

**Naval Historical Center
Oral Interview Summary Form**

Interviewers:

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Interviewer's Organization:

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Interviewee:

Lt Kevin Shaeffer, USN

Current Address:

Fredericksburg, VA

Date of Interview:

21 Jun 02

Place of Interview:

Shaeffer home, Fredericksburg, VA

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One

Security Classification:

Unclassified

Name of Project: Pentagon Terrorist Attack Incident

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Abstract of Interview:

Interviewee Information:

LT Shaeffer was born on [REDACTED] in [REDACTED], PA. He has one sister, [REDACTED]. His father works for US Gypsum Corporation. Growing up he lived in Pittsburgh and Denver, CO. He attended the Naval Academy, graduating in 1994 with a degree in Political Science. He went Surface Warfare and was assigned to sea duty out of San Diego, CA. He reported there to the *USS Princeton* in December 1995. While there he was the Electrical Officer and then Main Propulsion Assistant. From there he went to the *USS Elliott* as a Navigator. His wife is also an active duty Surface Warfare Officer with an Engineering Duty option. She went to Monterrey, CA for a Computer Science degree so LT Shaeffer took a job there at the Naval Postgraduate School as a staff officer. During this time he started taking classes in National Security Affairs, completing about 90% of the curriculum before he moved to the Washington, D.C. area in March 2000. He had been in a serious motorcycle accident while still stationed in Monterrey where he broke his femur, had internal organ damage and broke all his ribs. Because of this he never finished his thesis. He had his letter of resignation from the Navy completed when the accident occurred. He got a call from his detailers asking what they could do to keep him in the Navy. He told them he and his wife were coming to the East Coast Washington, D.C. area and if they could find a job related to what he had been studying in Monterrey he would stay in. The next day the detailers called him with a position at OPNAV in the N513 shop – Strategy and

Concepts. He accepted the position and they moved to Fredericksburg, VA in August 2000. His wife is stationed in Dahlgren, VA in the Strategic Systems Programs Office (SSP), the Program Managers for the Trident Missiles Program. His job in N513 was as an action officer. They had about 8 active duty as well as some reservists. His primary responsibility was dealing with Transformation, Network Centric Warfare, and producing a new naval strategy with the Marine Corps.

Topics Discussed:

Since he lives 60 miles south of Washington, D.C. He takes the train from Fredericksburg, VA to the Pentagon. He usually would get to work around 0700. Their days usually started off with a morning meeting after their department head, CAPT Bob Dolan would meet with the Admiral. CAPT Dolan would give out marching orders and then they would begin their day. Around 11 Sep most of them were working on making the new Naval Strategy document to replace Forward from the Sea. Most of his day was spent reading, writing and going to meetings to coordinate the preparation of the document.

On 11 Sep he got to work at his normal time. The day started off normally with their morning meeting in the Navy Command Center (NCC), it lasted about 45 minutes. The meeting broke around 0845. The NCC monitors news programs on big screen televisions from all around the world. The people in the NCC were acutely aware of what was going on in New York City when the first plane struck the World Trade Center. They actually watched the second plane strike the second tower. At that point they knew it was not an accident and it was a terrorist attack. They didn't suspect that the Pentagon or Washington, D.C. was a target. There was a lot of hushed talking going on while they watched the events in New York. The Watch Captain stood up his team, gave some instructions and told them to begin to log the events. Those not involved with the watch team stepped back to allow the watch team to do their job. LT Shaeffer's desk was just feet behind the watch spaces. The cubicles were about shoulder height allowing one to see over them if they were standing. LT Shaeffer went back to his four-man cubicle he shared with LCDR Dave Williams, CDR Pat Dunn, and CDR Bill Donovan. They were all talking about what was happening. Things started settling down. LT Shaeffer stood up by his desk and peered over the cubicles at the large screen TV's which were about 20 feet away watching the towers burning. That is when the airplane hit the Pentagon.

The NCC went from one moment being normal to the next moment being a giant fireball and a ton of force coming through the space. The space exploded and he remembers this huge flash of fire. LT Shaeffer had his side facing the corner where the plane came through. It blew him down. When he was on the ground he realized he was on fire. He rolled around to put out the fire. His head felt like it was on fire. He wiped his hands through his hair to put the fire out. That took a few seconds. When he stood up the space was black and the electricity was out. There were fires around. What struck him the most was it was eerily quiet. He called out. What had been an active, vibrant space full of coworkers now had no one there to answer. He heard unpleasant noises sounding like they were coming from the direction of where Bill Donovan and Pat Dunn had been to his left. It sounded like they were expiring. He realized he was alive. He wasn't in pain because of the shock. He felt like he had a deep cut in his left hand because he felt like it was bleeding but he couldn't see his hand in front of his face. He realized the space

was filling with acrid smoke and it was getting hard to breathe. It was painful to breathe. He knew he had to keep moving to get out of the space. He thought about his wife, [REDACTED], and it wasn't his time to leave her, he was going to fight as hard as he could to get out of the space. The space only had one controlled entry and exit point. This was electronically controlled. It was ironically a very large, thick, heavy blast door. You needed to swipe an identification card and enter a four-digit pin to get into the space. He didn't know whether that device would fail open or closed or what was on the other side. At the time he thought it had been a bomb. He decided it wouldn't be good to try to go towards the entryway (It would have been a 75-80 foot climb). The ceiling had fallen in from the floor above. Everything was not where it should have been. There were cubicles, ADP equipment, chairs, desks, the ceiling; everything was in piles of rubble. He couldn't see them but felt them. He decided not to go out the main door and instead headed the other way towards the back right corner of the space. He crawled over debris, under things and tried to find his way out of the maze of mess. He got about 10-15 feet and wires began sparking. There were water pipes above in the ceiling and as they broke they were mixing with the exposed wiring. This started arcing and sparking. He could see this and the fires. He thought he would be electrocuted. He crawled through the rubble and saw through the smoke what he thought was daylight. As he followed the daylight he went through a hole blown through the wall in the back of their space and into where he thinks the Intel Plot was. He got to a new office where he'd never been. The desks in there were more intact and he started climbing on the desks heading toward a jagged hole that had been blown in the brick wall. He followed the light and made it outside. He saw people running frantically around and began to call out for help. He knew he was going into shock and was badly burned. He had a lot of skin hanging off his hands. He had a short-sleeved khaki uniform on and knew his arms were burned and needed medical attention right away. He was told later that a Commander came by him and sat him down on the rubble to assess his situation, but then went on to help others. He remembers standing up and walking towards SGT 1st Class Steve Workman. He was wearing a v-neck t-shirt and Army pants. LT Shaeffer yelled to him that he needed medical help and to get him to a doctor. SGT Workman commandeered an electric maintenance cart (probably driven by YNSN Whitmarsh) and put LT Shaeffer on the back of the cart. SGT Workman pushed a clear path for the cart as it drove him to medical help. He thinks the blast effects of the plane caused the hole he escaped from. Two holes were blown through newer brick walls.

At the DeLorenzo clinic there was chaos. The clinic had been evacuated and the doctors were all at various triage areas. They put him in a room and were scrambling around. They tried to hook up an IV but his arms were too burned. He thought he was going into shock as he lay on the stretcher. He told SGT Workman he needed a doctor and to take him to a doctor. They stretchered him out to a grassy area. The sunlight was bothering him so about 6 people stood over him to shade him. LT Shaeffer kept asking for a doctor. They commandeered one of the first ambulances to come to the Pentagon. By the time the ambulance crew got out of their vehicle SGT Workman and the others had him all the way to the ambulance. The ambulance crew said he had to go to triage first. The people told them he had severe burns and needed to go to the hospital immediately, so they agreed. SGT Workman jumped in the ambulance and rode to the hospital with LT Shaeffer. They took him to Walter Reed Army Hospital. The ride to the hospital was like a roller coaster; they hit a couple of cars' bumpers. There was a lot of traffic and they were trying to get to the hospital as soon as possible. The Memorial Bridge had been closed so the ambulance crew talked the police crews into letting them cross the bridge anyway.

In the ambulance they had oxygen on his face. SGT Workman kept talking to him to keep him from going into shock. SGT Workman told LT Shaeffer there were two technicians in the back of the ambulance but they didn't tend to LT Shaeffer. Once they got to the hospital the technicians came over to LT Shaeffer. At the hospital a whole team descended on him. He was taken to a separate room with about 15 people working on him. They cut off his clothes. He heard one of the nurses give an assessment of his condition to someone else. He thought she said, "It looks like he's burned on 50%, he has a 50/50 chance." LT Shaeffer grabbed her and told her she didn't understand, he was alive, he made it, he was going to live. The last moment he remembers that day was when they tried to get his rings off. The doctors called for the ring cutters, but LT Shaeffer asked them to wait. He took off his Naval Academy ring and wedding band, even though his hands were raw. He gave the rings to someone, laid back and said, "Do what you need to". That's the last thing he remembers.

Ultimately he was burned on 42% of his body, all upper body. He had second and third degree burns on his back. Deep third degree burns on his arms. Second and third degree burns on his hands and his face and head. Because of the smoke he inhaled, as well as the raw jet fuel his lungs were badly damaged. He has about 5 separate nerve damage injuries on the right side of his body. He has no sensation in his right hand. He has limited movement in his right arm. His right shoulder had atrophied down to almost nothing by the end of his hospital stay. This has been attributed to nerve damage. He had nerve damage in his right leg. This was all probably caused when he was blown to the ground from the initial blast. He may have hit his desk with his arm. It might have thrown him about 5-10 feet down and out.

The rubble he crawled over ranged from about 6 feet deep to rubble just scattered over the ground. There were two instances where he had to climb over what may have been still standing areas of the dividing walls. Pieces of the ceiling were in the space. He crawled over one big jagged piece of metal he could feel, but not see and sliced his hand. After that he became even more cautious about where to go. There was broken glass, computers and metal in the debris.

He guesses it took him 5 minutes to escape out the hole in A-E Drive. During this time he was choking on the smoke and had nothing to cover his face with. He was climbing the whole way.

When he emerged from the Command Center into A-E Drive he was able to see how badly his hands were burned. His uniform was burned. He could see his shoulders on both sleeves had been burned off. He was wearing a white sleeveless tank top under his uniform shirt. He could see that.

