almost half a world of water and islands.

We left Bowman Fld. on a freezing day in Oct. 1943 spent 2 weeks at Hamilton Fld. near San Francisco waiting for our C-54s to take us to Hawaii, the beautiful land of sunshine and flowers. "This is war?!" we thought. To make it even more unbelievable, we were treated like celebrities. On touring the island, at the Outrigger Club at Waikiki, we met the legendary Duke Kahanamoko, of one of the few pure Hawaiian families left in The Islands. On the other side of the island was Lanaki, an officers' rest camp beach house where we would later spend rest leaves.

We enjoyed this island paradise for about a month, did some inter-island air evac and had a course in Tropical Medicine which would be helpful later when we picked up pts. With "jungle rot". We met a lot of high ranking officers during this time, one of whom was General Hale, CO of 7th A.F. Under his command, the entire Pacific would be taken.

It wasn't until late 1943 that the U.S. was in a military position to start an offensive to re-take our islands and free our P.O.W.s in the Philippines. Therefore, it wasn't until that time that there was a need for air evac. The 809th MAES was the first of flight nurses in the Pacific. In November 1943, we established air evacuation there - but not without some resistance -and proved to the world what air evac COULD DO.

Our patients were not fresh from battlefield injuries due to the long distances between islands, larger aircraft and longer runways needed, so the island was relatively well established before we went in. The boys had already had excellent front-line medical care. Of primary concern should we have to ditch was the patients with casts. We had to consider how many Mae Wests would be needed to keep each afloat, how we would get him into a raft and what would happen if the cast became saturated even if we saved him. Fortunately, it never happened but the possibility was always there.

After the Blitz on Dec. 7, 1941 all the families were sent home. The island consisted of military and natives. Military protocol still prevailed. It was the era of big bands, beautiful formals and parties. We brought with us a new life - we were young and full of life and the pioneers of flight nursing in the Pacific. For the first 6 months, we had war correspondents and PR people around. Our pictures and articles about flight nurses were in papers and magazines across the country. To us, our status as flight nurses, held its own importance. We never let go of that.

We flew from Hickam Fld to Hamilton, Ca. to Canton, Tarawa, Kwajalein, Saipan, Guam, Okinawa, Philippines, Biak, Guadalcanal, New Caledonia, Espiritu Santos with our longest flight about 12 hours, shortest 4. We flew on C-54s with a patient load of 24, some- times extra patients were strapped in the aisle, sometimes cargo. Some planes had large auxiliary gas tanks behind the cockpit so patients had to go to the cockpit to smoke. Litter patients were taken up litter and all. We had to turn the litter sideways to get them through the door. They endured it to have that smoke.

Our in-flight medical equipment was a medical chest designed by our squadron (very efficient), 2 cylinders of oxygen, 2 bottles of plasma, 2 of saline, an electric hot cup to make soup, a narcotics pouch on our belt. The nurses wore men's khakis for the lower islands; practical, comfortable and cool but not flattering. In-flight food was box lunches from the Red Cross.

Dec. 1943, we were sent to Canton, a tiny coral doughnut with 2 trees. Our quarters were right on the lagoon, which was named "The Garden of Eden". We spent long lazy days gathering shells and exploring the wonders of the underwater world in the lagoon. The colorful, intricate coral grew like a tiny forest of bright colored lacy trees with fish of every color, shape and size weaving in and out of the coral forest. We worked at the station hospital. At Christmas a Pan Am pilot brought us two small trees which we decorated, one for the hospital and one for us, using the green and white shells, cotton and a light bulb painted with nail polish. Christmas Eve we sang songs and reminisced with patients and staff. It got a little sad so we sang, "Deep in the Heart of Texas" etc.

