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Gaddo, Randy, USMC
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Navy Surgeon Puts Life on the Line To Help Save Marines in Combat

LCDR Richard Jadick, right, receives a Bronze Star with combat "V" in April 2006, from LtCol Mark Winn, the commanding officer of 1/8.

Story by CWO-4 Randy Gaddo, USMC (Ret)
Photos courtesy of
CDR Richard Jadick, MC, USN (Ret)

"In some ways, I had been preparing for Fallujah for most of my life. From my earliest days, I had wanted to join the military and I had wanted to be a doctor. Every step of my training … contributed something to the success our medical team had in Iraq, from my experiences as a communications officer with the Marine Corps to my background in trauma medicine and my several deployments as a Navy medical officer with Marine units."

–CDR Richard Jadick, MC, USN
In "On Call in Hell: A Doctor's Iraq War Story"

When he was in middle school, Richard Jadick identified with "Hawkeye" Pierce, the wise-cracking but highly skilled combat surgeon on the 1980s TV series "M*A*S*H"; later, Jadick found himself virtually walking in Hawkeye's combat boots.

The road that Jadick took in life was certainly not well-traveled. He started his career as a Marine and became a Navy surgeon who was decorated for valor in the Iraq War, earning a Bronze Star with combat "V" at the second Battle of Fallujah.

"Growing up, I knew I wanted two things—to be on the medical side and I wanted to go to war," reflected the Slingerland, N.Y., native. While living in the bucolic suburbs outside of Albany, N.Y., Jadick remembers good living with lots of woods to run around in. Like so many adolescents, he admired G.I. Joe, Marines and John Wayne.

"I watched all kinds of war movies," recalled Jadick, whose father was a Citadel (Charleston, S.C.) graduate who served two years in the Army Reserve.

As a high school senior, Jadick, the captain of the football and wrestling teams at his school, applied to the United States Military Academy at West Point, N.Y. "I got my senator's approval; I spent three days at the academy as familiarization to what I'd experience there, and I was ready to start the summer after graduation," he recalled. However, his depth perception did not meet the academy's standards and they turned him down. Their loss was the Marine Corps' gain.

"I didn't think I'd be going to college, so I went to talk with the Marine recruiter at school," he said. He hoped his depth perception wouldn't deter the Marines.

"I just wanted to be a part of the best that was out there. The Marine recruiters were always the best, the most professional, and their uniforms looked so much better than the others."

The day he went to talk with the enlisted recruiter, one of the officer recruiters was there and told Jadick he could apply for a Reserve Officers' Training Corps (ROTC) scholarship to get a college degree and serve as an officer in the Marine Corps. "So I applied, and a month later he called me and said I'd been accepted," Jadick said.

The Beirut Bombing

That was in 1983. "I'll never forget October 23, 1983," he recalled, the date that terrorists bombed the barracks in Beirut, Lebanon, killing 220 Marines, 18 sailors and three soldiers. "I was in the dorm. I had just signed a Marine ROTC agreement for school and four years in the Marines after that, and when I saw that in the paper, I thought, 'What did I get myself into? What does this mean about who I am?' "

Most of the Marines killed that day were in 1st Battalion, Eighth Marine Regiment. One of those killed was the battalion surgeon, Navy Lieutenant John Hudson. Jadick would later serve in 1/8, known as the "Beirut Battalion," in Iraq as battalion surgeon.

He attended Ithaca College, and he went through the six-week Officer Candidates School (OCS) "Bulldog" program in the summer of 1986 between his junior and senior years.

He said he didn't have a clear idea as to exactly what he was getting into when he went to OCS, but remembered that the physical demands were as tough as the mental requirements.

"I'll never forget having one candidate fall out of a run in the first morning of PT [physical training] for being a heat casualty, and he was gone before we got

back from evening chow, bags packed and rack rolled," he recalled. Jadick estimated about 60 percent of the company was prior enlisted and thus in good shape. "I came there in pretty good shape, but about 30 percent of the company dropped."

His journey through OCS, although ultimately successful, was not without snags. One occurred at the course designed to see how candidates in leadership positions handled problems. "I got flagged at the problems course when I had no idea how to handle the problem given to me, and I asked the fire team what they thought—big mistake," he said, noting that he got "screamed at for having my whole team killed by bad decision-making. I remember thinking how I may never make it through, so I just worked harder."