After 11 Sep LT Shaeffer's next memory is 13 Sep. At that point he had been transferred from Walter Reed to the Washington Hospital Center Burn Unit. On 11 Sep they had performed an emergency operation on him to open his arms because his arms had such severe third degree burns the skin was acting as a tourniquet. He was transferred that evening via helicopter to Washington Hospital Center. On 13 Sep he was on heavy medication in the ICU. He remembers everyone being nervous because the President was coming to visit. The next thing he remembers is the President in the space with LT Shaeffer's wife and family, and SGT Workman.

On 11 Sep LT Shaeffer's wife had been out of town on a business trip. LT Shaeffer had given SGT Workman his wife's cell phone number, however he was unable to reach her via cell phone because the lines were so busy. LT Shaeffer's wife meanwhile was trying to get in touch with LT Shaeffer after hearing about the Pentagon attack. Finally Mrs. Shaeffer got a call from LT Shaeffer's sister who told her his family had been informed that LT Shaeffer had been injured and was at the hospital. At that point her supervisor took her in a rental car from Massachusetts back to Washington, D.C. through the night.

LT Shaeffer remembers the President coming in, hearing his voice, but not much of what was said. He remembers Laura Bush coming in to speak to him. He knew they were the President and First Lady. Mrs. Bush had a calming voice and was a calming influence. LT Shaeffer was told that the President was quite emotional on that visit. As he was leaving the President commented to Mrs. Shaeffer and the Shaeffer family if there's anything he could do to help them out to let him know. SGT Workman heard this and remembered that LT Shaeffer had talked about golf. SGT Workman told President Bush that LT Shaeffer would like to play golf with him. The President asked if LT Shaeffer was any good at golf. The President said okay, he was on.

LT Shaeffer was on the ICU floor for just over 2 months. There were seven people who were badly burned at the Pentagon in that ICU unit. LT Shaeffer was either the second to last or last person of those seven out of the unit. He ended up with a raging infection in his lungs. Then he developed a bad infection in his arms. From his wrist to his shoulder they started doing operations where they removed the dead flesh to prevent infection. The infection set in anyway. The doctor, Dr. Marion Jordan, had been named President of the American Burn Association, was excellent. He was doing video teleconferencing with other doctors to try to best treat LT Shaeffer's infection. They used live maggots on his arms that would only eat dead, infected flesh. They nicknamed them medicals to give them a less grotesque name. These chomped away for 2-3 days, but didn't beat the infection. LT Shaeffer started to get worse. They put LT Shaeffer on a bed that rotated. The bed flipped almost completely over and then rotated the other way. He was strapped into this bed with vice grips. His back was severely burned, his arms were wrapped and he was flipping on the turning bed. This forced the fluids that were accumulating in his lungs and extremities to move around to assist in healing. He was on this bed for weeks. From day one he was on a ventilator through a tracheotomy in his neck. Being in the bed was really affecting his spirit. By the time they took him off the bed he doesn't think he could have handled it any more. The bed was in a constant speed taking about 1 minute to make a whole rotation.

In the beginning they would do dressing changes. These were terrible. They started off doing four a day, then down to two a day and finally one a day. The four a day changes involved stopping the bed, taking the dressings off his arms, and washing the wounds to disinfect with scrub brushes and washcloths. In the beginning they used synthetic skin on his arms to initially put covering over them. Then they switched to pig skin and then finally grafted skin from his legs onto his arms. There were times when he had no skin on his arms and hands. They took out his gall bladder because they were concerned about his internal organs. Because of the infections his internal organs started to have problems. The bed was incredibly painful. The cups they had to place on his ears to apply pressure to in order to hold his head in place were

painful due to the bad burns on his head. He had lost part of his right ear. Dr. Jordan kept him on the bed a week or two more than the nurses and LT Shaeffer's family wanted him off it. LT Shaeffer feels this saved his life.

He couldn't talk because he was on the ventilator. People had to read his lips. LT Shaeffer's wife had the main task of communicating.

LT Shaeffer was in the hospital for three months and three days, discharged on 14 Dec 01.

He had been transferred to the step down unit prior to Thanksgiving. He had been critical the whole time he was in ICU, but was upgraded to serious when he went to the step down unit. At this time he started working on his physical therapy on a daily basis. From the first week he had physical therapists working with him in the ICU.

He had been walking in the ICU, probably around the end of September. At first it was a 10-step walk with two nurses holding him up. Towards the end of his stay in ICU he did laps around the nursing stations. On a good day he could do three laps. By the time he left the ICU he could do 9 or 10 laps.

On 4 Oct he had a really bad day. He started going septic because the infections were affecting his organs. He was losing his oxygen percentage in his blood. During that day he had two separate cardiac arrests. On this day he was medically retired from the Navy. At the time his wife would receive more benefits if he passed away having been medically retired than if he was on active duty. They advised her that evening after his two separate cardiac arrests that they didn't think LT Shaeffer would make it through the night. The paperwork for a medical retirement was all ready and Mrs. Shaeffer was advised that it would probably be best to sign it. Late afternoon they gave LT Shaeffer a drug that paralyzed him to keep him from moving around and hurting himself. His eyes were open, so they taped his eyes shut to keep the light from shining in them. On 5 Oct Mrs. Shaeffer was in the room and LT Shaeffer couldn't figure out what was the matter with his eyes. They took the tape off and he was fine. From that day forward he started feeling better and physically healing better. It was a miracle.

On the evening of 4 October, ADM Clark, the CNO received a report about how bad LT Shaeffer was doing. He and his wife were having dinner with friends that evening. At the end of the night they all held hands around the dinner table and prayed that LT Shaeffer would pull through.

Other people who visited LT Shaeffer in the hospital included, the Secretary of the Navy, Secretary of the Army, Chief of Staff of the Army, the Navy chain of command – mainly ADM Clark and ADM Fallon, the Master Sergeant of the Army, and Vice Chief of the Army.

He received his nutrition through IV's and a feeding tube for much of his hospital stay. He would dream about water. He wasn't allowed to drink anything. He finally got permission to suck on ice cubes and chips of ice. His sister and [REDACTED] would get apple juice and orange juice and put it in his ice. He wasn't able to swallow; he would suck on it and spit it out.

When he was on the bed he would close his eyes and try to think of something good, but all he would see was fire. He could only see nice thoughts for a second or two before they were replaced by fire. This lasted up until he went home. He finally asked [REDACTED] to go to a bookstore to buy a picture book of landscapes. He wanted her to cut up the pictures and hang them around the room.

[REDACTED] would come to his room at the end of each day to say goodnight. She would bring some of the emails and cards they had received. She would read these to him and for that they would stop the bed from moving.

Lessons Learned:

You never know what life has in store for you. We have less control over our lives than we think. The vital things in life would just be a few items long. Working on the vital things in life is the best you can do.

His faith has been strengthened throughout this experience. This experience removed all doubt he may have had in his faith. The power of prayer was proven to him.

Open yourself up to allow other people to inspire you. You can find inspiration in unexpected ways.

He hopes Americans don't forget about 9/11 and it never leaves our conscious. As more time passes and we live our normal lives he hopes 9/11 is never forgotten. He thinks we're on track and doing well. What's important is that we offer the support to people actively fighting the fight. This is going to require a different level of continuous support. He would like to go back to work in the new Homeland Security Department. He is gun shy about going back to D.C. Prior to 9/11 he remembers talking to people about his concerns about security. He worries about them even more now.

Abstracted by:
CAPT Carol O'Hagan
24 JUNE 02

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Interviewee Information:

LT Shaeffer was born on [REDACTED] in [REDACTED], PA. He has one sister, [REDACTED]. His father works for US Gypsum Corporation. Growing up he lived in Pittsburgh and Denver, CO. He attended the Naval Academy, graduating in 1994 with a degree in Political Science. He went Surface Warfare and was assigned to sea duty out of San Diego, CA. He reported there to the *USS Princeton* in December 1995. While there he was the Electrical Officer and then Main Propulsion Assistant. From there he went to the *USS Elliott* as a Navigator. His wife is also an active duty Surface Warfare Officer with an Engineering Duty option. She went to Monterrey, CA for a Computer Science degree so LT Shaeffer took a job there at the Naval Postgraduate School as a staff officer. During this time he started taking classes in National Security Affairs, completing about 90% of the curriculum before he moved to the Washington, D.C. area in March 2000. He had been in a serious motorcycle accident while still stationed in Monterrey where he broke his femur, had internal organ damage and broke all his ribs. Because of this he never finished his thesis. He had his letter of resignation from the Navy completed when the accident occurred. He got a call from his detailers asking what they could do to keep him in the Navy. He told them he and his wife were coming to the East Coast Washington, D.C. area and if they could find a job related to what he had been studying in Monterrey he would stay in. The next day the detailers called him with a position at OPNAV in the N513 shop – Strategy and

Concepts. He accepted the position and they moved to Fredericksburg, VA in August 2000. His wife is stationed in Dahlgren, VA in the Strategic Systems Programs Office (SSP), the Program Managers for the Trident Missile Program. His job in N513 was as an action officer. They had about 8 active duty as well as some reservists. His primary responsibility was dealing with Transformation, Network Centric Warfare, and producing a new naval strategy with the Marine Corps.

Topics Discussed:

Q. (05:23) So you're working in N513 for roughly 13 months before the Pentagon attack. What was your job in that shop at that time?

A. I was an action officer. We had a shop of about eight guys and off and on we had some Reserve support, in fact one of the Reservists who was killed was the Reservist stationed to our office, LCDR PAT MURPHY. So I was an action officer, with primary responsibility is dealing with transformation, network centric warfare. Did a lot of work on upcoming, producing a new naval strategy and with the Marine Corps, and those were my primary duties.

Q. (06:13) OK, what would your typical day begin as? How would it work?

A. Well, actually since I live here in Fredricksburg, which is about 60 miles south of DC, I would take the train, the VRE from Fredricksburg to the city and into the Pentagon. So my days started quite early and ended quite late. But I was usually in at work around seven o'clock in the morning. We usually start off with a morning meeting after our department head, CAPT BOB DOLAN, would meet with the Admiral. Come in and meet with us for about half an hour and you know, decide if there are any fires that need to be put out that day. Get the marching orders and kind of a game plan for the day and then move on to the daily routine, which was kind of just a standard daily routine.

