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ARCHIVES FILE NUMBER 500-8-2 _ _ _

TITLE HISTORY AND ROSTER OF OFFICERS _ _ _ _ _

ORIGIN HOSPITAL NO. 2, BATAAN P. I. _ _ _ _ _

DATES DEC. 41 TO Mar. 42 _ _ _ _ _

AUTHENTICITY ORIGINAL, UNSIGNED _ _ _ _ _

SOURCE NOT KNOWN _ _ _ _ _

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Hospital Number 2
Bataan, P. I.

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Authority AFD 883078

HOSPITAL NUMBER "2", BATAAN, P.T.I.

When the war started on December 8, 1941, it was at once obvious that more hospital beds than were then available would be needed for the Philippine Department. For some time hospital expansion had been going on at Sternberg, McKinley, etc., and the Philippine Army was building several station hospitals of 250 bed capacity but these were not yet available. As a result of this acute need for hospital expansion the Manila Hospital Center was activated on December 12, 1941. Colonel Percy J. Carroll, M.C., was in charge of the Center with headquarters at the Jai Alai building. Various annexes were begun to be established in Manila and by December 25th, there were patients, in addition to Sternberg, in the following annexes: Estado Mayor, Philippine Women's University, San Escolastica School, Normal College, Holy Ghost College and Jai Alai. Jai Alai was prepared to do a large volume of Surgery and accommodate several patients. In addition, Hospital No. 1 at Limay had been established at Limay on December 23, 1941. The Station Hospital at Ft. McKinley had closed December 12th as had the Station Hospital at Ft. Stotsenburg.

On December 25th it had been decided to abandon further development on the Manila Hospital Center and to enlarge the hospital facilities in Bataan. On December 25th, as a result of the above decision, a group of Doctors, Nurses and Unlisted Men who had been with the Manila Hospital Center were sent to Bataan. The undersigned was in charge of the group with instructions to report to Colonel A. L. Vanderboegt, M.C., upon arrival in Bataan and Colonel Vanderboegt would assign the group to duty. Certain hospital equipment, such as beds, mattresses, etc., were sent with the group.

The hospital group left Manila on the S.S. McHyde during the night of December 25th and spent the night in the main Corregidor post. During the transit from Manila to Corregidor, there was excellent undesired illumination because of a large fire at Cavite.

About sunup on December 26, 1941, the McHyde left Corregidor for Bataan and docked at Lango, Bataan about 9:00 AM. The trip was uneventful. Due to communication difficulties, no knowledge of the arrival of the party was imparted to the Bataan authorities so the hospital party found itself stranded in Bataan not knowing where to go or where any installations were. There was no transportation. We found one stranded company of the 31st Infantry at Lango and from them secured some coffee. (We had taken no food and water in canteens only), but they could give no information as to where to go. I got on the highway and soon located Colonel Vanderboegt and Major Manning and was instructed to have the hospital group temporarily quartered with the Collecting Company of the 12th Medical Regiment at Kilometer post 143.5. I accepted a passing truck for a ride to hospital No. 1 at Limay where another truck was

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obtained to transfer the personnel from Lamao to Km Post 143.5 which was accomplished about 11:00 AM.

The S.S. McHyde was unable to go all the way in to dock at Lamao so that it was necessary to unload the passengers and hospital equipment on to smaller boats and then unload these on the Lamao dock. The personnel was readily unloaded and the equipment unloading was beginning as soon as possible. Several loads for the tugs were on the S.S. McHyde and the transfer of the equipment went on all day long. Beginning about 11:00 AM the enemy began bombing in Manila Bay. Ten enlisted men and I remained at Lamao to unload the equipment. When the bombing started the S.S. McHyde pulled out in the bay and returned to the dock only to reload the tugs. The McHyde had several narrow escapes during the day. Several bombing parties visited us during the day but no serious damage was done. However, about 4:00 P.M., we had a narrow escape from some high bombers and decided to abandon the unloading until after dark. The unloading was especially precarious in presence of bombing because, among other things, there was a large amount of ammunition and gasoline on the Lamao pier.

The unloading crew was taken to Km 143.5 and a new crew was sent down after dark and the equipment removed from the dock. However it is believed that much of the equipment loaded on the McHyde was never removed from it, since it was sunk shortly afterwards. Of the beds removed, head ends far exceeded the foot ends. It is also understood that the McHyde had considerable crew difficulties after a few bombings.

The hospital group which consisted of 17 officers, about 20 nurses and about 30 enlisted men remained at Km 143.5 until evening of December 26th when it was transferred to Km post 162.5. We messed with the Philippine Medical Depot for one day; we camped on the banks of the Real River which site was to be the location of General Hospital No. 2. A description of this area follows:

The area located on the Real River approximately 20 kilometers west of Cababin and about the same distance south of the Cababin airfield. The Real is a good size stream with good swift flow of clear water. It was generally on the north side of the area. National Highway No. 6 was about 1 Km to the south. The soil was a sandy loam and drained well. The area was covered with bamboo or other trees of various kinds, some being very large. Two small streams flowed into the Real River within the hospital area from the south side. These two small streams were sluggish and muddy areas bordered them in some locations. One headed in the hospital area from a Carabao wallow. The trees, bamboo and vines afforded excellent cover. There was but one bare area near the lower end, which had been a rice patty. There were no roads; one carabao trail, ending blindly, extended into the area from the national highway at

Casababin, crossing the Real River near the lower end of the area. One foot path crossed the area from the south. Several Filipino houses were located to the north-east of the area. There were open fields to the south; west; north-west and north-~~west~~ east of the area. The hospital area was approximately 2 Km x 1/2 Km in size.

Lt. Colonel North, M.C. and Lt. Buckhold had arrived on December 23rd and surveyed the area. The Sternberg group arrived about 4:00 P.M., December 27th. The following officers formed the group: Lt. Colonel James M. Sullivan, MC, 1st Lt. Alton J. O'Bonnell, DC, Major William R. Craig, MC, 1st Lt. C. W. DeLong, DC, Major Jack W. Schwartz, MC, 1st Lt. Ernest W. Bye, MC, Major Michael A. Sult, DC, 1st Lt. William D. Moran, Inf. Capt. Martin W. Evans, DC, 2nd Lt. Henry M. Sigrist, MC, Capt. James G. Bruce, MC, James A. Grider, USPH, Capt. John R. Bungarner, MC, Albert W. Sorewald, USPH, Capt. Harold E. Bertram, MC, V. Jackson, Dorset, USPH, Capt. Robert K. Whiteley, MC.

There were 23 Nurses, the senior being Miss Mueller; 30 enlisted men, the senior being Sgt. Patterson. A road from the national highway had been chopped through the brush for about half the distance to the hospital area and trucks can go to this point where baggage and personnel were unloaded. From this point foot lockers and some bedding were carried into the area late December 27, 1941. The following day location for all personnel, one mess, one ward, operating room and headquarters was selected. On December 28th, after a few hurried plans, it was decided that first of all we must have something to work with if a hospital was to be built in the jungle. These tasks must be accomplished. These were at once outlined and every officer and enlisted man given something to do; we had nothing. No supplies. We did not have as much as a hammer or saw. We had no transportation; no messing facilities for our personnel. We had no food. There were no roads into the area and certainly no utility service of any kind. To some, the construction of a hospital here was hopeless but others felt different and all worked hard and long at whatever task was assigned them. The three important tasks to accomplish on this day then, were: (1) There had to be a road into the hospital. (2) Tools to work with and transportation must be obtained; and (3) mess must be established to take care of our working people.

The Engineers were contacted by Major Manning and they came to us at once. On December 29th a road was plotted into the area and on the 30th actual grading began. It had seemed at first that it would be impossible to build a road in so short a time but one bull dozer accomplished the task in 2 days and by January 1st, 1942 ambulances could bring patients to the hospital with ease over a one way road. In all fairness it must be admitted that the weather gods were on our side for even a 70 night rain would make the road impassible. All the time that

Hospital No. 2 was in operation, there was not a single day of inclement weather.

As previously stated the group messed with the Philippine Medical Depot for dinner Dec. 27th and all day the 28th. This mess was located at the end of the cut out road above referred to which was about midway between the hospital area and the Philippine Medical Depot. ^{was at} Moved its mess to a nearer location and let the hospital have the equipment of the old depot mess.

This equipment was moved to hospital area after dinner Dec. 28th and the hospital mess No. 1 opened for breakfast Dec. 29th. In this connection it is appropriate to mention that the Depot turned over sufficient food to operate for a few days as yet the group had received no supplies from the Quartermaster. It is also to be noted that only two meals per day were served throughout the operation of Hospital No. 2. There was neither time nor available personnel to prepare more. Breakfast was served at 8:30 AM and dinner at 4:30 PM. Two meals a day was common throughout Bataan. There were some exceptions.

On December 29th construction began in earnest. We had obtained a few tools from the Medical Depot. In addition to establish mess No. 1, one group was assigned to clearing out for a ward, another for headquarters and operating room, a third group prepared an area for supplies. We were visited by a representative of the Department Surgeon and advised to prepare to accommodate as many as 1,000 patients. A request was made to the engineers for a water and light plant and Captain Hoffman of that corps reported to us and a site for each was selected and the water plant was brought in. Lt. Colonel Albert Field, D.C., reported as the Commanding Officer. Colonel C. L. Vanderboget, M.C., senior medical officer in Bataan was present for breakfast and made some helpful suggestions. A staff was appointed by Lt. Col. Fields, as follows:

- Executive Officer, Major W. R. Craig, M.C.
- Adjutant Captain Michael Sult, D.C.
- Chief of Professional Services, Lt. Col. Sullivan, MC.
- Chief of Surgical Service, Major J. W. Schwartz, MC.
- Det. Commander and Medical Supply, 1st Lt. E. W. Bye, MAC.
- Mess Officer, 2nd Lt. Horah, Inf.
- Subsistence and transportation, Captain Evans, D.C.
- Chief Nurse Miss Mueller, First Sgt Tech Sgt. Patterson.

While breakfast was being served we were visited by another individual who proved to be of inestimable value throughout our stay in Bataan and was of untold assistance to us. This was Mr. Calmbas, a Filipino, who lived nearby. This man is one of the most remarkable men I have ever met and a history of Hospital No. 2 would be incomplete without his inclusion therein. Without his assistance, advice, information, loyalty and cooperation the problems of constructing and operation of the hospital would have been made more difficult. He was the leader of the community and a farmer by occupation. He knew Bataan as well as a rancher knew his ranch. He knew all the people living in Bataan and he knew what type of work each could do.

... knew whether or not the people were dependable. He was a judge of humanity and all the other Filipinos helped their leader. For this man we looked for civilian help and advice in many other ways and he never once failed. If we needed extra help for any type of skilled or unskilled labor we merely had to tell Calamba our needs. He never failed to get what we wanted. If a man did not work, we fired him. He rarely fired a woman worker. He said they worked harder, had more endurance and were more dependable than Filipino men and I found he was correct. As a matter of fact I never found him wrong about anything. He was truly a remarkable man. His personal sacrifice during the war has had no official sanction, but this much I know: He had large banana plantations destroyed; his coconut grove near Cabanabaan was practically ruined; he lost 20 odd carabao and barbed wire which he said cost him P 1,000.00 was removed from his plantation. For this he received no reimbursement. In addition, many hundred bamboo poles were cut from his farm but for this he was at least partially paid. //

Early December 28th it was realized that we needed operating room supplies, so 4 trucks were obtained from the Medical Depot and Captain Eye went to Manila for that purpose. Captain Eye made the round trip, returning late at night with 4 trucks loaded with supplies - two loads for the Depot, the other two containing largely operating room supplies of various kinds. On Dec. 29th he again returned to Manila with two trucks. On this trip more difficulties were encountered. He was bombed going and coming. He obtained supplies at Sternberg and made several purchases in Manila. He was given two power trucks by Colonel Carroll and returned about 11:00 PM Dec. 30th. The bridges were destroyed just behind him. He obtained surgical supplies, medicines, all kinds of utilities tools and supplies, a safe and some food. One large truck broke down on the way back but was pulled in by the other. This was our last trip to Manila.

On December 28, 1941, Captain Evans obtained a 2 1/2 ton truck from the Philippine Medical Depot and went to Manila with 5 drivers. He obtained from Colonel Carroll a 4x4 truck and two panel trucks and returned on Dec. 29th with all trucks loaded largely with subsistence supplies.

On Dec. 29th Major North secured a 2 1/2 ton truck and went to Ft. Stoenburg for surgical supplies but mainly for a field sterilizer. This trip was made with only semi-official consent since it was felt that considerable danger was involved, but Lt. Colonel North returned with the sterilizer in the late afternoon. This proved to be a wise thing to do for the sterilizer proved to be invaluable to the hospital since it operated perfectly and was the only sterilizer the hospital had during the existence of the hospital and was the only practical type sterilizer for such an installation. Lt. Col. North is entitled to a lot of credit for this foresight. Another day possibly

On December 30, 1941, Colonel C. L. Vanderboget came to Hospital No. 2 as the Commanding Officer. There was no immediate changes in any other position. By this time work was well under way. On Jan. 1, 1942 the first ward was opened up. This was later designated as Ward No. 3. Some patients were received from a bombing in the region of Cabecabin. There were no soldiers in the group. On Jan. 2nd one of the civilians died, this being our first death. He was buried in the rice patty near the lower end of the area but was later removed to an established cemetery. At this time there was no Graves Registration Service but this service was soon established.

