

Battalion are the supporting medical companies. Liaison Officer of the 46th Medical Battalion was captured by the enemy with the monthly medical reports of the units engaged. He later escaped with some of the reports intact. Our casualty report shows 40 wounded and 10 exhaustions were admitted. We returned 1 wounded man and 3 exhaustions to duty and transferred 33 wounded and 8 exhaustion cases to hospitals.

31 July 1944 - Monday.

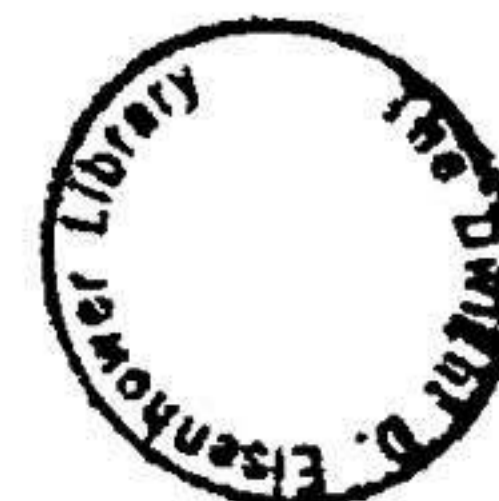
The division is now fighting at several points. Both Combat Commands are pushing through Pontoubault and Ducey. Enemy has left Avranches and retreating south and east. Captain Kifner moved forward to contact Colonel Abrams. Situation was discussed and he was dispatched to VIII Corps to procure closer hospital support. We are evacuating wounded 93 miles causing patients to arrive in hospitals in a state of shock and bleeding. Corps has promised closer support. Replacements for the medical detachments have also been promised. Two more aid men have been wounded. This brings our casualties in the medical department to eleven. Due to heavy enemy resistance our casualty report shows 107 wounded today and 30 exhaustions. We returned to duty 4 wounded and sent 101 wounded and 26 exhaustion cases to the hospital.

1 August 1944 - Tuesday.

Today the division was reassigned to the Third U. S. Army under VIII Corps. This will necessitate informing all medical detachments of changes in reporting. A request was made to Corps and Army to move an evacuation hospital to Avranches since our present distance is over 100 miles. Replacements arrived today and Captain Kifner checked service records for eyeglasses prescriptions, immunizations, etc. The records were all in good order. We still have no medical department replacements only Corps aid men on TD. Our casualty reports today listed 59 wounded and 7 exhaustions admitted. 10 wounded and 10 exhaustions were returned to duty. We transferred 55 wounded and 3 exhaustions to hospitals. Two aid men were killed in action today, one from the 53rd Armored Infantry Battalion and one from the 66th Armored Field Artillery Battalion.

For the Surgeon:

DANIEL R. KIFNER
Captain, MAC
Office Executive



JOURNAL
DIVISION SURGEON'S OFFICE



From : 0001 2 August 1944
To : 2400 8 August 1944
Place: France

2 August 1944 - Wednesday.

Combat teams were rapidly moving towards the city of Rennes meeting isolated islands of resistance and encountering mortar and machine gun fire. Supply depot for Class IV supplies was now open 1½ miles south of Coutances on Highway 171. It has been noted that for better control when both Combat Commands are committed the Division Surgeon will establish headquarters with G-4. This will enable him to maintain communication with both Combat Command surgeons and the Medical Battalion. The Division Surgeon believes that his work is much better when coordinating his work with the Chief of Staff, G-3 and G-4. We admitted 71 wounded and 10 exhaustion cases, returned 4 wounded to duty and transferred 66 wounded and 6 exhaustion to hospitals. Reports were extremely tardy due to the distance between Forward Echelon and the Administrative Center. Third U. S. Army replaced the fifteen ambulances and thirty-two enlisted men that we had from First U. S. Army with ten ambulances and twenty-two enlisted men. The Medical Battalion attached five litter bearers to Combat Command A. Three aid men from the 10th Armored Infantry Battalion were wounded in action.

3 August 1944 - Thursday.

Combat elements of the division were engaging the enemy before the city of Rennes. Ten tanks from the 35th Tank Battalion were put out of action in the vicinity of St. Gregoire. The following evacuation hospitals were in our vicinity: 107th - 3 miles southeast of Brehal on GC 20; 106th and 104th moving south of Avranches but not operating. The 585th Ambulance Company of the 64th Medical Group was now evacuating division medical service to Army installations. The Surgeon's Office in the Administrative Center moved south to Poilley, (vicinity of Ducey), and established office there. We received 12 wounded and 19 exhaustion cases, returned 4 wounded and 7 exhaustions to duty, and transferred 10 wounded and 17 exhaustion cases to hospitals.

