John H. Hobica
Veteran

Amanda Phelps
Interviewer

Interviewed on May 5th, 2010.
Location: New Hartford

Q: Please state your Name and date of birth.
JH: Johnny Hobica MD my date of birth is July 27th, 1926.

Q: What branch of service were you in?
JH: I was actually drafted, and I was in the United States Navy

Q: And you were a nurse?
JH: I was in the hospital core of the United States Navy, in other words I was actually a hospital corpsman which is equivalent to a male navy nurse.

Q: And how old were you when you were drafted?
JH: I was 18 years old; I was drafted while I was attending Hamilton College. In 1944 they drafted me in January 1945

Q: So, you were in college when you got drafted?
JH: Yes

Q: What were you going to college for?
JH: I was going to college to do premed at Hamilton college, At that time we had the selective service When you reach the age of 18 you automatically had to register for the draft board and then when your number comes up you then have to go to a training facility were they give you a physical and if you pass you are then inducted into the armed forces. And I was fortunate enough to get into the United States navy.

Q: So were you drafted as a soldier
JH: I was drafted as an enlisted individual because I hadn't gotten a degree in college and was not a physician at the time, so I was just an ordinary plain joe, and I got drafted as an enlisted man.

Q: So, you were able to choose to be a nurse

JH: Well they asked me in my interview what I was going to college for and I told them I was wanting to pursue the field of medicine and that procedure time they asked me to take a test and after I took a test they said I was in the Navy and I was going to go to hospital Corp school it was like an accelerated nursing school program were we spent three months in a hospital corps school and this particular unit was in San Diego California. So, I was in the training or boot camp at Geneva which is Samson Naval Air base and they transported me and a number of other people to San Diego where I trained to be a male nurse.

Q: So, when you were in training were you actually working with wounded soldiers?
JH: Not during the training facility we primarily did class work basic studies and when we got done with our training school we then were shipped transferred to various naval hospitals and I was transferred to Jacksonville naval hospital which happened to be a very large facility in Jacksonville Florida and we took care of very badly wounded naval personnel I remember one particular case were it was a naval pilot who had tried landing in the carrier and smashed his plane and got burned very significantly head face and so forth so they stabilized him in Jacksonville and then they transferred him to the burn center which was a naval hospital in St. Albans New York which is in long island and I remember I was asked to go with him in an ambulance plane to be his nurse transferred to the burn center then we discharged him there and I turned around and went back I mean these were the kind of things we took care of we also took care of other people who were il with either their post-surgical or we did clinics if any of the naval personnel were ill we ran outpatient clinics and checked them out to see what was going on, and stuff like that. We did this here an fortunately what happened for me was when I got drafted in the service world war 2 was almost over with because I got drafted in January of 45 and world war 2 had been going on since 41 and in July of 45 what happened they released the atomic bomb in Japan, and then of course Japan surrendered less than a month later. What they did with personal like myself they transferred us to separation centers and we were now we spent over a year after the war had ended we helped discharge all the navy personnel from the service back to civilian life we had to make sure there was no disability factors that were involved and that they were in good health we had to examine them and stuff like that before we could get our discharged so several years later we ended up getting discharged but that was a year and a half after the war had ended before we got discharged from the service. So fortunately, or unfortunately however you want to look at it I didn't see much actual action as a matter of fact if they haven't delivered the atomic bomb, I was scheduled to be in the fleet marines I was going to be a medic in the fleet marine. We were planning on invading Japan at the time but the atomic bomb falling on

Japan changed the whole concept of everything, so it was kind of good for everybody.

