**INTERVIEWEE:** Jan Herman

**INTERVIEWER:** David Winkler

**LOCATION:** Naval Historical Foundation

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**WINKLER:** Okay. This is Dave Winkler with the–here at the Naval Historical Foundation. Today is February the 23rd?

**HERMAN:** 25th.

**WINKLER:** 25th. 2015. And I am here on behalf of the Oral History in the Mid-Atlantic Region, OHMAR, to discuss the career and recollections of the 2015 Pogue Award winner, Jan Herman, who recently retired from the Navy's Bureau of Medicine. Jan, congratulations on your award. And I'd just like to open up and ask you a little bit about your background, and how you got into the history profession and then, you know, at the Bureau of Medicine. How'd you get into doing—become a professional historian?

**HERMAN:** Okay. My background, I grew up in Babylon, New York. Went through the Babylon school system, and went to the University of New Hampshire, where I got my bachelor's in history. And I was also a Ford Foundation Teaching Fellow with the university. And so they paid for my last two years of undergraduate and two years of graduate school. Right around the time I was in graduate school, I got a note from the government saying, "Greetings. We'd like you to serve your country." And at that time I enlisted in the Air Force, and I spent four years as a dental technician in the Air Force.

As I always like to say, [. . .] if winning the war in Vietnam depended on winning smiles, then I was doing my part. Winning smiles apparently didn't help that much. But nonetheless—

**WINKLER:** But you do have outstanding teeth.

**HERMAN:** I have good teeth.

WINKLER: Yes.

**HERMAN:** I know how to floss. Anyway, I ended up working for the Navy. I went to work for—actually didn't start there. I started at the State Department. I stayed in Washington [DC] after I got out of the service. And I was at the State Department for five years. And then I heard that there was a job opening with the [US Navy Bureau of Medicine and Surgery]. [For the] editor for their medical journal which was called *Navy Medicine*.

**WINKLER:** And what year was this about?

**HERMAN:** That was '79.

**WINKLER:** Okay.

**HERMAN:** So I came on board as the editor of the magazine. But shortly after the Surgeon General of the Navy, who was my boss, heard that I was a trained historian and I had a degree in history—a master's degree at that time in history and wanted to know if I would also like to have—play the role of the Navy Medical Department's historian. So I had two jobs, one as editor of the magazine; the other as historian of the medical department. The advantage of being the editor of the Navy's medical journal was . . . since I was the editor . . . I rarely gave myself a rejection notice. So I found a nice forum for publishing articles on the history of Navy medicine.

Since I was already a historian I began focusing my attention toward maritime history, specifically Navy history and more specifically Navy medical history. So I began publishing articles in the magazine. It was rather—when I arrived it was rather a dry journal. Typical journal that you might expect from an outfit that specialized in medical issues. I recall the first issue that I looked at. The primary article was called "Painful Punctate Foot Clavus." And the following issue had an article equally as interesting . . . "The Nightmare of Necrotizing Ulcerative Gingivitis." So I thought that perhaps putting a few history articles in along with these clinical directed pieces might be something the readership would enjoy. And it turns out they enjoyed it a lot.

So each issue there would be at least one article on the Navy's medical heritage. Whether it was the identification and autopsy of John Paul Jones, or other subjects connected with conflicts that the Navy had been in over the years. There was always an issue. There was always a medical article—or history medical article in each issue. Somewhere in the early eighties—I think it was around 1982, as I recall—I had been reintroduced to a story that I had heard when I was a young boy growing up. And one of the Navy chiefs that was working at the bureau kind of took me aside one day with his coffee cup, and he began telling **<T: 05 min>** me the heritage

of Navy corpsmen and how—what wonderful things they had accomplished over the years. Great, heroic acts in wars that they had fought in and such.

And he reminded me—he said, "I don't know if you've ever heard the story, but, you know, a corpsman—a Navy corpsman actually during World War II performed an appendectomy on a patient aboard a submarine. And we're very proud of that. It's part of our heritage." And I remember asking him if he remembered the guy's name. Then the said he didn't remember the guy's name which was unfortunate, because suddenly I remember the story as it was told to me by my mother when I was growing up. That she recalls back in 1942 reading an article in *The New York Times* on the front page of the *Times* at the time when the war was not going very well for the US in the Pacific, the beginning of that war, and how a Navy medic, she called him—she meant a corpsman, of course—had performed this operation and had saved a man's life. And it made the front page of the *Times*. And it really was a great morale booster at a time when morale was pretty low, and we were looking for any kind of positive story to come out of the war.