He did succeed at OCS, graduated from college with a bachelor's degree in biology and pinned on his second lieutenant bars in May 1987. He proceeded to The Basic School (TBS) to prepare for duty as a company grade officer.

For him, TBS was similar to OCS, "with some freedoms and for [him], maybe too many freedoms," he said. "On mess night we did the usual carousing and 'carrier quals' and then some middle-of-O'Bannon Hall fighting, which led to three of us getting caught." He had to see the TBS commanding officer, Navy Cross recipient Colonel Terry Ebbert, to receive his nonpunitive letter of caution and then "paint O'Bannon Hall for the rest of [his] free time at TBS."

He became a Marine Corps communications officer and began the first of his seven years in the Corps.

"At that point, I didn't expect to stay in the military more than four years," he said. "It was going to be an adventure, and I was going to run with it." However, he said that the military kept offering him incentives to stay that he couldn't turn down.

His path led him to deploying units and eventually to Marine Air Support Squadron 1, Marine Air Control Group 28 at Marine Corps Air Station Cherry Point, N.C. In 1990, his unit received the call to go into the first Gulf War, Operations Desert Shield and Desert Storm. He was ready to deploy when another more experienced officer was sent instead of him. That was not part of his plan; he was expecting to go to war.

Swallowing his disappointment, Jadick continued to march toward his goal to be in the medical field. "I took a joint billet at the MEPS (Military Entrance Processing Station) as the adjutant and testing officer, and at the same time, I was getting myself ready for medical school," he said.

Medical School and a Return to the Marines

Again, the military made an offer he couldn't refuse. The Navy, experiencing a severe shortage of doctors, introduced him to the idea of a Navy scholarship; he liked it. He paid for the first year of school. The Navy picked up the tab on the remainder.

He left the Marine Corps after seven years' service and started at the New York College of Osteopathic Medicine at Long Island under the Navy's program. He graduated in 1997 and did his internship in surgery at the Bethesda Naval Hospital in Bethesda, Md. (now known as Walter Reed National Military Medical Center).

LCDR Richard Jadick, center, with HM1 Rick Lees and HMC Russ Folley after Jadick received his award for his exemplary performance as the battalion surgeon for 1/8. Jadick's previous experience as a Marine communications officer served him well when the battalion deployed to Fallujah, Iraq.

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Although he had left the Marine Corps, he didn't leave his fellow Marines. After his internship, he had the choice to go "blue side," staying primarily in the Navy's ship- or shore-based units; or "green side," serving directly with Marines.

"I was the first guy up there volunteering for green side," he said. "I told them I wanted to be with an infantry unit that deployed. I was afraid someone else would get it before me." However, at that point, the line to be in a deploying unit was short and included only him. There wasn't anybody else asking.

"When I was in the Marines, I just wanted to get on one of those cruises someplace warm. Instead, I always got the cold-weather training—whatever happened to the sands of Iwo Jima?" he joked. "So I decided to try and get it another way."

Jadick finally got his warm-weather cruise as battalion surgeon for 3d Bn, 6th Marines on a "Med Cruise," with ports of call in places such as Egypt, Jordan and Israel.

He started his residency in urology at Bethesda, but the program closed in 2001 before he completed it. The following year he became a battalion surgeon with 1/8, the ground combat element of the 26th Marine Expeditionary Unit, finally going to war in Iraq and also participating in the noncombatant evacuation operation in Liberia.

He later became the 4th Marine Brigade surgeon in 2003, but a few months later he got "kind of bored, so [he] mentioned to the general [he] worked for that [he] knew 1/8 was going back to Iraq, and they

Using a converted Army APC as a combat ambulance during the Battle of Fallujah, Jadick and his corpsmen transported wounded Marines to the battalion aid station.

were having trouble finding a battalion surgeon, and maybe [he] could do it." The general agreed and orders quickly were cut, even though it meant sending him to a more junior billet.

Jadick said, "But in my opinion, it was a promotion because there is nothing better in the world than being a battalion surgeon. It's the respect; it's lots of intangibles, but I had to go home that night and explain to my wife that I had orders. I didn't tell her until much later that I had sort of volunteered for it."