Q: So, the men you took care of did they mostly come from battles in Asia?
JH: They came from people that were ill on the base people hurt during the war transfers whatever, anybody that was ill we had a large naval hospital that had hundreds and hundreds of beds in there and we were assigned to a particular part of the hospital sometimes we would be working in a place like the ICU another time we'd be working in the clinic and other times we'd be having some kind of dispensary duty or so anything that related to the medical field is what we ended up being assigned to and we had certain criteria sometimes we would work in the emergency room and this was all superb training for what I was going to do for the rest of my life and it really was very fortunate of being in the navy and being a hospital corpsman and being in the field of medicine which I did when I got discharged I went back and finished college and went to medical school and then took training in anesthesia in Boston took a long time.

Q: Did everyone you work with study medicine before?
JH: Well some of them were thrown into it some of them thought they might want to do it and then later on when they, I have a story to tell you one of my fellow graduates from Corp school his name was jack Hoff he was from Rochester and he and I both went to Corp school and I probably saw him and after he went to the great lakes area were they had a huge hospital there, but I probably saw him about forty years later, Yea that would be about right, I saw him on the golf course so anyways he asked if he could join us I was with my son I was taking him out he was probably 10 or 11 years old he is now maybe 40 so I would say about 30 years ago, yea about 1980 so he says how are you doing john I said fine we exchanged pleasantries and I said to him what are you doing he asked me what I did and I said I was a Physician that I was an anesthesia among other things, and he said I kind of figured you'd probably go into medicine. And I said what do you do and he said I got kind of tired and sick after I finished college I mean he didn't want to do any more education ok so he and his brother started a garbage business in the city Rochester and then bout a year or two before I met him they had sold the garbage business to waste management were you see these trucks here now means a huge multi-corporation which they sold it for like 15 or 20 million dollars and I thought to myself why couldn't I be lucky like that, so to answer your question a lot of people didn't pursue medicine like I did, Here's a fellow that just got tired didn't want to learn anymore and started a garbage business and made a huge success out of it. Not everyone pursued medicine, I just happened to be lucky or devoted and pursued what I intended to be.

Q: So, when you were in Jacksonville what was a typical day like? Did you always have someone that you didn't care about?
JH: We would be assigned if uh we were assigned to the emergency room or the clinic or what have you there's a certain number of duties you had to do. You had to spend the working day over there receiving seeing patients if there was a problem. You had a position on call that you can call to ask, or you took care of it yourself and a lot of times we're able to take care of these ourselves. We're almost like a physician's assistant so to speak. If you have a problem, you seek a higher level of advice and most of the time you can handle it yourself and that's what we did do.

Q: I have a question, the mental stability of a lot of the patients you had did you have to do any psych work with them?
JH: If we did have anybody, we were encouraged to refer them out rather than try to do anything for them. Primarily because we didn't have the background and there were plenty of facilities to take care of these people. I mean we had psych wards and we had psychiatrists on board and something like that could lead to some very dangerous end results if you don't take care of them properly and subsequently, I think it was a good idea to do that. Because of the fact you know you have cuts and bruises, you have burns simple ones, you can take care of those, and you can do a lot of first aid and that was our basic. You know as I said before because when I happened to get into the war it was near the end. I wasn't the typical medic that would be on the battlefield treating battle wounds and stuff of that nature because there just wasn't any by the time, we got ourselves organized. If you were in the army and you saw people shot, all over the place and stuff. It just didn't happen, and it was primarily because of the fact that I just wasn't old enough to be in the service at an earlier age. I mean don't forget the war started December 41 and I entered in January 45 which is four years later.

Q: So, what were you 14 or 15 when the war started?
JH: Well I was 18 in July of 45 I had just turned 18 years old well actually in July 44 I just turned 18 so I had graduated from proctor high school in June and started college July 1st well because at that time all colleges were accelerated programs so I was able to get a year in from July 1st to January 1st so when my 18th birthday came in July I was in college they let me finish the year and then they said you have to go, and that's the way it was with everyone unless you got deferred because you had an ailment unless you got deferred because you were married and a couple of kids. You might have gotten deferred if you had an essential type of job but being a simple student or unless you were in medical school or dental school what they would do is they would defer you until you finished and then immediately after you finished dental or medical school you

would automatically go into the service as an officer because you were a dentist or a physician.