On January 5, 1942 the first major operation was performed. The patient was Colonel Eddie Meck. He had a shrapnel wound of the left chest and abdomen with a laceration of the liver. This patient recovered. The fact that within 6 days time this small group of Doctors, nurses and enlisted men had cut a hospital from the jungles so that major surgery could be performed indicated that every one was working. On December 28, 1941, there was an area designated as hospital No. 2, and now on Jan. 5, 1942, roads had been build, mess opened up, supply and transportation established, a light plant put in, a water plant put in operation, a ward opened up, operating room built and a major operation successfully performed. Headquarters and quarters for all personnel had been established. On Dec. 28th there was not an aspirin, or saw or axe in the hospital but on January 5, 1942 a hospital was in operation capable of doing anything except certain laboratory work. As was noted by January 5, the hospital had been developed to the point of performance of successful major surgery. From this time on it was a question of expansion and improvement. Some new installations were made but the main problem was that of growth to care for the ever, and at times, rapid increase of patients. This hospital group had but one thing in mind and that object was: Whenever a patient or patients, without regard to number, were to be admitted, there must be a bed for him, something to eat and professional attention available. To this end all worked and since it was never known how many patients were to be received we endeavored to keep on hand a few hundred beds. At times this was very difficult and on several occasions we felt our heads were above water we would suddenly receive enough patients to practically fill all available beds. But in so far as I know at no time were we caught short except on the morning of the capitulation, when during the night between 1,500 and 2,000 patients were received; there was not enough beds to go around, but professional attention and some nourishment was available.

As stated previously, the hospital area bordered the beautiful Real River. This provided ample water for all hospital needs. When Capt. Hoffman of the Engineer Corps reported to us on December 29th a site was selected for the

water purification plant. No convenient central location was apparent but this was solved by diverting about half of the river through a new channel and on the diversion was built an ideal place for the plant. We agreed to have water in the new channel by the time Capt. Hoffman could get the plant well established. A dam of large, loose stones and brush was constructed that day and the water came through during the night - and there was more than enough water for all our daily needs. (By this diversion an island of about 2400 sq. yds. was formed and on this island the nurses were quartered). On December 30th the plant was put in operation. The plant was high speed pressure filtration - chlorination type with 3,000 gallon capacity. It supplied all the water needed for drinking purposes for the hospital and worked perfectly. The water was hauled in a panel truck to all the wards and emptied into saw Lyster bags. The filling required the services of a three man crew working at least 16 hours per day.

Our first operating room was located near the center of the area near the road. It consisted of a hospital ward tent on a frame 4 feet high at the sides. The floor was made of split bamboo. (There was no available lumber for flooring). With Filipino aid an excellent job of splitting the bamboo was done so the floor was reasonably smooth and easily washed. However, the heavy operating room furniture was too much for it and there was considerable wavering and some breakage on the strips. (This floor was replaced by a good wooden floor about a month later). The surgical tents were occupied and began functioning on January 2nd with Major Schwartz as the Chief of Surgical Service which position he held throughout the war. A light plant had been installed on December 30th and the surgical tent wired and equipped so surgery could be performed at night. The inadequacy of this tent could be seen by the time it was started. Only about two operating tables could be installed in it and we were dead certain that much more would be needed so a second was started on January 2. It was better planned, having 6 feet side walls, a substantial floor of 2"x6" and covered with black paper. This would accommodate 4 operating tables and was a great improvement over the first one which was converted into a dental clinic. It was completed about January 10th. These two surgical tents were constructed as rapidly as possible as an emergency project. When conditions warranted and material could be secured an improved surgical setup was constructed in a new location. The first location was selected because it was accessible for incoming vehicles but as the hospital developed this location proved to be too accessible; there was much traffic, dust and noise. The third location was selected near the west end of the hospital area beneath several large trees which gave perfect concealment. It was off the road and only operating room traffic was allowed. This pavilion was 24x60' with galvanized roof and covered with black paper. The windows and doors had black paper shutters for night work. There was room for 8 operating

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tables, 4 of which were being used a large part of the time. There was ample lights and an abundance of surgical instruments and supplies. A store room was attached to one end and a dark room for X-Ray development at the other. The large field sterilizer on the outside was highly efficient and supplied all the necessary sterilization except for a medium sized electric instrument sterilizer in the operating room. A portable X-ray with its own power plant was located just outside the operating room. Three large wards were near the operating room, accomodating more than 600 patients. The operating room personnel, with Lt. Colonel J.W.Schwartz, MC in charge, were quartered just across the river from the operating room. This surgical setup was ample and complete and served the hospital well. The location was ideal and in order to make it available a hundred yard road and a heavy duty bridge had to be constructed. This was excellently done by Colonel North. There were 5 complete operating teams and much splendid work was done here. During the latter part of February and most of March not a great many ~~xxx~~ new cases were received and this period was used for corrective operative procedure as reamputation and removal of foreign bodies. This operating setup was about 1200 yards from hospital headquarters and the original surgical tents. A small tent 50 ~~xxx~~ yards from the main operating room pavilion was completely equipped for operating on gas gangrene cases and they were largely treated by multiple incision. There were but two deaths reported from this cause. A large tent (A large QMC tarpaulin) was erected for the care of these patients and it separated them from other patients. There was never more than 6 such cases in the hospital at one time. This was evidently due to extensive, careful debridement of wounds as early as possible and packing same with Sulfa-powders or vaseline. The death rate too was very high & complimentary. While no specific statistical data are available, it is known that there was a total of only 303 deaths from all causes among more than 15,000 admissions to the hospital.

The Eye, Ear, Nose and Throat service was conducted in a small tent adjacent to the original surgical tent. This service was conducted by Major Harry Watrous, MC-Res., in a highly satisfactory manner. The equipment was not as complete as the general surgical setup but was adequate. Major Watrous succeeded in constructing many pairs of glasses from a trial lense case. Several officers who had their glasses broken would have been greatly handicapped or completely incapacitated in their work had not Major Watrous' ingenuity resulted in the construction of a highly satisfactory, even though some were clumsy, pair of glasses from this trial lense case.

The Dental Laboratory, run by Lt. Colonel Albert Field, DC, was prepared to do any type of dental work. This clinic occupied all the hospital tent which served as the original operating room. Much reconstruction work had been done or was about to be done, when the war ended.

SUPPLY: Upon arrival in Bataan, we had no supplies. However, the Philippine Medical Depot had moved to Bataan prior to the arrival of the hospital group. This organization had a large quantity of supplies, general medical, and it gave the hospital whole hearted support and untiring efforts to supply us. To this organization and its commanding officer, Major O. V. Keator, M.A.C., the hospital gives credit and praise for these efforts. While its stock was large, the hospital requirements proved in many instances to be larger and many articles were needed which the depot did not have, so that many supplies had to be obtained elsewhere, largely thru the depot, but in some instances independently. New supplies

The initial subsistence was given us by the depot. As previously stated transportation from the depot on Dec. 28th went to Manila and more food was obtained. Other subsistence was picked up at various food dumps until an issue Quartermaster dump was established and after January 6th all subsistence was obtained from this source, except bread which was obtained from the Quartermaster Bakery at Km 164 until the supply of flour was exhausted and carabao meat which was obtained from the Veterinary slaughter house near Lamao.

Much of our operating room supplies and surgical equipment was brought from Manila by Captain Bye on Dec 28th and on 30th as well as our supply of utilities tools. Many carpenter tools were also brought along by Capt. Bye. From the medical depot we obtained 10,000 blankets, an equal number of sheets, 3,500 beds and mattresses, pajamas, pillows, medicines, etc., in quantities great enough for our needs generally. However, a few items were more difficult to secure. For example, Lyster bags were a rare item and it was necessary that we have at least one for each ward. There seemed to be none available. We had two or three. The depot or QMC had none; we found two or three at Sababin. Commander Layman of the Navy brought us 6 or 8, a few more were obtained from Corregidor so that by the time ward was opened there generally was a Lyster bag available. Another item we had difficulty in securing was stoves for cooking. Our messes were of necessity very large so that equipment had to be of high type as would turn out a large volume of food. We tried the new type gasoline field stove but found it inadequate. Finally for 5 messes we had 28 stoves, including 3 old type field ranges. This was supplemented by various devices such as oil drums, galvanized and iron cans (which were also very scarce), etc. The hotel type ranges were obtained from Corregidor. Many more could have been used.

Hospital furniture proved to be a problem. We picked up about 4 chairs, found out in the brush and one of the Chaplains was given a chair by the QMC. We received 8 electric refrigerators. There were about 30 QMC and Medical Department mess and serving tables. There was no other furniture. There was however, a large grove of bamboo around the hospital area and Calimbas with his Filipino workers were able to make

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almost anything we needed. We were also able to obtain some lumber and construct many things from it, but bamboo was our mainstay for furniture. Some of the equipment made from bamboo was; mess and dining tables, medicine cabinets and nurses desks; chairs, beds, desk trays, brooms, fly swatters; laundry baskets, waste baskets, serving spoons; urinal troughs, storage cabinets, benches, linen closets, ward offices; ash trays, floor mats, etc. Beds were made of bamboo and mattress covers filled with rice straw are surprisingly comfortable. In the beginning the various articles of bamboo were made indiscriminately all over the hospital area but later ~~xx~~ an area was set aside as a furniture shop and all articles were made here and distributed throughout the hospital. Filipinos especially qualified for furniture construction were assigned to this shop.

On December 31, 1941, the remainder of our old Sternberg Hospital was directed to Bataan and join hospital No. 2. Some 17 trucks were loaded with various supplies but mostly food was started for Bataan about midnight. Sgt Page was in charge of the convoy, which was hazardous due to the heavy traffic, lack of lights and wreckage along the way. This convoy never reached hospital No. 2, but was detained in Bataan. Most of the personnel arrived on January 3. We needed the personnel ~~xx~~ more than we needed the supplies. To our great surprise, patients who had been left at Sternberg were also dispatched to Bataan and arrived at Hospital No. 2 January 1st. There were 152 of these patients. They came via boat through Mari-veles and 9 medical department officers from Corregidor and Sternberg arrived same day.

Another item which proved surprisingly scarce in Bataan was the shelter half. In as much as a rain may occur most any time in Bataan the hospital felt compelled to provide shelter of some kind for all bed patients. The shelter half seemed the simplest solution if not the only one. They were hard to find. Each soldier was supposed to have one but when admitted to the hospital generally there was no shelter half, so we were compelled to find some. Our first allotment of 300 came from the casual camp; some were with the patients while a few more were obtained from the GAC and Medical Department, here and on Corregidor so that by April 1st we had about 1,000, but it hadn't rained yet. As a matter of record it never rained except for one light shower while the hospital was in operation and other climatic conditions were equally as favorable.

At a later date considerable second hand furniture was purchased for our use from Cababin. Included in this conglomerate mess was several chairs, desks, cabinets, sewing machines, some mirrors and a motor boat. Much of this furniture was not used since the war ended before it was all repaired. Two of the sewing machines (Singer) were put to

constant use in repairing linens and operating room supplies.

The lighting system for the hospital at first was a 10 K.W. generator which was installed near the operating tent. Later a 50 K.W. generator was installed and proved very satisfactory. It supplied power for the ice boxes, lights for operating room and power for a medium sized instrument sterilizer, lights for headquarters and dental clinic tent and two radios. The radios were used only when the power was on for other reasons and the voice of Freedom at 12:30 AM and daily and KGEL at 8:00 P.M., daily.

MESSES: Our first mess opened for breakfast December 29, 1941. At this time there were no patients and all personnel ate at this mess. The organization at first was poor and so was the service. However this smoothed out rather rapidly and by January 1st was going very well. However, there was one factor connected with the messing which was never corrected as long as we were in Bataan. The hospital was trying to remain camouflaged and when 300-400 people lined up for mess it is difficult to conceal them. This number increased to 1,000 or more, concealment was about impossible as we were always feared strafing by the enemy. Since no fires were allowed at night the line up for all meals was of necessity in daylight. The mess line was never a trifle to our great joy. Mess No. 1 soon became overcrowded and mess No. 2 was opened on January 5th. The duty and patient officers and nurses were served in this mess, it being located between hospital headquarters and the officers ward (No. 6). The detachment continued to eat in Mess No. 1 all during the war. Shortly mess No. 2 was too crowded and mess No. 3 was opened in the upper area of the camp. On January 27th Mess No. 4 was opened; this mess then being utilized to serve the duty officers and nurses. Up to this time we had messed with patients. About March 10 the convalescent officer patients were allowed to eat in this mess to which I objected. About this time mess No. 5 was opened, it being our final mess.

Messing equipment was one type of supplies we never had enough of. When it became evident that a new mess would need to be opened we never had equipment on hand to work with and it was secured with difficulty, generally coming from Corregidor after considerable effort. As a rule when a mess was to be opened we robbed the messes already established of part of their equipment, most of which was never replaced. The shortage of mess equipment was difficult to understand since there seemed to have been plenty in the department. There was also a shortage of mess sergeants and cooks. At no time did we have enough of them. Mess No. 3 was rather typical of the messes. It had for a mess sergeant, Pvt. Ross, who was a trained X-Ray technician at Sternberg and a good soldier. He had had some experience in a mess as a cook, and had executive ability; was made mess sergeant because no one else seemed better qualified to do it.

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His equipment for cooking was one large and one small hotel type range, supplemented by two oil drums for cooking rice. He had approximately 25 men helping him. His mess fed as many as 2,000 patients in each day. The lineup for this mess resembles a regimental pay day assembly. Sgt Rose managed to have something for every one to eat twice daily. The dining area of this mess, like all others, was bamboo benches or wooden benches beneath the trees. This constituted no discomfort particularly. There was one mess officer for all of the messes. Food for bed patients was carried from the various messes to the wards where it was served to the patients by the nurses. This was quite a problem and it appeared that the bed patients, at times, did not get as well fed as the ambulant patients which brought down the wrath of the ward nurses on all concerned. The diet in the hospital left much to be desired. Two meals per day was about the limit. Serving for breakfast was rarely finished before 10:00 AM. The evening meal had to be finished in time to clean up the equipment before dark since lights were not allowed. The equipment and personnel were always inadequate and for special diets there was not much to offer. A good supply of fruit juice, especially pineapple, and canned milk was available after a few weeks and this was used to a great advantage. The diet at the front, I have been reliably informed, was far inferior to that which was available at the hospital and rear areas, while I never had an opportunity to make any personal observation. I do know that by April 9 (and before), there were food deficiency diseases being admitted to the hospital. After April 9th all of our fruit juice and canned milk as well as meat were no more. The diet from April 9 to May 13 was very largely rice and by this time there were many cases of leg and facial edema and the diagnosis of deficiency diseases was being made.

