

UNDER
GROUND
HOSPITAL

SUPPLY

NURSE QUARTERS

STATION
HOSPITAL

POWER
HOUSE

MORGUE

STREET

BARRACKS

MOTOR
POOL

OFFICERS
DAY
ROOM

OFFICERS QUARTERS

BARRACKS

DAY
ROOM

55th GENERAL HOSPITAL
Training Area
Camp Joseph T. Robinson
1943
Little Rock, Arkansas

LATRINE

OFFICERS
MESS

FLAG POLE

HEAD
QTRS

MESS
HALL

STREET

BOILER ROOM

OFFICERS
LATRINE

GUARD
HUTS

TO DRILL FIELD

BARRACKS

BARRACKS

BARRACKS

PX

NON-COM BARRACKS

LATRINE

COMPANY
HEAD
QTRS

WOODS

GUARD
HUT

STREET

TO DRILL FIELD

GAS
REGULATOR

DECLASSIFIED

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Auth: CO 55th GH

Init: cc N by JEC

Date: 27 December 1944

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- HEADQUARTERS 55TH (US) GENERAL HOSPITAL -
V HOSPITAL GROUP (PROV)
APO 121, U S ARMY

M-14

A HISTORY

OF

THE 55TH GENERAL HOSPITAL

INFO

A4 CJTR

UNTIL

17 FEB 1944

(From: 25 May 1943

)

(To: 30 Sept 1944

DECLASSIFIED

DOD Dir. 5200.9, Sept. 27, 1958

NMW by AB date 8/12

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The 55th (US) General Hospital of the United States Army was activated at Camp Joseph T. Robinson, Arkansas, on 25 May 1943, pursuant to authority contained in Paragraph 2, General Orders No 56, from Headquarters, Eighth Service Command, Army Service Forces, Dallas, Texas, dated 17 April 1943. Lieutenant Colonel Charles Chute Gill, 017840, Medical Corps, assumed command pursuant to the authority contained in paragraph 10, Special Orders No. 110, War Department, Washington D.C., dated 20th April 1943, having been transferred from Camp Pickett, Virginia.

Lieutenant Colonel Gill was born in Kenyon, Minnesota, on 18 July, 1903. Upon graduation from Pomona College, Claremont, California, 1924, Lieutenant Colonel Gill attended the Medical School at the University of California, graduating in 1929. Soon after Lieutenant Colonel Gill entered the United States Army Medical Corps, accepting a commission of First Lieutenant on 26 September 1929, and was promoted to the rank of Lieutenant Colonel 29 June 1942.

Prior to assuming command of the 55th (US) General Hospital, Lieutenant Colonel Gill saw service as follows: The Presidio, San Francisco, California from 1929 until 1930; Letterman General Hospital, San Francisco, California, from 1931 until 1933; Station Hospital, Schofield Barracks, Hawaii, from 1933 until 1934; Fort Shafter, Hawaii, from 1934 until 1935; Fitzsimons General Hospital Denver, Colorado, from 1935 until 1940; Station Hospital, Schofield Barracks, Hawaii, from 1940 until 1941; Fort Kamehameha, Hawaii, from 1941 until after the United States entered World War II, on 7 December 1941.

With the outbreak of War, Lieutenant Colonel Gill was given the assignment of organizing several Medical Department Installations on the island of Oahu. Relieved of duty in the Hawaiian Department in September 1942,

Authority MND 735017By EF NARA Date 8/19/05

SECRET

Lieutenant Colonel Gill returned to the United States and was assigned duty with the Medical Department Replacement Training Center at Camp Pickett, Virginia, where he remained on duty until his transfer to Camp Joseph T. Robinson, Arkansas, for the purpose of activating and organizing the 55th (US) General Hospital. During Lieutenant Colonel Gill's service he attended the Medical Field Service School at Carlisle Barracks, Pennsylvania, and the Army Medical School, Washington, D.C., graduating from both of these schools in 1931. In addition, he attended the Command and General Staff School at Fort Leavenworth, Kansas, and graduated in 1943.

The first General Order and Special Order published by the 55th (US) General Hospital were dated 25 May 1943. In the first General Order, Lieutenant Colonel Gill appointed his staff, and in the first Special Order he announced the assignment of all other officers present for duty on the date of activation. The officers present and their assignments are shown in the attached Orders. The enlisted cadre of thirty men for the hospital was furnished by the 49th (US) General Hospital, Chickasha, Oklahoma. The order effecting their transfer is attached hereto.

With the arrival of the first small group of men assigned from the Medical Training Center, also located at Camp Joseph T. Robinson, Arkansas, preparation for the reception of future arrivals was instituted. Housing facilities allotted the organization by the camp commander located in an area on the extreme northwest section of the occupied camp site, were found quite adequate. The buildings were of the temporary frame type.

After the necessary beds had been secured and set up in the barracks, the improvement of the interior of the office buildings and day rooms began.

Authority MND 735017By PE NARA Date 8/19/05

SECRET

A sufficient amount of Celotex was procured and used to cover the walls and ceiling, thereby hiding the rafters and beams. Due to the previous experience of Lieutenant Colonel Gill in improvising items for hospitals in combat zones, the buildings allotted provided an ideal workshop for the training of the utilities section. Under the guidance of men who had previous training and experience in carpentry, electrical work and plumbing, others were trained.

Blackout curtains that did not hinder ventilation were constructed and added to the day room which was used for purposes of showing training films. This dayroom also served as a classroom during unfavorable weather. During fair weather outdoor classrooms were utilized.

Soon after the organization had been activated, everyone was using his spare time preparing the available soil within the area for vegetable gardens. Soil erosion control and rerouting of the drainage ditch beside the mess hall was undertaken. Several gardens were started in and about the area which later provided an abundance of vegetables for the mess halls.

The crowning achievement, in which every member of the organization had some part, was the construction of a three room underground hospital, which was built in the side of a hill within the area allotted the hospital. Stumps were excavated and the rooms were dug manually. Wooden floors, walls and ceilings were constructed, pipe lines installed by the plumbers furnished the hospital with running water. It was wired by the unit electricians, and when completed the first room presented an adequate receiving and dressing room; the second room was designated for minor surgery and contained a small dark room for the development of X-ray films, the third was general surgery. Adequate ventilation was provided by ventilators which could also

Authority MND 735017By EE NARA Date 8/19/05

SECRET

be used as a means of emergency escape. There were three entrances into this underground hospital and they were constructed in such a way that when small arms were fired into them the bullet could not enter any of the rooms. Hand grenades dropped down the ventilator shafts did very little damage. Fifty calibre rifles were fired into the walls and the roof of the hospital, but did not enter the rooms themselves due to the amount of sod over the roof.

Supervision of the construction of the underground hospital was done by Lieutenant Colonel Gill himself with the assistance of Second Lieutenant Frank Stoy, O-1590836, QMC, who was in charge of the utilities section.

Technician Fifth Grade James C. Dixon, 36540475, was the first enlisted man to be promoted. His promotion to Technician Fourth Grade was effective upon receipt of notification for him to attend the Officers' Candidate School at Camp Barkeley, Texas.

Second Lieutenant Richard J. Coker, O-1541795, MAC, received the first promotion among the officers, having been recommended for promotion to the grade of First Lieutenant by the Commanding Officer of Brooks General Hospital, Fort Sam Houston, Texas, the organization to which he was assigned prior to his assignment to the 55th (US) General Hospital.

The first group of enlisted men began their basic review required by Mobilization Training Program 8-10, on 7 June 1943, under the direction of the Plans and Training Officer, Lieutenant Colonel Claude D. Winburn, O-280989, MC. There was a group of seventy-six Enlisted Men to attend this first course. Their duties were taken over by new men who came in almost daily.

On the 5th June, Major John S. Wolf, O-386692, MC, Captain Edward K.

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Lawson, Jr. 0-345081, MC, and Captain Alvin I. Kay, 0-416777, MC, arrived from the Medical Department Replacement Training Center, Camp Pickett, Virginia, and on the 8th June took over the plans and training section of the hospital. Lieutenant Colonel Winburn upon relief of his duties in the training section was placed on special duty with the station hospital at Camp Robinson for duty in the ENT Clinic. Major Edward M. Lipan, 0-344248, MC, was also placed on special duty with the hospital and his services were utilized in the operating room.

Major Oren V. Shaw, 0-221230, DC, who was on special duty with the Dental Clinic at the Station Hospital, reproduced five realistic models of human heads out of Plaster of Paris. These heads were attached to dummies that had been procured by Second Lieutenant Robert S. Wasley, 0-1589577, QMC, the Quartermaster Supply Officer, from local dry goods stores in Little Rock, Arkansas. With the assistance of the local quartermaster seamstresses, replicas of enemy uniforms were made from salvage clothing. Improvised insignia made them real life like and they were used in a course of identification of enemy personnel. Many model airplanes, both allied and enemy, were manufactured from salvage lumber, by all members of the command. They were also used in classes on identification of both allied and enemy equipment.

On the 20th of June 1943 the cadre for the 188th (US) General Hospital arrived and were attached to the 55th (US) General Hospital. The 188th (US) General Hospital which was to be activated on the 25th of June, occupied an area located between the 55th (US) General Hospital and the Post Station Hospital.

Shortly after a rumor had been confirmed to the effect that the local

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Authority MM 735017By PT NARA Date 8/19/05**SECRET**

Medical Replacement Training Center was to be deactivated, a letter was written requesting permission for this hospital to be furnished with the remaining three hundred and twelve enlisted men needed to bring the organization up to full strength from that source. On the 20th of July, a telegram was received from the Adjutant General, Washington 25 D.C. which approved the request. After a thorough survey and interview of the men already assigned to the hospital, General James E. Bayliss, 03310, Commanding General of the local Medical Replacement Training Center, was contacted by Lieutenant Colonel Gill through the Commanding Officer of the Post, Colonel Grover C. Graham, 066034, Infantry, and the remaining men were picked after Lieutenant Colonel Gill was allowed to look over the classification cards of the enlisted men assigned to the training center. The men selected were transferred and assigned to this hospital. The first to arrive was a group of two hundred and thirty-seven men on 22nd of August, and on the 25th of August they began their training under Mobilization Training Program 8-10. The basic review which had previously been of one week's length, was reduced to four days, inasmuch as these men had just gotten out of the Medical Replacement Training Center. A group of twenty-four men were received from the local Medical Replacement Training Center on the 4th of September 1943, making a total of two-hundred and sixty one received of the three hundred and twelve men that the Center was to furnish.

With the majority of the enlisted men being assigned, a tentative date was set for the organization to complete its training. Numerous inspections were made by the Post and Eighth Service Command Inspectors, prior to the definite date being set.

The first bivouac was experienced by the organization during the week

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of 13-18 September 1943. Many mistakes were made but much knowledge gained. One of the grave errors found was that the organization had not enough field experience under blackout conditions, therefore, hikes were scheduled at night in order to overcome the deficiency. With the deactivation of the training center, a great amount of equipment was acquired which consisted mainly of office furniture, stationary, sets of Army regulations, training manuals etc. During the last of September, five truckloads of such equipment was obtained.

On 13 September, nine Medical Administrative Corps Officers arrived for training, attached to the hospital from the Officer Pool at Camp Barkeley, Texas.. Those officers were as follows:

2d Lt Felix V De Maesschalck, 02047621, MAC
2d Lt Richard G. Kane, 02048030, MAC
2d Lt John S Knight, 0530577, MAC
2d Lt Sydney I Loewenthal, 02048058, MAC
2d Lt Renato H Lombardi, 02048059, MAC
2d Lt Harold S Mauer, 02048069, MAC
2d Lt Benjamin (NMI) Medoff, 02048077, MAC
2d Lt Jerry J Miller Jr, 02048080, MAC
2d Lt Thomas T Thompson, 02047857

Competitive spirit between the enlisted men of the 188th (US) General Hospital and the 55th (US) General Hospital. This was probably due to having been organized about the same time, and located so close together. The competitive spirit increased markedly in the overcrowded area so the Camp Commander moved the 188th (US) General Hospital to recently vacated buildings on the opposite side of the Station Hospital from the 55th (US) General Hospital. The 188th (US) General Hospital was moved about 23rd of September, during the absence of the 55th (US) General Hospital on its second bivouac.

Upon return of the 55th (US) General Hospital to the camp area, the

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Authority UND 735017By PC NARA Date 8/19/05**SECRET**

area previously occupied by the 188th (US) General Hospital was allotted to the 55th (US) General Hospital and crowded conditions which had existed for both hospitals were eliminated. The group of men that had completed their training under Mobilization Training Program No. 8-10 were placed on duty with the Station Hospital with assignments to wards and clinics. To begin with, they were on duty only half days in the hospital and attended classes the remaining part of the day.

Night Classes were instituted in gymnastics, arithmetic, algebra, current events, identification of Personnel both allied and enemy forces and music, geography, foreign languages consisting of French, Spanish and German. Specialized courses were conducted for personnel of the mess and the motor pool, also typing for those interested, and for those who were less formally educated, classes in grammar school subjects.

At the end of the training programs the final inspections were made by the Eighth Service Command. Administrative and Supply Officers found themselves very busy in preparation for the inspections for both personnel and supplies of the organization and their work was rewarded by a grading of "Excellent".

The Inspector General's Department from Washington, D.C. seemed quite pleased and gave a rating of "Superior".

Furloughs for all enlisted personnel were scheduled so that all men had some time to go home.

New officers and nurses began to arrive to bring the organization to full strength. First Lieutenant Bernice M. Hoare, N-734688, ANC, Chief Nurse, arrived 5 December 1943, quite some time before the other nurses. Enough officers were assigned to give the unit all that were allotted by the table of organization. They began to report for duty the latter part of December, the first male officers arrived 20 December 1943 and the first of the nursing

Authority MM 735017By LC NARA Date 8/19/05**SECRET**

staff the 15 January 1944.

After the unit was at full strength, a definite time for movement was determined. Consequently, everyone was busy correcting the records, personnel files and packing or crating equipment that was to go overseas. The organization was alerted and restricted to the area on the 12 February 1944.