Some Navy officers based across the lagoon became frequent visitors. One wrote a poem about our lives there, the last verse of which was: "To the air evac nurses, more power you're the best bunch I'll ever know. And here's to our "Cocktail Hour"

At the palace in old Tokyo. Jan. 1944, the war is real now, Tarawa has been taken. We evacuate the wounded and help in the base hospital. All the buildings were Quonset huts, complete with screens, important as dengue fever is rampant. We did not like mud on the floors in the hospital but the corpsmen were glad to just have floors, roofs, three squares and medical care. They said, "No water to clean floors." We hauled water from the ocean and with their help we soon had nice clean wards which improved morale as well as sanitation.

Most of the casualties from Tarawa were head and abdominal wounds, some of which caused problems at high altitude. We had to descend to 5000 ft. where it was hot and rough. Some patients got air sick and it increased our flight time but we did not lose a patient in the air during the entire war. Remember, this was before pressurized cabins.

The 812th had joined us by then and were most welcome as well as all other squadrons who came later. We needed all the help we could get.

On a flight to Tarawa, we lost two engines on the same wing soon after take-off. We couldn't hold altitude with a full load of gas and no dump valves, but we were legally supposed to ditch at sea, our skillful pilot limped back in and landed anyway.

Kwajalein was boring, muddy and hot. I do recall going to Church there, sitting on an embankment out under the sky. Rather inspiring, actually.

Saipan had beautiful beaches. Peggy married her jack there in a lovely white formal wedding. Maj. Henderson, our C.O. gave her away was to be her maid of honor but was on a flight. Edna Bracket of 812th wore my dress and took my place. Guam was about the same as Saipan. A few of us met Gen. Curtis LeMay, commander of Strategic Air Command, whose crews dropped THE BOMB.

As our flights got longer and longer, the patients needed some relief from the litters. Holding wards were set up at Hickam to off-load them for 48 hours. They showered, shaved, got clean clothes, rub downs, dressings changed and lots of fresh food.

Meanwhile, when we were backing home at our house at Hickam, the homes of colonels and generals in peacetime, there was plenty to help us unwind. We had ping-pong, darts, bridge games, using the old treddle Singer to mend uniforms for ourselves and the men. We also had parties and danced to live bands right in our house. We were not permitted to wear our formals to the officers' club.

Later they moved us from our beloved house to apartments. We were flying so much and trips so long that we seldom saw each other anyway. And our numbers continued to dwindle. Soon we were flying patients back to The States, into Hamilton Fld. a 12 hr. flight. Most of us would go in to San Francisco by limo. The St. Francis Hotel prepared a four-bed dorm just for flight nurses. San Francisco was pure magic.

On to Guadalcanal the beginning of the end. Flight nurses now, it seemed were also considered indestructible. 5 nurses on Tdy. Lived in the Dallas huts in a palm grove on a bay, behind the station hospital nurses' quarters. We were taking patients back to Hickam through Canton; no layover. A 24 hr trip with one nurse, no technician. Between those flights we flew inter-island to Espiritu Santos and New Caledonia round trip same day. We flew on C-47s inter-island with young inexperienced crews (fresh from flight school) who knew nothing about tropical storms. We were either blown off course or got lost trying to go around them. Real trouble when even the mental patients knew we were lost.

On the 24 hr Hickam flights, we were taking Benzedrine to stay alert on the flight and seconal at Hickam to get some sleep. Layovers barely gave enough time to pick up laundry, collect mail, repack and catch a night's sleep. The cockpit crews were changing at Canton. Not the dedicated nurse. On one such flight I became dazed, a little cyanotic and had to take oxygen. This was entered in the ship's log and the United A.L. pilots (on contract out there) wrote a report. Three of us were taken off flight status for 6 weeks. Layovers were then established at Canton and New Caledonia and more nurses were sent to replace us.

Just after we left Guadalcanal, a C-47 crashed on a beach. A patient's trachea was crushed from the litter above. The nurse of the 812th and her T-3 did a tracheotomy. They received several awards.

By the time I had a trip to the Philippines most of the POWs had gone home. Our crew hired a horse and buggy to go sightseeing.

Our first view of this kind of destruction; a city in complete ruin. Our quarters (formally a school) had a huge hole in the wall. We slept on canvas cots with mosquito nets over them.

