

Right: Jim Maddox, right, visits with Marine veterans and family members from Golf Co, 2/9, during a battalion reunion in Washington, D.C., in 2015. Maddox, who was a corpsman attached to the unit in Vietnam, said that reconnecting with the Marines he served with, decades later, has been cathartic for him. (Photo courtesy of Jim Maddox)



“Eternal Fraternity”

Throughout History, Marines, “Docs” Share Unique, Indescribable Bond



COURTESY OF BUMED

Corpsmen treat a wounded Marine during the Battle of Iwo Jima in 1945. After the WW II battle, four Navy corpsmen were awarded the Medal of Honor for their heroism while aiding wounded Marines.

By Sara W. Bock

As the decades went by following Hospital Corpsman Third Class Jim Maddox’s return home from Vietnam, the passage of time failed to erase the names and faces of the Marines whose traumatic and gruesome injuries he had treated on the battlefield. What happened to the ones who had still been hanging on when they were loaded into the back of a medevac helicopter to be transported to a higher echelon of care? Had they lived or died?

Time, it seemed, hadn’t healed the invisible wounds of war, and plagued by a lack of closure, Maddox struggled to move forward and leave the past behind.

“Did I do enough? Was I a coward?” Maddox recalled asking himself during a recent interview with *Leatherneck*, describing the psychological effects that lingered following his tour embedded with “Golf” Company, 2nd Battalion,



An FMF corpsman cares for a wounded Marine in Vietnam in 1968.

COURTESY OF BUMED

9th Marine Regiment in 1968. The weight of responsibility for saving the lives of the Marines in his unit by providing initial emergency medical treatment in combat stayed with him long after his transition back to civilian life. “I was threadbare with emotions about everything that went on over there and what I saw,” he added.

And there was one name in particular that stood out to Maddox—one he could never forget: Bob Murdock, the very first patient he had treated in combat. What had happened to him?

July 20, 1968, was Maddox’s second day in the field after arriving in Quang Tri, Vietnam, where he had then been transported by helicopter to meet his unit. It would become a date permanently

etched in his memory, even more than half a century later. Golf Company’s 3rd Platoon, to which Maddox was attached, had been assigned as the point platoon on a company patrol. They awoke before dawn and marched out, arriving mid-morning at Hill 174, where they were met by a well-entrenched unit of the North Vietnamese Army. The intense firefight that ensued was Maddox’s first taste of combat, the moment he had trained for, but that no amount of training could adequately replicate.

Shortly after all hell broke loose, Maddox could hear the screams. “Corpsman up!” He crawled out of the bomb crater in which he had taken cover and made his way down the side of the hill.



COURTESY OF JIM MADDOX

Jim Maddox

Below: From the left, Carl Johnson, Bob Murdock and Jim Maddox reunited in 2001. It was the first time that Maddox had seen the two Marines since they served together in Vietnam in 1968. Maddox had spent decades wondering what happened to Murdock, the first patient he ever treated in combat. (Photo courtesy of Jim Maddox)



There, he found a Marine crouched down, holding a battle dressing on Bob Murdock's side. Murdock had taken shrapnel through his flak jacket and shirt and had been hit in the back.

As the environment around him became more frenetic by the second, Maddox tried to remain focused as he worked to stop Murdock's bleeding and apply a battle dressing on his wound. As he attempted to start a blood plasma transfusion that he hoped would save Murdock's life, a grenade landed near them. He lay on top of his patient—"what I was trained to do," he recalls—and the explosion knocked him out. When he regained consciousness, another Marine, Private First Class George Gibson, came to his aid and helped him pick up Murdock so they could carry him back to the bomb crater. But within an instant, Gibson began screaming that he'd been hit as well. Seconds later, Maddox was next, hit in the hip with shrapnel that blew a large hole in his utilities.