The organization left Camp Robinson in two groups, which were designated as "A" Group and "B" Group, and traveled in two different trains over two different routes, both of which were to end at the staging area, unknown except to the few chosen by the Commanding Officer. Group "A" departed at 1600 while Group "B" departed at 1800 the 17 February 1944. "A" Group was the first to leave but through a delay enroute arrived a few hours after "B" Group at the destination.

The staging area was at Camp Myles Standish, Massachusetts, where the two trains arrived on the 19 February 1944. The final processing of the unit's personnel and records was accomplished while in the staging area. All were given typhoid shots, were fingerprinted, photographed, and issued Red Cross identification cards. After the third day in the staging area, 50% of the organization were allowed passes to visit the surrounding towns.

The organization took its departure from Camp Myles Standish on 27 February 1944 and arrived at the port of embarkation, Boston, Massachusetts, detrained, and loaded onto the transport, the U S S. George W. Goethals, before nightfall that day. Early the morning of 28 February 1944, the convoy started, then followed ten days of rest for some, sickness for others, and mingled feelings for all.

The Firth of Clyde in Scotland was sighted early in the morning 9 March 1944, and the group later the same morning de-barked at Greenock,

Authority AMD 735017By 17 NARA Date 8/19/05

SECRET

Scotland. Personnel were unloaded from the transport in two groups, organized exactly as they had been upon departure from Camp Robinson, and loaded onto trains for transportation to the Llandudno, North Wales, staging area. Group "A" arrived at 2300, 9 March, while Group "B" arrived at 0100, 10 March 1944.

Upon arrival at the staging area, each trainload was taken to the mess hall and fed before going to their billets. While the men were eating, directions concerning some of the British policies in the area, and regulations were given pertaining to sending of mail and cablegrams. After finishing the meal, the men were escorted to a previously arranged billeting area, assigned to quarters, set up their own beds and slept the remainder of the first night on foreign soil.

Shortly after the arrival at the staging area, orders were received from the War Department, Washington, D. C., in Special Order No. 47, dated 24 February 1944, promoting Lieutenant Colonel Gill to the rank of full Colonel.

Headquarters for this hospital, while at the staging area in Llandudno was located in the Claremont Hotel, overlooking the Promenade. Llandudno, in peacetime, had been a seaside resort town. This hospital was the first unit to be billeted within the town of Llandudno, and with the many possibilities for entertainment which the town afforded, and the cordial welcome which the personnel of the unit received from the inhabitants, the stay there was most pleasant. The seaside resort of Llandudno has a scenic mountain background on two sides, and its main promenade is a crescent-shaped drive bordering the sea, and to the West is another waterfront.

Authority AND 735017By PC NARA Date 8/19/05

SECRET

The next morning after arrival, that is, 10 March 1944, the men were marched to the mess hall in groups, so as to maintain order. At the mess hall, mail that had been received by the advance party was passed out to the enlisted men. While at the staging area, both officers, and enlisted men, in addition to the routine work of administration, mess, and supply, attended classes. Many of the officers and enlisted men went on detached service to learn the actual details of their departments from other hospitals already in operation.

On 19 March 1944, two officers, First Lieutenant Robert S. Wasley, O-1589577, QMC, Quartermaster Supply Officer, and First Lieutenant Carroll Welch, O-1546709, MAC, Medical Supply Officer, accompanied by 40 enlisted men, travelled from Llandudno to Wood Farm, Malvern Wells, Worcestershire, England, which was to become the permanent location for the hospital. The advance party cleaned the Nissen huts, and set up beds procured from the area Quartermaster Supply Depot. Mess halls were cleaned and made ready for feeding the main body when they arrived on the 27 March 1944.

Malvern Wells is a portion of the community known as the Malverns, which includes Great Malvern, Malvern Link, North Malvern, West Malvern, Malvern Wells and Little Malvern. Five general hospitals had been established in this vicinity, all in an area not more than three miles apart. The 55th (US) General Hospital had a position a little higher on the slope than three of the others. The slope led up the Malvern Ridge with its highest point 1395 feet above sea level. These five hospitals were built on the same general plan, single story, constructed of hollow tile and brick. The barracks provided for the personnel were of the Nissen hut type.

The hospital site occupied half of the Worcestershire Golf Course, which had been reduced to a 9 hole capacity because of land lost to the

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Government. The view out over the valley below and across the Bredon Hills impressed all who saw it and was fully as beautiful as the steep ridge which towered above.

Upon arrival the troops were assigned their quarters which had been prepared by the advance party. Part of the enlisted men were billeted in 3 of the hospital wards as the British civilian contractors were occupying a number of the hutments designated as their quarters. Messing facilities arranged by the advance party proved adequate and everything went according to plan.

The fatigue uniform was the prescribed outer garment for the unit during the greater part of the month of April as all its members were engaged in the arduous task of cleaning up wards, unpacking hospital equipment, clearing the grounds, and training in the subjects pertaining to the care of the sick. For the first time there was an opportunity to have the doctors, nurses, and enlisted men develop team work.

The physical set-up for the care of sick for this hospital had several subdivisions and at the southwest corner was a block of 14 wards which was called C Ramp. Next, there was a central group of 6 wards locally known as B Ramp, with the operating room immediately adjacent, along the west side, connected thereto by an enclosed corridor. Continuing north was another block of 14 wards locally known as A Ramp, while just beyond near the north limits of the post, were 3 buildings of the Genito-urinary and Venereal disease cases. In addition there were 2 small isolation wards at the east end of A Ramp. The operating room was located in the center of a cluster of buildings which furnished space for the Dental clinic, ENT clinic, X-Ray, and Physio-Therapy, Laboratory, Central Supply, Pharmacy, Post Exchange, Post Office, and Barber Shop, with Recreation Hall, Patients' Mess,

Authority MM 735017By PT NARA Date 8/19/05

SECRET

Receiving Office and Headquarters close by. The Nurse's Quarters were located at the south border of the post, while on the north side was the male officers' area. Between these two was a space devoted to warehouses, chapel, fire station, motor pool, parking lot and baseball field. Further up the hill along the west border of the post was located the enlisted men's area.

The Chief of Medical Service, Major William N. Weaver, O-309207, MC, upon arrival began organizing and orienting the medical officers assigned to his section of the hospital. The training of the officers consisted of a period of reading from 0730 to 0830 each morning on military subjects. After a period of 10 days, this hour of reading was made optional. They received one hour of gas mask drill and 3 hours of litter drill, under both daylight and black out conditions. During the month of April, there was a day of conference of the medical service upon various problems affecting the organization and administration of the medical service war tasks. At the same time, subjects outlined in the provisional tests for medical units were presented by different members of the medical service. In addition, there were daily lectures for all nurses of the medical service by the chiefs of the sections on provisional subjects.

Enlisted personnel received a formal course in litter drill and ambulance loading both under daylight and blackout conditions, in addition to courses in chemical warfare and other military subjects.

Supplies were cleared from the wards the second week in April and the officers, nurses and enlisted men of the medical service cleaned and equipped the wards and landscaped areas about the wards. This meant much hard work and was accomplished with commendable spirit and excellent results. Beds were received for the wards on the 15th of April. Several days later,

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Authority MM 735017By LC NARA Date 8/19/05

SECRET

mattresses and other equipment were gradually issued so that by the 29th of the month the wards were ready to receive patients. Due to the fact that the contractors were still working in the buildings, considerable difficulty was encountered in preparing the wards of the medial service.

The Chief of the Surgical Service, Major Joseph M. Roberts, O-398068, MC, began the organization of the Surgical Service of the hospital under practically the same conditions that existed for the Chief of the Medical Service. The wards assigned to the Surgical Service were not completed, consequently a large part of the time of the officers, nurses, and enlisted men was devoted to landscaping the areas, seeding the grounds, etc. The first equipment received on the wards were beds, mattresses, and bedside tables. These were delivered about the 17th of April. Classes were conducted for officers, nurses, and enlisted men.

The Chief of the Laboratory Service, Lieutenant Colonel John S. Wolf, O-386692, MC, found the building designated for the laboratory still under construction. During the first 2 weeks of April attention was directed towards an improvement of the landscape surrounding the buildings, including leveling and seeding. At the same time, enlisted personnel of the service set about the construction of numerous tables, stools and drainage boards, using whatever lumber and tools were available. By the middle of the month, the equipment for the laboratory began to arrive and was immediately issued through the Medical Supply. The larger items were installed while the small items were stored on the shelves. Requisitions for additional items desired were submitted to the Medical Supply Officer. After the building was officially completely and turned over to the hospital, additional improvements on the inside of the building were immediately undertaken by the

Authority MND 735017By LT NARA Date 8/19/05

SECRET

laboratory personnel. Improvements designed to facilitate the internal workings of the laboratory were instituted. Through hard work and sufficient material, by the 28th of April the laboratory was available for blood counts and urinalysis.

The Roentgenological service with Lieutenant Colonel Ray M. Freeman, O-322892, MC, in charge, was not able to begin working inside the building designated for his service until the 9th of April. However, until this time the area outside was improved by landscape work. A loading bench was built in the X-Ray dark room and a film pass box was constructed with lead lined doors and automatic locking device. Additional furniture was built, including tables for the filing room, three drawer desk for the reception room, film hanger racks and various other items of furniture were constructed and stained to harmonize with the woodwork of the building. On the 23rd of April a large 200 mil ampere Westinghouse X-ray unit with tilt top table and flourescopic screen and two British Watson units were brought from the X-ray Service Depot M-400 by personnel of the X-ray Service. On the 24th of April these units were installed by technicians from the X-ray Service Depot. Two Picker Waite Army Field units were installed, one on mobile base, in conjunction with an army field table flourescopic screen and foreign body localizer. The two British Watson units were assembled, one as part of a solus table and the second on a mobile stand to be used in the genito-urinary clinic with the cystoscopic table. The drier was installed in a dark room, additional furniture was made including a combination work table and cabinet for the filing room, angle boards, small office furniture and miscellaneous items. The initial issue of supplies was received and the developing solutions were mixed. A partition was constructed across the center of the main X-ray room, which subdivided it into separate flourescopic room

Authority AND 735017By PC NARA Date 8/19/05

SECRET

approximately 12' x 24' and a second room of equal size which was to be used for X-ray procedures not requiring a large unit.

The Dental Clinic, headed by Lieutenant Colonel Oren V. Shaw, O-221230, DC, began work immediately on the interior of the building designated for the dental service. In the second week of April additional plumbing facilities were installed by the Utilities section. A tile railing was placed in the reception room with space for patients on one side and the clerks on the other. A sink was installed in the room to be used for surgery and a bench constructed around three sides of the laboratory. Cuspidors were made for all operating chairs. Wide bases were attached to the operating chairs to prevent damage to the floor. Shelves were constructed in the storage room to facilitate proper storage of supplies. On the 18th of April, following other minor changes and rearrangements of the building, it was considered ready for service. By the end of the month, the dental clinic was in operation, having examined 92 patients in the clinic itself in addition to conducting a ward survey for 91 patients.

The Medical Supply Group with First Lieutenant Carroll Welch, O-1546709, MAC, in charge, arrived at the hospital site to find 6 wards of British hospital equipment on hand. The equipment had been received over a period of several months, and was stored in the wards without record and in such a confused state that a physical inventory was impossible. The men began at once rearranging and sorting the various items into proper classes, which in the end enabled them to complete the inventory and to facilitate its issue after taking out certain necessary items needed by the detachment for immediate use. Upon the arrival of the main party, First Lieutenant Welch was sent to the 52nd (US) General Hospital for a week's detached service for the purpose of obtaining information and instructions on the operation

Authority MND 735017By PT NARA Date 8/19/05

SECRET

of a medical supply in the European Theater of Operations. The Medical Supply Officer on the 6th of April visited the medical supply depot to ascertain the kind and amount of equipment ready for issue to this unit. Necessary preparations were immediately instituted for the receiving and storage of the American made equipment about to be shipped from the depot. At this time, however, the warehouses which were to be used for storage, were just being vacated by the British who had been using them for the past year for kitchen purposes. Personnel of the department laid aside all immediate duties and under the supervision of the civilian contractors arrangements were made for the reception of the equipment. Another visit was made to the depot a few days later by the Medical Supply Officer for the purpose of obtaining pertinent items of equipment necessary to take care of any emergency that might arise while awaiting shipment of the equipment and to designate the order for any articles desired at the start. The first items received on the 13th of April were hospital beds, mattresses, and pillows, which were sent directly to the wards. Heavy installation equipment was next to arrive and was also taken direct to the various departments concerned. The balance of the material was received and stored in the warehouses, the last of which was received on the 22nd of April. During this time, maintenance supplies were being issued to the wards and departments and by the 29th of April the equipment necessary for the functioning of the hospital had been placed in many wards and departments. Necessary memorandum receipts were accomplished at the time of issue. A total of 56 car-loads, consisting of 3130 boxes of supplies, were received from the Medical Supply Depot and this equipment represented 97.5% of the equipment for a 1000 bed General Hospital. A Contract for the handling of hospital laundry was accomplished on the 25th of April. It was found, in the last few days of the month of April, that a

Authority AMD 735017By PL NARA Date 8/19/05**SECRET**

435 bed ten expansion unit would have to be set up on the site and the equipment for this was received on the 29th. Nine more car-loads of tents, mattresses, and blankets arrived. Equipment borrowed from neighboring hospitals was returned by the end of the month. Tables had been placed in the mess halls, stationery furnished to different wards and office equipment had been issued to the X-ray, Laboratory, Dental Service and Pharmacy. Excess British items on hand were shipped to neighboring units and some surplus American supplies such as a field sterilizer were returned to the Depot. The warehouse finally reached a neat and orderly appearance for the issue of equipment and supplies.