Mess No. 5 in Ward 19 deserves special mention. By February 15, 1942, it became evident that ^{many of} soon be well but not fit for duty, as those with impaired vision, one arm or leg off, etc. There was no place to which these incapacitated soldiers could be sent (Later, Feb. 18/42, 50 were sent to the southern islands) and it was obvious that they would constitute a problem. It was decided to open a large area for them. This area was to be self contained except probably one of our own officers, who would act as a supervisor. A site on the south side of the hospital area was selected. It was well covered sloped rather abruptly and was large enough for up to 2,000 men, depending on how much was developed. Bamboo beds 7'x14' were built in rows, up and down the hillside after the underbrush had been cleared. It was estimated that each bed would accommodate 6 filipinos but it was found that 7 or 8 could sleep comfortably on them. It was originally planned to construct 167 of these beds to accommodate 1,000 disabled patients, but only 100 were finished when the war ended. This ward was opened up about March 1, 1942 with 100 patients. Major James Rinaman was in charge with a Scout Corporal assisting him. All cooks,

kitchen police and other ward help was obtained from the group. Most of the help was scouts and a swell job was performed under the guidance of Major Rinamin. This relieved the wards of many patients who no longer needed to be treated. Almost daily more patients were sent to Ward 19 so that on April 9 there were 539 patients in this ward. The wisdom of establishing such a ward was generally admitted and the smooth manner in which it functioned is a personal tribute to Major Rinamin since the entire administration was entrusted to him. The original idea of a disabled ward was converted to that of a convalescing and disabled ward. The scouts were enthusiastic about the idea and brought about many improvements about the area and many were preparing covers for the rainy season. By April 9, the mess they operated was efficient and its appearance was a standard for the other messes to hope to attain. Their equipment supplied them with little more than an ice box, a large stove, hotel type, and 1 blanket for each man, and several oil drums.

A description of some of the various installations and equipment is necessary to get a clear picture of the hospital and its problems. From the beginning it was the intention of the hospital administration to camouflage these hospitals. As was previously stated, the hospital area was covered with bamboo, vines and trees. This enabled us to put everything under cover except the roads and many paths that were soon made throughout the area and it is surprising how many such paths will develop in such a short time and how impossible it is to prevent people from walking in the same place between two given points. Within a fortnight the open areas were criss-crossed in every direction with paths which showed plainly and unmistakably from the air. This was of some concern to us at first but I learned from the American pilots that all of Bataan flat lands were just as much marked and the area in the hospital was no more conspicuous than many other areas. I asked these pilots to check our area for installations and was told that nothing but roads and paths could be seen from the air. However, the commanding officer was soon convinced that the enemy was respecting hospitals and camouflage became more and more questionable due to the great increase of activity within the hospital so about the middle of January 1942 a large white cross was placed in the field at the east end of the hospital area. At a later date a new one was constructed of metal pipe roofing to the south and of sheets to the west. The American pilots advised me that all of these crosses could be seen from the air. They were examined almost daily and kept in good condition. At no time during the existence of the hospital did the enemy bomb dangerously close to the hospital. It will be recalled however that army installations in general included most places in Bataan so that some of these were closer to the hospital than was desired and the

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bombing of these areas were very unpleasant and disconcerting to the hospital staff and patients but the Japanese respected our crosses at all times. With the display of crosses the attempt to camouflage did not cease however.

The wards were without buildings. A convenient and suitable area was selected and the underbrush was cut away, being careful not to destroy the vines and brush which afforded cover. The idea of conservation of cover was a little difficult to control and often a vine with no leaves near the ground but with beautiful foliage high up in the trees would be clipped. As soon as the leaves dried the cover was destroyed and the installation bared. Those in charge of this work had to watch for such acts constantly. This underbrush was very heavy, tough and resistant to the efforts of man to remove it but it did yield to the constant attack of filipinos and their bolos. The size of the wards was generally limited by the amount of suitable terrain and cover. An area was selected usually that would accommodate about 200 beds. Few were smaller. The brush would be cleared away, and beds moved and arranged to the best advantage and a ward office established. In a short time we had shelter for the ward office which was within a bamboo hut or tent. A storage area was also prepared for each ward but these were not generally covered. Not only the size but the shape of the wards was controlled by the cover available. Some were more or less rectangular, some oval, some long and narrow and others very irregular with arms jetting off into a clump of trees or bamboo at various points. They ranged in size from 100 to 700 beds with most of them well over 200 beds. On April 7th 14 wards had 200 patients; 1 300, 1 500 and one 100 patients with a gain of 682 patients for that day. They were really hospitals within a hospital group and each ward would contain a variety of cases, many having more patients than Sternberg had before the war. This unusual condition resulted from the fact that we were putting up beds for men who were already sick or wounded somewhere up front and when these men came to us they occupied the beds available. In so far as possible these patients were segregated according to disease or injury as soon as possible but no real segregation was possible until some time in late February or early March when activities were much less marked. There was, as a rule, considerable space left between wards. This separated the wards from one another and left no space in trees and bamboo for a latrine. Each ward had from 1 to 3 latrines which were at first open pit but later were changed to box latrines, more or less fly proof. The ward installations and equipment consisted of a medicine cabinet, a ward office, a storage place, a Lyster bag, a dressing tent and from 1 to 4 tents for patients. The patient-tents were for the more serious patients in the event of rain and there were sufficient tents in all wards to accommodate approximately 300 patients. There was a total of 19 wards with No. 13

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omitted. The ward personnel was 1 to 3 doctors, 2 to 4 nurses and 2 to 4 enlisted men. In the latter days two civilians were assigned to each ward, so it happened that from 3 to 11 ward personnel were caring for 200 to 250 sick and wounded large enough for a good sized hospital which would certainly have a much more impressive staff. When a ward was occupied, it was by no means complete; we could not wait. Generally the ward was occupied when the area was cleaned away and beds put up it was occupied. After the ward was expanded to twice its original size. Ward offices, storage facilities, medicine cabinets, desks, etc., were usually constructed after the ward had been occupied.

The number of patients increased rapidly and it was necessary to open up new wards to accommodate them. By January 1st three wards were prepared for occupancy. There were 177 patients including 152 from Sternberg. On January 17 there were ten wards ready with a capacity for about 1,500 patients. There were 1,000 patients in the hospital with patients in 7 wards. On January 25th there were 2160 patients in the hospital with 14 wards occupied and on February 5th, 2,411 patients. About January 20th the construction crew began to feel that they were far enough ahead with beds to have a safe margin. We had probably 500 beds unoccupied. A period for a much needed relaxation seemed to be in the offing. But to our great surprise and disappointment just after dinner on January 23rd, while enjoying the cool of the day, we were informed that all the patients from Hospital No. 1 would be sent to us during the night. There was no time to be wasted. The incoming patients must have a bed. Consequently Corporal Stuart and a crew of privates worked practically all night long and managed to keep abreast of the incoming patients, but next day there were but few empty beds and 682 patients had been received in the last 24 hours.

Originally patients were received at the surgical tent where an area was prepared for the temporary keeping of them. Here they were examined and those who did not need surgery were transferred to the various wards. This plan was cumbersome but worked very well when there were 25 to 50 patients daily, but when patients were admitted in larger numbers this system was more than cumbersome. In addition it created too much confusion, activity, noise and dust in the operating area. It was decided to move the operating and receiving activities to new and more appropriate locations. The surgical change has been described previously. It was decided to open a receiving ward at a site selected near the road entry to the hospital. The site was convenient and well covered. This was opened on Jan. 25th with Lt. Colonel W. D. North, M.C., in charge, assisted by Captain Comstock. The ward had 150 cots; it also had a receiving section which was equipped to do minor surgery and dressings. It was lighted for night work, equipped with an ice box and served hot drinks. Most of the patients were received at nights and

those who did not need immediate surgery were kept in the receiving ward during the night and then sent to the proper wards in the morning. Colonel North was kept advised of the number of empty beds in each ward and therefore knew which wards to send the patients to. Patients who required immediate surgery were sent to the operating area where both waiting and operating facilities were available. During the day the receiving ward was cleared of all patients ready for the reception of more patients at night. Some days it was cleared 2, 3, or 4 times.

A new one-way road was constructed into the receiving ward and it was well marked with signs and arrows but it was not possible to keep forbidden traffic out of the area so a guard was posted at the entrance to keep out all unauthorized traffic. In addition to the two medical officers, 2 or 3 nurses and 5 enlisted men were assigned to duty here. Staff Sgt. Folsom was in charge of the enlisted men and his work was superior. This receiving ward operated in a highly efficient manner from its inception. Its location on the opposite side of the hospital from the operating room permitted the operating room to escape all the noise and crowd which is an undesirable but necessary part of a receiving ward of this size. The arrangement of the ward was in accordance with Colonel North's idea and its high operating efficiency was due, more than to any other factor or factors, to this officer's energy and enthusiasm for any task assigned him in Bataan.

The records department of the hospital grew out of a state of confusion into an orderly institution. 2nd Lt. Henry A. Sigrist, M.A.C., was the Registrar from the beginning to the end. His office like the receiving office was transferred from the original operating tent area to a site adjacent to the receiving ward and on the same date. He was assigned a staff of typists including Miss Betty Broadfield, civilian employee of the ordnance corps and who proved to be of great value to Lt. Sigrist. The location of the Registrar's office was correct since it obtained the records as the patient was admitted and in a short time the office was well organized and the records in good order. The fact that these fine records were lost does not in any way detract from the excellent work performed by Lt. Sigrist and his staff. Lt. Sigrist was also custodian of the Patient Trust Fund; he was able to return the money and valuables to patients after the capitulation of Bataan on April 9th.

When patients were received they were divested of all Government property and given hospital clothing. This was in accordance with instructions from higher authority and caused a few arguments especially in the earlier part of the war. Many patients were loath to give up their equipment. All this equipment was collected and daily turned over to the quartermaster or ordnance. When patients were discharged they were taken to the casual center where they were equipped again and taken to their respective organization. The casual command would return our hospital convalescent

Some patients were incensed about leaving the hospital in less convalescent clothing but the hospital had no choice and had no equipment. I personally believe it was handled in the best way. The equipment of a casual center I believe to be correct. Some patients were allowed to get to the front in hospital clothing and the hospital was criticized by some front line commanders for it but this was not our responsibility. Our suspicions were confirmed on April 9th when a large office dump was turned over to the enemy.

In early April a great change was noted in the attitudes of the incoming patients and he had no hesitation in departing with his trusted rifle. A large office dump was turned over to the enemy. From about February 15 to the 10th of March the hospital population remained fairly constant. This period gave us an opportunity to improve the area and to settle our personnel in some fashion of comfort. Up to Feb. 1st no one had an opportunity to take the leaves from around his bunk and some had been entirely ignored for the simple reason that there was no opportunity to indulge in such trivials. We all slept in a bed beneath the trees with our combat personnel belonging placed beneath it or hung on trees nearby. This was no hardship. During this time several people provided themselves with some type of chair; beds were made more comfortable, electric wires were put up to the offices and nurses areas for radio installation, and some officers even put some kind of improvised cover over their beds.

Laundry: A need for some way to wash hospital linen developed almost immediately. With the large number of operations and dressings which soiled bed linen a large amount of soiled linen, convalescent clothes and towels accumulated almost overnight. There were two wives of marine enlisted men who had been sent to the hospital from Corregidor and they, seeing the need for laundry service, volunteered their services for this purpose. This was the beginning of the hospital laundry. They offered to work without pay and for a few days Mrs. Hedges and Mrs. Gould were out sole dependence for clean laundry except for a few articles which the operating room personnel found time to wash. In the mean time laundry needs became pressing.

We were about to employ Filipina women to do laundry when 12 Chinese from Corregidor reported to the hospital on January 9th and wanted to do any kind of work without compensation. Immediately they were employed to do laundry. An area 2 km below the hospital was selected; several oil drums installed for boiling, brush cleared away beneath good cover and several hundred feet of wire strung up for clothes line and the laundry began. These men turned out a large amount of laundry daily and it dried very rapidly. It

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was then folded and hauled back to the hospital area for distribution. Shortly 16 more chinese reported and we had a laundry staff of 28. The manager, John, saw that every one did a fair amount of work. With the rapid increase of patients the 28 chinese could not keep up with the laundry so about February 1st a Filipino laundry was established and 23 ^{civilians} filipinos, mostly women, because of Calimbas instructions, were employed. This laundry was just above the chinese and was also well covered. There developed a healthy competitive spirit between these two laundries. A daily comparison by bundles was made by a medical department corporal who was in charge of both laundries. A bundle constituted a days soiling of linen and filled a small pannel truck. When the filipino laundry started we were about 20 days behind but this was gradually cleared up so that by March 15th the laundry was all cleaned up. About this time the supply of soap was exhausted for laundry purposes which again complicated the situation. After this time hospital linen was boiled and washed without soap. It was not too repulsive in appearance but of course was unsatisfactory.

A third laundry was put in operation in February. This was located nearer the river from the nurses quarters and was for the sole use of the nurses. Up to this time the nurses were doing their own laundry when they could find time to do so.

A standard rate of ₱1.00 per day for all people working in the laundry was established so that the hospital laundry cost ₱51.00 per day. The officers and enlisted men either did their own laundry or employed civilians to do it by the piece. Some of the local people who performed laundry services for the officers wanted to charge ₱1.00 for a slack suit of khaki but the hospital believed this rate to be excessive and ruled that no more than 50 centavos could be charged for this service and other articles in proportion.