It did change a little bit when we, right when we moved into the new wedge, into the new Navy Command Center. We were pretty involved at that time making the new naval strategy document

to replace Forward From the Sea and we were working quite active with that. So that's what most of us were working on at the time that we were in the Command Center. Then also being kind of in the heart of the Command Center, we were just, being in that room, we were kind of up to speed a little bit more even with what was going on, just by being, by nature of being in that Center.

Q. (07:34) And so you'd spend most of your day reading, writing and attending meetings to coordinate the preparation of this document.

A. Yes, that's correct. A lot of writing.

Q. (07:41) A lot of writing, I'll bet yeah. Well you're prepared for it. Lead us then into the morning of the 11th. You went in presumably at your typical time?

A. Yes, I did. I got in at my normal time. I remember the day very vividly. It was just a beautiful day in DC and the day started off just like any other, and I've said that many times, too, that you know, it was the normalest of all normal days. We had our morning meeting in the Navy Command Center, which lasted about 45 minutes or so. We broke from that probably about 8:45, and the Navy Command Center by nature of its taskings, monitors news programs on big screen displays and TVs from all around the world. You know, keeping track of current events and also all the naval units, you know, forward deployed and operating. So we were acutely aware of what was going on in New York City when that first plane struck the World Trade Center, and actually watched the second plane strike the second tower and at that point we knew right away, all of us, I mean knew that it was not an accident. You know, you don't have that type of accident, type of coincidence. So we knew it was a terrorist attack, but what we surely didn't

know or suspect even that you know, the Pentagon was a target or anything in DC was a target. There was a lot of kind of hush talking going on, obviously when that was unfolding up in New York. I remember distinctly that the watch team who was always on watch twenty-four hours a day in the Command Center, the watch Captain I remember stood up the team, gave them some instructions, start logging the events. So they actually went right into their mode of recording the events as they were unfolding. We kind of, those of us who weren't involved directly with the watch team kind of stepped back and let them do their job and we were kind of watching around the periphery of the watch space.

My desk actually was just feet behind the watch space and the cubicles were such that they're only about shoulder height, so you could see over them if you stood and I remember going back to my four-man cubicle and I shared a four-man cubicle with LCDR DAVE WILLIAMS, CDR PAT DUNN and CDR BILL DONOVAN. I remember returning to my cubicle and we all were kind of talking, you know, in shock basically what was happening, and it was you know, so graphic to see it on TV. We talked for a few moments and things started settling down a little bit. People started trying to get back to work if they could, but you know, we were still pre-occupied with what was going on. I remember standing up from my desk and looking, peering over the cubicles and at the large screen TV, which are only about twenty feet away and watching the towers essentially burning at that point and that's when the airplane hit the Pentagon.

Q. (10:44) OK so you were actually in your space looking at the TV sets as the impact occurred. Describe the impact. Tell us in your own best way from start to finish.

A. Yeah, the easiest way to describe it would be, I think everyone has a graphic image of the second plane hitting the World Trade Center and that kind of orange fireball that it produced, a

huge fireball of you know burning fuel and smoke and flames. That's really what happened inside the Navy Command Center. Went from one moment obviously normal, the next moment was just a gigantic fireball with obviously a ton of force coming through the space.

The space just basically exploded and I distinctly remember this you know huge flash of fire, because I was standing – the blast came through what was really, there was only one entrance into the Command Center. If you're familiar with the diagrams, as you walk into the Command Center, if you kept walking straight back there was a conference room and a briefing room, and the plane basically came through the back corner of that space, with the back corner at an angle that really took it, kind of just lopped off the corner of our space. Didn't go all the way through directly, but kind of took off that corner.

I had my back faced to that corner, or my side faced to it rather, and it blew me down. The force of it blew me down, so kind of, I got engulfed in this fireball that the force blew me down and when I was on the ground I definitely realized that I was on fire and had to roll around, put myself out. I distinctly remember that my head felt like it was on fire, and I remember you know wiping my hands through my hair to put my hair out, and then feeling that I you know, I had very like you know burnt hair and brisily, you know to try to put the flames out. That took all probably just a few seconds, though it seemed like forever.

When I stood up you know the space was black. The electricity was out. There were fires around and what struck me the most though was that it was just kind of eerily quiet, and you know I called out and what had been an active you know vibrant space full of coworkers and friends at that point was, no one was there to answer my call. So I remember hearing noises of - sounded like coming from the direction of where BILL DONOVAN and PAT DUNN were in the, kind of

to my left, kind of unpleasant noises. Someone was sounding basically at the time I knew it was pretty bad. Sounded like they were expiring.

At that time I just, I realized that I was alive. I kind of assessed how I felt. I wasn't in a lot of pain right then, because I think the shock of the moment helped mask some of that. I thought at the time that I had a deep cut in my left hand, because I could feel like it was bleeding, and I thought it was bleeding, but I mean I couldn't see my hand in front of my face. At that, just, we're talking still seconds after the blast, after I stood up and then I realized that the space which is filling with this acrid smoke. I mean it was getting really hard to breath right away, and there was a lot of smoke in the space, and I could tell I was you know, was inhaling a lot of it, and that was certainly painful and it was giving me problems. I just knew that I had to keep moving to get out of the space.

After I got over the initial shock I just had to keep moving, and I thought about my wife, [REDACTED], and I remember thinking that you know, it wasn't my time to leave her yet, and you know I was going to fight as hard as I could to get out of this space. I knew that I needed to keep moving to try to find a way out.

The problem was because power was out and the space was so black, I mentioned the space only had one controlled entry and exit point and that was obviously electronically controlled. It was ironically a very large thick heavy blast door, that had been installed as part of the new wedge and you needed to swipe an identification card and enter a four digit pin to get into the space. I didn't know whether or not that device would fail, if it would fail open or if it would fail closed, or – and I didn't know what was on the other side. Really had no strategy of which way to go, because I didn't - at the time I thought it was a bomb by the way. Had no idea it was an aircraft, an airplane.

We thought it was a bomb for sure. I thought it was a bomb. Mainly because of all the contracting work that had been done on that new wedge, there were so many workers around. There continued, we moved in in August, and there continued to be contractors there on a daily basis and I just figured that it was coordinated and probably connected for sure with what's going on in New York, but that it wasn't an airplane, that it was a bomb. Someone had been able to get a bomb into the building.

So anyway, now trying to find a way out, I just decided that it wouldn't be good to go toward the entry, exit point and try out the door. It would have been probably about seventy-five, eighty foot walk for me or climb rather – the space had been just destroyed. I mean the ceiling had fallen in from the floor above. Everything was demol – everything was just not where I was from what I could feel. Essentially cubicles, ADP equipment, chairs, desks, the ceiling, everything was like now obstacles and in piles of rubble from what I could gather. Again not seeing them, but having felt them.

So I decided not to go through that door and decided for some reason to go head the other way, kind of toward the back right corner of the space. I remember crawling over debris, crawling under things just trying to find my way around and out of the maze and mess. There was a time, I got maybe ten or fifteen feet and there was wires that began sparking, because the electrical wires from the, that were in place in the ceiling, as the ceiling collapsed, those fell down into the space. I just remember there was a lot of ADP wires, I mean there was a lot of wires in that space, and that space just had a ton of electronics in it.

Then there also was water pipes above in the ceiling and as those broke, those are now mixing with the exposed wiring and it started arcing and sparking and that I could see. I thought well I've gotta go this way, or you know there's fire around my other way. So I just I thought at the

time I was going to get electrocuted. You know, here I survive this explosion. Now I'm going to get electrocuted, and I kept crawling through the rubble and made it through. Saw through kind of the smoke, what I thought was daylight, and that, as I followed the daylight that took me through what I can only guess was like a hole blown in the back wall of our space, into another space and I'm thinking that that might have been where Intel Plot was, but I'm not too sure, but I think their office was kind of on the exterior of ours, separated by a wall. Not normally able to walk through it.

So I got to the, a new office where I'd never been before. The desks I remember in that office were kind of intact and so I started climbing on top of these desks, because I was heading toward this jagged hole that had been blown through the brick wall in between in the N1 inner corridors, in between the rings of the Pentagon. Essentially that was you know exposed to the outside.

So I followed the light. Made it outside. I remember seeing people just kind of running frantically around and just was calling out for help, because I knew at that point, I could look down my hands. I was going into shock, but I knew that I was badly burned. I had, my hands were just basically a mess. You know I had a lot of skin hanging off of them. They were badly burned. My arms were burned. I had short-sleeve you know khaki uniform on, so I knew I was badly burned and that I needed medical attention right away.

I was told later, and I don't remember this but that a Commander came by me and sat me down, essentially onto some of the rubble from the wall that had been blown out and kind of, I guess maybe he assessed my situation and then decided to go help other people. I'm not too sure, right, because I don't even really remember that, but what I do remember is standing up again actually and walking towards this person, came to be he's a Sergeant First Class STEVE WORKMAN, and I came upon him right outside of the hole. He was wearing just a t-shirt, a V-neck t-shirt and

his Army pants, so I didn't know who he was. If he was a General or if he was Private, I had no idea, but I yelled out, yelled to him that I needed medical help. I said, "You need to help me. I need to get to a doctor."

He took one look at me and agreed. What he did was commandeered kind of an electrical maintenance cart that they use sometimes in those inner corridors. They got one of those. There was a driver of that who I don't know who it was, and STEVE and they put me on the back of this cart and then STEVE proceeded to like kind of tag along the side of the cart as we were moving and he was pushing rubble away with his hands and feet to kind of clear a path through as we headed out.

Now I looked at the diagram since and I think that the hole I escaped from was not caused by the plane coming through the ring there. It was caused by some of the blast effects of it and I guess two holes were blown through what were essentially newer built brick walls. Kind of brick enclosures. They weren't the limestone face, that they were brick and since they were probably less structural sound, the blast effect blew the brick out and the plane actually was down further and I think it just barely went through that last wall with the force.

Q. (21:36) Captain?

A. Sure.

Q. While we're talking about where you got out, CAPT BOROFF, was do you remember where he was located? This is –

A. I never saw him. No.

Q. (21:39) This is the ramp, and there was an emergency exit over here and there was an emergency exit back here. CAPTAIN BOROFF's office was right here and he walked out that space, basically turn, he said he saw you come out here. Is that not right?