4 August 1944 - Friday.

Combat elements of the division were rapidly moving southward from Rennes towards Vannes meeting some resistance from groups of isolated enemy. Heavy small arms fire and some artillery fire were encountered resulting in casualties for the day of 48 wounded and 4 exhaustion cases. We returned 5 wounded and 4 exhaustion cases to duty and transferred 42 wounded and 4 exhaustion cases to hospitals. A decided drop in cases of combat exhaustion cases has been noted with the start of the division's rapid movement. Six aid men that had been captured by the enemy returned to us today. Major Frank contacted the Surgeon of VIII Corps in an effort to receive replacements for our aid man losses. He also made an effort to get medical officers and closer support by hospitals. Hospitals are consistently too far to the rear resulting in the arrival of patients at hospitals in a state of shock. Journeys of a hundred miles or so in ambulances are not conducive to the best health of transportable patients. The Surgeon's Office in the Administrative Center was very close to scenes of enemy air activity. Strafing of nearby roads and heavy bombing at night resulted in changing of working hours.

5 August 1944 - Saturday.

Fourth Armored Division combat elements were engaging enemy in and south of

Vannes, very little enemy resistance being shown as enemy was retreating south. Isolated islands of resistance were by-passed. The 2nd Cavalry Group was attached to the division plus two Armored Field Artillery Battalions. Casualties for the day were 17 wounded and 10 exhaustion cases. We returned 5 wounded to duty. We transferred 13 wounded and 6 exhaustions to hospitals. The hospitals supporting us still remain approximately 100 miles to our rear in the vicinity of Rennes. Due to the rapid movement of our armored columns groups of enemy were bypassed. These isolated elements fired upon ambulances necessitating a request to the Commanding General for protection by armored vehicles - request was granted. Clearing Stations retained patients until ambulances could move rearward under the protection of supply columns. In this situation it was necessary for the clearing stations to perform enough surgery to prevent the loss of life or limb. Exhaustion cases that are returning to duty via the Administrative Center are checked by Major Frank and then sent forward. We are making all efforts to bypass replacement pools by going to hospitals and picking up our personnel ready to return to duty. All reports are again tardy due to the situation at the front. The Administrative Center is again near the scene of heavy enemy air activity, Enemy ground troops driving toward Avranches leaving us in exposed position.

6 August 1944 - Sunday.

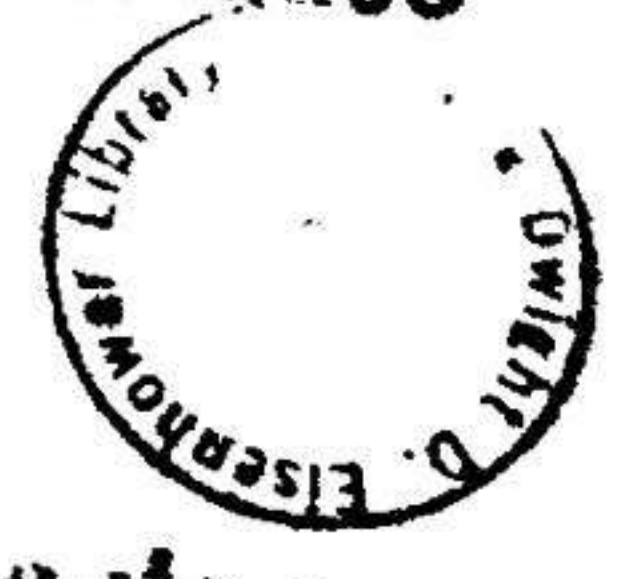
Cavalry screen reports enemy infantry with anti-tank guns dug in on the Vannes Lorient road. Our combat elements are meeting and overcoming these positions. The division is still moving towards Lorient. Company B, 46th Medical Battalion Clearing Station is now located 2 miles south of Vannes. Casualties reported were 6 wounded and we returned 1 to duty and five were sent to hospitals. We still haven't received closer hospital support. The distance we are evacuating is 107 miles. Requests to Corps and Army have been sent for aid in this problem. The Combat Command Surgeon took over the hospital in the nearest town and kept his non-transportable casualties there. Transportable casualties were evacuated with sufficient guard personnel. Medical reports are late because transmission is by ambulance and roads are still unprotected because infantry units can not keep up with us. At present we are short 22 aid men and 5 Medical Corps officers. We requisitioned these replacements two weeks ago and have received no response as yet. The Administrative Center again passed a bad night because of bombing raids by the enemy.