Q: Which would be like the TV show mashed then?
JH: Right

Q: Because those people were all doctors
JH: Right

Q: And they were all officers
JH: And they were all officers you had surgeons and you had internists and there were captains and majors and that nature but I was a lowly enlisted man because I was just starting college and if they had a selective service today everybody that turns 18 has to register and then they have to go into the service, they have done away with that now but we do have some kids that like to go into the service after they graduate from high school, and do very nicely for themselves.

Q: Now on the discharge papers I remember seeing my dad's discharge papers and the other thing I remember seeing I didn't pay much attention to be his height so what did you have to put on a discharge paper to discharge someone medically?
JH: Well actually the most important thing is whether you are honorably discharged or dishonorably discharged, that's the key they don't have anything on the actual discharge paper itself, ok there's a ribbon and there's an embossment and like in the navy secretary on the bottom an honorably discharged and I have to apologize because at one time I had a picture of myself in a swabbie uniform and I also had at one time my original discharge papers but I've moved and it's been 60 years since I been gone so they've disappeared somewhere, I suppose if I continue to look for them I may be able to find them but anyways they have a ribbon on the side of it and so forth and you needed that when you went back to college, when you applied for stuff to show that you're honorably discharged from the service, as far as the exam is concerned what you have to do is examine the person and check there heart and lungs, their height their weight their blood pressure make sure they have no hernias, okay and you ask them a certain number of questions and make sure they are reasonably sane and you ask them if they have any aches or pains and what have you or because of the knee bothers them or the toe bothers them because you want to make sure this isn't service related, because if it is service related now it's a brand-new ballgame now you have to take them and send them to the appropriate specialist if for example they have a bad knee incurred in the service then you got to send to a naval or army orthopedic surgeon all right. And they have to evaluate that and if they did have a

bum knee for example that was incurred either they may have been shot or sprained or they're carrying another fellow colleague or whatever okay, then they'll have to assess a certain amount of disability for that particular individual and these are quotations marks disabled veterans and they'll put a price tag. They'll put a certain label percentage under let's say, well because you will have trouble later on, they will give you 35% disability. So they'll figure out at that time what the persons monthly wage is, let's say in those days a man made a hundred and twenty five dollars a month, so they would take thirty five percent of a hundred and twenty five dollars and that would be his disability payment he would get a check like for maybe ten years and they would say after ten years you have to come back and see us, and if the condition is worse then what you would do is well, I don't know it may lead to a possible total knee and then they increase to 50% or 70% or you are now purely disabled you can't do anything anymore you can't even get a job so you become totally disabled and that's when they increase your salary your disability payment. And that's the origin of anytime you become disabled they got to attach a monetary figure to it.

Q: I thought it use to just be a discharge but after what you have told me it sounds like it could be a lengthy process
JH: It could be but believe it or not most people want to get out of the service as fast as possible. They've had enough, they want to go home to their families, they want to home and do what they want to. Some had to go back and finish their education some didn't want to have anything to do with the service anymore, so a lot of people just said now listen I don't want to do anything I want to get out I feel fine I feel great just discharge me, and so you have to accept what they tell you at face value. It's easy to bring everybody in, I mean the same thing when we're ready we had there are three or four hundred guys like me who were 18 years old or some were a little older because they may have been deferred for three months or six months or whatever and they had a lengthy process of getting in they had to make sure to check there eyes there hearing they arches and a lot of people got deferred with some stupid little things, you know what I mean either a bad back or they had fallen arches or they couldn't hear or that their finger was arthritic so they couldn't squeeze the trigger, I mean so it's not an easy phenomenon both ways and you know if you and a lot of people were 4F.

Q: And what does that mean (4F)
JH: It's a classification. One two three four, 1A is your acceptable one means you're in the best possible condition A is acceptable F stands for fail.

Q: So 4F would be pretty bad.
JH: yes