Quartermaster Supply under the supervision of First Lieutenant Robert S. Wasley, O-1589577, QMC, unlike the Medical Supply, had functioned at the home station. Contracts for officer and nurses' dry cleaning and enlisted mens' laundry and dry cleaning were made soon after arrival. Tiles, fixtures and glass for the utilities, coal, coke, and fire fighting equipment for use in the hospital and the detachment were received from the British special depot. Requisitions were submitted and cleaning and preserving material, stationery and office supplies, chemical and mechanical prophylactics, rubber stamps, and clothing for enlisted men were received from the United States Supply Depots. The initial T/E equipment from Chemical Warfare, Signal Corps, and Quartermaster Corps arrived and the necessary inspection of the enlisted mens equipment and clothing was accomplished. Gardening tools were procured and several gardens started in the immediate vicinity with seeds which were brought from the United States.

The Motor Transportation section received only a part of its equipment in the staging area. Upon arrival at the new hospital site, Second Lieutenant Frank Stoy, O-1591836, QMC, who was in charge of this section,

Authority MND 735017By PT NARA Date 8/19/05

SECRET

immediately requisitioned the transportation that had not previously been issued. During the month of May several new vehicles were added to the motor pool including: one 2-ton command reconnaissance, one 1-ton command reconnaissance, and one 1½-ton 6 x 6 personnel carrier. Blackout driving lights and gas can brackets complete with spare gas cans were requisitioned and installed. The ambulances were repainted and the necessary unit identification and dimensions were stencilled on all vehicles. One 2½ ton truck was altered to carry 17 litters and performed satisfactorily during the demonstration. During the month of May, a petrol, oil, and lubricant shed was constructed for the storage of gas, oil, grease, and vehicle parts such as truck tarpaulins when they were not in use. Concrete roads were widened around the garage. Shelves were erected in the tool room to carry spare parts and racks were built for the second echelon tools. Work benches were made and a transformer installed so that power tools of the utilities section could be operated. A partition was built in the garage to provide space for the dispatchers and necessary office work. Drains were dug from the motor park and the area around the garage was plowed and a program of landscaping completed. White wash was requisitioned and the walls of the motor pool was coated.

The Mess Department, under the direction of First Lieutenant Guy M. Marks, O-1546644, MAC, set about their necessary work. This section had functioned at the home station as well as in the staging area in the United States, on board ship, and at Llandudno. Therefore, they were quite capable of handling the situation which confronted them upon arrival at the new site. It was not until May that the enlisted men's mess hall was released by the contractors and turned over to the mess department. The first meal was served to the detachment in their mess on the 4th of May. It was necessary during the first few days for the entire organization to eat out of their

Authority MND 735017By LT NARA Date 8/19/05

SECRET

mess kits and it was not until the evening meal on 6 May that chinaware for the mess halls was received and put into use. As soon as the detachment had been moved from the patients' mess, a program of rearranging began. The serving counters were remodeled, racks were made for the storage of spare rations, and two new double-boiler stoves installed. Tables were sanded, varnished, and placed in the enlisted mens' mess. Their bright surfaces added much to the appearance of the dining room.

The Personnel Section under the direction of Second Lieutenant Irvin B. Lindsey, 01546653, MAC, assisted by the Chief Warrant Officer, Francis G. Hickey, W-2126275, USA, set about the necessary duties to bring up to date the records for the personnel of the unit. This consisted of many remarks omitted during the trip from the home station. The unit was paid and allotments for the purchase of war bonds and to dependants were readjusted. Visits to adjoining units were made in an effort to determine the necessary reports required in the European Theater of Operations. The office furniture consisted of packing boxes and tables, the standard pattern at that time for all offices.

Blackout window shutters were installed in the X-ray and Cystoscopy rooms. Permanent cabinets were built for Central Supply by the utilities department. By the middle of May, the operating room and central supply were in full operation, sufficiently staffed and equipped to receive any reasonable surgical assignment. Coco matting and door mats aided in mud control as there were frequent rains and almost no lawns. The Orthopedic Clinic, EENT Clinic, and Urological Clinic were similarly staffed and equipped.

There were 538 beds available for the surgical service, 178 of these being designated for general surgery, 180 for the orthopedic section, 60 for the EENT section, and 30 for the urological section, while 90 were assigned to the septic

SECRET

Authority MND 735017By PT NARA Date 8/19/05

SECRET

surgery section. Plans were submitted to the Commanding Officer for the conversion of the Genito-Urinary and Venereal Disease ramp into an auxiliary surgical unit by installing cyclotherms and sterilizing equipment in the Urological building. This made available an auxiliary surgical unit equipped with autoclaves, instrument boilers, and one cystoscopy room equipped with X-ray. Wards 37A and 37B, that were to be used for venereal disease patients of the medical service, were transferred to the surgical service to be used in conjunction with the auxiliary surgical unit in ward 38. This gave the service an additional 90 beds. Material was received for improving the ambulance entrances into Wards 37A and 37B, and Ward 38, and for a spur road from C ramp to an improved road owned by Mr. Moss, a nearby English neighbor.

The first operation, an appendectomy was performed on the 7th of May. The patient was a negro, Private Julius McClerin, 35358138, of the 3193 Quartermaster Corps, 211 Quartermaster Battalion. Nitrous oxide and ether were used in the anesthetic. The bed census for the week ending the 14th of May was fourteen, leaving a total of 585 beds available. During the week ending 12 May, several changes were made with reference to nurses and enlisted personnel on the various wards. A cement walk was laid into the rear entrance of the orthopedic building, and another was built around the operating pavillion connecting B ramp with the main north and south ramp in front of the surgical building. A 110 volt line was carried over to the central supply building for the washing machine so that salvage gauze could be properly laundered.

Classes and demonstrations continued during the last week of May for the information and training of nurses and enlisted men. All medical and surgical technicians were instructed in physical exercise for post operative bed patients, and the method of carrying out these exercises for reconditioning to be done on the ward.

SECRET

Authority MND 735017By LT NARA Date 8/19/05

SECRET

Thirty-nine tents were set up and attached to wards for administration. The bed status of the medical service for the first week was 450 beds for medical cases and thirty beds for mental cases. Wards 4 and 5 still contained supplies and were being utilized for warehouse space by the Medical Supply, and the closed ward for mental cases was not complete and Wards 12 and 14 were being used as barracks for the Enlisted Men. The nurses of the Medical Service continued to receive their one hour instruction each morning from the various section chiefs of the professional service. Enlisted personnel were having classes two afternoons a week under the direction of the Plans and Training Department. Officers attended classes from 1600 to 1700 daily in addition to which they averaged an hour per day on military subjects. The nurses, in addition to their Plans and Training Program and ward work, continued to receive lectures each morning by officers of the medical service. Training continued through the entire month and consisted mainly of road marches for the officers, together with lectures and practice on the reception of patients, fire-fighting and gas mask drill. On the 7th of May, the medical service began to function with the admission of three patients. There were twenty-three admissions and three dispositions during this week. Members of the professional service attended several clinical conferences at nearby hospitals.

During the week beginning 21 May, shelves and mirrors over the sinks of the patients' lavatories were installed. Mop racks, in addition to coat and hat racks were installed in the dirty linen rooms. Metal grilled doors and heavy screen wire arrived and Ward 15 was converted into a ward for prisoner patients. By the end of the month the medical service had a total of forty-eight patients.

At the laboratory during the last two weeks of May, emphasis had been made on furthering the specialized training and proficiency of the technicians, as a large volume of the work had been handled. The biological reagents arrived during this time for such things as Kahn tests, and penicillin work began. The first death

SECRET

Authority AND 735017By EC NARA Date 8/19/05**SECRET**

occurred and the postmortem was performed on the 29th of May. It was the result of an accidental gunshot wound sustained by an enlisted man, Private Henry J. Scott, 35734861, of the 3192 Quartermaster Service Unit, 211 Quartermaster Battalion, U S Army.

Every department of the 55th (US) General Hospital was now ready to handle its share of work for any patients from the battlefields of Europe.

RECEPTION OF PATIENTS BY THE TRAINLOAD

Incoming units were advised by the Western Base Surgeon to perfect a plan for the reception of patients by trainloads of approximately 300 casualties, with perhaps one hundred litter cases. This caused the Registrar, together with the Receiving and Evacuation Officer, and Commanding Officer of the Detachment of Patients, to make detailed plans for a volume of work never before contemplated. These officers made trips to hospitals nearby to study the breakdown of various phases of work, pertinent to their departments. It was found that the medical forms used in the United States were not to be utilized extensively, however, they were the only ones received with our initial issue of supplies. A special European Theater of Operations, United States Army (ETOUSA) form was to be used and upon investigation it was found that they were not immediately available.

The telephonic notice informing us of the arrival of a trainload of patients (battle casualties), was to contain the following information: The number of litter cases, ambulatory cases, and the total. The ambulatory patients were of no particular concern in unloading for they could take care of themselves. The litter cases offered an entirely different problem. Some cars had bunks for thirty-six patients, in vertical series of three, from which the patients had to be lifted, placed on a litter, and transported to the exterior of the car. Other hospital trains had litter racks. Each patient was brought into the train on his litter, which became his bed for the trip, set on racks along the side of the car. The

SECRET

Authority MND 735017By PT NARA Date 8/19/05

SECRET

detraining of patients transported on litters was simple as it consisted merely of picking up the litter and carrying it out. This litter-type of train was not as comfortable riding as the hospital train provided with beds. The Receiving and Evacuation Officer met the train at Worcester, about ten miles north of the hospital, accompanied by enough doctors so that there was one for each carload of bed patients. During the trip from Worcester to the post, casualties were interviewed and tags placed on each according to a pre-arranged plan, which indicated unloading points on ramp "A", "B", or "C", and the number of the ward to which he was to be sent. There was ample time to make a quick survey of each carload by this method, notes were made of any in a serious or critical condition, the approximate number needing penicillin, transfusions, or perhaps emergency surgery. In the meantime, a detail of about seventy-five enlisted men from the detachment went to the depot with the necessary number of litters, blankets, an exchange of linen, and food for replenishing the larder of the train. The distance from the hospital to the depot was about a mile and a half. Additional ambulances were borrowed from nearby units to make a total of twenty-five, and occasionally buses were available, each able to carry thirty ambulatory patients. Litters were unfolded and blankets placed on them in the proper order in case it was a train with beds. A property exchange was made for each car for litters, blankets, splints, linen, pillowcases, pajamas, and other items. When the train stopped, its commander was contacted immediately to determine the various types of patients and the cars in which they were located.

Ambulatory casualties were immediately guided off the train, directed to the waiting buses or trucks and sent on their way. When these men arrived at the hospital recreation hall, they went to the mess hall for a hot meal, and then to the Receiving Office for assignment to the proper ward. Messengers escorted groups of patients to their proper destinations.

Authority MND 735017By IC NARA Date 8/19/05

SECRET

In the meantime, the litter patients were taken from three or four hospital cars which were being unloaded simultaneously. An ambulance was given a definite destination, such as "A", "B", or "C" ramp, and was loaded with patients accordingly. The loading was controlled by an officer who read each tag as the patient approached the ambulance loading point. From the unloading point they were taken by wheel litters to the ward mentioned by the tag. American litters would not fit British wheeled litter carriers, and visa versa. Each English and American wheeled litter had been equipped with a frame with notches cut so that either variety of litters would fit without slipping. Groups of corpsmen used wheeled litters at the unloading point, which made an easy carry to the nearby ward indicated by the tag. When the patient was put in bed the blankets and empty litters were sent back to the unloading point. Ambulance congestion was avoided by having one-way roads on the post, made possible by the improvised connection with a farmer's private roadway to his estate. Prior to the arrival of the train, certain wards had been designated as orthopedic, general surgery, neuro-surgery, etc., and a tag prepared for each bed available in the ward. The group of doctors who sorted the patients during the last few miles of the trip used part of these tags. The unused portion, represented the vacant beds remaining on wards. These were immediately turned over to the Receiving Officer who sorted the ambulatory patients, consequently there was no mix-up by assigning too many patients to a ward. It was found that the collection of valuables, money and other items was too time-consuming for a large number of ambulatory patients so the procedure was changed and accomplished on the wards. All available clerks in the unit were placed in a pool to type the necessary records, and the Commanding Officer of the Detachment of Patients made his ward rounds immediately after the arrival of the last patient on the hospital site.

Patients were distributed more or less evenly throughout the hospital with the first trains. However, it was found that when the hospital was busy, this system

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had some drawbacks, principally because it was difficult for a doctor to keep track of all of his people on several wards. To correct this the system was changed whereby a few wards were completely vacated, then designated temporarily to various surgical specialties as receiving wards. This simplified the supervision of the new arrivals as it concentrated for the doctor all of his new casualties.

The receiving wards had a considerable extra burden of nursing care for a short time. The new patients were given baths shortly after arrival on the ward or were permitted to wash and shave, then eat before going to sleep. Doctors made rounds as rapidly as the wards filled and quickly classified cases into group "1", "2", "3", or "4", depending on the necessity for emergency surgery, transfusions, or other treatment. A few beds were reserved in the "B" ramp wards for the more serious cases, and some were admitted directly to those six wards which were connected by an inclosed corridor with the main operating room. It was a common experience to see transfusions or intravenous plasma actually started before the last litter cases were wheeled onto the ward. One litter troop train with 228 litter cases and 65 ambulatory cases was unloaded in thirty-three minutes.

Following is a table which gives the information listed with reference to patients received at this hospital by train:

- a. The number of trains received during the period covered by this history.
- b. The date of arrival of each train.
- c. The number of ambulatory patients received on each train.
- d. The number of litter (non-ambulatory) patients received on each train.
- e. The number of patients received by the medical service off of each train.
- f. The number of patients received by the surgical service off of each train.
- g. The total number of patients received on each train.
- h. The totals of c, d, e, f, and g above.