Pushing aside the searing pain, Maddox managed to crawl back into the bomb crater, where another corpsman applied a battle dressing. Both Gibson and Murdock had been pulled into the crater and Maddox began treating them again. Gibson died from his wounds shortly thereafter, but Murdock was still alive when he was loaded onto the CH-46 Sea Knight that had arrived to transport the wounded out of the field. Maddox helped load more than a dozen wounded Marines



Right: HM3 Levitt, a corpsman in Vietnam, administers an IV to a wounded Marine during a medevac from Phu Bai, Vietnam, 1966.

before boarding the helicopter himself. But despite his own injuries, he continued to attend to Murdock until they landed in Dong Ha. Maddox was treated for his wounds and sent back to Quang Tri, where he recuperated for a month before rejoining the battalion for the duration of his tour.

For his actions in the firefight on Hill 147, Maddox was awarded a Bronze Star with combat "V." "Observing wounded Marines lying exposed to continuing hostile fire, Hospitalman Maddox completely disregarded his own safety as he maneuvered across the fire-swept terrain to assist his companions," his award citation reads. "Ignoring the intense sniper fire and grenades exploding around him, he resolutely continued to render first aid treatment to the Marines, steadfastly remaining in his exposed position despite a painful fragmentation wound."

Like many others who have received

recognition for heroism under fire, the award brought a jumble of emotions for Maddox, including a sense of guilt that his own injury had interfered with his ability to care for Murdock, who he wasn't sure had ultimately survived.

"I felt real strange about it because I had left that guy. It still burns a hole in my soul," Maddox said of the Bronze Star in 1999 while participating in an oral history project with the U.S. Navy Bureau of Medicine and Surgery (BUMED).

But just two years after that oral history interview, in 2001, the rapidly expanding internet—and a brand-new Apple computer Maddox purchased—led him to a reunion website for the Marines of 2/9. He'd always had a sense of apprehension about reconnecting with the Marines with whom he served back in Vietnam, primarily because he feared the emotional toll of learning what had happened to them, or what feelings talking to them might provoke. But his curiosity overpowered

COURTESY OF BUMED

Right: While supporting Marine units during Operation Iraqi Freedom, a corpsman assigned to the 15th Marine Expeditionary Unit provides first aid to an injured Iraqi.

Below: The enlisted Fleet Marine Force Warfare Specialist Qualification, denoted by the FMF pin that corpsmen wear on their uniforms, is an outward symbol of their dedication to serving alongside Marines. To earn the qualification, they must demonstrate their mastery not only of battlefield medical skills, but also Marine Corps history, culture and structure.



LCPL JUAN BUSTOS, USMC



COURTESY OF BUMED

his trepidation, and he reconnected with Carl Johnson, a Marine he had shared a tent with and grown close to during his time with the battalion. To his surprise, he soon learned that Johnson and Bob Murdock—who had indeed survived and was now a wheelchair-bound paraplegic—were still in touch and had for years been trying to track down Maddox, who, using the term of endearment Marines commonly call their corpsmen, they referred to as simply “Doc.”

The three arranged to meet at Johnson’s home in Kansas, and during their reunion stayed up into the wee hours talking about the attack on Hill 174 and the injuries they all had sustained.

“When I was getting ready to leave, [Murdock] rolled up in his wheelchair and he said, ‘Doc, thanks for giving me some extra time,’” said Maddox. Their reunion put his fears and doubts to rest, and Maddox found it tremendously healing. He soon began attending annual 2/9 gatherings in Washington, D.C., where he found that his shared experiences with the Marines in Vietnam had forged a bond that only those who were there could understand. Even after all the time that had passed, the Marines still considered their corpsmen to be,

for all intents and purposes, Marines themselves.

“The corpsmen were as much a part of us as anybody else,” said Carl Johnson, who added that every year on July 20, the anniversary of the fire on Hill 147, he calls Doc Maddox—one of the only people in his life who understands the life-altering impact of that day.