His wife, Melissa, a pediatrician he had met while he was in medical school, was nine months pregnant with their first child, and she delivered just five days before he shipped out for Iraq. "I was fortunate to be there for our daughter's birth," he said. "Lots of guys are overseas when their children are born."

He explained that 1/8 normally deployed with two surgeons, but at that time he was it. Fortunately, "I had a strong enlisted crew led by Master Chief Russ Folley, who was great. He had it pretty well locked on." A second surgeon joined them later.

Having served in 1/8 previously, Jadick knew many of the staff and most of the line corpsmen. Plus, his Marine background enabled him to work as part of the team.

"I think 'in Marine,' even now," he said. "Five paragraph order, mission, execution, the things we learned in Basic School, the planning, what things we'd need to worry about as a support force—it all came into play as we were getting ready to go into Fallujah."

By this time he had already solidified his opinion that the battalion aid station needed to be closer to the fighting. Navy policy placed the battalion aid station in the rear. "It's better to be up front; you have to stop the bleeding," he said. "Everybody talked about the 'golden hour,' but if someone gets shot, and they're bleeding badly, you don't have an hour, you have maybe five or 10 minutes."

He again credits the leadership skills learned as a Marine, the ability to clearly communicate with his corpsmen, to train them and actually run drills as keys to success. "Downtime is training time, that's what I'd learned, so we trained as much as we could."

He and his staff actually had been working for some time on the concept of a forward aid station. He also credits his knowledge of Marine jargon and operations as crucial to working harmoniously with the battalion staff, to know exactly how Marines think. "They don't have to think about the logistics of moving a patient, but I do, so I would explain to them that having wounded on the line ties up a fire team or a squad protecting them, so the quicker I can get the wounded stabilized and headed to the rear, the sooner the Marines can get back into the fight."

Leading from the front was another Marine trait he brought with him. Normally, the battalion surgeon is in the rear at the battalion aid station, "But if your most experienced asset is in the rear, you're going to lose Marines up front because you can't get them out fast enough and corpsmen don't have as much medical experience. If I'm up front, the corpsmen are more confident because I'll be there to help them if they need it."

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In his book, "On Call in Hell: A Doctor's Iraq War Story," Jadick describes his part in the Battle of Fallujah: all the combat, the carnage, the near-misses, including the two rocket propelled grenades that ricocheted off the ambulance while he was in it (both duds) or the snipers who gunned for him and his corpsmen as they worked.

"I had a job to do, and the Marines had a job to do, and I just trusted them and they trusted me," he said.

Operation Phantom Fury

He did his job exceptionally well, applying his Marine Corps training and ethos to the task of handling casualties in one of the most important battles of the Iraq War. Named Operation Phantom Fury, it was a joint American, Iraqi and British offensive waged during November and December 2004.

On Nov. 8, 2004, as the 1/8 battalion surgeon, Jadick was the senior medical officer as the battalion perched on the line of departure, awaiting the signal for the attack to begin. Jadick and his team of 54 corpsmen and his assistant battalion surgeon were responsible for the medical care of about 1,000 Marines and attached military personnel.

Line charges detonated right on time, and Jadick noted: "The intense force of the shock wave, followed immediately by the sound wave, shakes you from the inside out, rattling through your body. … These sounds were the unofficial starting pistol for the Battle of Fallujah."

The somber estimate going into the battle was that 30 to 40 percent of battalion Marines would be killed or injured during the fighting. Jadick and his medical team's mission was to save as many of them as possible.

At first the injuries coming into the battalion aid station (BAS), as near the front as possible but still "in the rear," were relatively minor, but Jadick sensed that it would get worse. When a Force

Recon corpsman was reported injured with a sucking chest wound, in an area far from an extraction point, Jadick's Marine Corps training and instincts kicked in.

He turned to the Weapons Platoon commander who had armed humvees on standby and said, "We've got a man down, and I can't go in on my own." It was all he needed to say. "I don't think I was even done saying it by the time he responded, 'Roger that!' and got his guys ready to roll."