So at that moment I decided I was going to find—if this corpsman were still alive, I'd find him. And [it] took me a good deal of time because it was the days before the Internet. And so I had to do the rudimentary research. But I ended up finding the corpsman, a man named Wheeler Lipes, and interviewed him over the telephone. Asked him his story. He was very eager to tell it to me. It was even more unbelievable than the story I remember. And then he and I became very close friends. I went to visit him at his home in Corpus Christi, [Texas]. And we spent many hours together. But that was the first that we actually took that interview and then published it in *Navy Medicine Magazine*. It was very popular.

And [...] this was a jumping off point for what became the BUMED Oral History Project. And each month I would try to find veterans of the medical department, whether they were corpsmen or physicians or nurses or dentists, and interview them and get their stories. And the interviews began building up and building up. And pretty soon we had transcripts on shelves from here to there. It was quite a variety. In fact, they were—at that time in the—it would've been in the early, mid eighties—there were still medical department veterans who had been in the Navy prior to World War II. So there were several people I interviewed from the thirties who [served on a] battleship . . . sailors, some of them. Some of them who served in destroyer squadrons, as I recall.

And the question arose, how many of these things could I publish in a magazine? There was limited space, and it—pretty soon *Navy Medicine* got to have more of a flavor of a history publication than a medical journal. So I had to be careful about that. Had to be more—had to be balanced if I wanted to keep my job. But certainly there was a great interest in these interviews. And as time went on, the collection, as I mentioned earlier got larger and larger. And it became apparent that as in most situations where you have an archives, where you have a room where you put these—you deposit these files, it became a matter of what are we going to do with these things? They're certainly available for researchers who are writing books on the subject, but how could we make better use of these?

And the thought came of perhaps writing a book based on these interviews, and starting with the most recent war, at least in my lifetime, which was World War II, when I was born at the very end of. [I] decided to do a series on Navy medicine at war, that being the theme, and beginning with World War II and telling the story of Navy medicine's participation in World War II and using these interviews. So I did. We published a book—I published a book with the Naval Institute Press in the mid nineties, '90–1997, called *Battle Station Sick Bay*. And then proceeded to do interviews with veterans who were a little bit younger—not much younger than the World War II vets, a little bit younger—who served in the Korean War.

So once I had completed a number of these and published excerpts from them in *Navy Medicine Magazine*, decided to write a second volume in the series. And it was called *Frozen in Memory*. And it was the story of Navy medicine during the Korean War. <**T: 10 min>** It only became a matter of time before these veterans would start running out, also. And my next supply would be the next conflict in my lifetime, which was really the one that I was around during and served in the service during, and that was Vietnam. And so I began doing interviews with corpsmen, physicians, nurses, et cetera, who served in the Vietnam War, and published some of those in *Navy Medicine*. But the majority of them were excerpted and were put into a third volume, which made the trilogy for the Navy medicine at war series.

Then the question arose—some of these interviews were quite good. I mean, they had all been done on the old recorders, the old reel-to-reel or earlier reel to reel but then later cassette recorders. But some of these interviews I recognized [...] were quite good. And I thought maybe it would be a good idea to perhaps, if I had the ability to do it, to go back and reinterview some of these folks. In other words, the ones that were really—that stood out in my mind as being really superb, why not get them on videotape? Because there I could not only capture their stories, but I could capture the emotion that went with those stories, their facial expressions, the emotion that they would show.

And fortunately I had the use of the audiovisual section at the Naval hospital at Bethesda, [Maryland], the National Naval Medical Center, the folks who produced training films for the Navy medical department, and got their cooperation. And we went on the road and started interviewing some of these folks again, but interviewing them on video. Later on that video would get a little bit more modern, and they would be digital recordings in the later years. But we ended up with quite a collection of these video interviews. And of course, the next question was, what do we do with all of these? We have all these wonderful video recordings of these individuals, and they were done professionally, so the quality was quite good. They were done by professionals.