Biak was the most God-forsaken place on earth, right on the Equator at the beginning of Indonesia. The evening before I arrived, there had been a kamikaze attack which bombed the officers' mess at dinner hour. There was still an atmosphere of horror. About 3 hours out I had come down with dengue (break-bone) fever.

That plus the fatigue of the 30 hour trip down caused me to forget to sign over the courier mail. This in itself caused its own state of hysteria and threats. This wasn't a neat little pouch that fits on a lap. It was a heavy canvas sack that I had guarded with my life until the final moment. After all was said and done, headquarters was upset to learn flight nurses were being used as couriers.

Our quarters at Biak was again the little Dallas huts in a barren compound surrounded by a high wire fence with armed guard at the gate and a foxhole (long ditch) which was put to full use as the slightest disturbance brought on the air raid alarm.

Okinawa was our last "damned island". This was my first view of war. It was an 8 hr night flight from Guam to pick up patients the next morning and return. About 2 hrs before ETA a large flight of Navy fighter planes came out to escort us in and stayed with us as we circled because of burning aircraft along the runway. They too had had a kamikaze attack; a siege actually. As we landed and taxied up I could see a Japanese plane on its belly out in the tules and our GIs rounding up Japs with fixed bayonets to their backs. The terminal was in turmoil. I could get no information about patients or anything. I decided to go for coffee and as I started on the footpath down the embankment I slipped in the red mud and slid the entire 10 feet. About 5 hours later I was told there would be no patients today and we were to return to Guam as it was not safe for the ambulances to be on the road or for the aircraft to remain on the ground overnight. I wasn't too anxious to remain there either.

I am quite sure that was the first air evac plane in there. I have since learned that the 7th A.F. was no longer in command. A new 8th A.F. had been formed for Okinawa and the 7th was just pushed off into obscurity, after having taken the entire Pacific, to that point. At least the symbol of WW II, the Marines raising the flag over IWO JIMA, was under the rein of the 7th. No one can take that away. Its cast in bronze.

August 1945. THE WAR IS OVER. By chance we were all at home at Hickam. One by one light come on all over Hickam. We joined the activity out on Signer Blvd. in our P.J.s. The Air Force band is playing "Anchors Away"; a Navy band is playing "Wild Blue Yonder". The GIs jump off the Creep and run over saying "Oh boy, we can kiss the nurses now" EVERYONE is hugging, laughing, crying and dancing in the streets.

I don't recall our goodbyes. Each of us was under separate orders. We just seemed to kind of GO. We have kept in touch over the years. Marvelous group. A JOB WELL DONE!

In September 1943 the Pacific War was escalating. The first offensive in the Central Pacific was planned to be the Gilbert Islands, triggering activation of the 809th MAES. Major Andrew Henderson, an Alabamian, was named CO and 1st Lt. Frances Morgan, a Texan, C.N.

The Flight Nurses assigned to the 809th were a talented group with various nursing experiences, coming from the four corners of the USA. The multitalented nurses, with their varied backgrounds provided a rich continuing education for all. On an overnight flight from Bowman Field to Hamilton Field everyone felt pretty grungy with "ring-around-the collar syndrome." At a refueling stop in Albuquerque, one bright nurse told us to turn our shirts wrong side out, put our ties and jackets back on and no one would know how dirty we really were! In quarters where we had cooking facilities, specialties from around the whole USA were being prepared, and we either liked or hated each other's cooking. There was Welsh rarebit and Boston baked beans from New England, fried chicken and grits, from the south, and milk gravy from the mid-west.

In October 1943, the newly organized 809th was assigned to 7 AF in the Central Pacific Theater of War, headquartered at Hickam Field MB Oahu, Hawaii. After the complete squadron arrived at Hickam, there were 26 flight nurses, 6 physicians, technicians and supportive personnel, officers and enlisted, for administration, transportation and supply services. Sometime later, when it was determined that our planes would be safe, we were extended to the Southwest Pacific.