PFC VANIAH TEMPLE, USMC

Sgt Allen Greggs Jr., the great-nephew of PFC George Gibson, one of the first patients Jim Maddox treated on Hill 147 in Vietnam in 1968, accepts on his great-uncle’s behalf the Bronze Star with combat “V,” which was posthumously awarded to him on Oct. 16, 2013. Maddox attended the award ceremony and was instrumental in helping get the Bronze Star approved.

Through the 2/9 reunion group, Maddox also connected with the daughter of a Marine he treated in the field, who ultimately had died a few years after returning home from Vietnam due to complications from his injuries. He considers her to be like a daughter of his own, and Maddox cherishes the unlikely friendship that formed between them.

“It’s miraculous in a way; a silver lining. I’ve told them that the best part of the Vietnam War was being able to get together,” said Maddox of the 2/9 Marines. “I spent years focusing on the negative and finally somebody said along the way, ‘You talk a lot about the people you lost, but what about the people you helped?’”

In 2013, Maddox traveled to Marine Corps Recruit Depot Parris Island, S.C., to see the great-nephew of PFC Gibson—the Marine who was killed while trying to help him save Murdock’s life—accept a Bronze Star with combat “V” that had posthumously been awarded to his great-uncle. The great-nephew, Sergeant Allen Greggs Jr., was serving as a drill instructor at the recruit depot at the time of the presentation, and Maddox was instrumental in helping get the award approved.

For Maddox, these experiences of reconnection with the Marines with whom he served—or their surviving family members—were integral to his healing process and highlight the inimitable, sacred bond between Marines and their Docs.

Corpsmen, the Navy’s enlisted medical specialists, serve as assistants to health care professionals in naval hospitals, clinics and ships, but also are eligible to serve in

“greenside” roles, embedded with Marine units to provide first-response medical care both in garrison and in combat. It’s an assignment that affords them the opportunity to wear the Marine Corps utility uniform and to earn the esteemed title Fleet Marine Force (FMF) corpsman, the warfare specialist qualification denoted by the “Fleet Marine Force” pin, which they wear with pride on their uniforms—an outward symbol of their dedication to the history, traditions and culture of the Marines with whom they serve. Hospital corpsmen who meet certain qualifications can be assigned as independent duty corpsmen (IDCs) who are responsible for providing medical care aboard ships and submarines, FMF, Special Forces and Seabee units and at isolated duty stations where no medical officer is available.

Historically beloved and respected by the Marines with whom they serve, Docs have followed Marines into the chaos of battle as noncombatant medics, frequently disregarding their own safety to render first aid while under fire.

Corpsmen have served with Marine units since the formal establishment of

the U.S. Navy Hospital Corps on June 17, 1898; however, an argument could be made that the unique partnership began more than a century earlier, said BUMED historian André Sobocinski.

“Prior to this date you did have medical Sailors serving in roles of ‘proto-corpsmen’ and they were known by names like loblolly boys, baymen and stewards,” said Sobocinski, who added that these roles can be traced all the way back to the Continental Navy and Continental Marines during the American Revolution. The early 19th-century name “loblolly boys” came from a porridge known as loblolly the medical Sailors administered to the sick either aboard the ship or at shore stations. But in terms of the beginning of true Marine corpsmen, Sobocinski said you can look back to Haiti in 1915.

These experiences in Haiti would prove vital in the evolution of field medicine, Sobocinski said.

When the United States entered World War I in 1917 and Marine Corps Base Quantico, Va., was established, a field medical training program was created there to train the medical personnel that

would be embedded in the Marine units serving in France.

“It wasn’t a formal course or school, but it was foundational in the development of specialized training,” said Sobocinski, adding that the term “FMF corpsman” wasn’t used until the 1930s, after the Fleet Marine Force was officially established in 1933. It wasn’t until World War II that two Field Medical Service Schools were established to train corpsmen to serve with Marine units: one on the East Coast at New River, N.C., and one on the West Coast at Camp Pendleton.