7 August 1944 - Monday.

Our division's combat elements are now fighting north of Lorient overcoming prepared strong points. Enemy resistance has been heavy, his strong points have been well prepared, and he has heavy artillery support with a zone of anti-tank guns and ditches. An ultimatum was sent to the Commandant of the garrison of Lorient - the garrison numbers in the vicinity of 20,000 men and officers. Our casualties were 77 wounded and 6 exhaustion cases. 3 wounded were returned to duty and we sent 66 wounded and 5 exhaustion cases to the hospitals. The German drive toward Avranches is passing within 7 miles of the Administrative Center at Decey. Our ambulances have again been fired upon by machine guns. Captain Allen, Dental Corps, was wounded again by shell fragments. Lieutenant Roser of the 46th Medical Battalion was also wounded by shell fragments and two aid men were wounded. 31st Medical Group replaced the 64th Medical Group as Army medical servicing installation. Six enlisted men from the 429th Medical Collecting Company, (Separate), 31st Medical Group, attached to Company B, 46th Medical Battalion for duty.

8 August 1944 - Tuesday.

Combat Command B was now holding a position north of Lorient and besieging the city. Combat Command A moved southeast towards Nantes experiencing some enemy



resistance. We had 28 wounded and 12 exhaustion cases. We returned 3 wounded to duty and sent 20 wounded and 6 exhaustion cases to hospitals. A platoon of the 53rd Field Hospital was attached. They will be doing work on head, chest, and abdominal wounds. The nearest evacuation hospital is 97 miles away. We received 16 medical aid men today. These men were of very poor quality showing a decided lack of training and background. Eight litter bearers attached to the 53rd Armored Infantry Battalion on August 6 were returned to duty with Company B, 46th Medical Battalion, Armored. A study of figures shows that the rate of exhaustion cases declines when units are moving and rises when units stop and establish positions. Little dental work has been accomplished due to the rapid movement of the division. It is hard to set up a dental service under these tactical conditions. Captain Kifner visited hospitals in search of 4th Armored Division personnel ready for return to duty.

For the Surgeon:

DANIEL R. KIFNER
Captain, MAC
Office Executive



JOURNAL
DIVISION SURGEON'S OFFICE

From : 0001 9 August 1944
To : 2400 15 August 1944
Place: France



9 August 1944 - Wednesday.

Our two Combat Commands are still occupying yesterdays positions, Combat Command B at Lorient and Combat Command A at Nantes. Captain Scotti, task force surgeon for Combat Command A, evacuated 18 casualties to the nearest civilian hospital and treated same. Army ambulances later evacuated these wounded. Company A, 46th Medical Battalion lost a surgical truck when it was struck by a tank. Four ambulances and a 1/4 ton truck were lost to enemy shellfire. Replacements were received from Reserve Medical Company. Ambulance drivers have been instructed to stop all rumors.

The Adjutant of the 64th Medical Group visited our office to get copies of CMSR Form 323 that were lost in transmission to Army. Duplicate copies were given him.

The Surgeon's Office in the Administrative Center had another sleepless night due to enemy air activity.

10 August 1944 - Thursday.

The Surgeon's Office moved with the Administrative Center to St. Gregoire, 2 1/2 miles west of Rennes. Upon arrival office was set up. Combat elements report no change in their positions.

Major Frank and Captain Kiener visited hospitals in vicinity and brought back several men that were ready for return to duty.

Colonel Abrams contacted Captain Hood of Third U. S. Army who promised to push evacuation hospitals further south. It was suggested that part of the Medical Gas Treatment Battalion be attached to each medical company. This would provide the necessary chest and abdominal teams. The request for the chest team was transmitted to Army by VIII Corps. It has been noted that any medical installation that is to be attached to the division must be mobile, completely organic, and should have bed space for at least 50 casualties. If it cannot conform to these specifications it is of little use to us. Control of medical service was rather difficult when one Combat Command was in Lorient and one in Nantes and the reserve was in Vannes. This entailed a great area of medical service.

Colonel Abrams believes his office in the Administrative Center has been consistently too far in the rear.

Forward elements are still evacuating to the 108th Evacuation Hospital at Rennes.

The Chief of Staff was advised that graves registration personnel could work the best if they were in the vicinity of the Reserve Medical Company. He was also notified that men were not wearing pistol belts with canteen and first aid pouch attached.

One aid man was killed today while picking up a dead officer.

11 August 1944 - Friday.

Tactical situation unchanged. Casualties for the day were 9 wounded and one exhaustion case. 7 exhaustion cases were returned to duty and 6 wounded were transferred to hospitals.

All attached enlisted men of the 429th Medical Collecting Company, (Separate), were relieved from attachment per VOCO, 31st Medical Group.

Ten medical department replacements came in today and were assigned as follows: four to the Medical Detachment, 53rd Armored Infantry Battalion; five to the Medical Detachment, 51st Armored Infantry Battalion; and one to the Combat Command Surgeon. Medical Detachments of the 25th Cavalry Reconnaissance Squadron Mechanized and the 37th Tank Battalion are still short one man each.