The five C-54s and ten crews that would be transporting the 809th teams on their early missions, arrived at the same time. The C-54s were the largest planes used in the Air Evacuation system at the time, propeller driven, with non-pressurized cabins and an air speed of approximately 180-200 miles an hour.

An intensive indoctrination was carried out the first few weeks, to prepare us for the invasions, the long over-water flights and the tropics including the care of major trauma victims, the signs, symptoms and treatment of tropical diseases, and orientation to the C-54s which accommodated 24 litters.

The medical chest for supplies, medicines and equipment essential to patient care was redesigned for the big planes. Limited amounts of oxygen, plasma and saline were always available on board the aircraft. The flight nurses carried all narcotics in a pouch on their belts.

Ordinarily, the planes, with a full load of patients, were staffed by one nurse and a technician. When an airfield or an island was pronounced adequate and secure to land, the patients who

had been screened by a flight surgeon, would be loaded on the plane and take off occurred as soon as possible.

The trips to Hickam from Tarawa, Kwajalein, Saipan and Guam averaged 11 hours ...monitoring vital signs, checking wounds for bleeding, administering medications and intravenous fluids ... trying different techniques to relieve abdominal distention. We were constantly responding to the anticipated and unanticipated reactions of our patients. At times, the pilot was requested to descend to a lower altitude to see if this would relieve the respiratory and abdominal distress of some patients.

The flight nurse was in charge of the patients' care she directed the technicians. The captain of the aircraft directed the crew and advised the nurse about precautions to take during turbulent weather. On one trip, the fully loaded C-54 plunged 5000 feet before control was resumed. When a patient needed medical intervention, the captain radioed ahead for special equipment or supplies and to assure the availability of a physician on the flight line.

Critical patients were seen by a physician boarding the plane on landing. The most critical patients were deplaned first and transferred to the nearest military hospital. Whenever a plane load of patients arrived at an interim stop there were standby nurses and technicians to assist in deplaning the patients and placing them in holding wards which had been set up near the flight line. Patients were bathed, fed, ambulated when appropriate, dressings changed and finally evaluated by a flight surgeon and a nurse.

As the Islands were secured and the casualties were significantly decreased, the flight nurses and technicians worked in the hospitals or in the holding wards or met troop carrier planes to examine the personnel on board for symptoms of Dengue fever or other tropical diseases.

Prior to the assignment to the 809th, most of the nurses had not known each other. The flight to Hickam and the month in Hawaii was a time to get acquainted, to select a confidante or pal, to bond new friendships. We bivouacked in the mountains above Pearl Harbor for two weeks ...living in tents, hiking and having intensive classes.

The social life of Hickam and on the Island was a young woman's dream ... dances at the Officer's Club, first in the Flight Nurses' cadet blue uniform then in evening gowns, swimming and surfing at Waikiki, shopping in Honolulu, playing bridge, bicycling, learning to hula and so forth. That idyllic month was the only time we were all together; once the evacuation flights started, there were only three or four nurses at Hickam at any one time.

The squadron was organized into four Flights, each with a flight leader. Throughout the war an attempt was made to keep each of the flights together. Periodically, each of the nurses flew with patients from Hickam to Hamilton.

Flight Leaders and members were well-matched; each nurse had her strengths and weaknesses. It was the Flight leader's job to capitalize on the strengths and know the weaknesses.

Flight A Leader was our only regular Army nurse. The Flight A nurses were young, attractive ... the dynamos on the social scene except one whose main interest was writing her husband daily.

Flight B Leader was a tall, beautiful brunette who was always eager to learn and was thoughtful about the needs of the nurses in her flight. On the whole she had a quiet, unassuming group who were not particularly interested in partying.

Flight C was the most dissimilar group. The Leader was an enigma. She was very tall with a deep raspy voice, plain and an "operator"; a feminine version of Sergeant Bilko.

Flight D, headed by an experienced public health nurse from Georgia, was the most sophisticated group. They were older and wiser.

Each of the nurses had her own personal concerns about flying over large bodies of water for extended periods of time. One of the nurses worried about the number of Mae Wests (life vests) it would take to keep a patient with a heavy cast afloat.