PERSONNEL: Almost from the beginning hospital No. 2 was undermanned. When the group left Manila it consisted of 17 officers about 20 nurses and 30 enlisted men. Upon arrival in Bataan most of them were assigned to the Philippine Medical Depot. During the first day one nurse and 4 officers were called for by hospital No. 1. (The Officers returned to us on January 24th). So when the group arrived at hospital No. 2 it consisted of 13 officers, 19 nurses and 4 non commissioned officers (1 of which was appointed 1st Lt. M.A.C., Dec. 27/41. For the time being the nurses were in excess but on Dec. 29th they were assigned to the mess to supervise and to wash dishes etc. This activity for them was of very short duration and they followed their usual work. Lt. Colonel (Major) North and Lt. Buckhold and 30 enlisted men were already on location when we arrived.

On December 27th we had 15 officers; one enlisted man

was promoted and one officer joined us on Dec. 29th and 3 more joined Dec. 30th, including Colonel Vanderboget to be the commanding officer. On January 1st nine officers representing most of the officers left at Sternberg, joined. There was an addition on Jan. ~~XXXXXXXXXXXXXXXXXXXX~~ 2nd and two joined on Jan 3rd and on Jan 24th 8 officers joined including the 4 officers originally attached to hospital No. 1. On Jan. 24th there were 43 officers including 2 chaplains, 7 dental officers, 4 MAC officers, 1 Infantry officer and 1 red cross worker and there were 1205 patients in the hospital. From time to time officers were assigned to the hospital as follows: Jan. 29, 1; Feb. 16, 1; Feb. 26, 1; March 2, 2; March 3, 1; March 8, 1; April 1, 1; April 6, 4; April 9, 18. In addition there were about 18 Filipino Army Medical Officers assigned to hospital No. 2 and in the meantime 8 officers had been transferred away so that on April 6th, 1942 there were in the hospital approximately 47 american and 20 filipino officers. The surgeon's morning report on April 7th showed 5129 patients.

Approximately 20 nurses were in the original hospital group. This was augmented from time to time by american, civilian and filipina nurses so that on April 6, 1942 there were approximately 53 american and 30 filipina nurses.

Of the 30 original enlisted men who left Sternberg, Sergeants Watts, Bostrom, Gavin and Patrick arrived. Colonel North had about 30 already there. This number was increased by small numbers from time to time, including the remains of the Sternberg group on Jan. 3rd. Several scouts were assigned so that there were about 250 enlisted men on duty at the hospital. Upon the departure of the scouts on April 10 there were 187 american enlisted men remaining.

Civilian employees (Filipino) began working at the hospital on December 29 and continued to work there until April 8 when all contacts with filipinos was ceased. During this period up to 200 filipinos were employed. Their foreman, Calimbas, has been referred to previously. Their work consisted of laundry work, kitchen police, clearing brush, building furniture, making roads, paths and bridges and ward work. One seamstress was employed in the operating room and several were employed as barbers.

The filipinos were at first employed from the population ~~and~~ the barrio. As the war progressed and the normal living in Batan became non-existent, the army established certain refugee camps for civilians. The refugees were largely filipinos but an occasional american was among them. One such camp was established near the hospital and from this camp most of the civilian help was obtained. Shortly the hospital was allowed to maintain a refugee camp just outside of the hospital area. This camp was called the hospital work camp and all civilians who worked at the hospital lived in the camp.

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The hospital was charged with the sanitation of this camp and drew rations for all the refugees in it. There were about 840 people living in the camp. Calimba was the natural leader of the camp. It was established on his plantation. A board of 3 appointed by Calimba distributed the food which the hospital obtained for the camp. The refugees lived in temporary huts, all well covered. There were no disorders in the camp and it benefitted the hospital considerable by enabling us to secure sufficient civilian help. It also acted as a bumper between ~~the~~ refugees camp, with several thousand inhabitants, and the hospital. Prior to the establishment of the work camp, the refugee camp had begun to encroach on the hospital area considerably and had begun to be a considerable sanitary problem. Fortunately the refugee camp and work camp were below the hospital.

Picture, if you can, a hospital of from 3,000 to 5,000 patients with a maximum of 67 officers, 83 nurses, 250 enlisted men and 200 civilian employees and it will be readily understood that many problems were involved. This personnel performed practically all the hospital functions, including professional and administrative, both general and medical, supply, securing of rations and fuel, laundry, messing, road and bridge building, hospital and furniture construction and all hospital utilities. Of the 600 people employed in the hospital 280 filipinos were employed in construction and laundry functions that a hospital is not ordinarily concerned with requiring more than 25% of the hospital employees. Fuel for the messes and laundries was obtained locally. None was provided for the hospital. Wood and charcoal were used. Charcoal was more satisfactory and was burned by the hospital. It was obtained about 1 1/2 Km from the hospital and hauled 40 - 60 sacks at a time. It produced much heat and made but little smoke that could be observed by the enemy. Sufficient charcoal could not be obtained for the hospital and was supplemented by wood. Considerable dense bamboo was in the hospital area and this was used up. It could not be used alone, however, because it created too much smoke and was short lived so our main fuel supply was wood which was cut some distance from the hospital and hauled in by truck. Trees within the hospital area could not be used for this purpose because of the destruction of shade and cover. A constant wood detail was kept busy. On one occasion the hospital was highly indignant when another organization had hauled away some of our wood. The nearest organization was accused but pleaded not guilty. After this incident the wood was hauled when cut. After the capitulation, we were confined to the hospital area and had to use what ever was available for fuel, as lumber, furniture, etc.

The sanitation of hospital No. 2 was a serious problem. When 4,000 - 8,000 people live in one small community in which there is no sewer system a problem is encountered which is difficult, especially when you are dealing with people

many of whom have no personal or general interest or knowledge of sanitation as applied to groups.

As previously stated the original sanitary installation was the open pit latrine, which is everything except a sanitary device. The soil was that of a sandy loam and naturally would be well suited for latrine drainage but here the water level was not very deep and when the latrines were over 4 feet deep water came in. There was in the beginning nothing to spray them with so that our only means of treatment was by throwing in leaves and burning them which was quite unsatisfactory. We were also handicapped by not having an officer trained in sanitation who could be spared from other duties long enough to do justice to the important problem of sanitation. Consequently the one greatest defect of the hospital functions was that of poor sanitation, and flies became numerous.

Beginning in February the open pit began to be replaced by a box latrine provided by the 803rd Engineers. This brought about some improvements, but the hospital was still without an energetic sanitary officer. On March 2 Major Wilbur Berry, M.C., was transferred to the hospital and made sanitary officer with no other duties. The improvement which he brought about was almost magic. Very shortly the fly problem was under control, the open latrines were all covered with boxes provided by the Engineers or the hospital and diarrhea among the hospital personnel reduced from a moderately high rate to almost nothing. This satisfactory condition prevailed until after the capitulation when circumstances beyond our control again appeared with many flies, which persisted until the hospital was abandoned. A Graves Registration officer was reported to the hospital for duty on January 2, 1942 and a cemetery was established on the hill south-east of the hospital. Other officers joined him later on. This service moved to their own location in early March. The cemetery was well planned and beautified and at the time of the capitulation was in excellent shape but during the Corregidor bombing the cemetery was struck with some shells and extreme damage was done. After the capitulation of Bataan the original cemetery was out of bounds for the hospital and we had no Graves Registration Service. A new cemetery was established within the hospital and 72 people are buried in this area. It worked well and in good condition on May 13, 1942.

For the first time in our history, during the war in Bataan female nurses were utilized so near the front lines. Hospital No. 1 was about 7 Km from the front lines. Nurses were on duty at this hospital until January 23 when the hospital was evacuated. Hospital No. 2 was 24 Km from the front lines. However, Hospital No. 2 was only 2 Km from Cabocabin and Cabocabin air field and 4 Km from Bataan air field, all enemy objectives so that hospital No. 2 witnesses numerous bombings and some dog fights. Enemy planes bombing Corregidor were

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clearly visible from No. 2 hospital as well as the anti-aircraft fire from Corregidor so hospital No. 2 was very close, too close to the front lines and other enemy objectives.

When hospital No. 2 group went to Bataan about 20 nurses were included in this group. Miss Mueller was made Chief Nurse for a few days when Miss J. Nesbit joined and was made Chief Nurse which position she retained until the nurses were evacuated to Corregidor on April 8, 1942. Under the guidance of Miss Nesbit the nurses at Hospital No. 2 did excellent and heroic work during the battle of Bataan. In general their moral was on a par with the officers. Their bravery was exemplary and an expression of fear was rarely manifested. There was notable harmony among the group. The filipina nurses also performed their duties in a highly satisfactory manner. The comfort of the nurses was similar to that of the officers but there were ~~but there were but few~~ but few complaints. The nurses at hospital No. 1 and Corregidor were far more comfortable than those at hospital No. 2 but requests for transfer to these hospitals were conspicuous by ~~be~~ being practically totally absent.

When on April 8, 1942 the end of the Bataan battle was obviously near at hand and it was decided by higher authority to transfer the nurses to Corregidor, they went with considerable reluctance. Miss Nesbit expressed a very strong desire to remain at her post of duty and expressed her intentions to do so as long as any other nurse was left in Bataan. They all left together about 9:00 PM on April 8th, arrived at Corregidor in PM of April 9th, after a harrasing experience. Barring the necessary prolonged trip due to congestion of traffic there were no untoward incidents enroute and all of them arrived safely at Corregidor.

There were several cases of dysentery and malaria among the nurses and two of them were injured when bombs struck hospital No. 1. There were no injuries at No. 2 hospital although several slugs of shrapnel fell in their quarters.

Shortly after April 1st it was obvious to hospital No. 2 that all was not well and that something unpleasant may be expected at any time. Patients received from the front were discouraged and in a poor state of nourishment. Many expressed doubts that USAFFE could hold out much longer. Many had chronic malaria. They all looked tired and the number increased daily. Very few objected to giving up their firearms but simply threw them on the pile at the receiving ward which was rapidly growing larger.

On April 9th it was estimated that there were 7,000 patients in the hospital. We had heard that there was a surrender. We were not able to contact any organization. All night long we had heard constant traffic on the national highway. However we had not seen any fighting soldiers.

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be the wisest policy. Prisoners of war are not in a very favorable position for demanding. The Americans had never before been prisoners of war and had a little difficulty in adjusting themselves to this new state of affairs and several officers/patients felt that the Officers of the hospital could be better served by their management and frankly told us so. The senior patient, Lt. Colonel Brady, commanding officer of the 31st Infantry, (RA) felt different and the hospital staff felt that our commanding officer, Colonel J. C. Gillespie, MC handled the unpleasant affair well with the Japanese. To him they displayed many courtesies

Prior to the time when it became obvious that the battle of Bataan was about over, serious consideration had been given to moving Hospital No. 2 to a new location. With the approach of the rainy season, our position on the banks of the river and with no cover to speak of, would soon be untenable. A new location had been selected, to which location I was very much opposed, at little Baguio and work had actually started when the area was bombed, in March. Construction abruptly ceased. After the capitulation we were again concerned with getting the seriously ill and wounded under cover before the rains appeared, and this concern was imparted to the Japanese on the first and all subsequent visits to the hospital. We were assured that by the wet season we would be moved to a new location with shelter. However, the transfer was delayed and generally the reason given was the failure of Corregidor to surrender. This seemed to tie up transportation and caused road congestion both of which were not conducive to moving us.

On one occasion we were advised that all patients who had recovered would be removed to another location. Many patients had recovered and were anxious to get out of Bataan. They did not know how things were with the prisoners of war who had left Bataan. The hospital had many requests for permission to leave. These were always refused but of course we had no way of detaining any one who wanted to go and for about 2 weeks there were no Japanese guards around the hospital so any one could at least start to leave but the chances of getting very far would have been nil since there were many Japanese in Bataan at this time. The patients seemed to think if they could get away and possibly to Manila that all would be well. We explained to them that there were no Americans loose in Manila and that a Japanese medical officer had told us that 40- 50 Americans and many more Filipinos were dying daily at O'Donnell. I'm certain a few did leave but most of them remained until they were officially transferred by the Japanese on May 26th. In so doing they escaped a terrific ordeal as any can tell who marched out of Bataan and remained at O'Donnell for several weeks.

When we were told that we would move as above referred

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to us were also told that we would be compelled to provide our own transportation and gasoline. After April 9th we had lost several pieces of transportation - all we had - and all of our gasoline. However, in early March a plan had been framed whereby several busses, to be brought into the nurses area and to be used as quarters for the nurses. The plan never fully materialized but 12 of the busses were brought. Most of them were not in too good a condition, there being several 1926 - 1928 Dodges in the group. These were well hidden back in the woods and most of the trucks had gasoline in them - some were full - and had good tires. The plan was to move the busses and nurses living therein and when the hospital moved - if it ever did - to a new location. There was also 3 drums of gasoline hidden in the brush which we knew about so we told the Japanese medical officer that we could provide the transportation for the move and how well busses and gasoline under cover which we did.

Among the well patients we had some good mechanics (air Corps) and we put them to work on the motors, and in a few days all were in good running order. Another crew began to build double deck the busses. On each floor, a layer of good mattresses was placed, with pillows, sheets and blankets and a bed pan in each bus. We could haul 300 patients in all the busses and in 2 trips we would haul all patients who could not walk and haul their baggage on top of the busses. By April 25th all was ready for the move but no authority came forth for the move. In the meantime there had been considerable exchange of artillery fire between Bataan and Corregidor. Daily this occurred and daily pieces of shell fell through out the hospital. Large numbers of Japanese ammunition and other trucks were seen daily. We were constantly in fear that a shell or shells from Corregidor might fall into some of our wards for we were not certain that Corregidor knew the hospital was still in Bataan and shells were landing uncomfortably close to us. Finally on April 22nd several 155 shells from one of the islands landed in the hospital, killing 4, 1 died next day, and injuring 12 others. On April 29th there was, we thought, a terrific artillery bombardment of Corregidor and we could hear the firing very easily. But this was nothing to what we were to hear on May 3rd and again on May 5th. It was almost like rifle fire and we were certain that every thing on Corregidor had been destroyed. We were warned of the attack on May 3rd and 5th.