SECRET

Authority MND 735017By LT NARA Date 8/19/05**SECRET**

<u>a</u>	<u>b</u>	<u>c</u>	<u>d</u>	<u>e</u>	<u>f</u>	<u>g</u>	
		AMBULATORY	LITTER	MEDICAL	SURGICAL	TOTAL	
(1)	11 June 1944	149	164	6	307	313	
(2)	12 June "	195	83	64	214	278	
(3)	14 June "	110	172	36	246	282	
(4)	18 June "	62	252	40	274	314	
(5)	26 June "	176	42	23	195	218	
(6)	9 July "	171	98	70	199	269	
(7)	21 July "	119	166	21	264	285	
(8)	30 July "	65	228	1	292	293	
(9)	7 Aug "	63	232	24	271	295	
(10)	29 Aug "	64	228	10	282	292	
(11)	27 Sept "	28	227	26	229	255	
	<u>h.</u>	1,202	1,892	321	2,573	3,094	<u>h.</u>

Note: This table by no means shows or indicates the total number of patients admitted to this hospital.

* * *

Reports of the various Departments, by months, follow:

Surgical Admissions: **1308**
 Medical Admissions: **230**
 Hospital Admissions: **1538**

MONTHLY SURGICAL REPORT
 55TH (US) GENERAL HOSPITAL

Month Ending 1 July 1944

June

SECRET

Section of Surgery	Volume of Work			Number of Operations			Number of Wounds and Wound Infections										Post-Op. Complications		Deaths			
	Admissions	Out-patient visits	Consultations	Majors	Minors	Plasters	Diagnostic Procedures	Number of refractions	Number of glasses ordered	Clean Operations					Trauma					Pulmonary	Vascular, etc.	No.
										No. Operations	No. Infections	Battle Injuries	No. Infections	Non-battle Injuries	No. Injuries	No. Infections	Battle Injuries	No. Injuries				
General	370	9	14	9	168	3	3	4	-	12	0	370	4	5	1	1	0	0				
Orthopedic	411	58	59	15	142	201	0	-	-	244	0	368	1	1	0	0	0	0				
Neurological	124	1	55	33	23	2	1	-	-	56	0	120	0	2	0	0	0	2				
Septic	296	7	5	1	52	2	7	12	-	4	0	296	0	1	0	0	0	0				
Urological	55	14	14	4	31	0	3	12	-	35	0	30	0	0	0	0	0	0				
Thoracic	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0				
Otolaryngological	42	72	157	7	11	0	3	-	-	18	0	28	0	4	0	0	0	0				
Ophthalmological	30	92	93	3	13	0	0	29	18	16	0	27	0	2	0	0	0	0				
Plastic	0	0	0	0	0	0	0	-	-	0	0	0	0	0	0	0	0	0				
Maxillo-facial	0	0	0	0	0	0	0	-	-	0	0	0	0	0	0	0	0	0				
Gynecological	0	0	0	0	0	0	0	-	-	0	0	0	0	0	0	0	0	0				
Dental	0	0	0	0	0	0	0	-	-	0	0	0	0	0	0	0	0	0				
TOTAL	1308	253	390	72	440	208	24	29	18	385	0	1259	1	15	0	1	0	2				

SECRET

Authority MND 735017By PC NARA Date 8/19/03

SECRET

PROCEDURES

U. S. Army

Other U. S. Forces

Allied Forces

Other Personnel

TOTAL

	Major	Minor	Plaster	Diagnosis	TOTAL	Elective	Emergency
U. S. Army	57	395	0	15	467	21	15
Other U. S. Forces	2	22	0	0	24	0	4
Allied Forces	2	6	0	0	8	0	2
Other Personnel	0	0	0	0	0	0	0
TOTAL	61	423	0	15	499	21	21

INTRAVENOUS THERAPY

TRANSFUSIONS					CRYSTALLOIDS (by litre)				
Fresh whole blood	Stored blood	Dry Plasma	Plasma from stored blood	TOTAL	Distilled water	5% Glucose and saline	5% glucose and distilled water	10% Glucose & distilled water	Physiological saline
19	80	28	0	127	0	53	0	45	13
									TOTAL
									110

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SECRETComments on Interesting Cases and Deaths: (June 1944) Surgical Report

(See reference in monthly Surgical Report (*))

1. No infections are listed after the Battle and Non-Battle casualties because no post operative infections have been encountered. Almost all of the wounds received have shown infections, but they have cleared very rapidly under adequate surgical debridement, sterile dressings, penicillin and chemotherapy. For this reason no post operative infections are listed with the exception of one minor case in the Orthopedic Section. There was one pulmonary complication, a dry pleurisy, which appeared 48 hours after surgery and was thought possibly to have been related to surgery.

2. Two deaths have occurred on the Neurosurgical Service. Both of these were penetrating wounds of the head and in critical condition at the time of operation, however there were indications for surgical debridement and both deaths occurred after a 48 hour post-operative period.

3. There has been uniformity in agreement among the surgeons of this hospital that cases received here from the Normandy battle front had received excellent care in the forward echelons. We have been following a policy of continuing penicillin if the patient had been receiving it on admission at least for one or two doses until the cases could be evaluated. Sulfadiazine has been continued also for a short period of time if the patient had been receiving it on admission.

4. It is too early to evaluate our secondary closures, however a number of these have been done with surprisingly good results.

5. 513 anesthetics had been administered during the month with no post-operative complications other than the one case of dry pleurisy previously referred to.

/s/ Joseph M. Roberts
JOSEPH M. ROBERTS
Major, MC
Chief of the Surgical Service

Authority UND 735017By PC NARA Date 8/19/05**SECRET**

SURGICAL SERVICE: On the 11th of June this hospital received its first casualties from the battle of Normandy. Between this date and midnight, 30 June 1944, 1,405 patients were received by train and admitted to this hospital, of which 1,236 were admitted to the surgical service. In addition to the reception of these patients, 351 out-patients were seen by members on the surgical service.

During the month the following operations were done: 72 major operations, 440 minor operations; 208 plaster casts; 24 diagnostic procedures, and 29 eye refractions.

The majority of the cases received demonstrated some wound infection, however, no case of wound infection following surgery has been reported for this month. There was one minor infection following an operative procedure on the orthopedic service. There were no vascular complications, and only one minor pulmonary complication which was a dry pleurisy which developed two days following surgery.

Two deaths occurred on the surgical service: (1) Staff Sergeant John E Montgomery, ASN 20346575, of Battery B, 110 Field Artillery Battalion, U S Army. Death was due to gunshot wound, penetrating, posterior parietal region right, right eye and right maxillary sinus. The patient was transferred to this hospital and on the 18th of June a debridement and closure of the defect of the right parietal temporal region was done. The patient expired on the 20th of June. (2) Marvin Krull, ASN 8513878, of the U S Navy, U S S, L S T 48. Death was due to a gunshot wound, penetrating, both orbits, the right temporal fossa and left frontal lobe. This patient was admitted on the 12th of June and a craniotomy was done on the 13th of June, with debridement. The patient expired on the 14th of June.

The Eye, Ear, Nose and Throat Service had 42 otolaryngology and 30 ophthalmology admissions this month. There were 164 out-patient visits and 250 consultations within the hospital. Twenty-nine patients were given refractions, and 18 pair of glasses

Authority MND 735017By PT NARA Date 8/19/05

SECRET

ordered. There were 34 operative procedures for both services during the month.

The Neurosurgery Section had 124 admissions. Thirty-three major operations and twenty-three minor operations were performed during the month. The remaining cases were peripheral nerve cases awaiting surgery. Two deaths occurred on the Neurosurgical Service, however, both were very serious penetration intra-cranial lesions and were thought hopeless at the time of operation, although some help could be extended to them if surgery was accomplished. In the septic surgery section there were two hundred and ninety six admissions to this service. Sixty-two operative and diagnostic procedures were carried out. Superior work has very definitely been accomplished by this section in the care of burns and special commendation should be given to all the sections on the handling of infected wounds. Important items in the handling of these wounds were (1) penicillin, (2) sulfathiazol, (3) adequate debridement, (4) aseptic technique in the dressing of wounds. The Urology Section had 35 direct admissions during the month, of which 30 were battle casualties. Four major operations, thirty-one minor operations, and eight diagnostic procedures were accomplished. The General Surgery had 370 direct admissions to their service. One hundred and sixty-eight minor and nine major operations have been accomplished. There was one minor complication on this service which followed two days after surgery. Five hundred and thirteen anesthetics were administered during the month with no post-operative complications.

Central Supply issued the following supplies: three incision and drainage trays, four lavage and gavage, forty-three spinal sets, five catheterization trays, fourteen aspiration and injection trays, ninety-nine recipient sets, ninety-nine donor sets, sixty instrument sets, eight gastric analysis, twenty-five sheets and pillow cases, three hundred towels, seventy-six jars of vaseline gauze, and one hundred and eleven intravenous sets. The following dressings were issued:

Authority AND 735017By PT NARA Date 5/19/05

SECRET

96 packages of 4 x 4's, 128 jars of 2 x 2's, 74 boxes of applicators, 15 jars of cotton balls, 45 glucose 10% in distilled water, 12 normal saline, 53 glucose, 5% in saline and 28 plasma sets.

MEDICAL SERVICE: The Chief of the Medical Service, Major William N. Weaver, 0309207, MC, was placed on detached service for one day, 6 June, at which time he looked over the set-up of the 280th Station Hospital. Several other officers were placed on detached service with units to study their procedures so that a better understanding could be obtained of their own work. During this month of June, several officers of the medical service were loaned to the surgical service along with the technicians, nurses and wards as the preponderance of professional work required it.

With the beginning of the campaign of liberation on the 6th of June, a new phase of activity started. Previous to this, we had acted primarily as a station hospital for surrounding units, and for a short time, as a holding hospital for patients on their way to the Zone of the Interior. The first trainload of patients (battle casualties) arrived on the 12th of June; the second on the 12th of June, the third on the 14th of June, the fourth on the 18th of June, and the fifth on the 26th of June. An analysis of the type of patients received on the medical service showed that malaria comprised the largest group and combat exhaustion the second in size.

The first professional staff meeting for doctors was held under the auspices of the medical service on the 28th of June at 1930 hours in the officers' day room. There was a presentation of three cases: one each of Pneumococcal Endocarditis, Gout, and Boeck's Sarcoid.

LABORATORY SERVICE: During the first month of operation with battle casualties the laboratory was swamped with work after the first quiet days of the month. The

SECRET
- 33 -

Authority MND 735017By PC NARA Date 8/19/05

SECRET

laboratory technicians labored long hours testing urine, blood and other things, finishing frequently at midnight. All patients received a routine blood count and urinalysis, and all but 150 had a routine Kahn performed. Cultures were taken of the war wounds by the bacteriologist in his work of identifying numerous Clostridia. There was the added inconvenience of running to nearby hospitals to re-charge the anaerobic jar, as our hydrogen had not yet arrived. The many malaria patients had thick smears examined for parasites. The chemistry section took the load of sulfa level determinations and the task of preparing six to fifteen million units of penicillin daily. Pathology had three more postmortems and several neoplasms.

The month ended with the laboratory back in somewhat of a normal state after having performed approximately 10,000 tests.

ROENTGENOLOGICAL SERVICE: During the first ten days of the month of June, a small permanent shelter was completed at the rear and outside of the X-ray building, for the purpose of housing an emergency gasoline generator. A portable lead screen was obtained from Warehouse M-400, painted and mounted on a mobile base for the protection of the technicians. On 6 June 1944, fifty-five Roentgenologists were present at a meeting of all hospital x-ray service chiefs of the Western Base Section.

The first encephalogram was done during this time. From the 11th of June to the 30th of June, approximately 950 patients were examined and 287 returned for additional views.

DENTAL SERVICE: The month of June saw the clinic begin to operate under the stimulus of a hospital full of patients. The M.D. Form 57 for the month showed the following services rendered:

Admissions	-	341
Sittings	-	944
Operations	-	1224
Hospital Patients Surveyed	-	1122

SECRET

Authority UND 735017By PC NARA Date 8/19/05

SECRET

Several critical items of equipment were received, i.e., a mobile electric engine, an aspirating apparatus, a fountain cuspidor, four electric sterilizers, and a denture flask. The last item was purchased locally, while six more remained on back-order. The lack of denture flasks handicapped the clinic in such a way that the prosthetic section could not function, as the flasks were needed to produce dentures. Two were borrowed from a neighboring unit, which permitted the prosthetic section to function full time. Several minor problems in adjustment were encountered in relation to the coordination with the hospital as a whole, but were adjusted without difficulty. Lt Col T M Smith, DC, Dental Surgeon, ETOUSA, inspected the clinic late in the month and was well pleased.

MEDICAL SUPPLY: Routine trips were made to supply depots to get penicillin and other medical supplies. This department made property exchanges at all of the hospital trains received by this unit in June. Maintenance supplies were requisitioned and issued to the different wards and departments. Linen was taken to and returned from the laundry by the Medical Supply personnel.

QUARTERMASTER SUPPLY: Additional clothing and equipment was requisitioned. Among the items received were: towels, braid for EM caps, and bicycles for the departments. The salvaging of clothing and equipment was established and trash was sorted over for articles that could be used again. Concrete slabs were procured from the area engineers for the construction of side-walks and for the floors of the expansion program ward tents.

All impregnated clothing was picked up from the Enlisted Men and stored in a building for safe keeping. A "shake-down" inspection was held to determine the articles of clothing and equipment lost during the voyage overseas. They were replaced through Statement of Charges. Shoes were accepted for repair and taken to a shoe repair shop in Ledbury. A laundry service was obtained. Collection of garments was at the warehouse and delivery was to the company First Sergeants for

SECRET

Authority AND 735017By PT NARA Date 8/19/05

SECRET

distribution to the enlisted men of their individual companies. White clothing for the mess personnel was requisitioned, received and issued. Shoulder patches (Army Service Forces) were received and issued to those who had not yet received their basic share.

Second Lieutenant Frank (NMI) Stoy, 01590836, QMC, was in charge of Quartermaster Supply, the month of June 1944, in the absence of First Lieutenant Robert S. Wasley, 01589577, QMC, who was on temporary duty at another camp site for the purpose of receiving, storing, and guarding property for another general hospital.

