A NURSE'S TOUCH

I am standing on the edge of a red sandstone cliff looking down through a heavy mist to the medieval town of Landstuhl, Germany. Behind me is the U.S. Army's Landstuhl hospital, a sprawling complex of buildings set back from the cliff's edge. A few miles in front of me, beyond the church towers that rise over the town of Landstuhl, is Ramstein Air Base, an American base since 1945. For more than nine years, American wounded have been flown into Ramstein from the wars in Afghanistan and Iraq. Once off-loaded from the medevac flights, the wounded are bused here to the hospital.

I scan the gray skies above Ramstein hoping to spot an incoming C-17 and its load of wounded. A plane is due in from its seven hour medical evacuation flight from Bagram, Afghanistan. Suddenly, a light rain blows in from the north and it becomes impossible to see through the gloom. I walk back to the main hospital across wet lawns and then rain-blackened pavement.

At one end of the hospital there is a canopied entrance where the buses from Ramstein deliver the air-evac'd wounded. As I shelter under the canopy, avoiding the cold drizzle, the call comes in. They have "wheels down" at Ramstein. The C-17 from Bagram has landed. In twenty minutes or so the wounded will be here.

The receiving area begins to fill with stretcher bearers, critical care nurses in yellow smocks, physicians, liaison officers, medical technicians and two chaplains. A support group like this one meets each group of wounded.

In almost all respects, today's arrival of wounded will be no different from thousands of other arrivals over the past nine years. Wounded soldiers, marines and airmen arrive virtually daily, and the process for receiving them has evolved into a well-choreographed routine of disciplined and efficient care.

Yet, in one way, today will be different from most days at Landstuhl. Today, two seriously wounded Canadian soldiers are coming in. As a result, the waiting crowd includes two Canadian nurses and a Canadian chaplain. The two nurses, both young, wait in military uniform for the buses. They stand apart from the others, talking between themselves and looking down the road the buses will take. I walk over to the nurses and we speak briefly. One is a light-haired mother of two on a six-month tour, her first. The other is on her second tour, her straight, dark hair reflecting her family's origins in Vietnam.

Canada, like the U.S. and Britain, has sent its troops into the most deadly parts of Afghanistan. As a result, Canada has taken serious losses. Still, today's arrival is going to be particularly hard on the Canadian team at Landstuhl. The two Canadian soldiers were badly wounded when an improvised explosive device hit their vehicle. The explosion killed their 21 year old driver. The driver was the second Canadian woman to be killed in combat in Afghanistan.

The word passes through the waiting crowd that the buses have climbed the long, steep hill to the plateau where we wait. It is just minutes to their arrival. The stretcher bearers (four to each side of a stretcher) position gurneys under the canopy and line up in two rows, one to each side of the gurney. The most seriously wounded on this air evacuation are the two Canadians. That means they will be the first ones taken off the first bus. Since the Canadians will be first, the U.S. chaplain on duty stands

aside, allowing a Canadian chaplain the place second in from the front of the stretcher line. Because the wounded are always carried from the bus head first, the chaplain's position in the stretcher-bearer line is important. He is positioned to stand near each wounded soldier's head, able to speak directly to his countryman as he and the other stretcher bearers lift the soldier to a waiting gurney.

The double doors at the back of the first bus open wide. Each Canadian soldier is lifted, still on his stretcher, from the bus to a gurney. The stretchers support not only each soldier's weight but also the seventy or so pounds of medical gear that monitored him on the flight from Bagram. A Critical Care Air Transport team, commonly called a C-CAT team, cared for the soldiers on the flight. That team did its job. Now, responsibility falls on the medical team at Landstuhl.

While at Landstuhl, these soldiers will receive what may be the finest trauma care in the world. They will get that care because Landstuhl has had the sad experience of receiving seriously wounded men and women from the wars in the east nearly every day for many years.

The wounded Canadians are wheeled beneath the canopied portico and into the hospital, on their way to surgical theaters preset for their needs. Walking alongside each Canadian is one of the Canadian nurses. Each nurse leans close to her countryman, touches him gently, and speaks softly as the gurney moves along. One speaks French, the other speaks English. One soldier is from Quebec, the other from the west of Canada. The words are the same in both languages. "I am a Canadian nurse. You are safe now. I will stay with you." And, that is what they do, walking beside the gurneys to the operating theaters.

The two soldiers may have heard the nurse's words. They may not have. Both soldiers are badly injured and highly medicated. Still, if they could not hear the words, perhaps they saw the nurses' uniforms, one Army the other Air Force, each nurse wearing the brightly colored beret unique to her service. That is the hope; if not the words, then the uniforms, hearing the one or seeing the other. As the nurses told me, if the words, the colored beret, or a soft touch on a shoulder help assure the wounded even a little, then that is something. Merely knowing that Canadian nurses are at their side may accelerate the healing process, physical and emotional. You are safe. We are with you. We will stay.

The nurses live with a handful of other Canadian military in a converted inn in a small village near the hospital. There are only eight in the group, and they work together closely. Their job often includes supporting the families of wounded Canadians. Canada, far more frequently than the U.S., will fly the family of a badly wounded soldier to Landstuhl. Canada does this even though the wounded soldier will likely be air evacuated to Canada within days after arriving at Landstuhl. The families of the two soldiers brought in today will arrive tomorrow.

In two or three days, if all goes well, these two soldiers and their families will be air evacuated to Canada by the Canadian air force. The two nurses will stay behind, waiting for the next, the inevitable, arrival of Canadian wounded.

Whatever the physical and emotional outcome may be for the two soldiers who arrived today, or for those who come after them, Canada should be deeply proud of two young nurses serving far from home with dignity and grace.