“These were the first field medical training schools in our history,” said Sobocinski. “They would be effectively used for training thousands of corpsmen deployed to the Pacific. After World War II the schools were deactivated and remained so until the start of the Korean War when Navy medical leaders realized that these schools were vital for ensuring that we had properly trained corpsmen with Marine units.”

According to Sobocinski, the Field Medical Service Schools trained more than 3,000 corpsmen who would serve in combat in Korea. The schools operated under that name until they were renamed Field Medical Training Battalion-East at Marine Corps Base Camp Lejeune, N.C., and Field Medical Training Battalion-West at Marine Corps Base Camp Pendleton, Calif., in 2007.

“That corpsman is a Marine’s life link,” said Sobocinski. “That has not changed over the course of the history of the Hospital Corps and over the course of the history of corpsmen embedded with Marine units. Whether it’s Belleau Wood or Fallujah, Chosin Reservoir—those corpsmen have always been by the Marine’s side with that sole mission to protect those Marines, to save those Marines’ lives. And I think that sacred bond was really born out of those experiences forged over time and forged at these epic battles.”

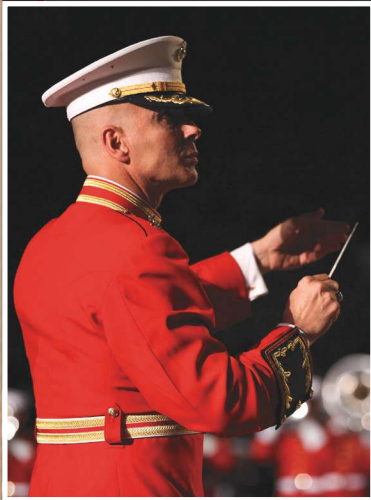
Over the course of the history of the Navy-Marine Corps team, countless corpsmen have sacrificed their lives to save their Marines. The U.S. Navy Hospital Corps—which is the largest rate or specialty in the Navy—also is the Navy’s most decorated enlisted rate. According to Sobocinski, 19 of the 22 hospital corpsmen in history who have been awarded the Medal of Honor were

WW I hospital corpsmen are pictured here in France in the summer of 1917, the same year that a field medical training program was established at MCB Quantico, Va., to train those who would serve with Marine units in Europe.



COURTESY OF BUMED

Marine Musician Dedicates March to Corpsmen



LCPL TIA DUFOUR, USMC

CWO-4 Brian Dix leads a performance of the United States Marine Drum and Bugle Corps during the evening parade at Marine Barracks Washington in Washington, D.C., May 4, 2012 (left). In 2004 he composed “Corpsman Up,” a march dedicated to Navy corpsmen. In a 2009 ceremony at the Bureau of Medicine and Surgery (right), Dix was sworn in as an honorary corpsman by BUMED Force Master Chief Laura Martinez and VADM Adam M. Robinson Jr., the Surgeon General of the Navy. (Photo Courtesy of Maj Brian Dix, USMC (Ret))



Since the establishment of the U.S. Navy Hospital Corps in 1898, corpsmen have been taking care of Marines in every clime and place. The dedication of corpsmen is well-known in the Corps and most Marines have a story to tell about a “Doc” who went above and beyond on the battlefield or in garrison.

It was these stories, one in particular, that inspired musician Major Brian Dix, USMC (Ret) to compose “Corpsman Up,” a march dedicated to corpsmen. “Corpsmen are so versatile and show compassion and empathy in everything that they do,” said Maj Dix about the inspiration for the composition he wrote in 2004 for the United States Marine Drum and Bugle Corps.

At the time, Maj Dix was the director of the “The Commandant’s Own,” at Marine Barracks Washington, D.C. And when the Drum and Bugle Corps wasn’t traveling to one of their many performances per year, Dix was spending time volunteering at the National Naval Medical Center (now named Walter Reed National Military Medical Center) in Bethesda, Md., organizing blood and plasma drives. He also regularly visited patients there—including Marines who had been wounded in Iraq and Afghanistan.