A. No, see the, turn a minute. Let me give you my version of the space. OK, this is the ramp here. This is the main entrance here. This space, this area was the watch. So that the bank of large screen TVs here. My desk and the cubicle, four-man is right here, OK. There was another like probably an eight-man set of cubicles here and there was a –

Q. (22:59) TOM BRADY?

A. In here was like where YN1 WILLIAMS had a desk, and there were a couple of other Petty Officers who had desks in here.

Q. (23:06) OK.

A. And then there was a six-man, CAPT DOLAN was right here. PAT MURPHY was right here, and then this led you into like a little corridor and there was, I know this was office, and I know that from what I read, YN1 WILLIAMS was actually in this office space with somebody and they were kind of out of the way. This is, see this is a wall right here, too.

Q> (23:39) That was WILLIAMS and LEWIS, it should have been.

A. Yeah.

Q. (23:41) OK.

A. That's who it was. WILLIAMS and LEWIS. They were around the corner, so the people were, see who I knew was it CAPT TANGRETTI was that also –It's not, it might not be TANGRETTI. No, I'm sorry I can't remember his name right now. Another CAPTAIN - DECONTO.

Q. (24:04) DECONTO, that's it.

A. DECONTO was actually sitting over here at the watch, because he ran that watch team and I remember he was sitting here. There are probably maybe a half dozen petty officers in this space. Like in this area, and I know that our four-man was full. There was DAVE WILLIAMS, BILL DONOVAN and PAT DUNN, and I thought CDR or CAPTAIN DOLAN was over here with PAT MURPHY.

I don't, I never actually knew, now in my drawing where was the emergency exit?

Q. (24:44) OK, there was an emergency exit over in here.

A. Yeah, it must have been back in here.

Q. Right.

A. Yeah, no, see, I did, I couldn't – this was blocked for me to go this way. I didn't even know there was an emergency exit that way, but I did at first, because the blast kind of blew me this way and I found myself thinking, I think standing right about here – the plane I guess came in this way.

Q. (25:08) Yep.

A. And here is kind of like, the corridor and this is like an outside wall kind of.

Q. A-E Drive.

A. Yeah, A-E Drive, right here. I guess the plane came through this way and ended up blowing you know holes, like holes like this through the brick. So what happened was I kind of climbed this way and then this way and I thought Intel Plot was right around in here.

Q. (25:32) It was.

A. And I thought, this is where, this is how I remember it, that I climbed toward the back. This is like where the center of the space was, our space, because this is all actually not a wall. There's, this goes back to other rooms. This is all open. The ceiling had collapsed and this is where, you know all the pipes and the water and the electrical cabling and everything was like arcing and sparking there you know. That kind of forced me to go this way and as I got to about here, I could see there's a hole. This had been blown through, and I could see the daylight coming through one of these holes and then crawled out this space over these desks to right there. Yeah.

Q. (26:13) OK.

Q. (Dr. P) You're crawling diagonally. You're not crawling along the pre-existing routes -

A. Correct, I'm just -

Q. (26:18) Through cubicles.

A. I'm crawling over the rubble of where there used to be cubicles.

Q. (26:24) Did you crawl and walk or did you walk, in other words, where it was more level and then crawl over things, or did you keep crawling all -?

A. Not, it was pretty much crawling everywhere.

Q. (26:29) Crawling everywhere.

A. From where I was.

Q. (26:33) But did you see anybody else while you were coming out –

A. No, not that I, like I said, I could hear people, I could hear kind of, you know, when I thought about it later, you know, just very unpleasant. I mean people were in, were hurting, but no one was able that I recall, able to audibly, you know, say anything. So at that point that's when I just started heading toward the back of the space to get out that way.

Have you interviewed anybody who is, had, who's been in here at all?

Q. (27:04) Yes.

A. Who was in here, that –

Q. (27:10) We interviewed WILLIAMS.

A. Well, she was over here actually, so she wasn't in the open space.

Q. No.

A. What I found or thought that nobody made it out of this inner space. Am I correct, or -?

Q. (27:17) You're right. You're the only one.

Q. (Dr. P) You're right, yeah.

Q (27:22) You're the only one.

A. Yeah, because they were protected by –

Q. (27:26) But where you did come out there were some folks who I think got out.

A. In the Intel Plot I heard people got just blown right out that hole, but they were OK.

Q. (27:33) There were a few, yeah, there were a couple that got out. There was HUMBERT.

Q (Dr. P) There was another group.

A. Right, and they were, you know again there was a wall here. There was, you know, so that their space was never connected to my space.

Q. (27:46) Right.

A. And I heard that they, you know, they came out OK. Now I also heard, OK, if you go up this ramp from the entrance, there is a group of offices –

Q. (27:57) Yes.

Q. (Another) Right.

A. Back in here. OK, this is the conference room. There is a group of other offices here.

MIETOC was over here.

Q. (28:04) Yes.

A. I heard there was a LT McKeown in METOC who survived.

Q. She did.

A. Was she in her spaces over here? See again that's why, because she was kind of sheltered as that came through. So the people who were sheltered in offices that you know had more walls in between them in the line of the plane, they ended up being OK. It was the Central Command Center, who we were all open, you know that essentially with that the blast effects I imagine just wiped everything out in here. Again the ceiling collapsed and that's how I remember it.

Q. (28:38) Right. I'd like to continue on. We're going to come back to this for a little bit, but when we last left your description you were on the cart with SGT 1st Class WORKMAN trotting along side, getting stuff out of the way.

A. Right.

Q. (28:49) Continue on from there.

A. This is where my memory starts getting a little bit hazy. We ended up, I remember him being back on the cart and us riding through the Pentagon to the De Lorenzo Clinic. We got to the De Lorenzo Clinic and I remember it being a little bit chaotic there. Apparently they had evacuated the clinic and then also some of the doctors and everything had gone to their locations to assist and set up the triage places and whatnot. So I don't think there were a lot of doctors in the area when we got there, and again this is really probably only minutes afterwards.

They put me in a little room and were kind of scrambling around. There were some nurses, maybe some tech assistance in there who were trying to scramble around. I do know they tried to hook up an IV into me, but my arms were so bad that they didn't really have much to work with. They attempted to give me some pain medicine through that IV and I don't think I got either any pain medicine or fluids.

I remember thinking I was going into shock as I was in that room on a stretcher. They moved me from that cart obviously to a stretcher. I remember telling SGT WORKMAN that, I said, "I need to get out of here." I was screaming that I needed a doctor that you know there wasn't anybody in that space to help me and they needed to take me somewhere else where I was going to get help. So they did, we started going – I remember they stretchered me out. How we got outside I don't know, but I remember being out like kind of in a grassy area, and I'm thinking that was maybe around the parade grounds there, outside of that, that entrance to the Pentagon. Kind of to the left there were some open grassy areas, so I was out there somewhere. Again the sun was just so bright, the sky was so blue, (chuckle) and I was lying on this stretcher and the sunlight was bothering me. They could tell right away. I didn't even have to say anything, so they stood over, about maybe half dozen people to try to block the sun and shade me as they were talking about what to do. I just kept telling SGT WORKMAN, I said, "Get me a doctor. Get me into an ambulance."

They ended up commandeering probably what was one of the first ambulances to arrive at the Pentagon, because I think the ambulances came through that, from that direction and I remember they said, "OOP, here come the ambulances." They started pushing me that way, SGT WORKMAN ran ahead, I think, and essentially when the ambulance crew came out, they had me

already, SGT WORKMAN and probably four or five others had me to the back of the ambulance. The ambulance driver said, “No, we’ve got to go to triage first.”

They said, “No, you don’t understand. Look at him. He’s got severe burns. He needs to go to the hospital right now.” They agreed. They put me on the ambulance and then like I always say you know, SGT WORKMAN could have been complete that day. He could have done his job there and gone back. As it turned out, he ended up helping out quite a bit of people before he came upon me. So he had done a lot since the impact, but he jumped in the ambulance with me and proceeded to ride with me to the hospital.

They were taking me to Walter Reed and from what I remember of the hospital, the ride in the ambulance to the hospital was kind of like a roller coaster. I mean we were off-roading. We were hitting cars. I remember hitting a couple of cars. Kind of nicking some bumpers. I remember saying something to the drive, or someone saying, “UPP, there’s another VOLVO bumped,” or something you know that we had hit, because I guess there was a lot of traffic and you know we had the sirens on and they were really hoofing it to get into the hospital as quickly as possible. From what I heard, also, the Memorial Bridge there that runs across to the Lincoln Memorial, that was closed down and the ambulance came up and talked the police units there into letting the ambulance cross, and then so we crossed the river there and then ended up heading toward Walter Reed.

The next kind of memory I have was in the ambulance. They had brought an oxygen bottle and had oxygen on my face, but they elevated my legs and feet, and so I was sitting kind of with my head down at the floor, with my feet and legs elevated and they stuck the oxygen canister right between my legs, and I can remember grabbing STEVE and saying you know, yelling at him to get the oxygen container out of from between my legs. It was rather uncomfortable even you

know, amidst all my other injuries. And so he did that and proceeded to come and just talk to me about my wife and what I like to do. He was you know trying to keep me from going into shock.

Q. (33:41) Was there a technician or anybody working on you while you were in the ambulance?

A. I never noticed anybody in the ambulance other than STEVE, but STEVE tells me that there were two techs in the back, and actually I think there were two, but one was an ARMY doctor. Maybe a Colonel or something like that and there was another, but he you know according to STEVE it was kind of strange because he was expecting them to start doing things to me and they never did. They were kind of, I believe they were probably in shock with the whole event and they were kind of just talking to one another away from where I was and STEVE was the one who was immediately tending to me the whole ride.

He says that once we got to the hospital just prior to stopping and opening the doors, that's when they started coming over and you know, but I think they were just kind of I believe, maybe in shock and that's why they didn't do anything.

