



PHOTO BY PHIL AUDIBERT

Pat Tackitt moved to this area three years ago. She says the current nursing shortage will only get worse, despite modest increases in enrollment in nursing schools. Recently she has taken over fund raising duties for the Orange Free Clinic.

"As long as there's been mothers, there's been nurses," says Pat Tackitt, who served 33 years off and on as a Navy nurse.

The profession of nursing goes back to the earliest years of Christianity, and it has a slender connection to the world's oldest profession. That's because army camp followers: the laundresses, the wives, the sweethearts, and, yes, sometimes the prostitutes, were the only ones you could find "to do this horrible dirty work."

It was not until the mid-19th century that, against the wishes of her family, Florence Nightingale went to the Crimea. "It was so horrific," there's that word again, "that's when

she understood there needed to be some kind of organized curriculum or schooling for nurses... She's truly the mother of modern nurses or professionally trained nurses." Just yesterday marked the anniversary of Florence Nightingale's birth, signaling the end of National Nursing Week.

Florence Nightingale may also be the first documented case of Post

Traumatic Stress Disorder, says Pat. She had all the symptoms: nightmares, headaches, sweats, claustrophobia, tremors, anti-social... "did not leave her home to go outside the door for 30 years."

By the American Civil War, nursing had become a recognized profession, often conducted by nuns such as the Sisters of the Holy Cross, an order instantly recognizable by their huge headdresses. They

tended the wounded on the first hospital ship, the *Red Rover*. Clara Barton, the founder of the Red Cross, may have had her first battlefield experience just up the road here at Cedar Mountain. And Walt Whitman was a nurse.

By the turn of the last century, there were military nurses in both branches of the armed forces. And throughout the mid 20th century, nursing established itself as one of the few "respectable" careers for women.

It is still female-dominated, but today, Pat Tackitt says nursing is in trouble. There is a shortage, estimated to be a quarter of a million nurses shy by 2016. Why?

Lots of reasons, says Pat. When she was growing up, a woman could be a nurse or a secretary or a teacher, and that was about it. But then women's lib hit. Women became doctors and lawyers and engineers. "So why work as a nurse?"

Couple this with the fact that at one point there were too many nurses.

"They started sending patients home earlier. You no longer would go to the hospital to have a baby and stay for a week...So the need for all these nurses went away."

That need is back now with a vengeance, as baby boomers start to flood the nursing homes. And Pat Tackitt adds, "those of us who carried the ball all along are retiring. We're in our 50s ad 60s and no longer working." The recession sparked a lit-

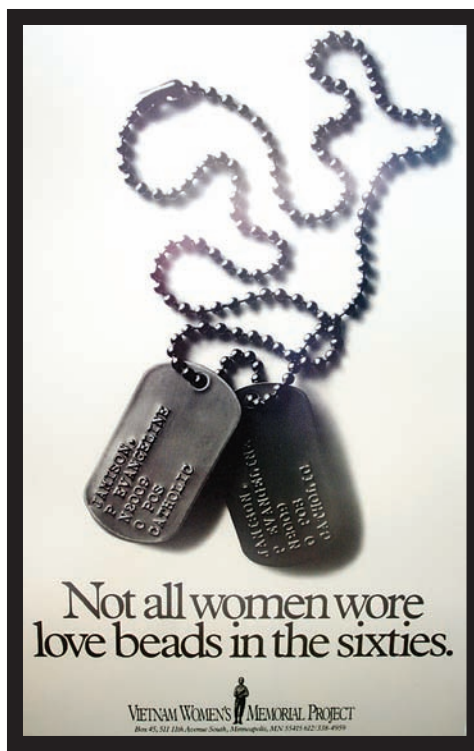
tle bump in enrollment at nursing schools, "but now the problem is there are not enough educators...The graying of nursing. There's not enough nursing instructors."

That's why Pat Tackitt is mentoring Kaylee Jacques, an OCHS junior who has already earned her certified nurse's assistant credentials and is working afternoons at CVS Pharmacy. A year from now, when she graduates, Kaylee plans to attend Indiana University of Pennsylvania, a three-year nursing school. When she graduates, she'll have a job just about anywhere she wants.