Typically, a battalion surgeon would have remained at the BAS and awaited the delivery of the wounded patient. Jadick could have sent a senior corpsman, but when he climbed into the platoon commander's vehicle, it was Marine leadership from the front that was propelling him. "A leader has to be willing to take the same risks he's asking his men to take," he said. "I had seen sucking chest wounds before, and they hadn't. I figured I'd be in and out in 15 minutes."

As he traveled through the town, which was darkened because the power had been cut prior to the attack, with the sound of rockets and small arms echoing around him, he remembered thinking, "What the hell am I doing?" Through his seven years in the Corps and multiple deployments, "This was my first real battle, my first real casualty call, and I hadn't expected to be in the thick of it quite so soon. I began to realize I hadn't really thought through my trip into the city too carefully, but, 'Guess what, jack---? It's a little too late now!' "

Jadick said he encountered a moral dilemma he hadn't anticipated. As he set out with the Wpns Co Marines on foot through the city's narrow alleyways armed only with a 9 mm pistol, "I felt like the guy who brought a knife to a gunfight," he recalled.

When a Marine asked him to cover a corner as they advanced, he hesitated. "My job was to be there for the wounded, not to shoot people," he said. "But right then, my job as I saw it was to get to my patient—that was the only way I could keep him alive. I was clear in my own mind that if someone was shooting at me, I would shoot back." He pulled his pistol and covered the corner as the platoon passed by.

They got to the wounded corpsman and loaded him into an ambulance. As Jadick climbed in to care for him on the way back to the BAS, a radio call came in from a line company with two wounded needing urgent evacuation. His wounded corpsman was stable, so Jadick made the call to go get the other two injured men.

Taking fire from AK47s, rockets and RPGs, the Vietnam-era Army ambulance raced to the front line escorted by armed weapons platoon vehicles. As they reached the scene of fighting and the back hatch of the ambulance dropped down, Jadick recalled, "I was on the knife's edge. … I had never wanted anything so badly as I wanted to stay inside that vehicle. … Every neuron in my body screamed it—stay inside, stay inside, stay inside."

He remembered thinking he was moving slowly, but the weapons company commander told him later that he jumped right off and rolled into action. Under fire, he and his team got the wounded loaded and back to the BAS.

During the six weeks of the battle, Jadick and his crew would go to the front again and again to retrieve casualties, saving as many lives as possible. But in the end, 21 Marines with 1/8 would die between June 2004 and January 2005. Jadick and his team, however, are credited with saving an estimated 50 or more wounded men who otherwise would have perished. For that, and his personal valor under fire, he was awarded the Bronze Star with combat "V."

Returning Home

He came home from combat and within 30 days of returning started his 100-hour-a-week residency. He credits that schedule with not having time to dwell too much on the carnage he experienced in Fallujah. He was happy to be home with his family, alive and in one piece, and wasn't thinking about any medals. The Bronze Star was sent to one of his professors, a naval reservist, who arranged for him to have it presented at the Second Marine Division headquarters at Camp Lejeune, N.C.

"Just being around those Marines and corpsmen was reward enough," said Jadick, who was the subject of a *Newsweek* cover article a year after returning. But he credits his crew for his success. "I could not be more proud of being around a group of warriors—professional, tough warriors with as strong an ethos as you'd ever want to see in your life."

Jadick retired from the Navy in 2013 after 23 years' service and took a position at the Newnan Hospital in Georgia to build a robotics program for them. "I came in with the same thought process I have with everything else in my life—five paragraph order, it fits whatever you're doing in life," he said.

A year later he was offered the chief of surgery position, and his Marine ethos once again came to the forefront. "If you come to work early, work hard and take care of the people who work for you, then you're taking care of your patients and that's a Marine Corps philosophy. Make sure the junior Marines get through the chow line first—take care of the people who pack your parachutes."

Author's bio: CWO-4 Randy Gaddo, USMC (Ret), a Leatherneck *contributing editor, was a combat correspondent as an enlisted Marine and later a public affairs officer. He retired from active duty in 1996 and now operates his own writing-based business, RGCommunications, and is a freelance photojournalist.*

The battalion surgeon and the senior corpsman of 1/8, LDCR Richard Jadick, left, and HMC Russ Folley, right, and their team of 54 corpsmen saved dozens of Marines during Operation Iraqi Freedom.