On one such visit, Dix met Hospital Corpsman Third Class Joe “Doc” Worley, who was recovering from the traumatic amputation of his left leg as the result of an improvised explosive device (IED) blast in Iraq. Worley was a corpsman assigned to 2nd Battalion, 1st Marines in Fallujah, Iraq, when their convoy was hit by a roadside IED. HM3 Worley was running to aid the Marines wounded in the blast, when a second explosion severed his leg.

From his hospital room in Maryland, Doc Worley explained to Dix that he knew his Marines needed him, so he tied a tourniquet around his leg to stop the bleeding, gave himself a shot of morphine for pain, and then gave instructions to those who were still standing about how to save the lives of their wounded brethren.

“The presence of mind of Joe Worley is what struck me, more so than anything else. And I left that room ... and I walked into the hallway and I just had to grab a railing because my breath was just taken away—I have met so many wonderful Marines in my day, but none have ever spoken so eloquently ... and with such humility as Joe Worley on that afternoon,” Dix said. “And that’s when I realized I have to do something nice. I have to do something good

for [the corpsmen] ... I going to write something for our Docs,” added Dix, who at the time was planning for “The Commandant’s Own” 2005 season.

“The entire piece has a pulse to it,” said Dix, explaining that the rhythm of the march mimics that of heartbeat. He also created a bugle call for the piece, which heralds the arrival of the corpsman on the battlefield. The Drum and Bugle Corps debuted “Corpsman Up” in March 2005 during their spring training performances in Yuma, Ariz., to an overwhelmingly positive response from audiences.

Not only did audiences love the song, the Navy medicine community, especially corpsmen, began to consider the piece their anthem, and Dix became somewhat of a folk hero to corpsmen—there’s even a question about Dix and his composition on one of the hospital corpsman advancement exams. A painting called “Corpsman Up,” which features images of Navy corpsmen at work and Dix conducting, was commissioned, and the artwork now hangs in “Heroes Way” at the hospital. Naturally, the Drum and Bugle Corps, with Dix conducting, played “Corpsman Up” when the painting was officially unveiled. And in what Dix considers one of the great honors of his Marine Corps career, he was sworn in as an honorary corpsman at a ceremony at the Bureau of Medicine and Surgery in 2009. “It was a great day,” said Dix who was completely unaware that the swearing in was being planned and thought his presence had been requested at the event simply to conduct another performance of “Corpsman Up.” “It took my breath away and when the performance was over, I gathered my Marines together and I thanked them because if it wasn’t for their musical prowess, their musical instincts, the piece would never have lifted off the ground,” he said.

Dix retired from the Marine Corps in 2015, but “Corpsman Up” is still a part of his life; he created an orchestral score for the composition, and it was performed several times by the Vancouver Symphony in Vancouver, British Columbia. He’s currently creating a score for the march so that other bands will be able to play his musical tribute to Navy corpsmen.

“Music is important to our Sailors and our Marines,” said Dix, adding that in his experience, music brings people together. Dix said he is proud to have created a song that means so much to the community of Docs. “I’m grateful to every corpsman that I’ve ever met who kept me on my feet,” he said.

Nancy S. Lichtman

embedded with Marine units at the time of their action. For their heroism and bravery during the World War II battles of Iwo Jima and Okinawa alone, seven corpsmen were awarded the Medal of Honor.

From Pharmacist's Mate First Class John Harlan Willis, who posthumously was awarded the Medal of Honor for his heroism during the Battle of Iwo Jima, to Hospital Apprentice Luis Fonseca, who received the Navy Cross for his bravery during the Battle of Nasiriyah in Iraq in 2003, today's corpsmen strive to uphold the legacy of those who came before them—a legacy that's rooted in the unique bond they have shared with Marines for more than a century.

For retired FMF corpsman Cynthia Lehew, who enlisted in the Navy in 1994 and spent her entire career working with Marines, it was a great honor to be invited to join the Women Marines Association as the first Sailor within the organization's ranks—an indication of just how much Marines value their “docs.”