TRANSPORTATION SERVICE: Two ambulances from the 12th Medical Hospital Center, were added to the transportation section and after a thorough cleaning were repainted, including Red Crosses, Caduceus and unit identification. The mechanics cleaned and put into operation the sterilizer and autoclaves for surgery, auxiliary surgery, and central supply. Arrangements were made for an additional Diesel oil fuel pump, so that a reserve could be maintained and dispensed as needed. The capacity for motor fuel was doubled by taking over another pump, giving total capacity of 1,000 gallons. Drums were requisitioned to maintain a small supply of white gasoline and kerosene. The mechanics also installed bicycle tire rubber on hospital food carts to reduce the noise made by the solid plastic wheels on the concrete walk. A parking lot for visitor's motor vehicles was started and rock was hauled to the site from a nearby hill. A chain block was constructed in the motor pool garage for lifting heavy motors from the chassis of trucks.

The motor pool, during June, operated twenty-four hours a day, seven days a week, covering a distance of approximately 30,000 miles with only one minor accident.

UTILITY DEPARTMENT: This department built clothing racks in the hospital wards, frames for mirrors in the enlisted men's hutments, several dish racks and garbage racks for the mess hall. Bulletin boards were placed in front of Detachment Headquarters for the Enlisted Men and in the Officer's Mess for the officers and nurses.

Authority AND 735017By PT NARA Date 8/19/05

SECRET

A scrap lumber pile was sorted and stacked near the utility shop. This was used in the construction of numerous things which included office furniture. Changes in electrical wiring and plumbing were started in the Genito-Urinary Section so that it could be converted into an auxiliary surgery. The men of the utility section were in demand all over the hospital and did an excellent job.

MESS DEPARTMENT: This month saw the Mess Department performing at a high rate of speed with many difficulties. The increase of work was caused by the great influx of patients from the Campaign of Liberation. Approximately 132,000 meals were prepared and served during the month. This figure does not include meals served in the Detachment and Officers' messes for the night personnel. Men from utilities built tables, and installed two dishwashing sinks. The mechanical dishwasher arrived and was ready to be installed. Several inspections were held by officials from the 12th (US) Medical Hospital Center and the XXVIII District Headquarters.

PERSONNEL SECTION: Ninety-five enlisted men of the detachment were interviewed in reference to conversion of their War Bonds. Of the 95 interviewed who were eligible to convert their bonds during the month of July, 41 increased their allotment for one bond a month, 22 increased their allotment to \$18.75 and one increased his allotment to \$37.50 a month. The rest of the enlisted men stated their monthly pay deductions were at the maximum and that they could not increase their allotment at this time.

The following is a table showing the amount of cash transmitted to the United States during the month of June 1944:

Money Orders	\$2,016.07	
Personal Transmittal of Accounts	3,270.00	Det Med Dept
Personal Transmittal of Accounts	105.00	Det of Pnts
War Bonds	<u>75.00</u>	
Total	\$5,466.07	

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Authority AND 735017By IC NARA Date 8/19/03**SECRET**

DETACHMENT MEDICAL DEPARTMENT: On the occasions when hospital trains arrived the detachment was split into various groups. All administrative, other than those used as typists, and mess personnel became litter bearers and helped with the evacuation of patients from the trains. All professional service men remained on their various wards and assisted wherever necessary within the hospital. The morale of the organization during this period was very high. Every man knew that it was his duty to help as much as he possibly could, and did so with the highest of spirit and willingness.

Special Service arranged movies and concerts for the men of the Detachment Medical Department and the patients. The first enlisted men's dance in the Detachment area was held in the officers club the early part of June, their dancing partners being local civilians or British Service Forces women.

The training program for the men was made by the Plans and Training Officer. The Articles of War were read and explained, a lecture and movie on Venereal Disease Control was given. Weekly formal retreat parades were held with the military band of the hospital. The Detachment participated in a parade in Worcester for the benefit of the "Salute the Soldier Week" campaign.

Various inspections were held during the month by the Western Base Section Headquarters. All of them found the hospital busy and coordinated. The Chaplains organized birthday parties for the enlisted men and the officers and nurses. There were religious services for many denominations. The hospital was honored by the visit of Staff Sergeant Joe Louis, U S Army, on 28 June. United Service Organization shows visited the post several times during the month and their shows were enjoyed by all.

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Surgical Admissions: 900
Medical Admissions: 78
Hospital Admissions: 978

MONTHLY SURGICAL REPORT
55TH (US) GENERAL HOSPITAL

Month Ending 1 August 1944

July

Section of Surgery	Volume of Work	Number of Operations	Number of Wounds and										Post-Op. Compli- cations	Deaths						
			Clean Opera- tions					Trauma												
	Admissions	Out-patient visits	Consultations	Majors	Minors	Plasters	Diagnostic Procedures	Number of refractions	Number of glasses ordered	No. Opera- tions	No. Infec- tions	Battle Injuries	No. Infec- tions	Non-battle Injuries	No. in- juries	Pulmonary	Vascular, etc.	No.		
General	309	6	60	36	136	6	11	-	-	31	0	835	0	16	0	0	0	0	0	(Spoke asso- ciated with
Orthopedic	218	21	228	163	161	890	0	-	-	1	0	196	1	17	0	0	0	0	0	(pression of spinal cord
Neuro- logical	131	7	50	87	7	21	0	-	-	0	0	125	0	7	0	0	0	0	0	1
Septic	171	6	14	19	78	4	36	-	-	10	0	164	3	7	0	0	0	0	1	(Nitrous oxide (Anes- thetic).
Urological	25	18	75	4	16	0	14	-	-	12	0	19	0	6	0	0	0	0	0	(death).
Rhinologic	0	0	0	0	0	0	0	-	-	0	0	0	0	0	0	0	0	0	0	
Otolaryngo- logical	26	51	225	4	18	0	0	-	-	6	0	16	0	7	0	0	0	0	0	
Ophthalmolo- gical	25	70	146	3	7	0	0	59	27	1	0	3	0	4	0	0	0	0	0	
Plastic	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Maxillo facial	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Gyneco- logical	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Dental	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
TOTAL	900	189	796	515	425	521	61	59	27	51	0	819	4	64	0	0	1	2		

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PROCEDURES

	Major	Minor	Plaster	Diagnosis	TOTAL	Elective	Emergency
U. S. Army	310	425	321	611	117	49	0
Other U. S. Forces	5	0	0	0	5	0	0
Allied Forces	0	0	0	0	0	0	0
Other Personnel	0	0	0	0	0	0	0
TOTAL	315	425	321	61	1122	49	4

INTRAVENOUS THERAPY

TRANSFUSIONS					CRYSTALLOIDS (by litre)					
Fresh whole blood	Stored blood	Dry Plasma	Plasma from stored blood	TOTAL	Distilled water	5% glucose and saline	5% glucose and distilled water	10% glucose & distilled water	Physiological saline	TOTAL
3	175	42	0	176	0	46	0	46	5	91

Authority MND 735017By PT NARA Date 8/19/05**SECRET****Surgical Report - Continued:****July Report**

1. **Interesting Cases:** There are four cases listed as having had infection secondary to surgery out of the 810 battle casualties. These four all were minor infections; one was associated with a Kirschner wire, and three were associated with secondary closure of wounds. None of these infections were serious. Almost all of the wounds received as battle casualties have come in as infected wounds, but the majority of them have cleared. There were no pulmonary complications this month; however, there was one moderate thrombophlebitis of an upper extremity. An intestinal obstruction developed as a result of a volvulus of the small intestine about adhesions which developed secondary to evisceration. This had previously been operated in a forward echelon and no through and through sutures had been placed in the wound. With relief of the obstruction the convalescence had been uneventful; patient is making a satisfactory recovery.

2. Two deaths have occurred during the month of July on the Surgical Service. (1) Kernoski, George A, Sgt, ASN 33055091; died of an over-dosage of nitrous oxide. a full report has previously been made on this case. (2) Martishek, John J, Jr., Pvt, ASN 48053811; died of shock, on the operating table, which was related to a compression of 5 upper thoracic segments of the spinal cord. A laminectomy was being done at the time of the patient's death for the relief of this obstruction but the patient failed to rally from the operation.

3. Two brain abscesses and one extensive sub-dural abscess have been treated by drainage, with the installation of penicillin into the cavities. These three cases have made startling recoveries. A number of cases of causalgia have been treated successfully with sympathetic injections of novocaine. Several of these have received complete relief by sympathectomies.

4. Approximately 200 secondary closures have been done since 11 June 1944. There have been no complete failures, and a very few have had partial separations. The best results in this series have been accomplished in those cases in which sulfadiazine was given pre-and post-operatively to the secondary closure. A great deal of emphasis has been placed on the obliteration of dead space and the prevention of buried sutures.

5. A total of 690 anesthetics were administered during the month with no post-operative pulmonary complications other than the one nitrous oxide death which has previously been described.

s/ JOSEPH M. ROBERTS
t/ JOSEPH M. ROBERTS
Major, MC
Chief of Surgical Service

SECRETDEPARTMENTAL REPORTS OF MONTH OF JULY

SURGICAL SERVICE: 1. During the month of July, 900 patients were admitted to the Surgical Service. The surgical patients were so numerous that thirty-three of the thirty-eight wards were necessary to house them, and twenty-two of the thirty-seven assigned Medical Officers attended to their professional needs.

Seven hundred and forty operations were performed during the month, of which two hundred and seventeen were done in the auxiliary surgery, and five hundred and twenty-three in the main surgical theater. Six hundred and ninety anesthetics were administered with no post-operative pulmonary complications. Two deaths occurred on the service during this month; both while on the operating table, one with a brain tumor, the other with a transection of the spinal cord.

2. Construction: The major effort was directed toward the completion of the auxiliary surgery. The cyclotherm furnished steam for the battery of instruments and water boilers, and the autoclave. A start was made on a heating system for the new surgical facilities but this was not urgently needed as the weather was mild. A portable generator was installed to furnish 110 volt current for the motors of the cyclotherm. In an emergency some current could be supplied to a few articles of American surgical equipment.

Weekly staff meetings were started during this month, two of which were taken over by the surgical service. The first program was concerned with diagnosis and treatment of clostridial infections, with analysis of the bacteriology of these infections. At the second meeting, a report was given on the work done in this hospital in secondary closures of wounds.

SPECIAL DEPARTMENTS:

PHYSICAL THERAPY: More emphasis was given to the rehabilitation of the battle casualties through increasing the home-made equipment of the physical

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therapy department and by reorganizing the number of wards and tents for rehabilitation. Attention was concentrated on three separate sections:

- (1) Detailed study of the needs of each individual.
- (2) Exercises for groups in the gymnasium.
- (3) Physical reconditioning of bed or convalescent patients on the ward.

Peripheral nerve injuries were studied pre-operatively by electrical tests in conjunction with the clinical examination; and were treated post-operatively by electrical stimulation, as well as active and passive exercises. An average of 143 men were treated daily in the physical therapy department, exclusive of wards and the gymnasium.

REHABILITATION: The rehabilitation section had 130 beds available for their program. The wards were at one end of the post which partially segregated them from the hospital proper without decreasing in any way a centralized control. The morale of this group was materially stepped up with the changed policy of allowing this group to partially govern itself and to stimulate competitive rather than required exercises. Their work was closely coordinated with that of the physical therapy department on an advanced scale.

EYE, EAR, NOSE, AND THROAT CLINIC: During July this section was reorganized. All eye cases were consolidated in Ward 25 and the ear, nose, and throat cases in Ward 21. This consolidation allowed the concentration of special instruments, medication and nursing care.

CENTRAL SUPPLY: This department operated in its usual efficient manner. The sterilization of supplies and the distribution to the wards was carried out in an excellent manner by this department.

MEDICAL SERVICE: The census of the Medical Service at the beginning of July was 152 patients and at the end of the month 77 patients, a decrease of 50%.

Authority MND 735017By PC NARA Date 8/19/05

SECRET

This was due to two factors; first, very few medical cases were received from France; and secondly, the number of units attached to this hospital for professional service had been greatly decreased. The bed capacity of the Medical Service decreased as other wards were released for the use of the Surgical Service. Female patients were no longer admitted to this hospital, as the 12th (US) Medical Hospital Center consolidated this service at the 93rd (US) General Hospital. The few officer patients on the Medical Service were transferred to the officer surgical ward.

Only one officer on the Medical Service was on detached service this month, Major William N. Weaver, to Headquarters, Western Base Section, July 19th and 20th. During this month twenty enlisted men were promoted, and three were reduced for inefficiency, while advanced technical training for all enlisted men was part of the day's work.

Beginning the 1st of July, each officer on the Medical Service was given one day off every eight days.

LABORATORY SERVICE: The Laboratory Service settled down to a more or less brisk routine, with less confusion in handling the weekly convoys and completing the regular laboratory tests. This work went on smoothly without any obvious disruption when new patients arrived. Clostridia cultures were demonstrated at a professional meeting, as this was one of the big problems of the laboratory service. This included the cultural characteristics of *Clostridium perfringens* and the action of penicillin on that organism. Several interesting blood dyscrasias were found.

The Chemistry Section determined numerous sulfa levels and put into solution the penicillin for use on patients. Serology continued routine Kahn tests with false positive reactions occasionally among malaria cases. In Pathology there was

Authority NND 735017By PT NARA Date 8/19/05

SECRET

an interesting postmortem, a patient with a brain tumor and a carcinoma of the prostate as an incidental finding. The surgical specimens proved to be little more than wound debridements and foreign material from wounds.

ROENTGENOLOGICAL SERVICE: This service held weekly conferences and the diagnostic problems were discussed with the ward doctor. Increased efficiency in the department permitted routine work to be done with less effort, and extra large loads were completed easily.

DENTAL SERVICE: During the month of July five dental officers gave 914 treatments.

MEDICAL SUPPLY: The Medical Supply made routine trips to Smethwick for laundry. Trips were made to Wolverhampton to secure gas from the British Oxygen Company. An additional allotment of balkan frames was made by G-22 and issued to the Orthopedic Service. Sinusoidal machines were received from G-23.

QUARTERMASTER SUPPLY OFFICE: The Quartermaster Supply Office performed routine duties, such as necessary requisitions and receipts of clothing and equipment. Shoes were accepted for repair and clothing was salvaged through this supply. Laundry services seemed to be quite adequate for both Officers and Enlisted Men.