The uniqueness of the 809th mission, and later the 812th and the Navy Flight Nurse Group, clearly lay in the long over water flights. The unfamiliar cultures encountered on each island were a challenge to the military personnel and a new wonder for "the families and friends back home."

We called our quarters on Canton Atoll, "The Garden of Eden." Each morning two of the flight nurses had latrine duty. Scrub brushes and mops were used vigorously the first two hours.

A holiday was a day like all the rest. Thanksgiving 1943 saw two flight nurses leave Canton Island early in the morning to fly over the International Date Line to Funafuti, and back to Canton late at night missing the holiday in both places.

One of the nurses, a strawberry blonde, was on a plane that had an emergency landing on Apamama. The natives who greeted the plane were enthralled by the red head. The news of her arrival spread rapidly over the Island. When the sixteen year old Queen was escorted to view her, she whipped off her grass skirt and presented it to the honored nurse.

Tarawa served as our departure point for Kwajalein. We lived in a Quonset hut near the navy medical hospital. It was a lovely, breezy, pleasant place to be. We ate in a Navy mess along with the sailors and frequently had beans for breakfast. At supper time we would see fish jumping up in the lagoon and after eating we would go fishing with a net.

The natives were very curious about the pale-skinned women living in their midst. In the morning while dressing, it was not unusual to look up and see noses pressed against the screened windows of our hut. One night after we had gone to bed, a nurse yelled that there

was a rat on her chin; she had forgotten to lower her mosquito netting. The flight nurses chased that rat round and round until someone got the bright idea to open the door and the rat dashed out. We had just settled down when another nurse screamed with an excruciating pain in her ear, an ant was walking across her ear drum. The intruder walked out when a flash light was used to examine the ear.

We had taken "lava lava" to Tarawa to use as barter. The Tarawans made baskets, wove floor mats, etc. "lava lava" was a 3 yard piece of fabric that the natives, men and women, wrapped around themselves as skirts. We bought the fabric in the "5-and-10" in Honolulu for 25 cents a yard. We would bring back all sorts of goodies from our swap shopping.

On los Negros in the Admiralty Islands, we lived in thatched huts built for other nurses. The hospital had no patients so the nurses had been farmed out to other units. The huts were right on the beach and we were frequently sprayed with sea water. We could sit in our huts and see porpoises playing. Transport plane arrivals to return air evac personnel to Biak were kept secret and as a result a lot of time was taken up waiting on the night line. Sometimes a bridge game would take shape, or we might play cribbage.

The Biak commander ordered officers who were awaiting flights to censor the mail. After breakfast the mail was dumped on the tables in the mess hall and we all had a hand in making sure that no secrets were written for enemy eyes.

Half of our flying time was traveling to a site to pick up patients. The time on these trips was our own, spent in many ways: bridge games, cubage games, reading, sleeping, talking about the noises of the engines, etc. One of the advantages of our long flights was the time we spent with our patients. We were able to establish a rapport with them and appreciate their individual personalities.

There was lots of cheerful banter between patients and flight nurses. Something about the young nurses made the soldiers and marines feel at ease. They talked to these officers as they would never have dared to speak to their line officers.

The food on our flights from the forward areas depended on what was available in the mess halls. Sometimes we had only thick slices of GI bread with liberal amounts of orange marmalade. Vienna sausage and spam appeared once in a while. There were no gourmet delicacies except Nescafe which was a godsend to us all. If the mess hall didn't have it, neither did we. Occasionally, the patients would bring rations on board which was shared with all.

The massive abdominal wounds, the jungle rot (a severe skin fungus) which covered the entire body from top of the head to the bottom of the feet, the missing legs, the multiple fractures, the withdrawal syndrome were the major concerns to the Air Evacuation team. The battle casualties going home showed humor and thoughtfulness for each other rather than dwelling on their injuries.

A GI in an underground hospital on Canton Island gave the 809th its first experience with Penicillin. He had a very severe eye and face infection, a high fever and was delirious. After 3 days, with nurses around the clock caring for him and monitoring the drug given by intravenous drip, he showed great improvement. He made a complete recovery.