After the fall of Corregidor on May 6th we felt certain that we would soon move from Bataan. Shortly we were visited by Japanese Officers and were told that all our personnel and patients who were not well would be moved to Little Baguio and those who were well would remain at hospital No. 2 until arrangements could be made for their transfer elsewhere. Our busses having prepared and a loading schedule which showed exactly what bus each patient was to go in all having been

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previously prepared, the move was easily organized. On May 11th some patients were sent to Hospital No. 1 at Little Baguio. We had been advised by the commanding officer of hospital No. 1 that the personnel at hospital No. 2 would not come to Hospital No. 1, but would be quartered in the ordnance area near the hospital. We had been told by the Japanese

that this move was temporary and that our group ~~would~~ would be moved from Little Baguio to some other place to operate a hospital. On May 11th I went with the first group of patients to Little Baguio and never returned to Hospital No. 2 but remained at Little Baguio to prepare for the rest of the group.

The remainder of the patients were transferred to Hospital No. 1 on May 12th and 13th and on the latter day the remainder of hospital No. 2 personnel came too. Little Baguio The patients who had recovered remained at the old hospital site and this area was converted into a prisoner of war camp from May 13th to May 26th when they were transferred to Bilibid in Manila. 646 patients were left at hospital No. 2 and 550 patients transferred to hospital No. 1. Three medical officers, 1 dental officer and 8 enlisted men remained at hospital No. 2 to care for any one who became ill. One dental chest, one foot locker filled with surgical instruments, enough messing equipment to operate a mess for our personnel and all personal equipment was taken to little Baguio. All other supplies remained at the old hospital site. The medical personnel left at hospital No. 2 rejoined the group at Bilibid on May 27th, arriving with the well patients on that day. At Little Baguio we were advised that our group was to be separate and distinct and no visiting was to be permitted between hospital No. 1 and hospital No. 2 groups. The patients received at No. 1 from No. 2 were given an opportunity to express grievances and complaints relative to their treatment at No. 2 - before a board of officers.

With the final transfer to Little Baguio on May 13th, most of us turned our backs, with mixed emotions, on hospital No. 2 forever. Many of us felt that the best work of our lives had been done here. That this small group in less than 3 1/2 months had built and operated hospital facilities for 16,000 patients is we believe a truly remarkable record. And a total of only 303 deaths is also an enviable record. Probably 1/3 of those were dead upon arrival at the hospital. Here I desire to express my appreciation of the harmony and good feeling which existed among the hospital personnel. I have never seen the equal of it. The doctors, nurses and enlisted men all worked to accomplish as much as possible for those who needed our professional care. I heard not a single complaint about long hours and I cannot recall a single instance where there was any personal grievances among the officers nurses or enlisted men. Chaplains Dawson and Talbot administered to the spiritual needs of our people in a most satisfactory way. They were busy at all times helping some one.

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Mr. Graybeal, the Red Cross Director, was of great assistance, but could not accomplish a great deal in his own particular field due to lack of supplies. He brought a truck load with him but of course this amount would not last long among so many needy people.

The hospital group moved into ordnance hodgepods on May 13th and for the first time since December 8th, relaxed. We were all under roof and had an extra hodgepodge for messing. We had no idea how long we would be here so preparations were begun for a short or long stay. We had a cover for everything except a mess hall and preparations were started on May 15th for building one. Material plans and work began as soon as we were settled which required most of the 14th because of the large amount of dirt, trash etc., in the hodgepods.

An operating room had been started, this being the proposed location of hospital No. 2. On this foundation a mess hall was begun. Lumber, roofing, nails and all kinds of carpenter tools were available. If a new tool was needed it could always be found around some previous installation and great numbers of various tools were carried in. The mess hall was not finished but by the time we were moved on May 26th we were about ready to put the roof on.

At Little Baguio we were not guarded. While we had no definite duties to perform every one was given work to do. Besides building a mess hall there was a group cutting wood and storing it under large tents; another group was assigned as a sanitary squad. Some were repairing buildings, making new water connections. Another group under Colonel North was acting as a salvage group. This group searched for food, clothing, nails, carpenter tools, etc. No food had been given us but we did all right and found enough food with some to spare especially surice which we turned over to Hospital No. 1. Flour, bacon, field rations, canned milk, rice, etc., were among the items found. Some cigarettes, (Not American) were also found. We had a carabao permit roger and killed some of them. So by the time we left Little Baguio the pangs of hunger had been driven away (Temporarily) and every man had new clothes and new shoes (Much clothing and shoes were among the items collected).

On May 26, 1942 we were ordered to move. Each officer was allowed a barracks bag and a foot locker. In addition a dental chest and a foot locker filled with surgical instruments and some medicine, especially quinine were also loaded. Many fine typewriters, much clothing, shoes, tools, etc., were left behind. (All hospital records had been left at Hospital No. 2 hospital, with a large quantity of medical supplies.) We loaded in trucks along with several patients from hospital No. 1 and left Bataan. We arrived at Bilibid prison about 10:00 PM May 26th where we remained until May 30th.

On May 27th the well patients we had left at hospital No. 2 plus the medical personnel left there joined us at Bilibid.

There was nothing particular happened at Bilibid, we were led to believe that we might run a hospital there but on May 30, 1942 we started for we knew not where. There was at this time 63 officers and 187 enlisted men. We rode in box cars to Cabanatuan where the night was spent. The following day we marched 16 Km to what is now called Camp No. 2. Here we found 1,500-1,600 prisoners, including the group originally left at No. 2 hospital. This group had arrived on the previous day. Food and water were both hauled into this camp. The following day we marched back 7 Km to Camp No. 1 where on June 10th a hospital was established and called "The attached Hospital Camp No. 1".

While at Bilibid Colonel Gillespie was approached by a navy warrant officer Gooding. Warrant Officer Gooding had been in Manila during the time we were in Bataan and had been connected with the hospital operated in Manila by the Navy, altho he was not in the Navy Medical Department I was informed. He had assumed or had been given some measure of importance around the hospital. He told Colonel Gillespie that he had been informed that we had a dental chest, and that the Navy dental corps needed a chest and requested Colonel Gillespie to turn same over to him. Colonel Gillespie informed Mr. Gooding that we had been advised that we were to operate a hospital some where and that upon this advice the dental officers of our group had with great care packed the chest and that it would be badly needed wherever we went. In view of this, and in view of the fact that dental supplies would be much more easily obtained in Manila than where we would be, Colonel Gillespie told Mr. Gooding he felt he could not release the dental chest. Mr. Gooding was very much disappointed at the refusal and stated that he could probably make it pretty hard on us by reporting the incident to the Japanese, which he of course would not do. Colonel Gillespie insisted that we would keep our dental chest but when we arrived in Cabanatuan there was no dental chest and we had no dental supplies for several months.

During the time we were in Bataan and while enroute from Bataan to Cabanatuan we suffered no loss of personnel except Pvt. Frank Pigg who was killed by a anti aircraft shell on January 14, 1941. When we left Bilibid our group was mostly all in excellent health. There was some chronic malaria and one officer had amoebic dysentery and two were recovering from jaundice. so with 5 or 6 exceptions the group stood the march very well and all arrived at camp No. 2. Some had not thrown enough personal possessions and tried

to carry too much. Some of these discarded practically every thing before arrival at Camp No. 2. One enlisted man, Pvt Schultz, had an attack of cerebral malaria at Cabanatuan but succeeded in making the march but succumbed to the disease at Camp No. 1 early in June.

With the establishment of the attached hospital at Camp No. 1 near Cabanatuan on ~~January~~ June 9, 1942 Hospital No. 2 lost its identity but in the main the group who had served so well and harmoniously at hospital No 1 continued to function as a nucleus of this hospital.

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John H. [unclear]
Aug.

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Authority ND 883078

UNUSUAL INCIDENTS.

Hospital No. 2 had a peculiar and uncomfortable location. It is probably the first Army hospital of such size located near installations that were constantly being bombed. It was certainly in the zone of action. When the enemy air ships approached these installations they almost invariably did so directly over the hospital. This was disconcerting for two reasons: (1) It always drew fire from our anti-aircraft guns, fragments of shells were constantly falling in the hospital area. Fifty calibre bullets also fell in the hospital area. (2). We were never certain that an enemy bomb, by accident, might not fall in one of the wards. On one occasion a 50 calibre bullet went through the only empty bed in one ward. Another 50 calibre bullet went through the head of a civilian kitchen police and the foot of one of our soldiers. One of our cooks heard the anti aircraft guns begin firing, jumped from his cot and fell flat on the ground 3 feet away just in time for an unexploded 3 inch shell to go through his chest and 3 feet into the ground. Various sizes of shrapnel and or shell fragments fell in every mess and ward and twice in the dental clinic and in our quarters. Only the operating room escaped. Several 155 shells fell in one mess, killing 5 and injuring 12 other persons. Every ward was riddled with fox holes which the men often used. This was hard on the poor bed patients who could not get out of bed.

On January 26, 1942 a filipino baby was born in Hospital No. 2. About the middle of February some carabao meat was received which our food inspector condemned because he stated that ~~it had maggots~~ maggots had been working in the meat. The quartermaster was contacted and stated they did not want the meat returned and it was disposed of by burial. The veterinarian who issued the meat was highly indignant and recommended that our inspector be forced to pay for the meat. As a result of this recommendation the inspector looked into the matter and did not concur in the veterinarians recommendation but did recommend that the hospital be compelled to dig up the carabao so the pieces could be counted. Someone in ~~the~~ higher authority stopped the procedure after Colonel Vanderboget protested. We felt that the count could have been made before burial as we were ordered to bury it. The hospital was too busy trying to take care of patients to be indulging in such activities. It was a waste of man power and this hospital was just as interested in the conservation of food as sent and other organization. The incident was finally dropped when our inspecting officer and mess officer were reprimanded. Patients ready for duty were collected in the mess area and buses from the casual center transported them to

the center where they were ~~re~~reequipped and then to their proper organizations. This transfer to the casual center usually occurred early (Day light) before enemy planes began to appear. The hospital made an effort to discharge patients as soon as they were able to go because it was felt that soldiers were needed at the front and the hospital needed the room for incoming patients. We had no difficulty with the first commanding officer of the center but during February and March a new commanding officer was appointed and he felt that many patients were not able to return to duty and many would be returned to us - 30 or more per day. To prevent sick and wounded from being discharged who should not be the chief of professional service and the officer of the day were directed to examine every man the day he was returned to duty. This procedure reduced considerably the number who were returned from the center but many still returned and the problem of discharging patients became more complicated. This demonstrated the need of a convalescent hospital and having none Hospital No. 2 soon became taxed with patients who really were no longer in need of treatment, but could not be returned to a full duty status. This condition was one reason for the establishment of ward No. 19, previously referred to. ~~For~~ On May 13th we had completed the transfer of patients to No. 1 an inquiry was made by that hospital, if all the patients had been received from hospital No. 2. This inquiry, it appears, was for the purpose of determining patients complaint. The result of this inquiry was made known to the officers of hospital No. 2.

When officers from hospital No. 2 ~~wanted~~ ^{vacated} the ordnance area in Little Baguio on May 26th, a board of officers was appointed by Hospital No. 1 to inspect and report on the condition of the buildings which we had vacated. We do not know the result of this investigation but we do know that we had no time to police the area when we were ordered to move. I doubt if much policing would have been done, had there been time, because under the circumstances there was not much inducement to do so. In any event the buildings were in much better condition upon our departure than when we arrived.

The fact that patients were evacuated from Manila and Corregidor to Hospital No. 2, in other words toward the front lines, occurred to us to be most unusual. This included general run of patients from Sternberg, tuberculosis and mental cases from Corregidor. The shell shocked cases did not react any too well to the infrequent bombing parties which visited, and the mental cases could not be confined.

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We had no P.T. service at the hospital but there was a patient, a marine, who was recovering from infantile paralysis and was in need of physiotherapy, which was available at Corregidor. A request was made to have the patient transferred to Corregidor where he could get proper treatment. The request was returned with an indorsement on it stating that the physio therapy aid at Corregidor was being transferred to No. 2 hospital to treat patient in question.

On February 7, at 3:00 am I was awake on my bunk listening to an air plane, first over head and then over Cabcabin field and there again apparently over the east end of the hospital area. Suddenly, there was a loud noise and instantly a flash of light. I was out of bed immediately and looked at my watch, pulled on a few clothes and ran in the direction of the fire. I believed the crash was within the hospital and feared much damage or loss of life. I arrived at the site of the crash at 3:15 am. It was just outside of the hospital and burning so you could not get near. Shortly machine gun ammunition began to go off and we backed away, we learned from some air corps personnel who had arrived from Cabcabin Field that Lt. Baker had been the pilot of the P-40 and all were much concerned over his unfortunate demise. When I returned to the hospital lights were on in the operating room and I went in to see what was going on, when I found they were dressing rather severe but not very likely fatal burns on the hands and face of a patient. I inquired who the patient was and was told it was Lt. Baker from the crashed P-40. No one ever knew how Lt. Baker got out of the crashed plane. He in some way, had located the ambulance which the hospital had dispatched to the scene of the crash. It is assumed that he was thrown from the plane during the crash and unconsciously crawled away from the burning plane and accidentally went in the direction of the ambulance.

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*Roster of Officers
Hospital Number 2
Batnan, Philippines*

ADDRESS NO. 1
 ROSTER OF OFFICERS
 HOSPITAL NO. 2
 BATAAN, P.I.