TRANSPORTATION SERVICE: The Transportation Service during this month made routine trips to adjacent cities to pick up supplies and assisted some of the other hospitals in this Center when their hospital trains arrived. During July, 26,000 miles were travelled by all vehicles of the motor pool, with no accidents.

MESS DEPARTMENT: The Mess Department made many changes and improvements, the biggest of which was the installation of the dishwashing machine in the patients' mess. Its use greatly improved the efficiency of the dishwashing procedure, with a considerable saving of man power. There was a sense of security because of the steam sterilization. Cafeteria-style feeding was put into practice for two lines of

Authority MND 735017By PT NARA Date 8/19/05

SECRET

patients, thus reducing the feeding time about 40%, and made it possible to have 700 ambulatory patients fed in forty minutes. Numerous inspections were conducted by officials from Western Base Section, XXVIII District, and the 12th (US) Medical Hospital Center, all with encouraging results. Approximately 165,000 meals were served in all mess halls during this month.

PERSONNEL SECTION: Second Lieutenant Richard G. Kane, 02048030, MAC, was appointed Personnel Officer on 18 July, relieving Chief Warrant Officer Francis G. Hickey, W-2126275, USA. The personnel office and the detachment of patients office were moved on 23 July to their present location, which gave them adequate space for the first time, and allowed separation into different sections. The personnel department handled records and papers for the Detachment Medical Department as well as the Detachment of Patients. Under the present arrangement with the two offices separated, the resulting increase in efficiency of all personnel enabled them to keep up with the work. With trainloads of incoming patients, and large outgoing groups, the volume of business was far in excess of anything anticipated. A partial payment was made to all patients of this hospital during the month in an amount considered to be adequate for his needs until the next pay day.

DETACHMENT MEDICAL DEPARTMENT: The Detachment Medical Department had a busy and exciting month. Enlisted men were sent to various schools and special teams were selected to witness demonstrations on decontamination of live mustard gas in Greater Malvern during the last two weeks of July. Details were set up daily for the landscaping and improving of the area. Special Service arranged for concerts of various kinds, and United Service Organization shows were presented to the Detachment and patients. The usual inspections of our area were made by the 12th (US) Hospital Center and Western Base Section. We were also honored by a visit from Major General Norman T. Kirk, USA, Surgeon General, Washington, D.C., accompanied by Major General

Authority UND 735017By PC NARA Date 8/19/05

SECRET

P. R. Hawley, USA, Chief Surgeon, European Theater of Operations.

The unit became owner of a new Theater, built with the help of an Engineer group, and completed by our own personnel. It was known as the "Coal Bin Palace" because it took over about a third of the central coal bin, and made use of a sloping concrete floor. This theater has added much comfort and better facilities for moving pictures, shows and plays. The monthly dance for the enlisted men was held in the Officers Club, where beer and coca-cola were provided at a small cost. The "55th Follies Company", consisting of a small group from the Detachment, were invited to present a show for the 12th (US) Hospital Center.

In addition to the theater, a new recreation hall was made available to the enlisted men in their barracks area, complete with a pool table, a refrigerator for beer, writing desks, and ping-pong tables. All streets and barracks in the enlisted men's area were named by the occupants with terms which were reminders of home or humorous titles.

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Authority MND 735017

By EE NARA Date 8/19/05

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Андрей

Surgical Admissions:	707
Medical Admissions :	54
Hospital Admissions:	761

MONTHLY SURGICAL REPORT
55TH (US) GENERAL HOSPITAL

North Ending 1 Sept 44

Section of Surgery	Volume of Work	Number of Operations	Number of Wounds and Round Infections							Post-Operative Complications		Deaths						
			Clean Operations	Trauma	No. Infections	No. Infections	No. Infections	No. Infections	Pulmonary	Vascular, etc.	No.							
General	206	4	45	19	176	2	0	0	3	0	190	0	2	0	Pulmonary			
Orthopedic	195	7	150	122	201	283	0	0	0	0	141	0	1	0	Edema			
Neuro-logical	123	10	60	88	19	35	0	0	0	0	107	0	1	0	(1) Subdural (2) Epidural (2) Intra-cerebral hemorrhage			
Septic	120	5	6	27	103	6	0	0	7	0	122	0	5	0				
Urological	13	3	42	7	11	0	4	0	22	0	11	0	7	0	1			
Thoracic	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
Otolaryngo-logical	28	53	154	1	21	0	0	0	23	0	9	2	4	0	0			
Ophthalmic-logical	9	26	197	5	5	0	0	0	18	0	8	0	0	0	0			
Plastic	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
Maxillo-facial	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
Gynecological	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
Dental	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
TOTAL	707	117	645	269	630	329	4	50	21	67	0	858	4	19	0	1	2	5

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PROCEDURES

	Major	Minor	Player	Diagnosis	TOTAL	Elective	Emergency
U. S. Army	268	629	329	4	1230	21	7
Other U. S. Forces	1	1	0	0	2	1	0
Allied Forces	0	0	0	0	0	0	0
Other Personnel	0	0	0	0	0	0	0
TOTAL	269	630	329	4	1232	22	7

INTRAVENOUS THERAPY

TRANSFUSIONS					CRYSTALLOIDS (by litre)																				
Fresh whole blood	2	Stored blood	149		Dry Plasma	76		Plasma from stored blood	0	TOTAL	227		Distilled water	0		5% glucose and saline	64	5% glucose and distilled water	10	10% glucose & distilled water	41	Physiological saline		TOTAL	116

SECRET**Monthly Surgical Report, August 1944****Comments on interesting cases and deaths:**

1. a. An area of fluctuation over an old McBurney scar on a colored boy who had previously been operated on for an acute appendicitis about one and a half years ago was drained. Cultures and biopsies of the inflammatory tract revealed actinomycosis. This patient received penicillin and, although he still has one small tract remaining post-operative convalescence has been uneventful.

b. In the early part of the month a patient was received on the Surgical Service with an operative note attached stating that his splenic vein had been perforated by a bullet and that the splenic vein had been ligated in a forward echelon. A few days after admittance to this hospital he developed an ascites. Diagnosis was made of splenic vein thrombosis with associated ascites. 4,000 cc of ascitic fluid were tapped from the peritoneal cavity. Following this there has been a gradual accumulation of a small amount of ascitic fluid which at this time appears to be absorbing. Patient is now ambulant and convalescence appears to be normal.

c. Following endoscopy in which local anesthesia was used for a posterior urethral tear, a patient on the Urological Service developed a right bronchopneumonia and a rather marked paralytic ileus, however, under the routine management of the ileus and pneumonia the patient made an uneventful recovery, and is symptom free at the present time.

2. There have been no definite cases of gas myositis observed this month, however several gas cellulitis wounds have been cultured and treated.

3. Of the four post-operative wound infections that have been listed this month, two were on the Otolaryngological service and two on the Neurosurgical Service. These have all been minor wounds and healing has taken place by secondary intention.

4. Three deaths occurred on the Surgical Service during the month of August:

(1) Stone, Harry W., Tec 4, ASN 6944463, was admitted to the 55th Gen Hosp on 30 July 1944. He had been struck on the right thigh by an aerial bomb fragment at about 1200 hours 24 July 1944 while in combat with the enemy in France. On 26 July 1944 a high amputation was done to the right thigh apparently because of circulatory disturbances to the lower extremity. On admission to this hospital his hematocrit was 19%. He received several blood and plasma transfusions, and late in the day of admission he developed marked dyspnea and considerable apprehension. On 31 July a diagnosis was made of pulmonary edema. Oxygen was administered; he expired 1100 hours 1 August 1944. Autopsy revealed an acute pulmonary edema, bronchopneumonia, bilateral and chronic passive congestion.

(2) Schultz, Mathias P., Pfc, ASN 33591965, was admitted to the 55th Gen Hosp from the 93rd Gen Hosp about 1600 hours on 29 August 44. Patient had sustained multiple wounds of the right parietal region, back, chest and extremities, on 14 August 1944 in France. He had lower extremities in plaster, and an indwelling catheter. There was a right lower facial paralysis. At 1830 he suddenly became cyanotic and dyspneic and expired at 1839, 29 August 1944. Autopsy findings were as follows: (a) Subdural hematoma involving left motor area. (b) Hemathothorax. (c) Fractured right femur, and, (d) Probable pulmonary embolus.

(3) McCue, William, Pvt, ASN 3231883, was admitted to the 55th Gen Hosp from the 156th Gen Hosp on 28 August 1944. He was operated in this hospital the

Authority MND 735017By PT NARA Date 8/19/05**SECRET****Monthly Surgical Report, August 1944 (Continued):****Comments on interesting cases and deaths:**

evening of 28 August 1944 at which time bilateral sub-temporal decompressions were done and blood was aspirated from both lateral ventricles. At 2330 30 August 1944 a second spinal tap was being done to relieve an increasing intra-cerebral pressure when the patient expired. Autopsy revealed cerebral hemorrhages all ventricles, secondary to penetrating head wound by shell fragment.

5. There were 765 anesthetics administered during the month of August with no post-operative complications.

* * *

DEPARTMENT REPORTS FOR MONTH OF AUGUST

SURGICAL SERVICE: A change was made in the reception of patients coming in by the trainload. Previously patients were scattered all over the hospital, according to unoccupied bed space. The new procedure concentrated incoming patients on certain wards that had been emptied by transfer of patients to other portions of the hospital. This permitted more efficient operation in the receiving of patients and in the surveying of seriously ill casualties. Just before operation the patient was transferred to one of the special pre-operative wards, to which he was returned for a day or two, and then went on to a convalescent ward designated for that particular type of disability.

The rehabilitation program progressed rapidly, because of visits by the staff to the 10th Replacement Depot, 77th Station Hospital, 123 and 307th etc., set aside for this purpose. Some apparatus was received from the 12th (US) Medical Hospital Center Supply and a great deal was made by the patients for their own use on the wards and in a tent set up as a gymnasium. The patients' soft-ball team made a good showing against the other teams in this center, two games were lost, out of about twenty-five played. The patients in rehabilitation built a miniature golf course with hazards, an outside basket-ball court, erected a tent for the Red Cross, installed cement foundations for heavy and light punching bags, laid blocks for tent walks, policed the area, cut grass, repaired the soft-ball field, and accomplished many other useful services in and around the hospital.

During the month some 544 men were discharged from this hospital as follows:

(1.)	10th Replacement Depot (Duty)	245
(2.)	77th Station Hospital	156
(3.)	279th Station Hospital	83
(4.)	307th Station Hospital.....	51
(5.)	123rd Station Hospital	8
(6.)	12th Replacement Depot	1

The Physical Therapy Department performed 7,491 treatments in their building and 18,675 on the wards. Their average daily number of patients in the Department came to 241.

Authority MND 735017By LC NARA Date 8/19/05**SECRET**

Status of Service. 1. Of the 761 patients admitted to the 55th (US) General Hospital during the Month of August, 707 were for the Surgical Service. The division to the different services was as follows:

- (1.) General Surgery.....206
- (2.) Orthopedic Surgery193
- (3.) Neurological138
- (4.) Septic120
- (5.) Urological 13
- (6.) Otolaryngological 28
- (7.) Ophthalmological 9

b. In the main surgery 213 major and 528 minor operations were performed, while Auxiliary Surgery unit, there were 56 major and 102 minor operations. Casts were applied in the two surgeries and in the orthopedic clinic.

c. Three deaths occurred on the service during the month. One was due to a pulmonary edema following the amputation of the right femur at a hospital in France. The patient died 48 hours after admission. The other two deaths occurred on the Neurological Service, caused by head injuries sustained in action against the enemy in France.

d. Of the 765 anesthetics administered during the month, there were no post-operative complications. There was, however, pulmonary condition which appeared on a patient on the Urological Service after his operation but he did not have a general anesthesia. There were a few minor wound infections, none at all serious.

MISCELLANEOUS: a. Central Supply: Arrangements were made for British Civilians to make dressings. Six bolts of gauze were sent weekly into Malvern where the ladies made the things for use in surgery.

b. In the last few days of the month a penicillin team was set up by 1st Lt Helen Rasmussen, N-771610, ANC, assisted by three enlisted men. This worked very efficiently and saved the ward personnel considerable running to and from the laboratory. There was less wastage of penicillin when administered this way.

MEDICAL SERVICE: The role of the Medical Service in this hospital continued to become smaller during the month of August. On the first of August, there were 77 patients on the Medical Service and by the end of the month this decreased to 51. There were only 54 direct admissions and 39 transfers from Surgery, giving a total of 93. Eighty-six patients were discharged to duty, 7 were transferred to the Surgical Service, 7 were transferred to other hospitals and 19 were started on their way to the Zone of Interior. There were no deaths.

On the 7th of August, the ninth trainload of casualties was received from the 347th Station Hospital, consisting of 232 litter and 63 ambulatory patients, a total of 295 cases. Twenty-four of these were admitted to the Medical Service.

On the 4th of August, Major William N. Weaver attended a staff meeting at the 53rd (US) General Hospital and the 93rd (US) General Hospital. On the 13th of August Lt Colonel Gordon E. Hein, O-141610, MC, Medical Consultant for the 12th (US) Hospital Center and Western Base Section, visited the wards of the Medical Service. On the 31st of August, Colonel W. S. Middleton, O-449557, MC, Chief Consultant for the European Theater of Operations, made a brief visit to the Medical Service.

Several officers and enlisted men received promotions. No new equipment was added to or requested for the Medical Service.

Authority UND 735017By PT NARA Date 8/19/05**SECRET**

LABORATORY: During the month of August the general laboratory work remained active with extremely active periods following the arrival of convoys. The adjustment for this extra load of work was now automatic. A total of 519 battle wounds were cultured 20% of which contained Clostridia organisms. Sixteen percent of this group were perfringens (welchii) the gas gangrene germ. Over 90% of this family of bacteria were sensitive to penicillin.