The evacuation of psychiatric casualties was the most serious dilemma faced by the air evacuation teams. A night on a (47 with 20 patients, from Biak to Guadalcanal, was a near disaster. The patients had been sedated before take-off but their behavior was very difficult to control. Soon after that experience, a directive was issued limiting the number of patients with mental disorders to five on each plane.

One of the greatest shocks for many of us happened in February 1945. A group of Americans who had been Prisoners of War (P.O.W.s) in the Philippines were transported from Leyte to the United States. Among the prisoners were some of the 67 nurses who had been interned. The sight of our colleagues, emaciated and malnourished, was painful. For the first time, the suffering and deprivation experienced by these nurses was a reality.

A plane load of Japanese prisoners, who needed medical attention and who were to be interrogated, were flown from Tarawa to Hickam. In addition to the nurse and technicians to care for the prisoners, there were three representatives from the G-2 section of the 7th AF. Transportation of the prisoners created some conflicts about how much to do for the detested enemy. It was a great relief at the end of the night to have them removed from our care.

The training of a group of young people on Tarawa to be nurses' aides was an unexpected challenge. Although language was somewhat of a barrier, the young ladies learned quickly. We brought fabric from Hawaii, made a simple uniform to replace the grass skirts and taught them to care for the sick. It was fun teaching them to take a temperature or to place a person on a bedpan, etc. The comedy of this situation was exacerbated by the young navy men who were hospitalized and had "great (?)" senses of humor.

There were many tropical diseases that we had not seen before going to the Pacific. Especially curious, to us, was a man with elephantiasis wheeling his scrotum around in a wheelbarrow.

The reputation of being "glamour girls" of the Nurse Corps was dispelled for one hospital nurse being air-evac'd from Fiji. After observing the Air Evac Team for about four hours, she remarked, "Thank God I work in a hospital, I never realized how tough your job is."

One day the 7th A.F. Surgeon, Colonel Andy Smith, facetiously suggested that if we cut off the legs of our khaki pants we would be cooler. Two of the nurses did just that. It took just 24 hours for a directive to come out of 7th A.F. Headquarters: that no females would wear shorts on an airplane.

We were frequently exposed to some pretty famous people. One day James Roosevelt, the President's son, was riding in the crew compartment on his way back to Washington. He was

very pleasant and offered to write letters to the parents of all our patients when he reached Washington. He took the names and addresses of everyone on the plane and followed through with his promise.

Spencer Tracy, dead-heading on a C-54 en route to a tour of the Central Pacific, was a very frightened man to be flying over the world's biggest ocean. He took frequent sips from a beautiful flask that always seemed to be full.

Edgar Rice Burroughs, author of Tarzan, invited three nurses to accompany him on an amphibious tank to visit another atoll. When they started, the tide was low, but on the way back the tide had risen and no one knew how to make the tank seaworthy and it was swamped. They all sat on top of the tank until some brave sailors came to their rescue. Mr. Burrough's jungle skills did not work in the lagoon.

Olivia DeHaviland, returning from a tour, was a charming and friendly woman en route.

There were unbelievable increases in the Air Evacuation capabilities during the last year of the 809th tenure. The number of planes had more than quadrupled; there were new flight nurses and the numbers of sick and wounded being evacuated from Okinawa, the Philippines and the Southwest Pacific to the United States was impressive.

The reports of Japan's surrender dominated our discussions especially after the B-29 bombing of Hiroshima on August 6, 1945 and Nagasaki on August 9, 1945. Each day we waited, then on September 2, 1945, President Truman declared the war was over! The Squadron was once again together at Hickam on that momentous day. We celebrated and shared feelings of pride and elation.

Shortly after September 2, 1945, we left the Islands as we had arrived 23 months before, at various times and on several different planes. We were thankful that the war was over and to be going home.

Air Force Lineage and Honors

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Sources

Air Force Historical Research Agency. U.S. Air Force. Maxwell AFB, AL.