The question arose as to moving platoon of Field Hospital with us. Army Quartermaster Company transported them here and then left. Third U. S. Army was contacted as to the solution of the problem. We have no transportation for them.

Major Frank has an extensive practice, coupled with the personnel of the Administrative Center, he is giving medical service to many French civilians.

One aid man from the 46th Medical Battalion was wounded in action today.

12 August 1944 - Saturday.

The general disposition of the combat elements of the 4th Armored Division remains unchanged. Combat Command B and the 25th Cavalry Reconnaissance Squadron Mechanized are still before Lorient. Combat Command A is still before Nantes. It has been noted that the enemy has withdrawn south of the Loire at Nantes. Light resistance is being encountered in these areas. Casualties reported for today were 10 wounded and 7 exhaustion cases. Returned to duty were 3 wounded. We transferred to hospitals 5 wounded and 10 exhaustion cases.

Colonel Abrams has been maintaining personal liaison with the Combat Command Surgeons. By this means he manages to keep abreast of the medical situation. By the use of the G-4 radio net, and his liaison officer Major Hugunin, good control has been established over all elements of the divisional medical service.

Evacuation to hospitals is still lengthy. General Wood has requested from the Corps and Army Commanding Generals closer support by evacuation hospitals.

Major Frank has been inspecting supplemental rations. He and Captain Kifner have maintained contact with hospitals to have returned to our division patients ready for duty from these hospitals.

Liaison with forward elements has been difficult due to the inability of unprotected vehicles to travel from the advanced elements of the division to the forward echelon.

One aid man from the 46th Medical Battalion was killed in action today. He was shot by a French patriot. The case is now being investigated.

Major Frank contacted the 108th Evacuation Hospital 2 miles north of Rennes. Cooperation between them and the Surgeon's Office in the Administrative Center has been excellent. Major Frank will contact this hospital daily until all available 4th Armored Division personnel ready for duty have returned to us. These contacts with the 108th Evacuation Hospital have returned to duty 7 men without the necessity of them going to a replacement pool.



13 August 1944 - Sunday

Combat Command A occupied the city of Nantes. Light infantry patrols were the only enemy elements encountered. All important bridges in the city were generally blown. Channels were blocked with sunken ships and dock areas mined. Combat Command B reports unusual inactivity - enemy mortar and artillery fire. Enemy patrols were active, especially during the night. Our casualties for today were 32 wounded and 11 exhaustion cases. We returned to duty 7 wounded and 2 exhaustion cases and transferred 28 wounded and 6 exhaustion cases to hospitals.

Permission was asked of the Third Army Surgeon to allow the 53rd Field Hospital Platoon to remain in this area and be placed under the control of the 6th Armored Division upon our relief from this area by them.

Colonel Abrams sent out a memo to all unit commanders asking that they insure the wearing of the web belt, canteen, and first aid pouch when going into combat, that the use of lemon extract powder be encouraged and that aid men should not be used to evacuate the dead. He also requested that aid stations be not placed closer than 400 yards of the main line of resistance.

Major Frank inspected Army water points in the city of Rennes. Water is being drawn from the canal running through this city. This water, despite purification, is almost unusable for drinking and cooking because of a peculiarly brackish and stagnant taste. Major Frank is in search of another water point for our use.

NSR 86ab was consolidated and forwarded to higher headquarters. One case of gonorrhoea was reported by the 94th Armored Field Artillery Battalion.

Replacements in the administrative center personnel have shown need for dental service. The emergencies are being sent to the 108th Evacuation Hospital for the necessary extractions.

14 August 1944 - Monday.

Combat Command A was relieved in the vicinity of Nantes by the 2nd Cavalry Group. The 2nd Cavalry Group is no longer attached to the 4th Armored Division. The 25th Cavalry Reconnaissance Squadron Mechanized and Reserve Command were relieved by the 6th Armored Division. Our division is in preparation for movement to the vicinity of Le Mans. Elements ready to move out are Combat Command A, Combat Command B, Reserve Command, Forward Echelon, Trains, and the 25th Cavalry Reconnaissance Squadron Mechanized. Our casualties for today were 5 wounded and 6 exhaustion cases. Returned to duty were 3 exhaustion cases and 1 wounded man. We transferred to hospitals 4 wounded and 7 exhaustion cases.

Replacements received for aid men lost appear to be better trained and prepared for our type of work. We are still short 5 MAC officers as assistant battalion surgeons. We do not seem to be able to get any action on this situation.

Forward elements are still evacuating patients a distance of 90 miles to the nearest evacuation hospital.

Permission has been granted for the Field Hospital Platoon to be left in this vicinity and remain under the control of the 6th Armored Division.