We talked on that ride about again my wife. We talked about golf. I really like to golf a lot, and just about just stuff. Got to the hospital and they opened the doors. I remember coming out and like a whole team ascending upon me from the emergency room. We burst through the doors and then they took me to a separate room on the first floor of the emergency room at Walter Reed, and started again like a whole team, probably fifteen people working on me. They were cutting off my clothes. You know asking me who I was, sticking in a catheter, all kinds of stuff and it was just kind of very chaotic and I remember I heard one of the nurses there kind of giving an assessment of my condition to someone else. I don't know who, and I thought she said, "It looks like he's burned on fifty percent; he's got a fifty-fifty chance." And to me that meant a 50-50

chance of living so I grabbed, I remember grabbing her and pulling her like down to me and saying, “No, you don’t understand. I’m alive. I made it. I’m going to live.” And they assured me that I was.

I had been saying that repeatedly throughout the whole ride to STEVE WORKMAN, that “I made it. I’m alive. I made it,” and I just kept saying that. When I heard her say the you know, got a fifty-fifty chance, I just didn’t, didn’t want to hear that so I told her that. So I remember that and then the last moment I remember that day was I mentioned my hands were in really bad shape. Well, I wore my class ring, I had on my right hand, and I had my wedding band on my left hand on my ring fingers. They couldn’t get my rings off. So they, I heard the doctors call out, “Get the ring cutters” and then I don’t know how, I mean I, because I know they were injecting me with pain killers and things, but I still was with it at that point enough to say, “No, wait. Wait a minute,” and I you know I took off my Academy ring, and took off my wedding band, and just remember my hands were just, you know raw. But I know getting them off. because I think I was able obviously to fight through more then they wanted to hurt me in getting them off.

I got the rings. I gave them to whoever was there, Said, “OK,” and I kind of laid back again and said you know, “Do what you need to now,” and that’s the last thing I remember on September 11th.

Q. (37:09) I’ve got a couple of questions that I’d like to follow up with you on. At this point you’ve described your trip in the ambulance, on the grass rather, you’re actually in the grass, and actually on the cart before – on the cart, on the grass, in the ambulance and in the hospital. How are you on those? Are you sitting? Are you laying down? Are you on your -?

A. Lying the whole time.

Q. (37:26) On your back or your front?

A. On my back.

Q. (37:29) That sounds very strange since presumably your back is pretty badly burned at this point.

A. Well, it was. I was, still had some semblance of a shirt on. So I, and I think that they, you know they couldn't assess my, how damaged you know, how burned I was.

Q. (37:47) OK.

A. I was very badly burnt on my arms, my face and head was badly burned and I, just to me at the time the most comfortable was to lie down and so that you know, lying down on that cart that took us away kind of laying back, actually not laying prone, but – then once in the – once they got me to De Lorenzo and put me on the gurney I was lying flat and that's how I stayed.

Q. (38:14) OK. I want to cast way back then to just the moment of impact. You described quite, quite, vividly the actual explosion, but I want you try to think about the sequence of things that you heard. What did you see or feel first? Did you feel a concussion, or a blast, or a flash?

A. Definitely, it was kind of simultaneous because obviously this happened so quickly. But certainly the walls exploded from my right, OK, I was standing at my cubicle looking at these TVs here, the bank of big screen TVs kind of like this and the plane came through this way, I think or some -from this back corner. This area kind of just exploded this way. Everything got pushed this way. Essentially to the right of the space as you came in the entrance. So the blast

effect certainly felt that first. The wall, everything just exploding and then right after that the fireball. I can't even explain it. When I see the fireball in New York in the Trade Centers, that's. What I think of immediately. That's what happened inside of our space.

Q. (39:25) OK, do you remember the color of the fireball?

A. Yeah it was orange, orange fire.

Q. (39:30) OK, and describe the sound if you can.

A. Just a deafening explosion.

Q. OK.

A. I mean it was a – the force, things getting, things moving, exploding around me, plus the impact sound. It was like, it was roaring. It was –

Q. (39:48) Would you say it was louder than say noises that you might have heard onboard ships in the Navy?

A. It was louder than anything I've ever heard, definitely.

Q. OK.

A. Louder than any gun going off, any five inch, any train that I've ever heard. It was louder than anything.

Q. (40:03) OK. Very good, thanks. Then you're pushed down. You're lying on your front I assume, and you're pushed down after the explosion?

A. Yeah, from what I remember I was blown forward. We think, because I've had, I've sustained some, I guess maybe, ultimately I was burned on 42% of my body. It was all upper body. I had second and third degree burns on my back. Deep third degree burns on my arms. Second and third degree burns on my hands, and second and third degree burns on my face and head. But in addition to that, I had, because of the smoke that I inhaled, and actually my surgeon thinks after assessing my lung condition, after about a week, a few weeks, they think I actually inhaled just the raw jet fuel that hadn't been burned yet and that somehow that ended up you know flying through the space and that I inhaled those, or those vapors quite severely and then the smoke and you know kind of the soot and the fire. So beyond the burns I had, I had my lungs were badly damaged and then actually it turns out I've got about five separate nerve damage injuries on the right side of my body that keep me from feeling. I have no sensation in my right hand. I have very limited movement of my right arm in terms of range of motion. My right shoulder toward the end of my stay in the hospital, they actually noticed had atrophied down to almost nothing. Had lost all the muscle mass of my shoulder, my deltoid, the front, the top of my chest actually atrophied way down. They have since attributed that to some nerve damage up there, and then I had nerve damage in my right leg.

So when I was blown down, we're trying to figure out what may have caused that and it's probably when I was blown to the ground from the initial blast, I may have hit my desk on the way down with my arm and whatnot, and just the blast effects, and maybe threw me five feet, ten feet down and out. So I could have obviously hit other things, but I might have also hit my desk you know coming down. So you know, that's where I was. I was lying flat when you know next

thing and I knew I was on fire, so I was rolling around at that point and that's when I remember you know putting my hands through my hair.

Q. (42:47) OK, you're on the ground. You start to get up. You say that your hair's, you put that fire out on your back and on your head. Do you see other small fires, or is it just pitch black?

A. From that time right around me it's just pitch black. There was at that point, I didn't notice any, because at that point I couldn't I was very disoriented. I couldn't get my wits about me in the space. It was very black, the space was like filled almost instantly with smoke and it was just a little bit later that I could see fires through smoke in different parts around the space. Some of them, some of them pretty big, but you know those were not in the direction where I was heading, so. I was going the other way

Q. (43:31) You mentioned that you were crawling over rubble. About how high would you say those piles were? Do you have a guess?

A. Yeah, some of them were like six foot of rubble. Some were just you know rubble on the floor. I think all of it was maybe at least a couple feet deep. I mean it was, I mean there were about two instances where I had to climb over what were maybe still standing areas of the divider walls of cubicles that you know so I'm walking on, crawling on two feet of rubble and then I get to this dividing wall thing or something and I had to crawl over that. But actually too I remember because all the ceiling you know, pieces of the ceiling were on the, in the space now, and crawling in over one piece of ceiling or you know, essentially it's a big jagged piece of metal so it came from somewhere. I could feel it. I couldn't really see it at all, and remember slicing again that same hand. Slicing my hand and feeling, "OK, there I go I'm bleeding again," because

you know I can feel, I felt blood on my hand from that. So then I was even more, I was very cautious about where to go, but you know I just I didn't have any choice I had to keep walking over everything. So I mean there was, there was broken, there's broken glass, computers, metal, just a lot of debris.

Q, (44:49) And as a guess, how long did you think it takes you to get out through the hole in to A-E drive.

A. I think maybe five minutes.

Q. OK.

A. Maybe.

Q. (another) (45:09) Related to that time, the, you said there was a lot of acrid smoke. I mean were you able to cover your nose or mouth or anything, or just, I mean, are you getting weaker from that? Do you remember?

A. Yeah, definitely at the end of, I was just gasping at the end and so it might have been more than five minutes in there, but at the end I was choking on the smoke and had nothing really to cover my face with.

Q, (45:34) And where you went out, could you just walk out or did you have to climb over that.

A. No I was climbing essentially the whole way, because I remember climbing over this desk and it looked like the desks of the office I waded through whether that was the Intel Plot or not I don't know. But those hadn't been blown up like our space and they were kind of abandoned,

but they were kind of intact. I was climbing over those still to get out. Probably up to the very last moment where, you know, I made it through the wall. I think I got down and then walked out the wall, walked out the hole in the wall.

Q. (46:13) You mentioned, oh, you get out into A-E drive and I presume at this point you stand up and you're walking outside from the hole blown in the wall. (46:20)

A. Yes, I remember walking and thinking to myself I mean you see it, you know, I didn't have an out of body experience but I could, I was thinking about how I was looking emerging from this hole blown in the wall, and because that was when the sun first hit me and I was able to you know, then to see my hands and so I knew I was just a mess. I just was thinking about how I must have been looking coming out of this hole in the wall, you know like a war image almost from Vietnam or something that you see on the history channel.

Q. (47:00) And can you describe what you saw when you looked down at yourself?

A. Yeah, definitely my uniform was burnt. I could see my shoulders on both sleeves had, basically almost been burnt off, and I could see my under white, I was wearing like a white sleeveless tank top underneath. Not actually a t-shirt, just a white sleeveless tank top and I could see that and you know my uniform was burnt kind of in shreds. Then really the only other thing I assessed was my arms and my hands where –

Q. (47:39) Out of curiosity, going to seems strange, but could you see your ribbons?

A. I didn't look. I don't recall seeing them.

Q. OK, that's fine.

Q. (another) And when you got out there though there was nobody like looking in trying to get people out. I mean you kind of went out and I think you said you saw some other –

A. Yeah, I saw people running. I saw maybe it was probably four or five people running down A- E in different directions. You know people scrambling essentially around and I believe that those people were running toward and around those other holes that had been blown in the wall. They weren't people exiting from the building. Basically, they were helpers.

Q. (48:13) And you mentioned a Commander that sat your down. Do you remember who that was?

A. No, I don't.

Q. (48:17) OK, very good. That's all the questions I have for that day, anyone have, I want to keep moving forward, but anybody else have anything to amplify from the 11th? OK.

We finished off the 11th then with you in the hospital. You pulled the rings off your hands. Start at the next, whatever your next memory is.

A. Right, my next memory actually then is September 13th, and at this time I had been transferred from Walter Reed to the Washington Hospital Center Burn Unit. Turns out, I don't have any memory of this, but on the evening of the 11th they performed an emergency operation on me at Walter Reed to essentially open my arms up because my arms had such severe third degree burns, the skin was then acting, beginning to act like a tourniquet. With burns, severe burns you get a lot of swelling, a lot of fluid accumulation so that was acting like a tourniquet, so they basically had to cut down each of my arms to free that up, loosen that. So that was the first

surgery I had. They transferred me that evening via helicopter to Washington Hospital Center.