Pat Tackitt has already warned Kaylee: "It's hard work, and there's no way that it's ever going to be anything less than hard work. You only have so many years when you can lift and tug." And she'll tell her of a spiritual toll as well. "When I hear people say 'Oh you're a nurse that doesn't bother you.' That drives me crazy. We just become very good at holding our emotions intact until we get into a dirty laundry room or someplace else

where we can cry." But she adds, "When you're on the job, and you're doing it, you do it. Your adrenaline takes over; you do what you have to do, and you get it done."

Pat Tackitt's next nursing job is to help the Orange Free Clinic. Her goal: to get this patient up on its financial feet. "Their numbers have gone way up; people who need care. And the money's not there. We need money."



A poster in Pat Tackitt's home says it all.



THE NAVY NURSE

So anyway, Pat Tackitt was in the middle of the Sahara desert on her way to digging up a diplomat's body, when the thought crossed her mind that she might not make it home.

For a Navy nurse, it was not exactly what you'd call a typical mission. Here she had been minding her own business playing golf on the King of Morocco's private course, when the shore patrol drove up and told her to report in immediately. Back at the base she was informed to "Be

ready to leave in a few minutes.' "A diplomat had died while trying to cross the Sahara desert in his automobile. His wife and son had to bury him right there in the sand.

"So we had to go down to retrieve the diplomat's body and bring the wife and son back," says Pat, rolling her eyes. "I pulled on my tennis shoes and my little go to hell hat," and flew down into Mauritania in a tiny embassy plane with a Navy corpsman and a doctor.

That night they found themselves seated in a Bedouin's tent. The only illumination came from a single bare bulb. The tribesmen were fascinated by her. "I had long blond hair then, a flower child," says Pat, eyes creasing in mirth. "They didn't know what it was. So the head dude gave me this spe-



Above, during her career, Pat Tackitt (left) helped make military medical training films. She also helped design a new type of field hospital for the Gulf War. At left, Pat Tackitt retired from the Navy in 2004, a full Captain. After that, she worked for a non-profit that conducted research in combat medicine and contagious disease.

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cial offering and it was a piece of raw organ meat; it was either the liver, the heart or whatever it was. I remember thinking one way or another I'm going to die. I'm going to die if I eat it, and they're going to kill me if I don't eat it. So how do I get out of this?" She breathes a sigh of relief. "God was on my shoulder. The light bulb went out. I lifted up the tent flap and threw it out."

The next day the absurdity of the situation hit home as they bumped along in a Land Rover on an unmarked track in the Spanish Sahara looking for a dead man's wrecked car. "There's nothing here!" she remembers exclaiming to herself. "And I knew I'd never get home again. I just started laughing."

She pauses a moment to compose herself. "We got to the site where the Peugeot was and we dug up the body. And I didn't know that was in my job description. We brought it back and we all got the wife and we got back in the plane and flew back up to Rabat." The widow was in such a state she had to sedate her.

And when they returned to Morocco, the entire embassy showed up like this was a social engagement. Here Pat and the others had risked their lives for this stiff and everyone is mixing cocktails and wondering what to wear. "So that was really an experience," she shudders.

That happened almost 40 years ago, yet to Pat it is just as clear today as it was then. She sits in her elegant dining room just outside Orange. Photographs spill out onto the table. Each one triggers a memory that launches a story from her 33-years active and reserve duty as a Navy nurse. It's been a helluva ride.

It starts with her Dad. He had been a cook on board Navy ships in both the Atlantic and Pacific theatres during World War II. Back home in rural Franklin Furnace Ohio, he would regale his daughters with sea stories. It was so rural, Pat says she went to school "all 12 years in the same building that my parents went all 12 years in."

But her father's stories took her far away from all that. He told her of taking on just-freed American POWs in Tokyo. Some of these poor, haggard men literally col-

lapsed and died from excitement the moment they came on board. He remembers clearing the dining room tables in the mess to make way for the surgeons to treat the overflow wounded right where a meal had just been served. "He had so many stories and he always said, 'those navy nurses, they were just a special group, just a special group.'"