Name, Rank, and Branch of Service	Date Joined	Date Departed
Buckhold, Wilbert W., 1st Lt., MC	12-25-41	
North, William D., Lt. Col., MC	12-25-41	2-11-42
Bostrom, Clarence, 1st Lt., MAC	12-27-41	
Bostrom, Clarence, 1st Lt., MAC	rejoined 4-9-42	2-10-42
Bye, Ernest W., Capt., MAC	12-27-41	
Craig, William R., Lt. Col., MC	12-27-41	
DeLong, Cyrus W., Capt., DC	12-27-41	
Dorset, V. Jackson, Capt., MC (USPHS)	12-27-41	
Evans, Martin W., Capt., DC	12-27-41	
Grider, James A., Capt., MC (USPHS)	12-27-41	
Horan, William D., 2nd Lt., Inf.	12-27-41	3-5-42
O'Donnell, Alton J., 1st Lt. DC	12-27-41	
Schwald, Albert H., 1st Lt., MC, (USPHS)	12-27-41	
Schwartz, Jack W., Lt. Col., MC	12-27-41	
Sigrist, Henry E., 2nd Lt. MAC	12-27-41	
Sullivan, James H., Lt. Col., MC	12-27-41	
Sult, Michael C., Major, DC	12-27-41	
Fields, Albert, Lt. Col., DC	12-29-41	
Cummings, William, 1st Lt., Ch.	12-30-41	2-10-42
Lawson, William, Major, Ch.	12-30-41	
Vanderboget, Carlton L., Col., MC	12-30-41	3-3-42
Graybeal, Harold, Red Cross Director	12-31-41	
Genung, Russell W., Capt., DC	1-1-42	
Hubbard, Ralph W., Major, MC	1-1-42	
Hubbard, Ralph W., Major, MC	rejoined 4-9-42	3-5-42
Reschner, Harold W., Capt., MC	1-1-42	
Lewis, Robert B., Capt., MC	1-1-42	
Linnie, Francis K., 1st Lt., MAC	1-1-42	
Kaupin, Clinton S., Major, MC	1-1-42	
Metcalf, William L., Capt., DC	1-1-42	
Roderick, Elwood L., 1st Lt., MAC	1-1-42	3-3-42
Waterous, Willard H., Major, MC	1-1-42	
Strand, Clarence J., Major, MC	1-2-42	
Ayers, Robert L., Capt., MC	1-3-42	
Katz, Charles J., Capt., MC	1-3-42	
Bertram, Harold F., Capt., MC	1-24-42	
Bruce, James G., Capt., MC	1-24-42	
Bumgarner, John R., Capt., MC	1-24-42	
Comstock, Jack A., Capt., MC	1-24-42	
Folsom, Charles, Capt., MC	1-24-42	1-26-42
Rinaman, James G., Major, MC	1-24-42	
Noland, Paul S., Capt., MC	1-24-42	
Whitely, Robert A., Capt., MC	1-24-42	
Schrenburg, James A., Major, MC	1-29-42	

9 July 45
 Attached
 JH

Name, Rank, and Branch of Service	Date Joined	Date Departed
Smith, Albert C., Capt., Ch.	2-16-42	
Wadsworth, Edwin C., Major, MC	2-26-42	
Berry, Wilbur C., Major, MC	3-2-42	5-26-42
Sitter, Stephen C., Major, MC	3-2-42	
Gillespie, James C., Col., MC	3-3-42	
Shott, Robert W., Major, LC	3-8-42	
Kowalske, Oscar C., Major, LC	4-1-42	
Langdon, Benjamin B., Lt., MC, Navy	4-6-42	
Kardai, John E., Lt., MC, Navy	4-6-42	
Rose, William D., 1st Lt., MC	4-6-42	
Swanson, Wendell F., Major, MC	4-6-42	
Bennett, John E., Major, MC	4-9-42	
Bodine, Roy L. Jr., Major, LC	4-9-42	
Burge, Julius C., Capt., MC	4-9-42	
Francis, Ernest P., Capt., LC	4-9-42	
Gard, Harold L., Capt., MAC	4-9-42	
Goldberg, Harold M., 2nd Lt., MAC	4-9-42	
Rockman, David, 1st Lt., MAC	4-9-42	
Johnston, Melvin D., 1st Lt., MAC	4-9-42	
Nauffmann, Nelson W., Capt., MC	4-9-42	
Lentz, Emmert C., Major, MC	4-9-42	
Marsico, John, Capt., MD	4-9-42	
Ranson, Kenneth R., Capt., MAC	4-9-42	
Schultz, Black, 1st Lt., MC	4-9-42	
Shaw, Vaughn, A., Capt., MC	4-9-42	
Taylor, Robert F., Capt., Ch.	4-9-42	
Wernitznig, Edward R., Major, MC	4-9-42	
Zerfas, Mathias, Capt., Ch.	4-9-42	
Zimmerman, Leslie F., Capt., Ch.	4-9-42	
Bloom, Samuel M., Capt., MC	5-27-42	
Garberry, Richard E., Capt., Ch	5-27-42	
Friedman, Howard W., Capt., LC	5-27-42	

FILIPINO MEDICAL OFFICERS

Gonzales, Capt., MC
 Albino, 1st Lt., MC
 Diaz, 1st Lt., MC
 Amparo, 1st Lt., MC
 David, 1st Lt., MC
 Katindig, 1st Lt., MC
 Pelayo, 1st Lt., MC
 Carino, 1st Lt., MC
 Arreglado, 1st Lt., MC
 Angeles, 1st Lt., MC
 Gomez, 1st Lt., MC
 Borromeo, 1st Lt., MC
 Dinsaguila, 1st Lt., MC
 Deoga, 1st Lt., MC
 Largoza, 1st Lt., MC
 Arceano, 1st Lt., MC
 Vercoote, 1st Lt., MC
 Medina, 1st Lt., MC

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9 July 85
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Addenda No. IV
Chronological

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New Years Eve! No one at Sternberg thought about celebrating it in the time honored manner. The world was moving under everyones feet; at least that part of the world which constituted the once holiday spirited Manila. Sternberg was preparing to evacuate. The 31 men left behind on Christmas had been kept busy all day loading, adjusting and reloading 25, more or less, vehicles of every description, for the journey to somewhere in Bataan. The zero hour had been set for midnight. All through Manila destruction of military installations sent palls of smoke far above the low clouds. The city was apprehensive. "The strangers were at the door!" "How will they act?" "What will they do" are the American s leaving?" "What will become of us?" Questions of similar nature were buzzed from ear to ear. The civilians were paid off. Tears and sobbing goodbyes punctuated the hustle and bustle of leave taking.

The time had come at last. At precisely 11:15 pm, Major Maupin gave the orders to 'turn 'er over'. Racing motors drowned out the final goodbyes and words of encouragement. The convoy of miscellaneous, but valuable medical supplies slowly crept along the semi darkness of Manila. The convoy wormed its way toward the outskirts and finally straightened itself like a huge caterpillar moving toward the unknown. Where was Bataan? No one knew. No one seemed to care. The shock of leaving 'home' left us all feeling as if we were just emerging from the effect of some drug. The drivers eyes were glued to the narrow ribbon of a road whose sides were garnished with wrecked, overturned and abandoned vehicles having been made useless by the ruthless element known as time. There was no time for rumination. The roads drew all our attention. One slight swerve, and the road would be ornamented with another, or perhaps, a dozen wrecked cars. We had a job to do! To deliver the goods, or else..... The moon was partially obscured by the clouds of dust made by the many vehicles moving to and from the scene of action in Bataan.

The convoy separated here and there. Some vehicles were lost to be found later, far ahead in a different convoy. Frequent stops and sudden spurges of mad speed through burning barrios kept everyone awake. Life and death was split seconds apart while winding through tractors, busses, caissons and foot troops. San Fernando had been bombed. Many structures were but glowing skeletons. The crackle of bamboo was deafening. (I was told later that the "crackling bamboo" was machine gun fire.) In this manner the best part of the night was spent.

*Extracted
W.D.J.*

About 3:45 am, we finally slowed down at Limay. We parked our vehicles and slept several hours. Having breakfasted, we were ready to continue our journey. But, we were at our journey's end. At least that was made plain to us. Despite our explanations to the Detachment Commander Capt. L.M., we were ordered to dump our loads and turn over the keys. The guard was given specific instructions not to allow anyone of our vehicles out of the compound. In plain terms he informed us that the convoy had reached its final destination. Sgt. Page who had led the convoy was not to be found. No one knew his whereabouts. Two days later we were ordered to our true destination minus the best part of our transportation and practically all of our supplies.

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*Extracted
W.G.J.*

ADDENDA NO. 14

CHRONOLOGICAL

Thursday, December 25, 1941.

Foodstuffs from commissary distributed to annexes.
3:00 pm orders to evacuate to Pier 1.
Loaded General Hyde and Milley.
Left Pier 1 - 11:00 pm for Corregidor.
Cavite demolitions - Manganese store fires.

Friday, December 26, 1941.

Corregidor to Lamac on General Hyde.
Air attacks on Hyde nearing Lamac - 3 attacks, no hits.
Unloaded Hyde at Lamac
Casual camp at 142.5 - Installation of 12 Med. Regt. mess.

Saturday, December 27, 1941.

Casual camp at 142.5. Capt. Reader in command.
Several bombing raids nearby - ships north of Limay.

Sunday, December 28, 1941.

Evacuate to new area, 162.5 with 20 nurses.
Fed by mess of Medical Depot, Major Pete Kempf.
Original camp - bottom of hill - plan outlined by
Major North previously on reconnaissance.
Located and began installation of mess No. 1.
Decided on sites for surgery under Mango trees, receiving
and registration, headquarters - medical supply and wards
Plenty of raids all day - nearby airfields objective.

Monday, December 29, 1941.

Corregidor received terrible bombings. 12 to 2 lots of
damage. Details cleaning out areas for wards all day.

Tuesday, December 30, 1941.

Lt. Col. Vanderhoet promoted to Colonel. Major Criag
promoted and assigned executive. Lt. Col. Sullivan,
Chief Prof. Service. Maj. Schwartz, Chief Surgery.
Capt. Sult, Detachment C.O. Capt. Dorsett, USPHS Chief
Medical. Lt. Sarwold, ass't Chief Medical Service.
Lt. O'Donnell ass't adjutant to Sult. Lt. Bostrom
made 1st Lt. - commissioned. Water plant in - 10 kw.
one cylinder engine for lights. Nurses installed in
new quarters. Course of river diverted. Road in and
out completed. Chaplain Dawson reports for duty.
Capt. McClosky assigned here. No raids today. Lt. Col.
Field personnel officer. Capt. Bye - property. Lt.
Horan - mess., Capt., Evans - QM, supply. Capt. Grider
Ass't Chief Surgery USPHS. Lt. DeLong - Chief Dental.

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Wednesday, December 31, 1941.
1st patients, 2 Filipinos diagnosis acute conjunctivitis and external otitis - later case of dengue. One medical and one surgery ward ready for occupancy. Second mess started. Detachment working 12 hours cleaning underbrush for wards.

Thursday, January 1, 1942.
First contingent of patients - 152 - were previously strung along the road from Mariveles - several had crutches - brought here by trucks, busses etc. End of day 177 patients. Most of Sternberg staff arrived today from Corregidor. Three wards - 2 surgical and 1 medical. 2/3 patients medical, 2/3 of these GU

Friday, January 2, 1942.
Surgery began functioning Major Schwartz, chief. Second surgical tent constructed, adjoining tent No. 1. Officers Mess to Mess No. 2. 25 more casualties admitted. Several local raids. Wards labelled. Capt. Strand reported. Assignment of wards: - Sarwold Buckholtz, ward 1 - Capt. Dorsett ward 2 - Capt. Strand 3 - Capt. Grider 4 and 5 - Capt. Lewis 6 and 7. Arrival of Col. J. A. Sullivan - Graves Registration QMC.

Saturday, January 3, 1942.
Raids, locally and over Corregidor - work interferred with by raids. Fox hole recumbency. Casualties from Limay bombing coming in.

Sunday, January 4, 1942.
Catholic Chaplain Cummings here. Arrival of more officers from Corregidor - Keshner, Gillespie, Katz. Several air raids today.

Monday, January 5, 1942.
More raids all day, Cabaoben locally air fields. Anti aircraft artillery gun explosion nearby killed two American Officers among others. Lt. Col. Mack patient hit on rt. chest by shrapnel fragment, operated, no abdominal injury.

Tuesday, January 6, 1942.
182 patients today, 775 beds up for occupancy. Steam sterilizer for surgery - brought here by North. Dog fights and local air bombing raids - AA - no hits.

Wednesday, January 7, 1942.
Day quiet, no raids, more wards being constructed.

Thursday, January 8, 1942.
No bombing today. Daily casualty list admittance Red Cross, Mr. Graybeal here. Front line retrenched to Abucay.

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Friday, January 9, 1942.

Early raid - no casualties. 12 Chinese tailors, refugees from Corregidor hereto establish hospital laundry - Major North officiating. Ward 7 officially opened.

Saturday January 10, 1942.

Quiet day, no raids, plenty of rumors.

Sunday, January 11, 1942.

Three or four raids during morning hours. Ward rounds - daily occurrence. All efficient and actively working.

Monday, January 12, 1942.

Quiet all day - daily casualty admissions however.

Tuesday, January 13, 1942.

Another quiet day.

Wednesday, January 14, 1942.

Field Day of local bombing on air fields from high altitudes. Frank Pigg, Pvt. detachment Gen. Hospital No. 2 killed by falling. First casualty in unit.

Thursday, January 15, 1942.

Maupin and Strand promoted to Major. Keschner promoted to Captain. Many air raids today.

Friday, January 16, 1942.