Again I don't remember that.

Next thing I remember is the 13th. I'm under a lot of heavy medication. I'm up in the ICU at Washington Hospital Center on the 4th floor and I remember my nurse and everyone preparing in a, I just remember everyone just kind of being nervous. Running around that, turns out that they were running around and a little bit nervous because the President was coming to visit.

So my memories kind of fade off and on on the day, but the next thing I remember is the President is in the space and my family is there, my wife is there. SGT WORKMAN was there and actually had just found me that day, because I went to Walter Reed first. It took him about a day and a half or so to find out where I had been transferred to, and so it's the 13th so that's when he arrived to visit, and you know meet my family, meet my wife.

I should say also just to take a time out, back track. On the 11th my wife was out of town. She was on a Navy business trip to Pittsfield, Massachusetts so she was out of town on the 11th.

When I was in the ambulance I gave SGT WOKRMAN her cell phone number because he was doing a good job of keeping me with it and I was able to give him her cell phone number.

They weren't able to contact her directly with that cell phone, because the cell phones weren't working, I guess. When she was in Pittsfield they were alerted of the blast in New York and the attack on the Pentagon. She mainly then tried to, she broke from her meeting and was trying to call me. Couldn't get through, couldn't get through for hours. She finally got a call from my sister who had informed her that my family had been informed that I was in fact injured and at the hospital. So that's when her and her supervisor CDR BENEDICT, TERRY BENEDICT, they with a couple of other people got in their rental car and had to drive from MASSACHUSETTS throughout the night on the 11th down here. So that was a terrible time for her too, essentially not

knowing my condition, not being able to contact anybody and then having you know a multi-hour drive in the night down to me. So that was her, you know that's where she was. My family lived in Chicago. My parents and my sister live in Chicago. So they had been notified.

Well from the 13th there, obviously everyone was there with me, and I remember the President coming in. I remember his voice. I don't remember too much of what was said. I was under some very serious medication. I remember Laura Bush coming in. Speaking to me right by my bedside and at that time I remember just how, I knew they were the President and the first lady, and I knew it was her. I just remember she had a very calming voice. Very calming influence and that was nice. From what I was told the President was quite emotional on that visit in my room.

As he was leaving he made a comment to my wife and family, if there's anything he could do to help me out, please don't hesitate to let them know if there's anything they can do. SGT WORKMAN heard that and I had talked about golf with him obviously in the ambulance ride like I mentioned.

Well he said, "Actually, Mr. President, Kevin would like to play golf with you."

(someone is chuckling)

I vaguely remember this taking place and this wasn't all registering to me very well. So I did not initiate the request, (everyone laughs) but SGT WORKMAN did and the President in kind of, I can almost picture it now, in a true kind of GEORGE W. BUSH way, fashion probably, was paused by that and then said, "Well, is he any good?" You know he wanted to know if I was any good right away.

So obviously he didn't want to get beat or you know he just wanted to know if I was any good at golf. I remember him asking that and they said, "Well, Kevin's OK. You know he's not great. He's OK."

And he said, he thought about it and then just said, “You’re on.” He said, “When he’s able and ready to play we’ll give him a round.”

They said, “Great.”

So then they moved on to some of the other spaces and it turned into quite a funny situation.

(54:16)

Q. (54:17) Do you have a handicap?

A. I actually had, probably the best I was playing in Monterey. We were playing a lot in Monterey was probably a 16 handicap.

Q. (54:26) OK.

A. I mean I was a bogie player you know, nothing great, but so that’s something that I’m actually right now working to get back to be able to play golf this summer. I hope to be able to play, schedule permitting before September 11th 2002.

Q. (54:50) Excellent, yeah. So you’re in the hospital. The President visits. How long did you stay in the hospital? Tell us more about the stay, and what –

A. Yeah, I was on the ICU floor for just over two months, and then got transferred, that was, that’s a long time to spend in the ICU. There were I think seven of us who were badly burned, injured at the Pentagon who were in that ICU unit, and I was very close to being the last one down, if not the last and maybe the second to the last person down because I had, the complications that I had were because of the burns and also because of that lung damage.

I had a raging infection going on in my lungs, almost immediately this infection set in. It was not just pneumonia. It was pneumonia plus all these other things going on. And then I developed a really bad infection just in my arms. Essentially from my wrist up to my shoulder where the severest burns were. That's where they started having to do operations called debridement. That's where they remove the burnt flesh, the dead skin, the dead flesh. They want to get that out of that, because that also can cause infection as well.

The infection set in and started raging in both arms. Anyway, so I had these two simultaneous infections going on. The doctor who's a great surgeon, his name is DR. MARION JORDAN, J-O-R-D-A-N. He's an excellent doctor and in fact he has been named the President to the American Burn Association and it's a year-long tenure. He'd actually had been designated to take that position prior to Sept 11th. Then of course September 11th hit and he was, had a quite busy fall and just this past April he was named President of the ABA. He's a great surgeon. He was very much perplexed about what to do with me. To the point where I was told they were doing video conferencing, teleconference, to find out and strategize with other doctors around the country how to treat my infections, because my infections were just kind of off the charts with what they knew how to treat. So they were trying everything.

I've seen very special kind of unique, exotic antibiotics and everything that they could think of to cure that. For my arms that treatment actually led to the use of live maggots that they used. That's not a new treatment, but they've used those for probably centuries, but the maggots were put on my arms and they're cultured and grown in such a way that they're grown in a laboratory. They're not caught from nature and they only eat dead infected flesh. They don't touch healthy skin or flesh. I had no skins on my arms, actually I mean they're all completely grafted, so it was the flesh and inside the muscles and everything. So they put these things on. It was kind of a, it

was a no-brainer decision for me. I was definitely aware of it when they were doing it. I know that my family and my wife were very uncomfortably with it, but I just said, you know, "If it works, it works." That was kind of my you know, just one thing that came along after another. Just trying to make it by day-by-day and I just said you know, "Go for it."

So we now don't call them maggots, we called them, we decided to nickname them "Medicals" To give them like a less grotesque name. So they put the "medicals" on my arms and they chomped away for a good two or three days. Took care of some of the infection. Didn't beat it, and then actually I started getting worse. My lung damage, I had very bad lung damage. They put me on a bed probably about three weeks, so we're talking now early October, maybe the end of September actually, just a few weeks after. Put me on this bed. It was a rotating bed where the bed flips all the way over, almost, you know almost rotates completely over and then flips back the other way. I was essentially strapped into that bed with like vice-grips on my hand. You know, strapped in; enlodged in this bed. Mind you now I had all these burns so I'm on my back. My back is severely burned, my arms are all wrapped and I'm now flipped on this bed, this turning bed. What that does is you know, it forces the fluids accumulation and things into different parts of your lungs. Moving that around helps to you know, the stresses of that help heal and make the wounds stronger and then you know, try to fight it that way.

I was on the bed for weeks and it was really tolling. I knew that the nurses wanted me off of the bed. The, my parents wanted me off of the bed, but Dr. JORDAN you know kept me on the bed. They had me hooked up - immediately I was, from day one I was on a ventilator through a trach in my neck. They had to actually go to a new ventilator called a "Drayger" (phonetic) ventilator that is not used a lot by Dr. Jordan. That is a brand new ventilator for the worse cases, and they put me onto that. Put me on the bed. I just remember that bed was kind of, I mean it just really,

really effecting me, my spirit, because I you know, I was taking one day at a time, but the time after weeks and weeks of this rotation, the pain, and it was just getting to be almost too much and I think by the time they actually took me off the bed I wouldn't have been able mentally to handle it much longer.

Q. (01:00:54) Was that a product, I'm sorry to interrupt, but was that a product of the fact that the bed sort of, how fast did it make it's turns first of all?

A. I mean it was very constant speed, but it took maybe, maybe about 45 seconds, not quite a minute to make a whole rotation over and then a rotation back, so.

Q. (01:01:09) Did it do that constantly?

A. Constantly, constantly, unless they, see that was constant –

Q. (01:01:18) Did you sleep.

A. At the beginning, well, sleep was kind of in and out kind of thing. At the beginning they would do dressing changes and that sounds kind of you know neutral enough, but dressing changes were terrible, because and they would start off doing four a day and then they got down to two a day and then once a day toward the end of my stay. But the four a day involved you know, involved stopping the bed and then essentially taking off the dressing that they had on my arms. Then they have to wash your wounds. They have to wash your burns with you know detergent and things to try to disinfect. They wash using you know like scrub brushes and wash cloths. So at the beginning they had used, and I don't know all the technical names for these, but

they used, I don't think it was cadaver skin, but it was synthetic skin on my arms to kind of initially put the cover on.

Then they switched to, I believe it was pig skin actually, and then but throughout that and then 'til they could put my own autograph, which is my skin, from my legs on there was times in there where I had just no skin on my arms or on my hands, and it sounds, I mean it's amazing that, but the way that they wrap you in these clothes that had ointments on them. They would always wrap you up in that and then put bandages around it, that was my skin.

But during the dressing changes they took you down to nothing and scrubbed away, and then you know, roll me over on my side to do the same for my back and then so that was terrible. So between the dressing changes, the many surgeries, the debrisment and they were in, they took out by gallbladder. They were very concerned about my internal organs, because of the infections. They just started to really get, kind of a domino effect, the organs started to have problems, my organs. So that was really hard between the dressing changes and the bed.

Q. (01:03:39) Was the bed emotionally and psychologically a problem to you because it in effect sort of kept time for you, that it was sort of a drag?

A. No, it wasn't that. It was just incredibly painful.

Q. (01:03:51) OK.

A. If was painful and I mean I would have had enough problems mentally and psychologically just lying on a normal bed, but this you know with my arms out, my arms in such pain, it you know, even though I was strapped in and I had these vice grips on my head, it couldn't, it was, it wouldn't - it's almost impossible to hold someone down correctly on a bed you still have a lot of

forces on your arms and things pressing against you. So every time it would move you know that was very uncomfortable. The cups that they had to place on my ears and then apply a lot of pressure to those cups to hold my head in place, that was extremely painful because I had bad burns on my head. In fact, you know I've lost part of my right ear, because you know, just because of the burns they just died and fell off. But at the time you know, my ears were very raw. I had burns all over my face. They shaved my head, and now I'm in this. They have these cups on my ear and they've got a lot of ointments and creams and things to you know, but it was, so I was very slippery anyway up there and just the bed was just, it was a nightmare.