One aid man from the 53rd Armored Infantry Battalion was killed while trying to evacuate a dead officer.

This division was transferred to the XII Corps and relieved from VIII Corps. Our reports are now being directed to the new higher headquarters. We are submitting a daily consolidated CSR 323 to them.

Numerous instances have been noted of faulty casualty reporting due to the fact that combat elements often times take the clothing of evacuated or lost personnel for their own use. When these men with the borrowed clothing are wounded or killed the

name and serial number is often times taken off the clothing when identification tags are not found on the casualties thereby, the man who has already been listed as a casualty is again entered on the report and the true casualty's identity is not established until a future date by investigation.

15 August 1944 - Tuesday.

Combat elements of the 4th Armored Division completed the march from their previous location to the area east of Le Mans during the night of 14 - 15 August and began attacking the enemy in the area of St. Calais - Orleans. There were no casualties encountered during the march itself. Upon engaging the enemy again we received 5 wounded and 1 exhaustion case. We returned to duty 3 wounded men and transferred 4 wounded to hospitals.

We are evacuating casualties to hospitals in the vicinity of Le Mans. The length of the route of evacuation is approximately 90 miles. The 32nd Evacuation Hospital is being moved to this vicinity as soon as possible. This will place a hospital within reasonable distance to casualties.

The situation concerning the shortage of medical department officers remains unchanged.

Additional aid men replacements will be assigned to the 46th Medical Battalion upon arrival. From there they will be assigned as needed.

Colonel Abrams believes his office in the Administrative Center is still too far to the rear for effective and immediate rendition of necessary reports. His office is now located approximately 120 miles to his rear.

It has been noted that unit personnel officers are not notifying unit adjutants of the casualties sustained by their units and reported by us to them through the medium of the A & D sheet Form 324A. Arrangements have been made for the Adjutant General Casualty Reporting Division to make a duplicate of the report rendered to the unit personnel officers and to send this duplicate report to the unit surgeon. This duplicate tells the unit surgeon the casualties that his unit has sustained and he in turn can pass on this information, and the disposition of his casualties, to the unit adjutant or commanding officer. This report also embodies patients reported by A & D's from other units other than our own division and general hospitals

For the Surgeon:

DANIEL R. KIFNER
Captain, MAC
Office Executive





From : 0001 16 August 1944
To : 2400 22 August 1944
Place: France

4th Armored Division Office of Surgeon Journal, August 2
1944 - February 22, 1945

16 August 1944 - Wednesday.

Combat Command A, with a combat team of the 13th Infantry from the 35th Infantry Division, attacked the enemy defending Orleans and took the city at 1:15P. Enemy defenses consisted of mines, road blocks, anti-tank guns, machine gun and mortar fire. The Command Post of Combat Command A, approximately one mile northwest of Orleans, was shelled with 88's and machine gun fire for about ten minutes. Major Gardner, Combat Command Surgeon, was wounded and evacuated. Captain Cohn was transferred to the existing vacancy. Our casualties in the taking of Orleans were 27 wounded and 1 exhaustion case. We returned to duty 4 wounded men and transferred to hospitals 23 wounded and 1 exhaustion case.

We are still evacuating casualties 90 miles. We expect the 32nd Evacuation Hospital to move forward sometime today.

The XII Corps Surgeon visited with Colonel Abrams today. This is the first visit from a Corps Surgeon since we started moving south from Raids. The Corps Surgeon promised to alleviate the hospital situation and medical department officer shortage as soon as possible.

General Order number 16 awarded Captain McLeod, Surgeon of the 24th Armored Engineer Battalion, the Silver Star for gallantry in action on 2 August 1944. He led his detachment forward under heavy enemy artillery and mortar fire and established his aid station close to the battle area.

Technician 4th Grade Gaudenti was awarded the Silver Star for gallantry in action on 2 August 1944. Without regard for his own personal safety he rendered first aid and evacuated casualties in the face of intense enemy fire, anti-tank guns and small calibre automatic weapons.

Technician 3rd Grade Biondo and Technician 5th Grade Burns were awarded the Bronze Star for meritorious service in action against the enemy on 2 August 1944.

The above men reflect great credit on the medical service of this division. All medical department officers and enlisted men have conducted themselves meritoriously reflecting great credit on their service.

17 August 1944 - Thursday.

Combat elements of the 4th Armored Division report enemy holding line from Tours to Orleans. Rest of division elements are occupying bivouacs at Vendome, Montoire, and Chateau Renault. Enemy aircraft strafed the rear units of Combat Command A. Combat Command B is now in the Third Army reserve. Our casualties reported for today were 47 wounded and 1 exhaustion case. One wounded man was returned to duty and 41 wounded and 4 exhaustion cases were transferred to hospitals.