The first battle casualties had wounds relatively free from infection as the soldiers were strong, healthy and vigorous young men. After weeks of battle, without rest, and recuperation the chronic fatigue of the men lowered their resistance to such an extent that the percentage of wound infections increased. It was found that over 50% of these organisms were penicillin resistant, which made that drug less useful. Pieces of nerves resected at operation revealed neurofibromata in almost every instance, so a study of these tumor was started.

ROENTGENOLOGICAL SERVICE: During the month over fourteen-hundred patients were examined of which six-hundred were new patients. The various examinations included our first cervical myelogram.

Members of the service held weekly classes for their own group to discuss films, techniques and problems of the clinic. Weekly conferences with officers of the medical service were held to discuss and correlate clinical and roentgenological findings.

Construction was started on a dolly for the portable British Field Unit so that it might be carried from ward to ward with little difficulty. A filing cabinet was made for the Radiologic Reports and Index Cards. A blood count was taken on each member of the Service, as a part of the check on amount of radiation from X-ray tubes that might have resulted in anemia.

DENTAL CLINIC: During August, the work of the Dental Clinic went smoothly with 887 treatments during the month.

MEDICAL SUPPLY: The Medical Supply made daily trips to Smethwick hauling approximately 100,000 pieces of soiled linen. The excess of certain equipment was turned-in to the issuing Depot, G-22. Memorandum Receipts for local property were checked and brought up-to-date.

QUARTERMASTER SUPPLY: At Quartermaster Supply the usual items were issued to departments and enlisted men. Purple Heart medals were requisitioned for Headquarters for issue to wounded patients.

MESS: August was a busy month for the Mess Department. Great improvements were made throughout all three Mess Halls with the help of the carpenters, plumbers, painters, and electricians of the Utility Section. The excessive heat over the stoves made working conditions unbearable, so three electric fans were installed by the electricians to improve the circulation of air. There were no further casualties as a result of heat exhaustion. Storage space in the patients' mess was inadequate to properly carry the load so two additional sets of shelves were installed. Two special American made bake ovens were obtained and used daily by the bakers who produced tasty articles of diet. In the officers' mess remodeling continued. Carpenters built a pot and pan rack; a meat rack in the meat room; shelves in the store room; coffee pot rack in the dining room and a mop rack for the outside. A concrete garbage rack was also erected. Several changes took place in the personnel of the mess department as cooks and cook helpers were transferred to other units. New men replaced the former personnel and the work went on uninterruptedly.

Authority MND 735017By PT NARA Date 8/19/05**SECRET**

PERSONNEL: The Personnel Department continued to take care of needs of the Detachment of Patients as well as Unit Personnel Records. Patients in the hospital were given a partial payment of £7 in the middle of the month with about 1200 names on the list. Records were maintained on civilian personnel. The weekly time cards were sent to the British Pay and Establishment Officer before the weekly pay check could be prepared.

DETACHMENT MEDICAL DEPARTMENT: For the Detachment Medical Department, probably the biggest news announcement of the month was the authorization of forty-eight hour passes, and restriction was lifted on travel to London. This gave a new glow of anticipation and adventure to the forthcoming passes. Each day inspections were held by various members of the command, which led up to the big event of the month in the way of inspections---the visit of Colonel Herr of Headquarters, Western Base Section, XXVII District. There were many recreation activities for the enlisted men including a dance in the Officers' Club and also USO shows and GI shows. There were movies daily for enlisted men, officers, and patients. Trips were arranged by Special Service to Stratford-Upon-Avon to see some of the plays by Shakespeare. A new reading room was completed and made quite home-like in the enlisted men's area with a radio to make it more attractive. An excellent account of D-day operations was given by an officer patient in a class for the Detachment.

* * *

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Authority AND 735017

By JF NARA Date 8/19/85

SECRET

Outpatient Admissions: 334
Medical Admissions: 50
Hospital Admissions: 334

September

MONTHLY SURGICAL REPORT
50TH (US) GENERAL HOSPITAL
North Anding 30 Sep 1944

Section of Surgery	Volume of Work	Number of Operations	Minors	Majors	Consultations	Admissions Out-patient visits	Diagnosis	Procedures	Number of refractions	Number of glasses ordered	Clean Operations	Tumors	No. of wounds and round infections	Post-Op. Complications	Deaths
General	90	2	32	16	106	0	0	0	0	0	3	0	113	0	4
Orthopedic	107	14	217	29	217	184	0	0	0	0	0	0	246	0	0
Neurological	92	9	62	92	3	36	4	0	0	0	93	0	96	0	1
Septic	19	5	15	8	75	0	5	0	0	0	3	0	71	0	0
Urological	10	0	64	5	7	0	2	0	0	0	1	0	3	0	0
Thoracic	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Otolaryngological	11	70	182	4	14	0	0	0	0	0	4	0	11	0	0
Optic	3	25	130	5	6	0	0	0	0	0	0	0	9	0	0
Plastic	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Maxillofacial	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laryngeal	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Gynecological	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Dental	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTAL	334	155	722	162	428	280	12	29	15	109	0	551	0	21	1

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PROCEDURES

U. S. Army
Other U. S. Forces
Allied Forces
Other Personnel
TOTAL

Major	Minor	Plaster	Diagnosis	TOTAL	Elective	Emergency
159	428	220	12	819	25	3
0	0	0	0	0	0	0
3	0	0	0	3	0	0
0	0	0	0	0	0	0
162	428	220	12	822	25	3

INTRAVENOUS THERAPY

TRANSFUSIONS					CRYSTALLOIDS (by litre)					
Fresh whole blood	Stored blood	Dry Plasma	Plasma from stored blood	TOTAL	Distilled water	5% glucose and saline	6% glucose and distilled water	10% glucose & distilled water	Physiological saline	TOTAL
2	104	56	0	162	104	0	10	27	3	144

Authority UND 735017By PT NARA Date 8/19/05**SECRET****COMMENTS ON INTERESTING CASES AND DEATHS.**

1. Seven cases have been admitted to the Surgical Service recently with temporary cecostomies or colostomies present. Of these seven cases, one transverse colostomy and one cecostomy have been closed successfully. The other five cases will be prepared sufficiently in a short time so that the colostomies or ileostomies can be closed. No difficulties have been encountered in these cases. Particular attention has been given to fluid and protein balance and in all cases sulfadiazine and penicillin have been used pre-operatively and for a few days post-operatively.

2. Singrey, Mark E, S/Sgt, ASN 35562401, was injured about 1230 hours 4 July, 1944, near St Lo France, by mortar shell fragments one of which injured his left arm, the second penetrated the right chest diaphragm and lodged in the liver. Prior to admission to the 55th Gen Hosp the hemothorax had been treated and the skin wounds had been closed. On 26 July 1944 a sympathectomy was done removing the 2nd and 3rd ganglia and intervening trunk, because of severe causalgia of the left median nerve. 7 August 1944 the left ulnar nerve was sutured and transplanted and a neurolysis of the median nerve was accomplished. 19 August 1944 patient developed fever and diagnosis was made of an anterior subphrenic space infection. Extraserous drainage was established, following which he developed the complication of the lung abscess. It was felt that the subphrenic space infection and the lung abscess were both secondary to and communicated with the liver abscess. On 18 September 1944, a right rectus incision was made and 195 cc of pus (staphylococcus aureus) were evacuated through a ventricular needle and the metallic foreign body was removed. Catheter placed in the liver abscess and two cigarette drains were placed in the dependent gutter. 20,000 units of penicillin were instilled every four hours into the liver cavity. His post-operative convalescence has been uneventful. Temperature, pulse and respiration are all within the normal range. The lung abscess has drained completely.

3. Post-Operative complications: Vascular. Carlson, Herbert C Private, ASN 42052298, developed a right phlebothrombosis on 17 September 1944, 10 days following a secondary closure of two small wounds of the lower leg. Multiple small pulmonary emboli of the left lung developed on the 18 September. The chest condition has cleared and the leg is subsiding. Femoral vein was not ligated in this case.

4. Post-Operative Complications: Pulmonary. George H. Stritzinger, Pfc, ASN 33604618, received a gunshot wound of the perineum, posterior urethra and right scrotum on 17 July 1944 near St Lo, France. On August 18 1944 endoscopy was carried out without difficulty under 2% Cocaine anesthesia. Forty-eight hours after this the patient developed a pneumonitis. He was treated by oxygen and penicillin and the usual supportive measures. Since then post-operative convalescence has been uneventful.

5. Deaths: Hollingsworth, William C, Pvt, ASN 34881981, was admitted to the 55th Gen Hosp on 6th September 1944. Patient had

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Authority AND 735017By PT NARA Date 8/19/05

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a penetrating wound, severe, shell fragment (HE), frontal parietal region of skull, incurred in combat against the enemy 15 August 1944. Debridement and suturing of scalp had been done previously in France, and then on 21 August 1944 in the 98th Gen Hosp a debridement of the scalp and brain was done. On Sept 9 Capt William Patton did a debridement of the pericranium wound with the removal of bone fragments and an insertio of the tantalum plate. On 10 September diagnosis of meningitis was made. Patient expired on 13 September 1944. Diagnosis: (1) Friedlander's bacillus abscess around the foreign body in the left hypothalamus with breakdown and resultant meningitis and septicemia. (2) Pneumonia, lobar, both lobes of left lung. Possible Friedlander's.

6. A total of 500 anesthetics were administered during the month of September with no pulmonary complications other than one case of pneumonitis which followed 48 hours after an endoscopy under cocaine anesthesia.

s/ JOSEPH M ROBERTS

t/ JOSEPH M ROBERTS

Major, MC

Chief of Surgical Service

Authority UND 735017By PT NARA Date 8/19/05**SECRET**DEPARTMENTAL REPORTS FOR THE MONTH OF SEPTEMBER

SURGICAL SERVICE: The volume of work was enough to require tables in Surgery No 4 for the neurosurgeons and occasionally an additional table became necessary as the large number of patients on that service increased. Physical Therapy kept the muscles in peripheral nerve cases in better condition both before and after sutures and casts were removed, while they waited transportation to the Zone of Interior.

The handling of each outgoing patient from the hospital was examined by the Rehabilitation Officer to judge his condition and determine his fitness to go to duty reconditioning. The total number of beds on the rehabilitation wards was increased as the department grew in size and importance. An excellent day room was installed in Ward 7 for this program, and Ward 14, was converted into an indoor gymnasium so that during inclement weather physical exercise continued for all groups without interruption.

Five hundred and four patients were under treatment of the physical therapy department, with a daily average of 187 at the treatment room and 96 on the wards. During this month 14,993 group exercises were carried out in the physical therapy building. New Patients were received from the following services:

(1.)	Orthopedic.....	97
(2.)	Neurosurgical	60
(3.)	General Surgery	64
(4.)	Septic Surgery	28
(5.)	Rehabilitation	11
(6.)	Outpatients Department	15
(7.)	EEENT	2
(8.)	Urological	2
(9.)	Medical Service	1

Of the 384 hospital admissions for September, 334 were sent to the surgical wards. A total of 590 surgical procedures were carried out and 220 plaster casts were applied. With this volume of surgery there was one Vascular complication, a Phlebothrombosis; one pulmonary complication, a pneumonitis, which followed 48 hours after an endoscopy of the urethra with cocaine anesthesia; and one death, which was due to a brain abscess.

Authority MND 735017By CF NARA Date 8/19/05

SECRET

A total of 500 anesthetics were administered during the month with no pulmonary complications.

Numerous technical problems were found in the seven cases admitted with cecostomies or colostomies, two closed successfully and the other five were in a stage of preparation for further surgery. These cases were closed and the bowel placed in the peritoneal cavity after a satisfactory sulfadiazine level had been obtained preoperatively and the sulfadiazine and penicillin level maintained for a few days post operatively.

In a case of liver abscess, 195 cc of Staphylococcus aureus pus was drained and a mortar shell fragment in the right lobe of the liver was removed. A secondary anterior superior sulphrenic space abscess was also found and it connected with further lung abscess. A tube was placed in the liver abscess since it was the most dependent of the three areas of infection all of which communicated. Penicillin (20,000 units) was instilled into the cavity every four hours. The patient's convalescence has been uneventful. Temperature, pulse and respiration soon came within normal range, and the lung abscess drained completely.

An officer was received with the last convoy with a diagnosis of gunshot wound of the lesser omentum. Examination, however, revealed this to be a pancreatic fistula. Strenuous efforts were immediately instituted to bring the patient's proteins, chlorides and blood to a normal level. Continuous suction was applied to the fistula tract. By the end of the month, the wound was markedly better and the fistula appeared to be closing.

* * *

MEDICAL SERVICE: There was a further drop in the role of the Medical Service in This hospital during the month of September. At one time, the census reached a low of 29 patients. There was a total of 50 admissions and 22 transfers from the Surgical Service, 21 less than in the month of August. For a period of 12 days, there were no patients on the Neuro-Psychiatric Section.

On the 27th of September, the 11th trainload of casualties arrived. There were 227 litter and 28 ambulatory patients. Of these, 26 were admitted to the Medical Service

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3 to the General Medicine Section and 22 to the Neuro-Psychiatric Section. An additional 27 Neuro-Psychiatric cases were sent directly to the 96th (US) General Hospital from this train.

Twenty-two enlisted men of the Medical Service received promotions during the month and one was reduced for inefficiency.

* * *

LABORATORY: During the month of September, the quantity of Laboratory work remained relatively active, although there were only two convoys to be handled. The routine procedures were still maintained in hematology, urinalysis and serology and these proved to be a source of interesting statistics. From one convoy which was evacuated largely from Brest, a fair percentage of the casualties had eosinophilia. Following this disclosure, stool examinations were requested and several of these specimens showed hook worms and other intestinal parasites.

The Bacteriology Department remained quite active and a short preliminary report was prepared on the general bacteriology of wound cultures, with particular emphasis on the clostridia and penicillin sensitivity of these organisms. This article was sent to Chief Surgeon, ETO, for inclusion in the Medical Bulletin.

From the neuro-surgical section a large number of peripheral nerve injuries were received. A study of these nerves was continued and a number of new stains introduced. An interesting postmortem was performed during this month, at which time the patient was found to have died from Klebsiella meningitis and septicemia.