Enlargening hospital - opening wards 8, 9, and 10. 700 patients in hospital. Jap. bombers in groups of nine flew over areas locally dropping bombs.

Saturday, January 17, 1942.

Schwartz promoted to Lt. Col. Assignment to wards 1,000 patients.

Katz, Buckholtz and Sarwold, Ward 1 - Gonzales, Ward "2" - Strand, Ward 3 - Lewis, Ward 4 - Argosino, Ward 5 - Grider, Largosa, Ward 6 - Gomez, Ward 7. Surgical teams organized.

Sunday, January 18, 1942.

No bombings - New assignments - Col. Vanderboget - CO; Lt. Col. Craig - Executive; Lt. Col. Fields - Dental; Lt. Col. Sullivan - Chief Prof. Services; Lt. Col. Schwartz Chief Surgery; Major Waterous EENT - Ass't Chief Surgery; Capt. Dorsett - Chief Medical; Major Strand - W.O. #3; Capt. Sult - Trans. Officer; Capt. Evans - DC; Maj. Kagy - regulating Officer; Maj. McClosky - Medical Inspector; Capt. Lewis - W.O. 4; Lt. Buckholtz W.O. 1; Lt. Sarwold - W.O. 1; Capt. Katz - NP Officer; Lt. Argosino - W.O. 5; Lt. Grider - W.O. 6; Lt. Gomez - W.O. 7; Lt. Largosa - W.O. 8; Maj. Maupin - Adjutant; Capt. Keschner - San. Officer.

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Capt. Bye - Supply; Lt. Lunnie - Det. C.O.; Lt. Bostrom
Ass't Det. C.O.; Capt. Ayres - receiving officer;
Lt. Campbell - W.O. 7; reporter; Lt. DeLong - DC;
Lt. Genung - DC; Maj. Hublard - W.O. 9; Chap. Dawson;
Chap. Cummings; Lt. Horen - mess officer; Capt.
Metcalf - mess officer; Capt. Gonzales - W.O. 7;
Graybeal - Red Cross; Lt. Roderick - QM; Lt. O'Donnell -
DC.

Thursday, January 22, 1942.

Formation of receiving ward, rectifies confusion of
records. No raids.

Friday, January 23, 1942.

Reception of 600 patients from Limay. Fracture
cases on trucks etc. had terrible mauling trip.
Wonder all didn't die from shock. Very painful ride.
All very busy. Waitely, Batram, Folsom, Bruce,
Comstock, Roland and Bungarner here from Limay.

Saturday, January 24, 1942.

1008 patients as of 1 - 18 - 42
569 Patients as of 1 - 14 - 42
1205 patients as of 1 - 24 - 42
2 Japanese casualties here.

Sunday, January 25, 1942.

Receiving ward under Maj. North and Comstock func-
tioning. Folsom and Roland transferred to Air Corps
Aid Station. 2160 patients. Maj. North promoted to
Lt. Colonel.

Monday, January 26, 1942.

Raid today. Opened ward 16 - Lt. Diaz. Engineers
building more permanent surgery. Delivered still
born baby - 1st OB case.

Tuesday, January 27, 1942.

Oiled roads today. New X-ray unit - traveling unit
here. New mess used today.

Wednesday, January 28, 1942.

Roland Back with gruesome experience - good officer
here however. Several minor raids.

Thursday, January 29, 1942.

2190 patients. X-ray unit in operation today. South
China Seas Naval Battle, 44 Japanese ships sunk.
Plenty of artillery most of the night. Bombs from
raid on or about airfields today did not damage.
no casualties. Corregidor's big guns active.

Friday January 30, 1942.

Quiet except for a few dive bombing raids. Dysentery
among some officers and men - flies.

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Saturday, January 31, 1942.

Bombing raid early this morning. Air fields. Flares noted from adjacent refugee camp. Questioning of five 5th columnist. More Japanese prisoner casualties admitted.

Sunday, February 1, 1942.

Plenty of artillery all night. Only a few casualties from front. Surgery teams working of fracture cases. putting them in casts - some having open reductions. (Maj. Strand)

Monday, February 2, 1942.

Major Bahrenberg assigned here. Dysentery among command.

Tuesday, February 3, 1942.

Visit by Col. Cooper. Cabcaban bombed today about noon - leaflets also dropped. Allied victory in Macassar straights - Naval victory.

Wednesday, February 4, 1942.

Visit by Mr. and Mrs. Jacobi, Life Magazine Photographers. Plenty of bombing today. Fire in Calembas plantation put out by our men.

Thursday, February 5, 1942.

First raing last night, had to put up shelter half. Visit by vice President Las Menas, Maj. Gen. Valdez, etc. 2411 patients in hospital.

Friday, February 6, 1942.

Corregidor blasting away at Cavite all day. No raids during the past 8 hours.

Saturday, February 7, 1942.

Crash of airplane in woods above mess # 1 at 2:30 am. Relief and rescue party under Craig and Sullivan to scene.

Sunday, February 8, 1942.

Put sand on roads taken from beach, improving same materially. Using old gasoling truck as road sprinkler. 2409 patients - few changes.

Monday, February 9, 1942.

Spectacular dog-fights by P-40's and Japanese planes, with at least 2 Jap. planes downed. Maj. Manning now Lt. Col. Another strafing and bombing of air fields attack by Japs.

Tuesday, February 10, 1942.

No activity. Capt. Roland doing splendid work here.

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- Wednesday, February 11, 1942.
Another early air raid on airfields - No casualties.
- Thursday, February 12, 1942.
More Japanese prisoners, casualties. Dysentery still active in command. Several raids of no consequence today.
- Friday, February 13, 1942.
Incendiary bomb attack on Cabcaban. Several babies and children burned and died, in shock. About 40 casualties and as many injured. Marshal and Gilbert Islands victory.
- Saturday, February 14, 1942.
Dysentery active in command, no Malaria however. Flies a menace.
- Sunday, February 15, 1942.
Chap. Cummings ordered to Little Baguio. Bombing raids all day - no casualties.
- Monday, February 16, 1942.
Chap. Talbot assigned here. Corregidor bombing all day in direction of Cavite. Bombing raid in Cabcaban. Few casualties.
- Tuesday, February 17, 1942.
Bombing again this morning over airfields. One of our cooks, civilian employee watching activity hit by strafing in Mess # 1 died. Permanently disabled list collected.
- Wednesday, February 18, 1942.
First contingent (50) of permanent disabled Filipinos went out on ship. Investigating disposal of maggot infested carabao - Col. Lellick.
- March 2, 1942.
Headquarters moved to original surgical tent.
Col. Vanderboget leaving - new assignment - service area surgeon. Grider moved to Ward 3 Jackson to 6.
- March 3, 1942.
Lt. Col. Gillespie arrived - new CO. Major Berry here - sanitary officer, medical inspector; Maj. Sitter here W.O. 6; new assignments made; P-40's sink two Jap destroyers in Subic Bay.
- March 4, 1942.
Capt. Bye assigned mess officer. Lt. Horan relieved.
- March 5, 1942.
Hubbard and Horan transferred out. 2498 patients.

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- March 6, 1942.
Command getting cholera shots today.
- March 7, 1942.
Jap planes - bombers and dive bombers made early raid.
- March 8, 1942.
Capt. Schott promoted - Miss Motley, dietician, assigned.
2543 patients.
- March 9, 1942.
Malaria cases flockin in. 2700 patients.
- March 10, 1942.
Bunaman promoted. administrating mess and organization of ward 19.
- March 11, 1942.
Strafing attack by airplanes. Comstock promoted to Capt.
- March 14, 1942.
Motor busses moved into nurses area. shortage of Quinine.
- March 15, 1942.
Corregidor heavily bombeñ. 2523 patients. Case of filiarlasis Ward 6.
- March 18, 1942.
Visit by Vanderboget and Duckworth. Glattley now Bataan surgeon (army) under Wainwright.
- March 19, 1942.
Visit by Generals Pierce and Stevens and Col. Glattley
- March 21, 1942.
Visit by Col. Cooper.
- March 22, 1942.
Airplane activity, 50 planes overhead.
- March 25, 1942.
Bombs dropped on Corregidor. 2800 patients.
- March 26, 1942.
McClosky killed, also Col. Lima. Col. Vanderboget injured. at Philippine General near Mariveles.
579 total permanent disabled (78 American 501 Filipino)
- March 29, 1942.
Rearrangement of patients 3000 here now.
- March 30, 1942.
Little Baguio Hospital bombed.

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April 1943

1. Gillepie full Colonel- Pete Kemp- Lt. Col.- Earthquake.
2. Air activity increased- 3078 Patients.
3. Admitted about 400 Patients- Maleria Exhaustion- Malnourishment
3129 Patients.
4. Rearrangement of Patients for more room if necessary.
5. Unloading collecting at front- Patient flocking here.
6. Patient sleeping on ground- 3920 Patients.
7. 4700 Patients- 10 new Nurses and 6 Doctors from Corridor-
front folding up- all retreating.
8. All Nurses left for Corridor- had stampede described on
Highway
9. Capitulation.
10. 5700- 6000 Patients- 4000 Filipinos miraculously well allowed
to leave for their homes- Japs inventoring our supplies-
Some looting.

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CHRONOLOGICAL

Thursday, December 25, 1941.

Foodstuffs from commissary distributed to annexes.
3:00 pm orders to evacuate to Pier 1.
Loaded General Hyde and Wilby.
Left Pier 1 - 11:00 pm for Corregidor.
Cavite demolitions - manganese store fires.

Friday, December 26, 1941.

Corregidor to Linao on General Hyde.
Air attacks on Hyde nearing Linao - 3 attacks, no hits.
Unloaded Hyde at Linao
Casual camp at 142.5 - Installation of 12 No. Regt. mess.

Saturday, December 27, 1941.

Casual camp at 142.5. Capt. Haeder in command.
Several bombing raids nearby - ships north of Linao.

Sunday, December 28, 1941.

Evacuate to new area, 162.5 with 20 nurses.
Led by mess of Medical Depot, Major Pete Kempf.
Original camp - bottom of hill - plan outlined by
Major North previously on reconnaissance.
Located and began installation of mess No. 1.
Decided on sites for surgery, unassisted patients
and registration, headquarters - medical supply and records.
Alert of raids all day - nearby airfields objective.

Monday, December 29, 1941.

Corregidor received terrible bombings. 12 to 2 lots of
damage. Details cleaning out areas for work all day.

Tuesday, December 30, 1941.

Lt. Col. Vanderbogt promoted to Colonel. Major Craig
promoted and assigned executive. Lt. Col. Sullivan,
Chief Prof. Service. Maj. Schwartz, Chief Surgery.
Capt. Sult, Detachment C.C. Capt. Dorsett, USPHS Chief
Medical. Lt. Sarwold, ass't Chief Medical Service.
Lt. O'Donnell ass't adjutant to Sult. Lt. Boston
made 1st Lt. - commissioned. Water plant
one cylinder engine for lights. Nurses in- stalled in
new quarters. Course of river diverted. Road in and
out completed. Chaplain Dawson reports for duty.
Capt. McClosky assigned here. No Raids to- day. Lt. Col.
Fields personnel officer. Capt. Bye - pro- verty. Lt.
Moran - mess., Capt. Evans - M, supply. Capt. Greer
ass't Chief Surgery USPHS. Lt. DeLong - Chief Dental.

Wednesday, December 31, 1941.

1st patients, 2 Filipinos diagnosis acute conjunctivitis and external otitis - later case of dengue. One medical and one surgery ward ready for occupancy. Second mess started. Detachment working 12 hours cleaning underbrush for wards.

Thursday, January 1, 1942.

First contingent of patients - 152 - were previously strung along the road from Mariveles - several had crutches - brought here by trucks, busses, etc. End of day 177 patients. Most of Sternberg staff arrived today from Corregidor. Three wards - 2 surgical and 1 medical. 2/3 patients medical, 2/3 of these GU

Friday, January 2, 1942.

Surgery began functioning Major Schwartz, chief. Second surgical tent constructed, adjoining tent No. 1. Officers Mess to Mess No. 2. 25 more casualties admitted. Several local raids. Wards labelled. Capt. Strand reported. Assignment of wards: - Jarwood Buckholtz, Ward 1 - Capt. Lorsett, Ward 2 - Capt. Strand 3 - Capt. Grider 4 and 5 - Capt. Lewis 6 and 7. Arrival of Col. J. A. Sullivan - Graves Registration HQ.

Saturday, January 3, 1942.

Raids, locally, no over Corregidor - work interfered with by raids. Fox hole recumbency. Casualties from Limay bombing coming in.

Sunday, January 4, 1942.

Catholic Chaplain Cummings here. Arrivals of more officers from Corregidor - Rechner, Gillis, etc. Several air raids today.

Monday, January 5, 1942.

More raids all day, Cabaoben locally air raids. Anti aircraft artillery gun explosion nearby killed two American Officers among others. Lt. Col. Mack patient hit on rt. chest by shrapnel fragment, operated, no abdominal injury.

Tuesday, January 6, 1942.

182 patients today, 775 beds up for occupancy. Steam sterilizer for surgery - brought here by Ho. Log flights and local air bombing raids - AA - no hits.

Wednesday, January 7, 1942.

Day quiet, no raids, more wards being constructed.

Thursday, January 8, 1942.

No bombing today. Daily casualty list admitted. Red Cross, Lt. Graybeal here. Front line entrenched to Abucay.

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Friday, January 9, 1942.
Early raid - no casualties. 12 Chinese tailors, refugees from Corregidor hereto establish hospital laundry - Major North officiating. Ward 7 officially opened.

Saturday January 10, 1942.
Quiet day, no raids, plenty of rumors.

Sunday, January 11, 1942.
Three or four raids during morning hours. Ward rounds - daily occurrence. All efficient and actively working.

Monday, January 12, 1942.
Quiet all day - daily casualty admissions 1 fever.