It is still evident that our number of exhaustion cases are still falling rapidly. This can be laid to the rapid movement of our forces.

The 32nd Evacuation Hospital is now established at Epuisay. This is a central location and ideal for evacuation. Our patients are arriving at the hospital in good condition.

General Order Number 17, 17 August 1944, awards the Silver Star to Captain Giovale, Surgeon of Combat Command B, for gallantry in action from 31 July to 8 August 1944. Under extreme heavy enemy artillery and mortar fire, without regard

for his own personal safety, he constantly remained at the front lines and carefully supervised evacuation of the wounded.

The Silver Star was awarded to Staff Sergeant Wellman for gallantry in action on 1 August 1944. He voluntarily and without regard to his own personal safety left the aid station in a captured German vehicle and made continuous trips evacuating wounded in the face of heavy enemy gunfire.

Technician 5th Grade Kelliher received the Silver Star for gallantry in action on 1 August 1944 for assisting Staff Sergeant Wellman in his actions.

Reports from our medical detachments prove that the 1/4 ton truck is an excellent vehicle for evacuation purposes when it is fitted with the necessary frames for litters. Its low silhouette and maneuverability over all types of terrain are its principal features.

18 August 1944 - Friday.

No change has been reported by our forward elements. Combat Command B and Combat Command Reserve are now enroute to La Loupe. Combat Command A is now attached to the 35th Infantry Division. The 25th Cavalry Reconnaissance Squadron Mechanized is patrolling the north bank of the Loire River from Tours to Blois. The enemy is withdrawing north and east of Orleans. Our casualties reported for today were 3 wounded and 3 exhaustion cases. 4 wounded were returned to duty and 3 transferred to hospitals.

The Surgeon's Office in the Administrative Center moved to St. Cerrote.

Lieutenant Mabee was transferred from the 10th Armored Infantry Battalion to the 53rd Armored Infantry Battalion.

All necessary reports are arriving much more completely.

The chart on the number of casualties suffered by each unit and the type of missile causing the wound is progressing satisfactorily. This chart should be of great value to the Division Surgeon, Colonel Abrams, and others upon the completion of the campaign.

Some difficulty has been encountered with A & D Form 324A. Units do not enter the number of cases that were battle or non-battle injuries. They also do not state whether the man is entitled to the Purple Heart or if it has been awarded to him. This situation is being corrected by sending to the unit surgeons a list of the cases on which this information is incomplete. Results of this action are very satisfactory.

Captain Kifner contacted the 32nd Evacuation Hospital and returned three men to duty. He also drew necessary supplies to replenish the store of equipment carried by the Administrative Center.

Major Frank is continuing the examination of replacements and returnees. A check on the records of replacements shows their papers to be up to date on immunization, eyeglass prescriptions, dental appliances, and blood typing.

19 August 1944 - Saturday.

Combat Command B reported no enemy activity during its movement to La Loupe. Combat Command A was relieved from attachment to the 35th Infantry Division as of 1135 today. Enemy forces are continuing withdrawal east and northeast of Orleans. We received 1 wounded admission and 3 exhaustion cases today. 2 exhaustion cases were returned to duty. 1 wounded man and 1 exhaustion case were transferred to hospitals.



The Surgeon's Office in the Administrative Center sent the G-4 periodic report as of 0900 today. Some Weekly Statistical 86ab's were received today. Every effort is made to check on reports as far forward as possible.

We have received information today that the 39th Evacuation Hospital is located one mile north of Courtalain and that the 35th Evacuation Hospital is located south of La Ferte Bernard on Highway N23.

A & D Report Form 324A from Company B, 46th Medical Battalion shows a number of casualties from the 35th Infantry Division. Extracts will be made from this report and sent to the surgeons of these units. It has been our policy from the start of operations to send all EMT's and information from 324A's on all casualties other than from our division to the unit surgeon concerned. Other divisions have reciprocated in like manner. This information has been a big help in finding men that have been reported missing in action or killed in action. The information received from other units is then transmitted by us to the units concerned in our division.

Our chart on all casualties sustained by our division by name, rank, organization, and diagnosis is well up to date. It has proven its worth when we have been besieged by requests for information on casualties from unit personnel officers.

20 August 1944 - Sunday.

Forward elements of the division report little activity. Our casualties for today were 4 wounded and 5 exhaustion cases. We returned to duty 4 wounded and 4 exhaustion cases and evacuated to hospitals 3 wounded and 3 exhaustion cases.

Replacements received today included two 2nd Lieutenants, MAC, who have been trained in the school for assistant battalion surgeons, Camp Berkeley, Texas. These two MAC's are the first we have received in this category. We are now awaiting orders for their assignment. We are still short 3 medical department officers.

The 86ab has been consolidated and sent forward to higher headquarters.