**WINKLER:** But these guys . . . what do they typically do in their day job?

**HERMAN:** The guys who were doing the recording? They make the film. They make the training films for the Navy medical department on a variety of things, you know, audiology and going in the OR [operating room] and videotaping operations, using them for training purposes

and that type of thing. But not—they didn't really have a background in documentaries. Some of them had been trained, certainly had gone to school and had learned, you know, learned the format. But they rarely got an opportunity to do that type of thing until I came on the scene. And now they have an outlet for their creative talents, and some of them were quite talented.

So at one point we decided, or I decided and I got fortunately the backing of my bosses. My boss at the time was the Surgeon General of the Navy and was very interested in history. And so I said, "Admiral, I have an idea. What do you think of the idea of putting together a series of thirty minute documentaries on Navy medicine at war during World War II?" I only focused at that point—I wasn't looking at the big picture. I was focusing on World War II. I figured if we could make a documentary or a series of documentaries about World War II, that would be very satisfying if we could pull it off. And so we decided to begin at the beginning when the US entered World War II on the 7th of December of 1941 with Pearl Harbor. And we decided to make our first documentary based on interviews I had done of survivors of Pearl Harbor.

And we'd interview them on videotape. [We would] bring them to Washington or go [to] their homes, wherever they happened to be, and record them, record their stories. And then looked through the national archives and other sources for documentary footage that we married together with these interviews and, you know, create a script and put it together as a film. I was very new in the business, and the first effort which we produced in 1999 . . . a little bit dated now if you look at it and a little stiff. I was on camera as kind of the on-camera historian. We did have a professional narrator who did the narration, but I was on the screen and we decided to go on location.

I think I told you earlier about the first attempt to do it right here in the [Washington] Navy Yard on the [USS] *Barry*. And it was a total disaster **<T: 15 min>**. So we decided if we're really gonna do good job, we really need to go on location. And if possible, it would be fun to take some of these veterans with us to the places where they experienced their service. And so the first place we went was Pearl Harbor, and we did a shoot there a couple of days. Did a few scenes at the Arizona Memorial. Went over on the park service boat over there and shot a few scenes over there. Interviewed some Pearl Harbor veterans. And we put it together, and it was the first. It was called *Navy Medicine's Trial by Fire*: *December 7th*, 1941. That was the first in the series.

And now we had what we thought was a successful attempt to make a documentary. And now we would make a second documentary. And the second one was a little bit out of chronological order, but it was about Navy medicine [on] D-Day at Normandy. Of course, there were a lot of folks who looked at that historical event and realize that it's really an Army story for the most part. The Army lands on the beach at Omaha and Utah and et cetera, and they create a beachhead. And then they start moving, and, you know, they invade the continent successfully. But the fact is, it was the Navy who got them there. And I was surprised to learn that there were Navy people on the beach at Omaha and Utah, also, a beach battalion.

And I ended up interviewing a bunch of these veterans who served in the Fifth Naval Beach Battalion at Normandy. And so we went to Normandy, and we took one of those veterans with us, a Navy physician in his—close to ninety years old. Took him to Normandy and had him tell his story on the beach, on Red Beach, where he came ashore. That was a very—we considered that a very successful documentary. And then number three was about the . . . prisoners of war and those Navy personnel—medical personnel who were captured by the Japanese when the Japanese invaded the Philippines. And so we were able to find at that time a number of them who were still around who were willing to tell their stories, including a group of Navy nurses who were captured in Manila and were held or interned. The distinction being internees rather than prisoners of war, but their experience was not much brighter than those men who were captured.

But these nurses, all eleven of them survived the war, survived captivity and were rescued in the great raid on the 23 of February of 1945, the great Los Baños raid that freed the nurses and a whole bunch of other people. We called that *Guests of the Emperor*, that particular show. Half-hour, again, like the others. We enjoyed making it. We ended up going to the Philippines and taking a former prisoner of war with us, Dr. Fred Berley, who was a Navy surgeon who was captured at Corregidor. And when we took him back, he was ninety-two years old already, a very spry ninety-two. In fact, he died just two years ago at age 101, which is a quite remarkable feat for someone who had been through Japanese prison camps and the torture and the privation and everything else that he suffered.

So we made that film. And then, uh, that was number three in the series. And then number four was called *Battle Station Sick Bay*, which is the same title as the book, in which we examine the experience of those veterans who served at sea aboard the ships, mostly in the Pacific. Those who served on carriers and destroyers and smaller vessels [...] and cruisers and the like, submarines. In fact, that's when I got a chance to tell the famous story of Wheeler B Lipes, again, my good friend who had performed the appendectomy aboard – well, back in 1942. And we interviewed him again, this time on videotape. And he tells his story.

