Dr. Norman Rich decided his career path early in life, listening to the doctor who delivered him relay the horrors of the amputations of World War I. “Someday, blood vessels will be repaired,” he told me,” said Dr. Rich of his early mentor, Dr. Otto Utzinger of Ray, Ariz. “And I thought, ‘I’d like to be involved with that.’ It set my career!”

He perhaps never dreamed as a young boy and man just how closely he would come to be associated with vascular injuries as well as treatments that would save a leg savaged by vascular trauma, avoiding the amputation that had so disturbed Dr. Utzinger.

Dr. Utzinger was just one of Dr. Rich’s mentors. Others include some of the giants of vascular surgery: Drs. Michael DeBakey, Carl Hughes, Frank Spencer, Emile Holman and others. From them Dr. Rich was exposed to some of the groundbreaking treatments of vascular trauma drawn from necessity on the battlefields of World War II and Korea. These ranged from Mobile Army Surgical Hospital units close to battlefields, quick evacuation via helicopters and abandoning ligation in favor of arterial repairs, saving many legs from amputation.

Dr. Hughes had, while serving in Korea, cataloged on a large piece of cardboard the vascular cases he treated. Dr. Rich himself cataloged his own vascular trauma cases and later created the Vietnam Vascular Registry, a formal database of vascular injuries surgeons in Vietnam saw over the course of approximately eight years. Developing and maintaining the Vietnam Vascular Registry of injuries for more than 7,500 people, said Dr. Rich, is one of his proudest achievements.

Each person treated for arterial and, eventually, venous injuries received a registry card. Within the registry, individual records included the progression from injury through treatment through evacuation until point of discharge or entry into the VA system; many records even include notes from the original battlefield doctors.

“A Marine Corps general told me, in the middle of the mud, in the middle of the monsoons, ‘If you can make something good out of this horrible mess, go to it,’” said Dr. Rich. “He told me the Vietnam Vascular Registry was my chance.”

Dr. Rich’s goal was to:

- Document the details of the injury as closely as possible
- Obtain and add long-term follow-up to each entry “to see if what we did worked.”
Beyond arterial injuries, the VVR also cataloged venous injuries. “No one had had much interest in that,” Dr. Rich said. “But I kept saying, ‘Blood flows in a circle. It goes back to the heart through a vein.’” This addition led to some significant surgical treatments and saves. “I felt very good about that contribution,” he said.

He served at Walter Reed, including as head of the vascular surgery service at Walter Reed Army Medical Center, and then was tapped to found and chair the surgery department of the Uniformed Services University of the Health Sciences in Bethesda, Md., a kind of academy for military physicians. This long-term posting — unusual for military personnel who tend to move around a great deal — enabled him to maintain the VVR.

The registry has had a lasting impact. During the first Gulf War, Dr. Rich was told, “You know, that database might be of value. Weapons haven’t changed that much, and treatments haven’t either.” Interest in his registry increased.

Dr. Rich teamed with Dr. Frank Spencer, whose work in Korea revolutionized treatment of vascular injuries, to write “Rich’s Vascular Trauma,” which included VVR statistics collected up to that point. Two editions have followed, with additional statistics; the second with Ken Mattox and Asher Hirshberg of Houston and the third, by Todd E. Rasmussen, MD, FACS, and Nigel R. M. Tai, QHS, MS FRCS (GEN), includes civilian and international statistics as well. “It makes me very glad that there has been some legacy to the registry,” said Dr. Rich.

He downplayed his own overall role, saying, “I was merely a scribe for 600,000 young American physicians who served during an eight-year period in Vietnam.”

Beyond technical information on injuries, treatments and results, Dr. Rich’s registry has accomplished important human connections as well. The records have led to more than half-a-dozen soldier reunions. For example, not long ago a U.S. Department of Defense article related the wish of a former Army Specialist to thank the surgeons who had treated him in Vietnam in 1969. John Fogle had kept his VVR registry card through the decades, and with it, Dr. Rich was able to access Fogle’s medical records, including the names of his doctors. Fogle and one of his surgeons met up in May.

Dr. Rich is now retired from the Army and from his career. His registry remains a passion. “My remaining job, is to pass my knowledge on to someone else who would be interested.”

**Article Date:** Friday, November 16, 2018  
**Author:** Re-posted from the November 2018 issue of Vascular Specialist  
**Tags:** Vascular Specialist  
**Article Type:** Article