Major Frank has been working on the correction of the diagnosis section of EMT's. His help here is needed due to his knowledge of medicine and medical terms.

Usually upon arrival in a bivouac area a number of French civilians arrive and request medical attention. These requests for attention vary from shell wounds and bayonet wounds to infected fingers. It is evident there is a great lack of civilian doctors in all localities.

To date there have been no outbreaks of disease in our command and we have only one case of venereal disease so far this month.

The practice of retaining all EMT's is beginning to show results. One clerk is in charge of all corrections and verifications on these tags. This relieves the unit surgeon from the responsibility of correcting faulty tags and cuts down on the possibility of loss of these tags in transmission.

At the present time our Medical Battalion is being assisted by the 173rd Medical Battalion. Their ambulances are a big help in evacuation and they also act as transmission agency for all medical department reports.

Colonel Abrams work forward is of great help to us because he contacts our unit surgeons for necessary reports overdue and rectifies errors that we note upon contact with the unit surgeons.

Colonel Abrams was visited today by the XII Corps Surgeon and he suggested to him that we have use for some mobile organic medical installation.

21 August 1944 - Monday.

4th Armored Division cavalry screen reports scattered enemy elements retreating

generally east and southeast from the area of Souppes Sens - Montargis. The main body of Combat Command A is as far east as Les Clerimois. The general advance of Combat Command A and Combat Command B in the vicinity of Sens and encircling Montargis was impeded only slightly by small arms, mortar and artillery fire from scattered islands of enemy resistance. Our casualties for today were 9 wounded and 1 exhaustion case. We returned to duty 3 wounded and transferred to hospitals 5 wounded and 1 exhaustion case.

Colonel Abrams again advanced the idea to XII Corps Surgeon that we must have some type of organic, completely mobile, medical installation attached to us. This installation should have bed space for at least 25 to 35 patients. It should also have an abdominal and chest team attached. With such an attachment we should be able to compensate for the distances we must often times evacuate to hospitals. Previous requests to Army for closer hospital support were answered with the reply, "Impossible to comply with request."

The two MAC officers received on Sunday have been assigned temporarily for duty with the 46th Medical Battalion. It is contemplated that they will be reassigned in the near future to the Tank Battalions, one to the 35th Tank Battalion and one to the 8th Tank Battalion.

Medical Department Personnel Casualties From
Beginning of Operations To This Date

10th Armored Infantry Battalion

Reinold, Lester N.	Pvt	36691100	LIA, 1 August 1944
Green, Joseph E.	Pfc	32147423	LIA, 1 August 1944
Gilbert, Curtis E.	Pfc	35123838	SWA, 21 July 1944
Vecchio, Joseph	T/3	32091627	LIA, 2 August 1944

51st Armored Infantry Battalion

Dusenberry, Harold W.	Pvt	37539220	MIA, 9 August 1944
Troup, Kenneth T.	T/5	32044094	KIA, 4 August 1944
Ward, Charles T.	Pvt	31250857	SWA, 7 August 1944
Miley, William J.	Pfc	11063764	LIA, 30 July 1944
Spaldo, Louis (NMI)	T/5	32018218	SWA, 20 July 1944

53rd Armored Infantry Battalion

Szurka, Francis (NMI)	T/4	32073772	MIA, 29 July 1944
Slowik, John R.	T/5	32148884	SWA, 31 July 1944
Gulfoyle, Walter H.	Pfc	32091876	LIA, 29 July 1944
Unglenk, William J.	Pfc	32091866	MIA, 29 July 1944
Trovato, Mario E.	Pvt	32221709	MIA, 29 July 1944
Lavitola, Nicholas (NMI)	Pfc	32148546	MIA, 29 July 1944
Sokol, Melvin (NMI)	Pvt	32073191	LIA, 31 July 1944
Shaw, John M.	T/5	35395833	LIA, 31 July 1944
Jackson, George A.	Pvt	38469910	KIA, 29 July 1944
Pohowsky, Alex Jr. (NMI)	Capt	0-441415	SWA, 29 July 1944
Seiber, Buford A.	Pvt	14047200	SWA, 18 July 1944

46th Medical Battalion, Armored

Bartol, Theodore J.	T/5	33138332	KIA, 12 August 1944
Roser, Francis B.	1st Lt	0-1533663	LIA, 7 August 1944
Regan, George C.	Pvt	33164157	MIA, 11 August 1944

Combat Command B

Bruss, Michael (NMI)	T/5	32147616	KIA, 24 July 1944
Sturm, Herman (NMI)	T/4	32191794	LIA, 24 July 1944
Allen, Frank Jr.	Capt	0-357214	LIA, 24 July 1944
			LIA, 7 August 1944