We were able to use the USS *Cod* in Cleveland, [Ohio] as our location shoot for me being the guy on screen telling the story of what it was like to serve aboard submarines as a corpsman back during the war. That show again, *Battle Station Sick Bay*, that was number four. And then number five in the series was called *Steppingstones to Tokyo*. And it was the story of those <**T: 20 min>** medical personnel who served in the long island campaigns on the way to conquering the Japanese in World War II. So we were able to go on location for that also. We went back to Okinawa. We went to Iwo Jima. We shot some scenes there, Iwo Jima, on Mount Suribachi and on the invasion beaches. One of the great thrills of my life was to be there on the beach all by myself and feel the ghosts, literally. I've never felt the same feeling on any battlefield I've ever been to that I felt at Iwo Jima.

So shooting those scenes at Iwo Jima and then telling the story of how that happened, and then going to Saipan and Tinian and those islands. And telling the story of Navy medicine in the fight to win the war in the Pacific. And then there was one final version that we finished in 2010, which was called *Final Victory*. And it was the Okinawa campaign and the kamikaze

attacks and how corpsmen dealt with that aboard ship with the consequences of kamikaze attacks and the dropping of the atomic bombs and the final victory in World War II.

So that's how I was able to use those oral histories. It didn't end with World War II. It didn't end with the series because I had a chance to write another book about a Navy destroyer escort that rescued thirty thousand Vietnamese refugees at the end of the Vietnam War. And that book was called *The Lucky Few*. And my boss, the Surgeon General, felt that that story was worth telling on film, also. So I was able to create one last documentary while I worked for the Navy, which—of the same title, *The Lucky Few*, which came out in 2010, the story of the USS *Kirk* and its rescue of the Vietnamese refugees.

Ironically or coincidentally, that story became the basis of a film that's just come out, a film produced by the filmmaker, Rory Kennedy, called *Last Days in Vietnam*. And *Last Days in Vietnam* is a more general subject study of us, the United States, leaving Vietnam in 1975. But much of that film is based on the story of the *Kirk*, the USS *Kirk* and its rescue. So it's been good to feel that I was part of that, helping Rory Kennedy in some cases to help her find people to interview and that. And the film was up for an Academy Award – didn't get it – for best documentary. But it was nominated as one of the best documentaries of 2015.

So the legacy of the oral history project kind of lingers. And those are my immediate memories.

**WINKLER:** So during your tenure you also had some noted interviewees. For example, wasn't Dr. Heimlich a–had a Naval affiliation?

**HERMAN:** Yes. Dr. Heimlich, Henry Heimlich was a Navy physician in World War II. He was stationed in inner Mongolia as a part of an effort to set up weather—the Navy setting up weather stations in central Asia. He also provided assistance in having the, the Chiang Kai-shek government—the Guangdong government in China at the time was fighting the Japanese along with us—in setting up a medical department for the Nationalist Army. And I heard that he had been a Navy physician, and I decided it would be a wonderful thing if he was agreeable to do an oral history with him. One of the great physicians of the twentieth century, certainly. Someone pointed out that he was probably one of the most famous physicians in the world.

They say having your name in the encyclopedia is considered to be quite an accomplishment. But pointing out Dr. Heimlich has his name in the dictionary, that's even more of an accomplishment. So needless to say, I was very honored to be able to go to Cincinnati, [Ohio] and interview him. And I was, of course, Dave, you've heard this story. I'll truncate it a little bit there. I was quite intimidated with the idea that I was going to interview this fellow of such profound fame and accomplishment. And when I went to his office I sat down and put the lapel mic on him, and we began the interview. Or just before the interview kind of breaking the ice, so to speak.

And I asked him a question. I said, "Dr. Heimlich, I understand your wife's name is Jane. Is that right?" And he looked at me rather puzzled and said, yes, his wife's name was indeed Jane. <T: 25 min> [. . .] I asked him—I said, "Isn't she the daughter of Kathryn and Arthur Murray?" And he looked at me puzzled and said, "Yes". He nodded. "Yes, she was the daughter of Kathryn and Arthur Murray." And then I said, "Well, Dr. Heimlich, your wife Jane and my uncle Dave Brock are first cousins." And he looked even more puzzled. And slowly a smile appeared on his face, and he said, "Well, I guess then you're family." And I said, "I guess by marriage we are." And so that broke the ice.