“I felt more at home with the Marines than on the Navy side of the house,” said Lehew, now the chief of administration for the nonprofit organization History Flight. “It's very humbling to know that they think highly enough of you.”

“The relationship between the Marines, the junior Marines specifically and their ‘docs,’ and once they prove themselves to their Marines, is probably the most valuable tool the Marine has on the battlefield,” said Force Master Chief Michael J. Roberts, the Force Master Chief, BUMED and Director of the U.S. Navy Hospital Corps. “They see the Sailors carry the same gear that they carry, plus their additional gear that they have to do potential lifesaving impacts or treatments on those Marines ... from the walking, the hiking, the lack of water, the lack of food, whatever the case may be ... everybody is in the same misery.”

According to Roberts, there are nearly 27,000 corpsmen currently serving in the

Navy today; of those, about 8,000 are serving with Marine units. And in order to prepare them for the battlefield, they are required to undergo additional schooling and continue to learn and train once they join their units.

After completing their “A” school, the Basic Hospital Corpsman School or “Corps School” as it is known, newly minted corpsmen assigned to Marine Corps units attend the Field Medical Service Technician (FMST) course at one of the two Field Medical Training Battalions. It's an eight-week program that's also attended by corpsmen who aren't new to the profession, but who will be serving in greenside billets for the first time. There, both Marines and

Right: On June 25, 1948, President Harry S. Truman presents the Medal of Honor to PhM1c Francis J. Pierce, a corpsman who treated Marines during the Battle of Iwo Jima. After 1948, the Navy eliminated the “pharmacist's mate” rate and replaced it with the “hospital corpsman” rate that is still in use today. (Photo courtesy of BUMED)



Corpsmen transport a wounded Marine during the Battle of Iwo Jima in 1945.



COURTESY OF BUMED

seasoned FMF corpsmen, most of whom have combat experience, “team teach” the students to ensure that they are prepared for their assignments in the fleet.

“We’re always evolving,” said Navy Captain Brian G. Tolbert, the commanding officer of FMTB-East. “Every class is a little bit different from the previous one because we always see opportunities for improvement.”

According to Hospital Corpsman First Class Courtney Dion, an FMF corpsman and instructor at FMTB-West, the FMST course builds on the skills corpsmen learn in Corps School, focusing on preventative medicine; field hygiene; heat and cold injuries; surgical interventions like cricothyrotomy to establish airways; the placement of pressure dressings; and lifesaving needle thoracentesis to remove fluid or air from around the lungs.

In addition to specific medical care skills, Dion said, they also undergo basic infantry training, including learning hand and arm signals, patrolling, individual movements, military operations on urban terrain (MOUT), land navigation and communications.

“They’ve never had a flak and Kevlar on, they’ve never had to MOLLE weave their magazine pouches and they’ve never had a rifle—so they’re introduced to those things as well,” said Dion.

One of the most challenging parts of the course, according to HM1 John Edstrom, an instructor at FMTB-West, is what he calls the “heavy hitter”: casualty assessment, which is perhaps the most crucial skill that corpsmen need to be



COURTESY OF HM1 JOHN EDSTROM, USN

John Edstrom

proficient. The staff takes a hands-on, in-depth approach, and students are graded and evaluated on how well they implement their assessment on a “patient”—a mannequin with lifelike injuries.

While nothing in training can truly replicate saving the life of a real patient in a true combat environment, the instructors and staff of both FMTB locations draw from their own real-life experiences to prepare their students for reality.

“We can’t simulate combat obviously, and what we do is we try at this school to put them in a stressed environment that simulates combat as best as we can, as safe as we can in order to see how they can effectively execute what they’ve learned,” said Navy Captain Jerry J. Bailey, the commanding officer of FMTB-West, who was an enlisted staff noncommissioned officer and graduate of FMTB-West prior to becoming a Navy Medical Service

Corps officer. “We put them through a final exercise here where they’re utilizing everything that they’ve learned to try to save that Marine’s life. A little tougher to administer an IV after they’ve done an 8-mile hike through the hills of Camp Pendleton with a 54-pound load and their hands are shaking. So we try to do that to simulate combat as best we can.”