But it did save my life. Dr. JORDAN really stayed the course. He kept me on that bed for a good week or two beyond when they wanted. When I could you know, I was conscious of the mood or the attitude of the nurses and my family about wanting to get me off of this thing, and he stayed the course, and I didn't like him for it, but I know that that definitely saved my live.

Since then I've known that this is not, this is nothing good and they should never do this, but they had a nickname for that bed. Prior to me coming to the hospital, and it was called the "death bed," because typically when they put someone on that, their lung damages is so severe they, their odds of making it aren't that great and that's where I was.

Q. (01:05:51) Have they renamed it now?

A. I don't think they've renamed it. That was never anything official. It was never an official name so. A couple of the nurses did tell me that. So I've got kind of off and on moments of memory in the ICU.

Q. (01:06:04) Could you talk to people when you're on the bed?

A. No, I was on the ventilator, so the ventilator through my trach, you know I couldn't talk, I could lip, I could just lip words. My wife became the best lip reader in the world, because everything that I would say would you know, she had to read my lips. Certain people were able to read lips and certain people weren't. My father was notoriously bad at reading lips, so he would never, he would make me very frustrated because and I was very drugged up, but I'm trying to communicate. My dad does not understanding me. My mom and my sister were a little bit better but not much so, the main task of communicating fell through me communicating through my wife, which was actually really nice, because she, knowing that she got everything and that what I was saying was important.

I remember a lot more then I think your typical patient remembers from the ICU. I've gone back to visit with the nurses and talk to them and they actually say that the things that I remember in the ICU, typically a patient may not even remember anytime spent in the ICU. And I do know that a couple of the patients who spent time in the ICU think that they were only there for a very short time, when in fact they were there for weeks and weeks. But so I do have a good memory of a lot of things that happened.

Again the operations, I had many operations. More then a dozen during that time and I think I remember the operations being kind of like a horrendous nightmare where I was conscious in my mind, psychologically and because I have since learned, I mean the voices that I would hear in my dreams, they were quite bad though, the good force in it was the voice of DR. JORDAN. Now I had no idea that it was him, but you know now I know him very well and I can tie that into him. So I had various levels of memories during that time.

Q. (01:08:15) All right, I think, anybody else want to ask any questions about that ICU period?

You're in hospital then until when?

A. Three months and three days.

Q. (01:08:22) Three months and three days.

A. So December 14th.

Q. (01:08:25) December 14th you're released for Christmas. You come home at that point.

A. Yes. I had been transferred down to the step-down unit, we call it, just before Thanksgiving and that's the unit that you get moved to and it's actually a physical move too. You go down a floor and that's where you're doing a little bit better. They upgraded my condition. I was critical the whole time in ICU and they upgraded me to serious down in the step-down unit and that's when I started really working on my physical therapy on a daily basis. But I should say too that from that very first week actually they had physical therapist working with all of us up in the ICU. So I mean I had these terrible you know burns and bandages on my arms and they were having to you know try to move my arms, try to move my hands and things, and so I had been doing those from the very first week. But I'd gotten obviously to another level just before Thanksgiving.

Q. (01:09) 21) When were you first able to walk and get up out of bed yourself?

A. I was walking in the ICU, and I don't remember the day that I first walked, but I think it was probably the end of September, within a couple of weeks.

Q. (01:09:36) OK.

A. And I say that trip was probably a ten-foot trip, and then back to the bed. It was all I could do. I mean I'm walking with a ventilator tube, two nurses holding me, but they did you know they want to get you out of that bed as soon as possible, and up and walking around so toward the end of my stay in the ICU you know I would do laps around the nursing stations and on a good day if I could do three laps, which wasn't very far, that was a big accomplishments. By the time I actually left the ICU, I probably could have done nine or ten laps.

So they had me up and moving and in physical therapy right away, which is a real important thing. There is one other thing, when I was in the ICU on October 4th, I mentioned I had these bad infections and on October 4th was a really bad day. My body, I believe the condition's called septic, I started going septic, because just, the infections were affecting my organs and then I was losing my oxygen percentage in my blood. The machines were saying you know I was heading toward a bad place, and ended up during that day having two separate cardiac arrests.

Q. (01:10:54) Do you actually remember that day.

A. No, that day is, I don't remember anything of that day. I remember the day before going into like a hyperventilated state, because they were getting me up to walk, and for some reason I was just terrified of walking that day. And when they did try to eventually kind of get me up, I was like hyperventilating beyond control. I was in kind of passed out, and I remember that as being like really bad and then I have this very long period of dream, of nightmares and then, but so I know that day was October 4th because that was the day I got medically retired from the Navy. Because at the time, the way that the laws were, it actually was more, my wife would receive more benefits if I passed away having been medically retired, vice passing away on active duty,

which is really stupid, but, so they advised her that evening after I had two separate cardiac arrests. They had to paddle me back to life with the paddles. My surgeon had to do that twice that day. He told her that he didn't think I was going to make it through the night and that it would be probably best to sign the paperwork. It was all ready to be signed, so she signed it and that was day I was medically retired.

Well, that late afternoon and evening I guess they had given me a drug that paralyzes you to keep you from you know flopping around and hurting you and so, they gave me this drug. I was paralyzed, but my eyes were open and there were, so there were lights right above the beds, so to have, you know to give me some comfort, even though I was out of it. Didn't realize or remember any of this, but they taped my eyes shut.

So on the morning of October 5th my wife was in the room with the nurse, and that's when I awoke and I couldn't figure out what was going on. I was asking her, you know, mouthing "What's the matter? What's on my -," You know I couldn't pull it either because my hands were you know like this, but "What's going on with my eyes?" and they took the tape off and I was fine on October 5th. I asked what was the matter you know. "What's the matter? What happened? That day I just started feeling better and I started physically healing much better from that day on, so it was kind of, you know it was a miracle. So there was actually up to that point there are many miracles.

There was the miracle of surviving the initial blast when no one else made it, and I'm talking, my cubicle mates, those three guys were you know not much further apart then we're sitting right now. Just feet apart, and all those guys were, were probably killed instantly.

The second miracle, getting out of my space, you know, just getting out of a hole that you know a door that shouldn't have been there, a hole in the wall.

And then the miracle that day of surviving October 4th and then to kind of really not just surviving it, but then turning around the next day and kind of turning the corner and you know toward progressing past all this.

Q. (01:13:58) Can I ask you, Kevin, did you ask your doctor what he did to prevent that septic condition from getting worse? I mean how did -

A. They didn't know, they didn't actively do anything. I mean what they were doing was the same antibiotic treatment, My condition started degrading on October 4th and they didn't know why. That was the big mystery. He told my wife in fact, because I mean, because this is a process. You know I wasn't in good condition and then had a bad day. You know I had, you know I was progressively getting worse and that's when they were actually trying to figure out how to treat me. So they had been working on that for a long time. You know, October 4th which was kind of the culmination of all that and they didn't know what to do. I mean my oxygen level in my blood was down in the 20s and they knew that my organs were going to start shutting down. My heart was obviously having a hard time, and that's, you know, why my heart failed. My heart stopped.

He said, "Well there are times, well as a surgeon as a physician," you know, "I don't have all the answers and I don't know what's going on in this case."

But kind of an, so it's there are some positives out of that actually. A really moving story for me was ADMIRAL CLARK, the CNO, told me on the evening of October 4th, he received a report that day of how bad I was doing. ADMIRAL CLARK received it during various times from daily reports to every other day to a couple times a week, but always these reports on my condition.

So he knew and very was up to speed with how I was doing. Well, he knew how I was doing and that I was doing so poorly on the 4th and he and his wife were at, having dinner with some friends that evening and he told me that at the end of the dinner, you know, they couldn't do much but talk about me. And at the end of the night they held hands around their dinner table with the other couple they were with and they prayed that you know that I'd pull through the night.

And so, yeah I did, I mean so the 5th you know I was better.

Q. (01:16_15) You mentioned the visit by the President and the first lady. Who-obviously your family and your wife [REDACTED], who else came and visited you. Do you recall?

A. Yes, Secretary of the Navy came. Secretary of the Army came. The Chief of Staff, the Army. Obviously the whole chain of command from the Navy you know, ADMIRAL CLARK, ADMIRAL FALLON, ADMIRAL KEATING, but mainly ADMIRAL CLARK AND ADMIRAL FALLON were the big visitors. Master Sergeant of the Army –

Q. MCPON?

A. Not of the Navy no, I don't think I ever say him. The Vice-Chief of the Army, General King he was a great visitor.

Q. (01:17:04) When you say a great visitor in what way?

A. Just, there were some visitors who were just really positive in motivating. I don't know how, everyone was obviously there concerned about my condition so I was thankful that they were visiting. But some of them just had a way about them, a spirit about them that motivated me with their attitude and you know, their positiveness I guess and so that was, General King, in

particular was a wonderful - and ADMIRAL CLARK and ADMIRAL FALLON were both right up there in terms of helping me not just get through those days, but days thereafter.

Q. (01:17:53) When did you get off the ventilator?

A. I should know this date, and I don't. My wife does, I know, because that was the day I first spoke throughout the whole process. I want to say, want to say I got off the ventilator toward the end of October So it was almost, probably, no, I should, probably the beginning of November, so almost like two full months on the ventilator.

Q. (01:18:21) Do you remember when you went back on solid food?

A. Yeah, it was actually right before coming off the ventilator. I went back on solid food and the first thing that I wanted to eat, and that was toward the end of October, I wanted a smoothie. I wanted a peach smoothie. That was a whole other kind of aspect of this hospital stay, was obviously I wasn't on solid food. My stomach couldn't handle any of that. My organs were still kind of swollen and they were all very delicate. I couldn't even drink water so I had the ventilator on and I was getting all of my nutrition through IVs and I had a tube that they put through my nose, ran down to my stomach and would feed me liquid food like that.