At the end of the month a spectrophotometer was received and preliminary work was begun with this instrument to utilize it in analysing various constituents of the blood. The recently activated penicillin team was showing its worth, both from the point of view of the ward personnel and economy in the use of penicillin.

* * *

ROENTGENOLOGICAL SERVICE: Films were made for 982 patients and included two encephalograms, one lumbar myelogram, several soft tissue studies, one bronchogram and

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Authority AMD 735017By PT NARA Date 8/19/05

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several localizations of foreign bodies in the eye. Examinations were completed by the last of the month, on all of the patients who arrived on the September 27th train.

A statistical analysis of cases examined was carried out and graphs were plotted from this information. These showed the number of patients examined, film- patient ration, and the number of days necessary to complete the roentgenological investigation of a new trainload of patients.

Enlisted personnel of this department attended and participated in the required training classes under the supervision of the Detachment Office. Meetings were also held in the department during which techniques were discussed, special examinations outlined and a general technical training program was executed.

* * *

DENTAL CLINIC: In Dental Service, five dental officers gave 763 treatments during this month. Work other than the above went on as usual without any major interruptions.

MEDICAL SUPPLY: Medical Supply made daily linen trips and the usual 100,000 pieces of soiled linen were hauled to and from the Smethwick laundry.

QUARTERMASTER SUPPLY: Quartermaster Supply, in September, requisitioned and issued the usual supplies. Maintenance items were issued to different departments under the service of Quartermaster Supply.

MESS: Improvement in the mess halls still in progress. The painters repainted the ceiling in the kitchen and added a black base border throughout the mess hall. The hinged blackouts in the kitchen and preparation room were removed blackout curtains were installed in their place, all of which improved the appearance of the kitchen. Carpenters made another table for the pots and pans washroom and a large meat rack with metal trap was built in the meat thawing room. The detachment mess received a plate rack built by the carpenters and the painting of the kitchen was completed. The officers' mess had a complete lavatory installed by the plumbers.

Authority MND 735017By PT NARA Date 8/19/05**SECRET**

DETACHMENT MEDICAL DEPARTMENT: The month of September saw many exchanges of personnel in the detachment. Forty-five limited service enlisted men from the 10th, 11th and 12th Replacement Centers were assigned to the detachment to take the place of forty-five general duty men who went to combat units. Landscaping of the area continued and new footpaths were constructed. Enlisted mens' sleeping quarters were improved by reducing the number of men in each hutment to sixteen men. Reductions and promotions were announced while one hundred-sixty enlisted men were awarded the Good Conduct Ribbon. Inspections were made by the XXVII District and the 12th (US) Medical Hospital Center, with favorable reports rendered regarding the detachment. A Public Relations Office was set up in the Special Service building staffed by two enlisted men who formerly had experience in journalism. These men made a start on the history of each individual concerning his or her Army experience. Cellophane covers were purchased for the enlisted mens' class "B" passes.

* * *

Authority MND 735017By PT NARA Date 8/19/05

R E S T R I C T E D

HEADQUARTERS EIGHTH SERVICE COMMAND
Army Service Forces
Dallas, Texas

V/dab

GENERAL ORDERS

April 17, 1943

NO.....56

ACTIVATION, ORGANIZATION AND ORDERING INTO ACTIVE
MILITARY SERVICE OF NEW UNITS

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2. Pursuant to instructions contained in WD Ltr., AG 320.2 (3-27-43)
OB-I+SPOPU-M, Subject: "Activation and Ordering into Active Military Service
of Medical Units in May and June, 1943", dated March 31, 1943, the following
unit is organized at Camp Joseph T Robinson, Arkansas, effective May 25, 1943:

55th General Hospital

Upon organization this unit is assigned to the Eighth Service Command
for administration and for preparation for extended field service.

*

*

*

By command of Major General DONOVAN:

C. B. RUCKER
Colonel, General Staff,
Chief of Staff.

OFFICIAL:

(Seal)

WALTER JESSEE,
Lt Col, A.G.D.,
Adjutant General.

AG 320.2 (Med)

A TRUE EXTRACT COPY:

Richard J. Coker
RICHARD J. COKER
Capt, MAC
Adjutant

(DISTRIBUTION "H")

R E S T R I C T E D

Authority MND 735017By PT NARA Date 8/19/05HEADQUARTERS
55th General HospitalCamp Joseph T. Robinson, Ark
May 25, 1943.

SPECIAL ORDERS)

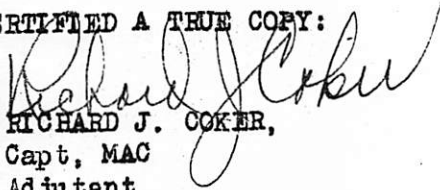
NUMBER 1)

1. The following assignment of officers to duties in this organization is made effective this date:

- a. Major, OREN V. SHAW, 0221230 DC, Chief of Dental Service
- b. Major, EDWARD M. LIPAN, 0344248, MC, Chief of Surgical Service.
- c. Capt. SAMUEL S. CAPLIN, 0347678, MC, Assistant Plans and Training Officer.
- d. 2nd Lt, IRVIN B. LINDSEY, 01546653, MAC, Medical Supply Officer
- e. 2nd Lt, FRANK STOIY, 01590836, OMC, Transportation Officer, Fire Marshall, Provost Marshall, Utility Officer.
- f. 2nd Lt, DIONISIO GARCIA, 01546727, MAC, Det Mess Officer.
- g. 2nd Lt, CARROLL WELCH, 01546709, MAC, Det Commander.
- h. 2nd Lt, GUY MILFORD MARKS, 01546644, MAC, Asst Med Supply Officer Custodian of Funds.
- i. 2nd Lt, RICHARD J. COKER, 01541795, MAC, in addition to his other duties is appointed Special Service Officer, Public Relations Officer.
- j. 2nd Lt, FREDERICK CARL KUNDE, 01546689, MAC, Personnel Officer, Assistant Adjutant, Insurance Officer, War Bond Officer.
- k. WO (jg) HENRY L. HOCHHEISER, W2126218, Chief Clerk, Assistant Personnel Officer.

By order of Lt Colonel GILL:

CERTIFIED A TRUE COPY:


RICHARD J. COKER,
Capt, MAC
Adjutants/RICHARD J. COKER
t/RICHARD J. COKER,
2nd Lt, MAC,
Adjutant

Authority MND 735017By LT NARA Date 8/19/03

R E S T R I C T E D

HEADQUARTERS
55th General HospitalCamp Joseph T. Robinson, Ark,
May 25, 1943.GENERAL ORDERS)
NUMBER 1)

1. Pursuant to directive contained in Par 2 GO #56, HQ 8th SC, ASF, Dallas Texas, Apr 17, 1943; the 55th General Hospital is activated as of 0001, May 25, 1943.

2. The undersigned hereby assumes command.

3. Authorized Enlisted Strength: 575, as authorized by T/O 8-550, as amended by Changes 1 and 2; and Par 3, Ltr WDAGO, File AG 320.2 (3-27-43) dated Mar 31, 1943.

4. Appointment of Staff: The following appointments to the staff, this headquarters are announced:

- a. Executive Officer, Lt Col, CLAUDE D. WINBORN, 0280989, MC.
- b. Adjutant (S1), 2d Lt, RICHARD J. COKER, 01541795, Med Adm C.
- c. Intelligence Officer (S2), 2d Lt, RICHARD J. COKER, 01541795, Med Adm C.
- d. Plans and Training Officer (S3), Lt Col, CLAUDE D. WINBORN, 0280989, MC.
- e. Supply Officer (S4), 2d Lt, ROBERT S. WASLEY, 01589577, QMC.

*Charles C. Gill*CHARLES C. GILL,
Lt Col, MC,
Commanding

DISTRIBUTION:

A

Authority UND 735017By PC NARA Date 8/19/05R E S T R I C T E D

HEADQUARTERS BORDEN GENERAL HOSPITAL

SPECIAL ORDERS)

Chickasha, Oklahoma

NO. 106)

May 17, 1943

3. A cadre of thirty (30) EM, Det Med Dept, 49th General Hospital, accompanied by one (1) officer of Co. Gr., composed of the following named officer and EM who are qualified to perform the duties in grade indicated after each name, are transferred in grade to Camp Joseph T. Robinson, Arkansas, and WP to that station on or about May 20, 1943, reporting on arrival thereat to the Commanding Officer for assignment to the 55th General Hospital. Upon arrival at station of organization the officer named below will become a part of the officer complement of the unit to which the cadre is assigned:

<u>Name</u>	<u>ASN</u>	<u>Duty Asgmt</u>	<u>SSN</u>
CAPT SAMUEL S CAPLIN	0347678	CADRE OFFICER	
M/Sgt Glenn D Samuelsen	37089871	Sgt Maj	502
M/Sgt Robert C Mineck	37046233	Chief Clk	052
1st Sgt Warren M. Hansen	39090340	1st Sgt	585
Tech Sgt Ralph W. McLees	39153703	Supply	825
Tech Sgt Guy W. Anderson	38219443	Pharmacist	149
Tech Sgt Fillmore Miley	6389112	Nursing Tech	225
S/Sgt Duane M. Morse	36039566	Clk Gen	055
S/Sgt John C. Kisler	19063016	Clk Gen	055
S/Sgt Jack Pearlstein	32023541	Clk Gen	055
S/Sgt Alexander Bohachef	36251973	Mess	824
S/Sgt Milton T. McMahon	35313523	Motor	813
T/3 George Pappas	35386571	Phar Tech	859
T/3 Edward H. Posuch	36308802	Surg Tech	225
Sgt William B Dixon	16033946	Supply	825
Sgt Harry M. Greer	6355644	Duty	566
Sgt Edward M. Zydowsky	36315808	Duty	566
Sgt Frank A. Neal	37016136	Mess	824
T/4 Robert J. Alder	36252203	Lab Tech	411
T/4 Grover Page	34269734	Cook	060
T/4 Milton J. Forthun	37290957	Cook	060
T/4 Andrew A. Morin	31110885	Cook	060
T/4 Alexander P. Bealkowski	20273540	Steno	213
T/4 William T. Buster	35482630	Med Tech	123
T/4 Paul L Keene	35359992	Surg Tech	225
T/4 Arthur E. Lowenthal	32138667	X-Ray Tech	264
T/5 James C. Dixon	36540476	Phar Tech	859
T/5 Romie Ramsey	35384292	X-Ray Tech	264
Pfc Charles W. Dunn	35680694	Cook	060
Pfc Louis J. Di Grazia	36708687	Cook	060
Pvt Donald E. Rademan	36251702	Cook	060

Authority MND 735017By CF NARA Date 8/19/05

SO No. 106 - 5/16/43 (Cont'd)

In accordance with AR 30-2215, the QM Corps will issue meal tickets for thirty (30) men for one-third (1/3) day each.

TOT TDN FSA FD 33 P 433-02, 03, 07, 08 A 0425-23.

(Auth: Ltr WD, AGO, Washington, dated March 31, 1943, file AG 320.2 (3-27-43) OB-I-SPOPU-M, subject: "Activation and Ordering into Active Military Service of Medical Units in May and June, 1943, and 1st Ind., Hq 8th SC, ASF, Dallas, Texas, dated April 14, 1943.)

By order of Colonel GENTRY:

s/ R. F. TOLBERT
t/ R. F. TOLBERT
Capt., Med. Adm. Corps,
Adjutant.

OFFICIAL:

s/ R. F. TOLBERT
t/ R. F. TOLBERT
Capt., Med. Adm. Corps,
Adjutant

DISTRIBUTION:

5-Capt Caplin, 49th
2-ea enlisted men above named
10-CO, Camp Joseph T. Robinson, Ark
100-QM
3-CO, 49th Gen Hosp
31-Personnel, 49th
31-Personnel
10-Finance
3-Hq, 8th SC, ASF, Dallas, Texas
1-File

CERTIFIED A TRUE EXTRACT COPY:

Richard J. Coker
RICHARD J. COKER
Capt, MAC
Adjutant

Authority MND 735017By LT NARA Date 8/19/05R E S T R I C T E D

HEADQUARTERS BORDEN GENERAL HOSPITAL

SPECIAL ORDERS)

Chickasha, Oklahoma

NO. 109)

May 20, 1943

1. So much of par 3, SO No. 106, this Headquarters, dated May 17, 1943, as reads, "M/Sgt Robert C. Mineck, 37046233, Chief Clk, 052," is hereby amended to read, "M/Sgt Norman E. Brekke, 6580428, Chief Clk, 052." So much as reads, "Pfc Louis J Di Grazia, 36708687, Cook, 060" is hereby amended to read, "Pfc Raymond L. Anderson, 39848078, Cook, 060."

*

*

*

By order of Colonel GENTRY:

s/ R. F. TOLBERT

t/ R. F. TOLBERT

Capt., Med. Adm. Corps,
Adjutant

OFFICIAL:

s/ R. F. TOLBERT

t/ R. F. TOLBERT

Capt., Med. Adm. Corps,
Adjutant.DISTRIBUTION:

2-Personnel, 49th	1-Lt Harvard	1-Chief Nurse
3-CO, 49th Gen Hosp	1-W.O. Zavalick	1-Registrar
2-CO, Camp Joseph T. Robinson, Ark.	1-1st Sgt, Med Det	1-Lt Baker
2-Hq, 8th SC, ASF, Dallas, Texas.	1-1st Sgt, QM Det	1-Sick & Wounded
1-M/Sgt Mineck, 49th	1-1st Sgt, Vet Det	1-Sick & Wounded, 49th
1-Pfc Di Grazia, 49th	1-1st Sgt, Fin Det	3-Lt Faltz (Patient)
1-Lt Nicholds	3-Lt Hall, ANC	1-Capt Allen
1-Lt Demke	3-Lt Warren, ANC	5-QM
12-Finance	15-Personnel	1-File

A TRUE EXTRACT COPY:

Richard J. Coker
 RICHARD J. COKER,
 Capt, MAC
 Adjutant