Becoming a nurse was a no-brainer for Pat. "I knew I wasn't going to make it as a secretary. That just wasn't going to cut it for me...and I knew I wanted to leave southern Ohio and I wanted to travel. Boy the Navy gave it all to me."

She attended the Mt. Carmel School of Nursing in Columbus, run by the Sisters of the Holy Cross. "The nuns tried real hard to keep us out of Ohio State and the other universities, and it didn't work. We learned how to put on lab coats and go out through the emergency room so they wouldn't know we were gone."

From there it was "knife and fork school," basic training for Navy nurses in Newport, RI. The drill sergeant just threw his hands up in frustration. It was here that Pat saw the newflash on TV: "Army Nurse Killed in Vietnam." It was a sobering moment. "I'm going, 'What? This isn't Hollywood anymore.'"

It was the Great Lakes Naval Hospital in Chicago, instead. The year was 1969, the height of the Vietnam War. "It was an 800-bed hospital and there were 1,200 patients in it the day I reported in. So they were in gurneys in the hallway. They were everywhere." She remembers seeing 40 of those special circular beds that can rotate paralyzing patients, every one of them occupied. "And I thought, Oh....my....God." For four weeks she worked the 3-11 shift. "It was one nurse for six wards which is 240 patients."

The toughest part was dealing with the families of these mangled men, explaining to them what had happened to their son, brother, husband, boyfriend. "They may not recognize you," she remembers telling them. "I'll never forget that; going down and talking to the families and saying I'll come and get you as soon as they show

up." She pauses to compose herself, and then adds in a whisper, her voice quavering, "that moment when they first saw each other; that's tough."

There were funny stories too. She visibly brightens as she remembers them. "I found out a good place to hide from the supervisors was the men's head because they didn't go in there." And she remembers, "One night I was doing my Florence Nightingale thing with the flashlight, going up and down every bed during the middle of the night, and they're all snoring, and I was just leaving one row of beds and I heard (a low voice), 'Damn, I just smelled a woman.'"

In officer's school she was taught, "you're a nurse, you're a mother, you're a sister, you're a daughter. So you need to learn to balance that because you need to be all of them to these patients." She was also a trainer, working closely with the front line battlefield EMTs, the Army medics and Navy corpsmen. "I learned a lot from corpsmen. I would not be the nurse that I turned out to be had it not been for them that first year."

It was hard work but, "I was loving it...We worked hard, but boy we played hard too." During twice-a-week

happy hour at the officer's club, she and other nurses would "go up to the officer's ward, get the patients, put 'em in wheel chairs, get their medications, their IV bottles, and wheel 'em over to the officer's club. And then we'd come back at midnight when their liberty was over and tell the night nurse, 'you've got 'em.'"

After about a year of this, Pat's feet started to itch. She wanted to go to Vietnam or Japan. She learned of an opening in Morocco...isolated duty, six docs, six nurses. She said to herself, "I didn't know we had a navy base there." She looks down sheepishly. "The funny thing is I walked around for 24 hours thinking I was going to Monaco...The Navy doesn't have a base in Monaco. I went to North Africa!"

And that's when she was sent to retrieve the diplo-

mat's body in the middle of the desert. It is also here that she delivered babies, lots of them. In Morocco, "there was no TV, nothing to do and there was really good wine, so people, who never had babies before, had their first one there," she says with a knowing wink. "So we delivered a lot of babies over there."

During one of those deliveries, a snake slithered into the operating room while they were performing a caesarian section. "So I start screaming and hollering and throwing instruments because I did not want that thing wrapped around my leg. And he (the corpsman) came in and got rid of the snake." She arches her eyebrows. "Can you imagine this young mother about to have her first baby and she's got this stupid nurse screaming her guts out over the operating room table."

Pat Tackitt went on to marry, birth two sons of her own, and serve off and on with the Navy for 33 years in a wide variety of capacities, rising in rank to Captain. She went to Pearl Harbor three times and South Korea on exercise. She earned a degree at the University of Arizona, served in Portsmouth, VA and lived in the Washington, D.C. area from 1982 until she came to Orange a few years ago.