After graduating from FMST and being assigned to Marine units, greenside corpsmen have the opportunity to earn the FMF pin that many proudly wear on their uniform. In addition to proving their proficiency in the medical and infantry training they’ve received, they also are required to learn about Marine Corps history, traditions and culture and familiarize themselves with the structure of the Marine Corps, its terminology and equipment. They then must pass both a challenging written test and an oral examination conducted by a board before earning the title of “FMF corpsman.”

The FMTB instructors all agree that earning that qualification and wearing the FMF pin speaks volumes to the Marines about a corpsman’s dedication to serving alongside them.

“I think what makes that bond so special is you’re sharing all those experiences together: the highs, the lows, the misery, the good times, you’re going through that together,” said HM1 Jason Merrithew, an FMF corpsman who deployed to Afghanistan and now works as an instructor at FMTB-East. “As corpsmen, earning

Below: HM1 Alberto Sevillaparra and HM3 Evans Bolton access “wounded” Marines during a training exercise at Al Asad Air Base, Iraq, July 5, 2018.



SGT ZAKIA GRAY, USA



COURTESY OF HM1 CYNTHIA LEHEW, USN (RET)

Above: Retired Navy corpsman HM1 Cynthia Lehw was the first Sailor to join the Women Marines Association after spending her entire career serving with Marine units.



CAPT Jerry J. Bailey, USN

COURTESY OF FMTB-WEST

that respect from the Marine side because you're going outside of your realm, learning what they do."

Not only do FMF corpsmen learn what it means to be a Marine, but they also have the opportunity to teach and train their Marines in combat lifesaving skills, utilizing the Department of Defense-developed Tactical Combat Casualty Care (TCCC) course to prepare Marines for providing trauma care for each other—and for their corpsmen—on the battlefield.

"I don't want my Marine to learn about his skill to save my life at the time that I'm dying. I needed to teach him or her how to do IVs. I need to teach him or her how to do blood products. I needed to teach him or her tourniquets and battle dressings and what to look for," said Force Master Chief Roberts, who spent many years serving on the greenside throughout his Navy career.

According to Hospital Corpsman Second Class Mohannad Sherif, an instructor at FMTB-East, combat lifesaving training is always well-received by the participating Marines.

"They go above and beyond," said Sherif. "When you see somebody from another branch, somebody that has nothing to do with medicine, that passionate about something very small that you're teaching them, something that's going to mean that much more in the future, it's very rewarding."

For HM1 Edstrom, who was going through Basic Hospital Corpsman School on 9/11 and was quickly assigned to the greenside and attended training at FMTB-West prior to deploying to Iraq, the opportunity to use his own experiences as teaching tools for his students gives him the confidence that they'll be more prepared for the future fight than he was. In 2002, when he went through the training, the FMST curriculum was extremely basic and quickly had to evolve

Below: Corpsmen at FMTB-West assess a simulated casualty during the FMST course final exercise at MCB Camp Pendleton, Calif., Sept. 19, 2019. Completion of the course is required, even for experienced corpsmen, prior to serving with Marine Corps units.



COURTESY OF LCPL DRAKE NICKELS, USMC



SGT JAMES GUILLORY, USMC

Students at FMTB-East carry a simulated casualty during the endurance course at Camp Johnson, N.C., Aug. 17, 2020. The endurance course helps simulate a combat environment in which corpsmen train to provide medical care in high-stress settings.

to prepare corpsmen for handling injuries from improvised explosive devices (IEDs).

"I remember being in Iraq, driving down one of these main roads in a humvee with zero armor on it," said Edstrom, who was "blown up" seven times during his deployment with 2nd Battalion, 7th Marines. "A lot of it was 'learn as you go' medicine, unfortunately."