I think a combination of not having anything to drink for a long time, but my burns, too, were kind of psychologically I needed water. And I was always thinking about water. I would dream about water. I would try to close my eyes and whenever I did think of something, the first scenes would be of water, and I wasn't allowed to drink anything and I was going crazy and finally talked them into letting me like suck on ice cubes, chips of ice. There were times when - my sister and [REDACTED] were kind of a team. My sister is 27 you know, [REDACTED]'s 29 so they were like

this team and they would get like apple juice and orange juice and put it in the ice and then I could suck on the ice, so it would have some kind of flavor. So I couldn't swallow even that little bit. I'd have to, I'd have to spit it out, so I kept doing it you know/ I'd do that all the time and it was just on and on and on for days, but you know, that few minutes of having something in my mouth was amazing.

To go back to thinking about water. When I was in the hospital in IC not doing well, you know I was on this bed for a long time and I was, when I would close my eyes I would try to think of something good, but I couldn't you know. I'd always see like a sailboat on the water and then all I could see was fire. For long - so I could only see those nice spots for like a second or two and then it'd just be replaced you know by fire and things moving quickly and stuff like that. So that was pretty bad, that lasted all the way until I got home, actually. I couldn't see so I would ask, when it was really bad, I finally I asked my wife to go out to a book store and I told her to buy those pictures books, you know they always have them on sale at Borders or whatever, that have the, you know, they're just landscapes or books on the ocean, and you know they're on sale.

I mentioned on sale, because I told her not to – get the ones that are on sale, because I wanted them to cut them up. So I wanted them to cut up the pictures and like hang them around the room and stuff. That was really big for me. That I could see things because my own mind wouldn't allow me to recall, kind of focus on something nice, so they would, before they cut them up they actually would take turns, my parents, my sister and [REDACTED] would take turns holding the book as the bed would kind of rotate. I had like a good thirty seconds to look you know, at the book, at the pictures. So they would look, I'd look on this side of the bedroom, they'd run over and show me other pictures on this side and I'd roll back and it was all my strategy to try to you know put some good images in my head. So it kind of worked.

Q. (01:22:11) Sorry, I'm reminded of the cartoon and forgive me please, but it's of Tweety Bird and Sylvester when they're on the boat and Tweety Bird holds up a boat and he starts going like this. He's trying to make Sylvester get seasick. Exactly the image that's going through. I'm sorry that's not a proper thing –

A. That's all right.

Q. (01:22:265) Did they read to you?

A. They did read to me. I couldn't really handle books just because of the medication that I was on. I wasn't that cogent I guess is the word. The best reading though was at night. We had some special times. [REDACTED] would come to my room. Visiting hours were supposed to be until eight o'clock at night, but I mean we never abided by that. So I'd have visitors until usually about eight and then my family would stay longer. But we would close out just about every day with [REDACTED] coming to my room you know, just saying good night. You know finishing the day and she would bring with her some of the emails and cards and letters that we had received. She would go through you know some of those with me. So whether it was emails, or you know a stack of cards, or some letters and she would read them to me and for that they would stop the bed, and let her just sit by my bed. So it was good in a lot of ways you know. I had the bed stopped, and then I was actually getting all this support from people and you know all the way from elementary school kids, you know writing these little cards, to, from my extended Navy family. You know people in the service who I didn't know, never met, you know writing these nice words of encouragement. Obviously my family and friends. So those were like really motivating times, because that got me through a lot of days knowing that the evening you know, I was looking forward to that.

So we did a lot of reading. She did a lot of reading to me that way.

Q. (01:24:12) She get to stay up there closer or did she stay here?

A. They did, no she didn't have to come down here all the time. They have a house called the Monroe house up at Walter Reed and it was a home that was dedi- it was like a mansion dedicated to the hospital and now they've turned it into rooms. So if you have family members who have people sick and are in that area, if they're from out of town they can stay there. So they stayed at the Monroe House actually on the grounds of Walter Reed. So even though I was in Washington Hospital Center they were able to stay there and then at the end, [REDACTED] started staying in-the hospital had several hotel rooms. Kind of like maybe fifty rooms attached to it that were quite nice actually and so she stayed there for the last couple of weeks. So she didn't have to come back and forth.

Q. (01:24:59) Right, Normally we end with some questions about lessons learned if you want to, do you have anything that you want to suggest about that? Personal, political your, you can say what you want.

A. Yeah, I've had the chance to speak several times since being home and so I had to put a lot of thought into what I was going to say and some lessons learned and I guess I get a few, just a couple. One lesson was obviously, you know you never know what life has in store for you and in fact we have a lot less control over our lives then we often think. And you never know, because of that, and leads to me to think and kind of feel that what we have control over, there are some important things and some not so important things. Actually what I like to say is the vital things in life, if you were to actually put them down on a list would just you know be a few

items long probably. And whatever that is - for different people its different - might be faith. It might be family. It might be friends, career, who knows, but if that's vital to you, it's a short list.

There are tons of important things in the world and in our lives, but their not vital.

Not to, at the exclusion of now focusing on what is important, but you know working the best that you can on the vital things in life and trying to alter those the best way you can is all you can do. That's kind of, this whole experience has focused me on that point. Obviously to me, my faith has been, and my wife, our family's faith has been strengthened throughout this experience. It's very nice, it's kind of a blessing actually I'd say to have such solid faith, knowing that without a doubt, you know, it removed all doubt, that's kind of a special thing. The power of prayer is something I always like to talk about.

I was aware through all these letters and people coming to visit that people were praying for me and you know, it - me personally I knew I could feel that and I knew that it helped me. So the power of prayer should never be underestimated.

Then I guess, I thought you know just letting the people inspire you, opening yourself up to being inspired. Not just being you know searching and being an inspiration for other people, but letting people inspire you. I mean you can find inspiration in a lot of different ways. Often in very unexpected ways in life. And that's really a blessing too, how I found that.

So those are some lessons learned

Q. (01:28L05) OK. Is there anything else that we've missed that we haven't asked you about that you'd like to? - ?

A. No, only that I guess if I had any kind of larger comments on the War on Terrorism, on you know looking ahead to the future, I would hope - you know people ask me, "Do you think that

people are forgetting about 9/11? You know I have mixed feelings about this. You know I would, I definitely hope that people, Americans don't forget about 9/11, and that we don't, it never leaves our consciousness, but as we get back to normal and as more time passes and we live our normal lives and we try to get back to normal, I think that's a very good thing, but that you know I just hope and trust that we never forget 9/11.

As the, I'm keeping up to date very much with current events and what we're doing and I just you know, it - I think we're on track. I think we're doing well and I think this is, you know over and over again you know you hear experts or people in the administration talking about how this is going to be a long term fight, a long term battle, and people just really have to prepare their minds for that. What's important is that we offer the support to people that are actively fighting this fight whether they be civilians or people in the military, but I would just hope that the country would you know, never forget to give that support, because it's going to require a different level of support, continued support.

I'm a little bit gun-shy about Washington DC. I would very much like to go back to work somewhere in the city. I would very much like to maybe go back and work in this new Homeland Security Department.

I'm very gun-shy about going back to DC. Before 9/11 hit DAVE WILLIAMS, LCDR DAVE WILLIAMS and I were, we were really close friends and you know last summer you know in July and August I remember having conversations with DAVE at lunch or you know at our Deck about my concerns over security. I had this queasy feeling. You know, I had worries. I'd ride the Metro and then I would have worries and things and you know obviously we never thought we'd get hit by a plane striking the building. I worried about those things then and I worry about them even more now. So I'm just a little gun-shy, and I hope to get over that.

Q. (01:30:31) Have you been back into the city?

A. I have been back. In fact I mean I had to go to physical therapy three times a week. Washington Hospital Center's up kind of in the north, northeast corner and I had a driver, because I wasn't driving for many months and so for three days a week the driver would come down here and pick me up and we'd go up there. So I'd drive by the Pentagon you know every day almost, and that didn't bother me so much because we're kind of on the periphery but I mean probably no safer then I would have been you know walking on the mall, but so and I've been back to the Pentagon now twice. I was back once to kind of have lunch with STEVE and then I was back for a Purple Heart ceremony that you all attended. So I'm trying to get over that.

We, I mentioned [REDACTED] read letters to me and emails and things. Well, of course the anthrax scare hit you know when that hit in the fall, and I became really worried. It's funny what I worry about you know I say, "buy the books on sale, " and you know and I was worried about this mail. I was worried about [REDACTED], because I know she had hundreds of letters if not thousands accumulating in boxes in her hotel room and I was just, I was just really worried about her and about us you know having this mail. She said, you know, "Kevin, we are not going to let this scare us into, you know, the state of fear or living our lives differently. We're just not going to." She said, "Look I refuse to let that happen." And she's been a very, you know, amazing source of strength for me, because I definitely need and would like to be able to take that attitude to coming back up to the city.

Ironically her, her next job that she's going to is in off of Nebraska Avenue, up at SP headquarters, so that's very close, so we're more then likely going to move back and move up closer to the city, if not in the Virginia area then Maryland. So I need to get over that and you

know there are a lot of things that I would like to do, but I maybe need to have a little bit more time before we do that.

Q. (01:33:00) I do have, I was going to ask you where do you go from here? You've kind of answered that, but I want to, from your motorcycle accident recovery here in the Pentagon, situation on 11 September, and again the episode on the 4th do you have a sense of destiny?

A. I don't only because I don't necessary believe in fate and destiny per se. I don't believe in luck either. People say how lucky I am. I don't feel that way at all. I say I'm fortunate, but do I think that God has a plan for me? Yes, I don't really think of that as destiny you know, because destiny maybe has some grander connotations with it. If my, if you know if I'm here just to be like a good husband or someday a good father, or you know much smaller scale then some kind of grandiose destiny thing, then that's why I'm here. So I don't really think of that too much. You know, people say God has a plan for you. I definitely agree with that. That's how I feel, but you know beyond that for me that's why I tied in those things that I've learned. For me it's just important to focus on those things that we do have control over and what's vital in life, and this is really calibrated I guess by priorities and thinking, and if you do all these things and if great things come fine, but if not, then you've done all those things and that's good and that's all you can do. So.

Q. (01:34:39) Anything else? All right. Thank you very much.

A. You're welcome.

Transcribed by:
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