

# EXTRAORDINARY DEDICATION

## MD Anderson nurses serving in the armed forces

Wendy P. Lynn

They're Air Force, Army, Navy, Marines –  
and they're the nurses you work with every day.

Some have been deployed overseas, some to assignments on U.S. soil, and still others are awaiting orders. Although each one has a unique story to tell, they have much in common. Their experiences in the military have deeply affected every one of them. Here are some of their extraordinary stories.

### To Mortaritaville and back

Warner Tse considers his experience in Iraq to be the most rewarding thing he's ever done. Tse was a clinical nurse in MD Anderson's Operating Room and a captain in the U.S. Air Force when he was deployed in 2005 to Iraq, where he spent five months at the Air Force Theater Hospital, Balad Air Base.

He discusses research protocols with his colleagues in Thoracic/Head and Neck Medical Oncology. The hospital (pictured above) is the only one with full capabilities in Iraq, and all casualties pass through there. "We were moving 100 miles per hour at all times," says Tse. "We were short-handed, and there was no downtime." The base has the nickname "Mortaritaville" because of frequent, if ineffective, enemy mortar attacks; Tse experienced 110 in his first 110 days there. He says there were two occasions when improvised explosive devices were planted in the hospital, and many of the non-ambulatory patients had to be quickly evacuated; some were moved to Germany and others sent to the U.S. Robots were brought in to disarm and remove the explosives.



"I'm grateful to everyone at MD Anderson who has taken the time to teach, precept and mentor me," says Tse. "The skills and knowledge they passed on have touched the lives of the many casualties of war that I cared for in Iraq." He remembers it took him about six to eight months to adjust to being back from Iraq. One major difference between the two settings, he says, is that "in the military, the mission is always clear and everyone must maintain their focus on it. In civilian life, people can become unfocused." Tse, who is now a research nurse in Thoracic/Head and Neck Medical Oncology, says the experience has helped him realign his priorities in life.

### A hospital without a facility

Lance Zuckero's last deployment directed him to a job at MD Anderson. Zuckero was a travel nurse with a reserve hospital unit, assigned to the 4005th U.S. Army Hospital in Houston. He was deployed in November 2004 to Fort Gordon, Georgia, where he was stationed for a year and a half, working as an open heart/surgical ICU nurse. The 4005th is "a hospital without walls," known as a troop program unit. The unit comprises everyone necessary to staff a hospital – nurses, doctors, lab technicians, certified nursing assistants, etc. Their primary mission is to backfill positions in American hospitals in the event that hospital staff is deployed overseas.

Zuckero was stationed with MD Anderson employee Marvin Radford, clinical nurse, Nursing Resource Pool, who encouraged him to apply for a job at MD Anderson when they left Fort Gordon. Zuckero joined our ranks in

June 2006. The 4005th is not currently trained as a field unit, but their mission will be changing in 2008. They'll begin training to become a Combat Support Hospital (CSH) in March 2007. When asked if an overseas deployment could be somewhere in his future, Zuckero replies that it's a possibility. He points to a photograph that adorns his unit supply box of his one-year old son sitting in a pumpkin patch, and adds, "If so, I wouldn't like the prospect of leaving him and my wife."

### **A year in Kuwait, a year to readjust**

RhonJean Gordon was a senior nurse instructor covering Diagnostic Imaging and Nursing Assistant Orientation at MD Anderson, and a U.S. Navy Reserve lieutenant, when she was deployed to Kuwait in December 2004. She served there for one year as an emergency trauma care nurse with a mobile medical unit, Fleet Hospital Medicine. The hospital was a tent that could be packed and moved swiftly in case an evacuation was necessary. It was a long, difficult year. When she returned, she was not ready to talk about the war when well-meaning people tried to engage her in conversation, nor did she watch or listen to any news coverage of the war. It was just too painful. "You get back, you close a chapter. You have to recondition yourself that you are here now."

Gordon returned to the same position at MD Anderson, but now covers different areas: the Cardiopulmonary Center, Emergency Services and Radiation Oncology. She says it's taken about a year to readjust. Some of the adjustments were environmental. "Over there, it was communication by siren. Certain sirens meant certain things. When I came back, I heard a fire alarm and I had to search my brain for what that siren meant." Her biggest challenge, she says, has been in maintaining her focus. She knows she could be recalled. "Every sailor is a potential deployment candidate. You have to prepare as if you'll be deployed tomorrow. You may only have 72 hours' notice."