At Camp Pendleton she made training films for military medicine, and she served as a consultant to Hollywood for TV shows like *China Beach*. She even met Loretta Switt, the unforgettable "Hot Lips Houlihan" of *M*A*S*H** fame at a dedication ceremony for the Vietnam Women's Memorial. After she retired from the Navy in 2004, she worked for a non-profit, doing research for military medicine, "especially combat medicine and contagious diseases."

Because of her experience, Pat Tackitt helped the military bridge two broad gaps: one was in gender; the other in combat medicine. She remembers first testing the gender line in Morocco when she was turned away from the officer's-only golf course. She pointed to the stripes on her arm and gained access to the men's only

club. The gender barrier rose its head again when she was helping design field hospitals for the Gulf War. She was asked to make recommendations regarding instruments and drugs, and she found the list ignored women's needs completely. "You're going to have women in the next war," she warned her superior. "There's no estrogen for the menopausal women. There were no birth control pills. In the surgical instrument list, there weren't appropriate instruments for gynecological issues if they have to go to surgery."

The officer went ballistic, threw her out of his office, saying "That's their problem." I said, 'well you give condoms to all the guys; why can't you give out birth control pills. There's going to be mis-carriages, there's going to be DNCs, there's going to be problems.' " She pauses and adds prophetically, "The bottom line is, it all happened; he just didn't want to hear it."

Another gap: medical experience with combat-related injuries. She had seen what Vietnam did to the human body, but the young docs and nurses coming in during the Gulf War and later Iraq and Afghanistan came from a generation that had not witnessed this kind of violence. "Every war there's a lot of research done, and medicine as a whole benefits from what's learned during war time," says Pat. "That's sad but true."

But she adds even though the medicine has improved, so have the weapons. "Maybe it's because I'm older, but it got to the point it was so hard for me to walk around the hospitals because of the broken lives...We're saving lives, but," her voice gets husky, "...there are horrific things...horrific." Pat uses that word a lot.

One of her last days, she was walking down a hallway at Walter Reed, "and there was a young, I think Marine, trying to change her baby's diaper. She had one arm. You want to stop and help, but you can't. She has to learn to do that herself.

"That's visually hard for us to look at, all these amputees," she continues. "But it's not the signature wound of this war. The signature wound of this war is head injury; traumatic brain injury either closed or open...They have these roadside bombs. These horrific blasts go off and they all get their bell rung."

Pat worked with a neurosurgeon who found that among other things, arteries to the brain would constrict after soldiers "got their bell rung." He developed a technique "with a little tiny wire that put medication in the brain." It saved lives; improved damaged ones.

One of the scariest things Pat Tackitt ever did was land on an aircraft carrier to visit her son Patrick, when "he was a real sailor, a real Dixie cup." She remembers flying out of Portsmouth in a tiny COD plane. "We're going to land and you see it (the carrier) down there and it's about that big," She curls her thumb and forefinger to the size of a quarter. "You go around and around and around and then you don't see anything and then you see water, and then vwoomp, you're there; you're on."

Her own son guided the plane in. It was one of her proudest moments. But three days later, it was time to go. "You're sitting there backwards," she shudders. "They put a helmet on you

and all kinds of life vests...You're sitting there forever not knowing when it's going to happen, when they catapult you off, and all of a sudden vwoomp! It is so intense, very scary."

That son, a Delta Airlines pilot, will be deployed next month to Afghanistan as a reservist. When he was first sent to Iraq another civilian nurse questioned Pat's politics regarding the war. "I have been challenged many times about being a nurse in the military," responded Pat dryly. "I'm here to take care of casualties, their families, their children, the retirees who have served already. I'm not making any kind of decision or judgment about why they got here."

That's what a Navy nurse does.



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Christmas 1969. Ensign Pat Tackitt takes a short break from her busy day treating Vietnam wounded at the overcrowded Naval Hospital in Great Lakes, Illinois.



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Pat Tackitt with her two sons: Andrew (left) of Charleston, SC and Patrick, who will soon be deployed to Afghanistan.



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The scariest moment of her life came when she had to land and later take off from an aircraft carrier on a visit to her son Patrick.