Tuesday, January 13, 1942.
Another quiet day.

Wednesday, January 14, 1942.
Field Day of local bombing on air fields from high altitudes. Frank Figg, Pvt. detachment General Hospital No. 2 killed by falling. First casualty in unit.

Thursday, January 15, 1942.
Maupin and Strand promoted to Major. Reschner promoted to Captain. Many air raids today.

Friday, January 16, 1942.
Enlargening hospital - opening wards 8, 9, and 10. 700 patients in hospital. Jap. bombers in groups of nine flew over areas locally dropping bombs.

Saturday, January 17, 1942.
Schwartz promoted to Lt. Col. Assignment to wards 1,000 patients.
Katz, Buckholtz and Sarvold, Ward 1 - Gonzales, Ward #2 - Strand, Ward 3 - Lewis, Ward 4 - Argosino, Ward 5 - Grider, Argosa, Ward 6 - Gomez, Ward 7.
Surgical teams organized.

Sunday, January 18, 1942.
No bombings - New assignments - Col. Vandenberg - 30; Lt. Col. Craig - Executive; Lt. Col. Fields - Dental; Lt. Col. Sullivan - Chief Prof. Services; Lt. Col. Schwartz - Chief Surgery; Major Waterous BEMT - Asst Chief Surgery; Capt. Dorsett - Chief Medical; Major Strand - W.O. #3; Capt. Sult - Trans. Officer; Capt. Evans - DC; Maj. Nagy - regulating Officer; Maj. McClosky - Medical Inspector; Capt. Lewis - W.O. #4; Lt. Buckholtz W.O. 1; Lt. Sarvold - W.O. 1; Capt. Katz - NP Officer; Lt. Argosino - W.O. 5; Lt. Grider - W.O. 6; Lt. Gomez - W.O. 7; Lt. Argosa - W.O. 8; Maj. Maupin - Adjutant; Capt. Reschner - Sen. Officer

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Capt. Bye - Supply; Lt. Linnie - Det. C.O.; Lt. Bostrom
Ass't Det. C.O.; Capt. Ayres - receiving officer;
Lt. Campbell - W.O. 7; reporter; Lt. DeLong - DC;
Lt. Genung - DC; Maj. Hubbard - W.O. 9; Chap. Dawson;
Chap. Cummings; Lt. Moran - mess officer; Capt.
Metcalf - mes. officer; Capt. Gonzales - W.O. 7;
Graybeal - Red Cross; Lt. Roderick - DC; Lt. O'Donnell -
DC.

Thursday, January 22, 1942.

Formation of receiving ward, rectifies confusion of
records. No raids.

Friday, January 23, 1942.

Reception of 600 patients from Linay. Procedure
cases on trucks etc. had terrible hauling trip.
Wonder all didn't die from shock. Very painful ride.
All very busy. Maltby, E. tram, Polson, Bruce,
Constock, Roland and Bungerner here from Linay.

Saturday, January 24, 1942.

1008 patients as of 1 - 18 - 42
569 Patients as of 1 - 14 - 42
1205 patients as of 1 - 24 - 42
2 Japanese casualties here.

Sunday, January 25, 1942.

Receiving ward under Maj. North and Constock func-
tioning. Polson and Roland transferred to Air Corps
aid station. 2160 patients. Maj. North promoted to
Lt. Colonel.

Monday, January 26, 1942.

Raid today. Opened ward 16 - Lt. Diaz. Engineers
building more permanent surgery. Delivered still
born baby - 1st OB case.

Tuesday, January 27, 1942.

Oiled roads today. New X-ray unit - traveling unit
here. New mess used today.

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Roland back with gruesome experience - good officer
here however. Several minor raids.

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2190 patients. X-ray unit in operation today. South
China Sea naval battle, 44 Japanese ships sunk.
Plenty of artillery most of the night. Bombs from
raid on or about airfields today did not average.
no casualties. Corregidor's big guns active.

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Quiet except for a few dive bombing raids. Mentary
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Saturday, January 31, 1942.
Bombing raid early this morning. Air fields. Flores noted from adjacent refugee camp. Questioning of five 5th columnists. More Japanese prisoner casualties admitted.

Sunday, February 1, 1942.
Plenty of artillery all night. Only a few casualties from front. Surgery teams working of fracture cases. putting them in casts - some having open reductions. (L.A.J. Strand)

Monday, February 2, 1942.
Major Bahrenberg assigned here. Dysentery among command.

Tuesday, February 3, 1942.
Visit by Col. Cooper. Cabeben bombed today about noon - leaflets also dropped. Allied victory in Macassar Straits - naval victory.

Wednesday, February 4, 1942.
Visit by Mr. and Mrs. Jacobi, Life Magazine Photographers
Plenty of bombing today. Fire in Calenbas plantation put out by our men.

Thursday, February 5, 1942.
First rain last night, had to put up shelter half.
Visit by vice President Das Anas, Maj. Gen. Valdez, etc. 2411 patients in hospital.

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Corridor blasting away at Cavite all day. No raids during the past 8 hours.

Saturday, February 7, 1942.
Crash of airplane in woods above mess # 1 at 2:30 am. Relief and rescue party under Craig and Sullivan to scene.

Sunday, February 8, 1942.
Put sand on roads taken from beach, improving some materially. Using old gasoling truck as road sprinkler. 2409 patients - few changes.

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Spectacular dog-fights by P-40's and Japanese planes, with at least 2 Jap. planes downed. Maj. Manning now Lt. Col. Another strafing and bombing of air fields attack by Japs.

Tuesday, February 10, 1942.
No activity. Capt. Roland doing splendid work here.

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Another early air raid on airfields - No casualties.

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First contingent (50) of permanent disabled Filipinos went out on ship. Investigating disposal of maggot infested carabao - Col. Lellick.

March 2, 1942.

Headquarters moved to original surgical tent. Col. Vandertoget leaving - new assignment - service area surgeon. Order moved to Ward 3 Jackson to 6.

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Lt. Col. Gillespie arrived - new CO. Major Berry here - sanitary officer, medical inspector; Maj. Sitter here W.O. 6; new assignments made; F-40's sink two Jap destroyers in Subic Bay.

March 4, 1942.

Capt. Aye assigned mess officer. Lt. Moran relieved.

March 5, 1942.

Hubbard and Moran transferred out. 2498 patients.

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- 7 -
- March 6, 1942.
Command getting cholera shots today.
- March 7, 1942.
War planes - bombers and five bombers made early raid.
- March 8, 1942.
Capt. Schott promoted - his Motley, dietician, assigned, 2543 patients.
- March 9, 1942.
Malaria cases flourish in. 2700 patients.
- March 10, 1942.
Luncheon promoted. administrative mess and organization of ward 19.
- March 11, 1942.
Strafing attack by airplanes. Constock promoted to Capt.
- March 14, 1942.
Motor busses moved into nurses area. shortage of quinine.
- March 15, 1942.
Corridor heavily bombed. 2523 patients. Case of typhoid fever ward 6.
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Visit by Vanderboget and Duckworth. Glattley nowataan surgeon (army) under Wainwright.
- March 19, 1942.
Visit by Generals Pierce and Stevens and Col. Glattley.
- March 21, 1942.
Visit by Col. Cooper.
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Airplane activity, 50 planes overhead.
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Bombs dropped on Corridor. 2800 patients.
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McClosky killed, also Col. Lins. Col. Vanderboget injured, at Philippine General near Mariveles. 579 total permanent disabled (78 American 501 Filipino)
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Rearrangement of patients 3000 here now.
- March 30, 1942.
Little Baguio Hospital bombed.

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April 1943

1. Gillepie full Colonel- Pete Kemp- Lt. Col. Earthquake
2. Air activity increased-3078 Patients.
3. Admitted About 400 Patients-Malaria-Exhaustion-Malnourishment
4. 3129 Patients
4. Rearrangement of Patients for more room if necessary.
5. Unloading collecting station at front-Patient flocking here.
6. Patients sleeping on ground- 3920 Patients
7. 4700 Patients- 10 new Nurses and 6 Doctors from Corregidor- front folding up- all retreating.
8. All Nurses left for Corregidor- had stampede described on highway.
9. Capitulation.
10. 5700-6000 Patients- 4000 Filipinos miraculously well allowed to leave for their homes- Japs inventoried our supplies- some looting.

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List of nurses and female employees at Hospital No. 2, Bataan.

NAME

DATE JOINED

UNITED STATES ARMY NURSE CORPS

Kimbell, Blanche	December 27, 1941.
Mueller, Clara L.	December 27, 1941.
Schacklette, Edithe M.	December 27, 1941.
Hatchit, Eunice	December 27, 1941.
Dollason, Kathryn L.	December 27, 1941.
Lohr, Mary G.	December 27, 1941.
Kehoe, Doris C.	December 27, 1941.
Breese, Minnie L.	December 27, 1941.
Durrett, Sally	December 27, 1941.
Oberst, Mary Jo.	December 27, 1941.
Downing, Susan K.	December 27, 1941.
Thor, Ethel M.	December 27, 1941.
Lee, Eleanor O.	December 27, 1941.
Bickford, Clara Mae	December 27, 1941.
Foreman, Adele F.	December 27, 1941.
Reppak, May J.	December 27, 1941.
Williams, Anne E.	December 27, 1941.
Blaine, Ethel L.	December 27, 1941.
Hahn, Alice J.	December 27, 1941.
Nesbit, Josephine	January 1, 1942.
Putnam, Beulah, M.	January 17, 1942.
Henshaw, Gwendolyn L.	January 17, 1942.
McKay, Hortense	January 17, 1942.
Lee, Harriet G.	January 17, 1942.
Hennessey, Helen M.	January 17, 1942.
Arnold, Phyllis	January 18, 1942.
Daley, Dorothea M.	January 23, 1942.
Allen, Earleen	January 23, 1942.
Hallman, Grace D.	January 23, 1942.
Summers, Helen I.	January 23, 1942.
Gastinger, Leona	January 23, 1942.
Corns, Edith M.	January 23, 1942.
Veley, Beth Alta	January 23, 1942.
Wilson, Lucy L.	January 23, 1942.
Kennedy, Imogene	January 23, 1942.
Jenkins, Geneva	January 23, 1942.
Jenkins, Ressa	January 23, 1942.
Wurst, Anne B.	January 23, 1942.
Moultrie, Mary Lucy	January 23, 1942.

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Rieper, Rose E.	January 27, 1942.
Scholl, Dorothy B.	January 27, 1942.
Whitlow, Evelyn D.	January 27, 1942.
Gillahan, Nancy J.	January 27, 1942.
Garen, Eleanor	February 1, 1942.
Straub, Ruth M.	February 5, 1942.
Dalton, Mildred	February 5, 1942.
Burris, Myra V.	February 5, 1942.
+ Palmer, Rita C.	February 5, 1942.
Lewey, Frankie T.	March 12, 1942.
+ Greenwalt, Beulah, M.*	March 6, 1942.
Stevens, Mabel V.*	March 6, 1942.
Anschick, Louise M.	April 6, 1942.
Ludlow, Dorothy L.	April 6, 1942.
Peterson, Mollie A.	April 6, 1942.
Dworsky, Bertha N.	April 6, 1942.
Gorns, Catherine M.	April 6, 1942.

NOTE: Rita Palmer transferred to Hospital No. 1, March 12, 1942.
Helen Summers transferred to Ft. Mills, March 6, 1942.
Imogene Kennedy transferred to Ft. Mills, March 16, 1942.
* Began ten (10) day temporary tour of duty on March 6, 1942,
permanently assigned to Hospital No. 2, April 6, 1942.

CIVILIAN NURSE

Mrs. Maude Williams (Denny) January 10, 1942.

FEMALE EMPLOYEES

Miss Catharine Nau - Red Cross Field Director	January 1, 1942.
Miss Ruby Motley - Dietician	March 7, 1942.
Mrs. Vivian Weissblatt - Dietician	January 1, 1942.
Miss Brunetta Kuehlthian - P.T. Aide	February 5, 1942.
Mrs. Fontaine Porter	January 2, 1942.
Mrs. Edith Hedges	January 3, 1942.
Mrs. Marie Gould	January 3, 1942.
Miss Elizabeth (Betty) Brodfield Ord. Emp.	January 8, 1942.
Mrs. Margaret Folsom - Wife of M.C. Officer	January 23, 1942.
Mrs. Rita Johnson	February 5, 1942.

NOTE: Miss Motley from Ft. Mills exchanged assignments with Mrs. Weissblatt on March 9, 1942.

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FILIPINO NURSES

Dulay, Cleopatra Q.	January 8, 1942.
Chan, Felisa N.	January 8, 1942.
Villauera, Marina	January 8, 1942.
Tolentino, Catalina N.	January 8, 1942.
Gempesaw, Bagongsilang	January 8, 1942.
Ranada, Juana C.	January 8, 1942.
Garcia, Federica M.	January 8, 1942.
Espejo, Herminia D.	January 8, 1942.
Maria, Pura Santa	January 19, 1942.
Valido, Esperanza W.	January 19, 1942.
Profetana, Anita C.	January 19, 1942.
Ona, Esperanza (now dead)	January 19, 1942.
Lara, Genovera	January 19, 1942.
Quintos, Perfecta B.	January 19, 1942.
Garcia, Adelaida T.	January 22, 1942.
Budano, Paula B.	January 22, 1942.
Macasa, Leda V.	January 22, 1942.
Singsong, Caridad N.	January 22, 1942.
Gacayan, Florencia M.	January 22, 1942.
Barrera, Lucila	January 23, 1942.
Cruz, Lumen B.	January 23, 1942.
Go, Salustiana F.	February 5, 1942.
Salvacion, Rebecca J.	February 5, 1942.
Davis, Maureen N.	April 6, 1942.
Lorenzana, Sustines A.	April 6, 1942.
Sarmiento, Beatriz	April 6, 1942.

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