And rather than in my one-hour interview, we spent all day together. And I was invited home to his dinner—his house for dinner. So it was quite an honor to have dinner at the table of the great Henry Heimlich. Of course, I had to make a slight fool of myself by saying that I appreciated being there at dinner. And I thought that if I should choke, I would have a pretty good chance of coming out of there alive. And he looked at me, and he said that he had a confession to make. And that he had never actually done the Heimlich maneuver on a patient, anyway, a patient who needed it. So he wasn't sure I would make it out of there alive if I choked.

But he stands out as being one of the greats. I did have an opportunity in my career to interview two Navy astronauts . . . one who served as the first American physician in space, a guy named Joe Kerwin, who went up on Skylab Project back in the early seventies. I believe it was 1972, '73 when he went up into space, becoming the first American physician to be there. And at that interview, of course, asking the kinds of things that everyone dreams of asking an astronaut. Number one, "Do you guys really drink Tang?" And number . . . "How do you go to the bathroom in space?"

And then later on, many years later, interviewing Navy physician, Jerry Linenger, who was a shuttle astronaut and also spent about six to seven months on a Russian Mir space station. And getting his story prior to going up on his shuttle missions and stories when he came back from his mission on Mir. And having the honor of being at both launchings at Cape Canaveral, [Florida]. At the time he launched I was his guest. So being there at a early morning launch and seeing the space shuttle go into space was, again, one of those thrills that you couldn't do this if you had any other job. You could not do this stuff. So I consider myself very, very fortunate.

**WINKLER:** One of the thing—you know, you have a history degree. [...] But, you know, medicine is kind of complicated. Is there a—your knowledge of the field, I think it helps that you were editor of a medical journal, so you get some familiarity with procedures and terms. [...] How do you prepare over the years so that you can converse intelligently with your subjects?

**HERMAN:** Well, I think, what you pointed out, the fact that I was editor of the medical journal for many years. I would get involved with the articles and with the authors of those articles and trying to get them to explain it to perhaps maybe not quite as professional audience as they were normally used to. I always pointed out that *Navy Medicine Magazine* had a wide constituency.

We not only had physicians, but we had nurses and hospital corpsmen and medical service corps officers. And we had a lot of civilians who worked for Navy medicine.

So if they would write an article, could they try to put it in terms that would not at all denigrate or take away from its professional quality but would make it a lot more understandable? Well, that's easier said than done. Because if you've ever worked with physicians, they speak a language all their own, and they write in a language all their own, which is not always intelligible. And as you may know, their handwriting is not all that great, either. But fortunately I was working in the age of the computer, or at least the typewriter, anyway.

But we spent long hours—and I made many friends among — in the medical community and all the branches of the medical community. So I got an understanding of it. I spent lots of time over at the Naval Hospital in Bethesda witnessing procedures when they would allow me to do that, asking questions and studying certainly the history of medicine was a topic. I felt that if I were gonna be the Navy's medical historian, I had to speak with authority. I <T: 30 min> really needed to know this stuff.

So I spent many, many hours, days, months, whatever, reading the literature, some of it pretty dry. But certainly the history of military medicine and in particular maritime and Navy medicine I found very fascinating. So I was able to learn the lingo and ask the right questions, I thought. Sometimes I didn't ask the right questions, but they would give me the right answers anyway. I mean, they took pity on me.

**WINKLER:** Okay. You know, that's an important technique, to understanding your subject, to get that basic trust. And I – not that I'd ask you to perform an appendectomy, but I have a feeling that you might be able to pull it off. [laughter]

**HERMAN:** I certainly know the [...] theory of how to do it. I'm not sure I'd want to do it. I like to point out that, you know, in 1942, when this procedure was done by the Navy corpsman using rudimentary instruments, he didn't do it on the fly, because he had been a trained OR corpsman. So he had witnessed many, many appendectomies. However, it was the age before antibiotics.

WINKLER: [Yes].

**HERMAN:** You could have an appendectomy done in a hospital with a qualified staff, and you could still die from an appendectomy back in 1942. So the fact that this gentleman performed this courageous act at age twenty-three using rudimentary instruments on a submarine in enemy controlled waters and having his patient come out on the other end of it in very good shape is

really not only a testimony to very good luck but also a tremendous amount of skill on the part of that corpsman.