In one instance, Edstrom was riding in an amphibious assault vehicle that hit an IED, and a Marine's arm was caught under the vehicle's hatch, which snapped his radius and his ulna in his left arm. It wasn't an injury he had been trained to treat, but he used the knowledge he did

have to fashion a sling out of a cravat, attached it to the Marine's flak jacket, and gave him some morphine.

"You didn't show that you didn't know what you were doing. You made sure that your Marines felt like no matter what happened they were going to get taken care of, and that's what we were always taught—to give them that invincibility feeling, that they can run into gunfire because Doc has my back," said Edstrom.

"That's part of the culture that we try to breed here," CAPT Bailey added. "If that Marine knows that Doc is competent and Doc has their back, it makes that Marine even more lethal."

A corpsman assigned to Co B, 1st Bn, 4th Marines, Regimental Combat Team 1, hands out candy to Iraqi children in the Andaloos Precinct of Fallujah, Iraq, in December 2008.



LCPL GRANT WALKER, USMC

By 2006, when Jorge Castilleja, now a Chief Hospital Corpsman and course chief at FMTB-West, went through FMST, the training had evolved based on the experiences of instructors who had served with Marine units in Iraq.

“It was a benefit to come through there at that time,” said Castilleja. “Now I’m back here as an instructor to provide that feedback to the students, to hopefully build that legacy so they’re ready to replace us in the future.”

What will the corpsman of tomorrow look like? Today, CAPT Bailey, CAPT Tolbert and their respective staffs at FMTB-West and East are preparing to train the next generation of corpsmen for the future fight. In accordance with the Commandant of the Marine Corps’ Force Design 2030, they’re trying to conceptualize what skills the “2030 corpsman” will need as the fight shifts from counterinsurgency in the Middle East, in which the airspace wasn’t contested and evacuations could be near instantaneous, to potential engagements with near-peer adversaries.

In Iraq and Afghanistan, said Tolbert, the “platinum 15 minutes” and the “golden hour” were the benchmark standard for treating casualties.

“If you were seen by a corpsman or a medic inside that 15 minutes after you got injured ... you were probably going to live. At least you were going to reach the hospital,” said Tolbert. “So compared to the historic Vietnam era, we had a lot who died by wounds—and then during the most recent war, ‘died of wounds’ went down significantly.”

Recognizing that the future corpsman may need to hold a casualty for much longer than 15 minutes or an hour, both Bailey and Tolbert are preparing to develop a training program for what they call “prolonged field care,” which they plan to add to the FMST curriculum after testing it in small groups of students this year.

“We are no longer doing dismounted or mounted patrols, and we don’t necessarily own the air, evacuation chains can be exponentially longer—1,000 miles will not be an uncommon evacuation lane,” said Tolbert of the anticipated future fight. “Those corpsmen that we’re producing here may have to hold a casualty for—we’re anticipating 72 hours ... so that 15 minutes platinum, golden hour stuff sounds really good if you own the air and can move them, but what if you can’t?”

While preparing for the future fight,

today’s corpsmen also will continue to learn from those who came before: who showed bravery and courage from the islands of the Pacific to the jungles of Vietnam and the streets of Iraq and Afghanistan, and even in the moments when they felt ill-equipped or incapable, made sure to never let their Marines know it. As training and warfighting continue to evolve, one thing that will forever remain unchanged is the bond between Marines and their docs.

For Jim Maddox, finding Bob Murdock more than 30 years after that fateful fire-fight on Hill 147 was one of the defining moments of his life.

In 2007, Murdock lost his battle with cancer. But the night before he passed, he and Maddox had one last phone call. “We told each other we loved each other,” Maddox emotionally recalls.

“It’s hard to really explain unless you’ve lived it,” said HMC Castilleja. “No one else really gets to experience that culture and that life and that eternal fraternity that is the Doc and the Marine ... you’re always going to have their back no matter the situation, no matter how much time has passed or how old you’ve gotten, they can always reach out to you.”