**WINKLER:** Okay. Now that you're retired do you plan to stay engaged in doing oral histories? Or [do] you want to be a cattle rancher or . . . ? [laughter]

**HERMAN:** Well, cattle ranching is not my thing, necessarily. I do. I am still in the business of oral history now that I'm retired. And one of the things I do in retirement is I volunteer for a local hospice. And I'm involved with a former Navy colleague of mine, who's also retired, in a project they call Life Stories. And what we do is we go to the patient's home. Usually these patients are—sad to say are in their last, you know, months and days, perhaps—in some cases weeks, whatever. And we give them an opportunity to tell their life stories.

And, you know, we find it very rewarding to do that. And the families are extremely grateful. The patients are grateful because they've never—in most cases have never had an opportunity to tell their story. It's kind of in a sense, it's their last chance to tell their side of it. So everybody benefits. The patient benefits by having the opportunity to tell their stories. The patient's family, children, wives, children, grandchildren in some cases, have the story of their loved one on a disc. We provide a CD to the family, and it's very rewarding.

In fact, we have one patient who passed away shortly after we finished the project. His son told us—and it was very, very touching—he said, "My father immigrated when he was nineteen, came to this country from South America. And, you know, I grew up with this man, and I never knew this part of his history. I never knew about my grandparents left behind and my great-grandparents." And so he was very grateful that he now had—understood his father a lot better. And so that's one. You asked what other—and I'm still doing research.

I'm working on a project right now on Navy medicine in the Persian Gulf War of 1990, '91. So I'm doing interviews with folks, medical personnel who served in the Gulf War. So [yes], I'm still very much involved.

**WINKLER:** Okay. You had a short stint on the board of directors for the Oral History [in the] Mid-Atlantic Region. Can you comment about [...] what value OHMAR [Oral History in the Mid-Atlantic Region] had and perhaps if there's any insights you got from being a member on that governing body and as far as networking and seeing what other people are doing?

**HERMAN:** Oh, absolutely. I found, number one, that there were a whole bunch of other people who were doing what I was doing but were focusing on different communities. It was interesting to see what techniques were being used. Many of them were similar. Many of them were different. I certainly got pointers. And the networking I can't even overemphasize the fact that when I realized I was really part of a much larger group of people who are dedicated to **<T:** 

**35 min>** telling these stories or to recording them and then processing those stories and using them for other purposes, getting them out there.

You know, doing oral history is only one part of it. It's, as I said earlier, if these transcripts end up on a dusty shelf somewhere in an archives and no one ever hears these stories, it's really a sin. It's really a – it's like doing a beautiful piece of art and then locking it up in a drawer and not letting anyone see it. So yes. Being on the board was a very valuable experience. I got a lot of insight. I got to know a lot of these folks, and it is really a community, a close – I think a close-knit community in many cases. But to find out what other people are doing was very rewarding to hear that.

**WINKLER:** Okay. And finally, receiving the Forrest Pogue Award [. . .] any reflections as far as Pogue and, I guess, feelings expressed about receiving this honor?

**HERMAN:** Well, I'm still processing it. Maybe it hasn't quite all sunk in yet. When you called, Dave, and you told me that I was the recipient, I didn't know what to say. Again, you see people with their mouths hanging open not knowing what to say. And I think I was in that stage at the time, but I've had a chance to think about it since. And it is a tremendous honor for me. I can't tell you. It's a recognition of a part of my life that has been part of my life for so many years, being an oral historian. And being recognized as having achieved something that deserves an award named after one of the greats, one of the pioneers of oral history, Forrest Pogue—just to have his name associated with it enough — kind of gives me the chills a little to realize that I'm going to have an award that's named after this great pioneer in oral history.

But to be recognized by my peers for having deserved this award is, I guess, forever grateful for that. I, you know, I was – at some point in my life, I think way back, I had my sights set on some kind of a . . . on perhaps a Nobel [Prize]. I'm not sure I'm in line for a Nobel for anything. But I think that the Pogue Award for me is my Nobel. And I'm pleased to be chosen.

**WINKLER:** Well, thanks Jan. And again, congratulations on receiving the 2015 Pogue Award, and we look forward to hearing you at the conference [...].

**HERMAN:** I'm looking forward to it. Absolutely.

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[END OF INTERVIEW]