	<u>Combat Command A</u>		
Gardner, Leon P.	Major	0-399205	LHA, 16 August 1944
	<u>25th Cavalry Reconnaissance Squadron Mechanized</u>		
McSherry, Fred J.	T/5	32148506	WIA, 29 July 1944
	<u>37th Tank Battalion</u>		
Grasso, Angelo C.	Pvt	31250988	WIA, 7 August 1944
	<u>66th Armored Field Artillery Battalion</u>		
Andrejanski, Paul J.	T/5	33117975	KIA, 1 August 1944
<u>22 August 1944 - Tuesday.</u>			

Combat Command A contacted the enemy at Sens. The enemy counterattacked at 1300 and the attack was repelled with little difficulty. Combat Command B is engaging the enemy in the vicinity of Courtenay. The general situation is good. Casualties reported for today were 22 wounded and 1 exhaustion case. 22 wounded were transferred to evacuation hospitals.

It has been noted by Colonel Abrams that the FM Radios are not working well between battalion surgeons and supporting medical companies. He has found it necessary to rely solely on personal liaison. The inability of FM sets to work well may be laid to the fact that battalion surgeons have often been separated from the medical companies by great distances. Enemy jamming of nets may also be held responsible.

The 32nd Evacuation Hospital is located at Janville and the Field Hospital Platoon attached to the 35th Infantry Division is located west of Pithiviers. We are evacuating to both of these hospitals. Even with these hospitals our route of evacuation covers approximately 60 miles.

We have distributed 35 Army ambulances in the following manner: 15 ambulances to Company B, 46th Medical Battalion; 15 ambulances to Company C, 46th Medical Battalion; 5 ambulances to Company A, 46th Medical Battalion. This proportion of ambulances has proven adequate so far.

Our ambulances still have long hauls through enemy territory due to the fact that our advances are often only along the width of the road and the enemy is driven off into the bordering woods. We must depend on the infantry to clear out these isolated groups of enemy. These enemy groups make it extremely difficult for evacuation of casualties. Our alternative is to move our ambulances along these roads only in the daytime. Evacuation at night is virtually impossible due to the enemy firing at any and all vehicles. This situation forces us to hold casualties overnight making for backlog of casualties ready for evacuation.

For the Surgeons:

DANIEL R. KIFNER
Captain, MAC
Office Executive



JOURNAL
DIVISION SURGEON'S OFFICE

From : 0001 23 August 1944
To : 2400 29 August 1944
Place: France



23 August 1944 - Wednesday.

The division's forward elements report that scattered enemy elements are retreating generally east and northeast from the area of Sens-Troyes. Combat Command A is holding strong points at Foissy-Molinon-Villeneuve. Combat Command B is engaging the enemy southwest of Paucourt and the forest of Montargis. Reserve Command is securing the north bank of the Loire River from Tours to Orleans. Casualties for this action were light. We had reported 3 wounded and 1 exhaustion case. We transferred to hospitals 1 wounded and 2 exhaustion cases.

Attached to the 4th Armored Division are the 696th Armored Field Artillery Battalion and the 137th Combat Team from the 35th Division.

The dental situation is becoming acute, particularly the repair of broken dentures. We contacted XII Corps and the following information was received: "Dental Prosthetic Teams are attached to the 12th, 35th, 101st, 104th, and 107th Station Hospitals. These hospitals will take care of all dentures of personnel of the Third Army." The dental surgeons with the companies of the medical battalion are doing as much work as possible. The dental surgeons with the combat elements have found it practically impossible to do much dental work because of rapid advances.

Combat Command Surgeons are now taking two ambulances with them. They find this very practical.

Company B, 46th Medical Battalion is doing superior work. The cooperation among medical officers has been superior.

The surgeon of the 24th Armored Engineer Battalion is taking water samples at the time of opening of a new water point and as frequently thereafter as indicated.

24 August 1944 - Thursday.

Combat Command A and Combat Command B report very little enemy activity. Combat Command E moved north from Montargis to Ferriers during the morning, encountered little opposition, and took 250 prisoners. Combat Command A is still holding strong points mentioned yesterday. Our casualties for today were listed as 4 wounded and 3 exhaustion cases. We returned to duty 1 wounded and 3 exhaustion cases and transferred to hospitals 3 wounded and 2 exhaustion cases.

The Surgeon's Office in the administrative center moved from St. Cerotte to a bivouac area in the vicinity of Autry. We are now approximately 40 miles from the Division Surgeon at forward echelon.

XII Corps is now pushing evacuation hospitals closer. The 106th Evacuation Hospital is opening in the vicinity of Chateau Londou.

Because of enemy infiltration ambulances have been forced to take an indirect route involving much greater distances. Fortunately our casualties have been light.

Evacuation Hospitals have been moving so rapidly that they have been unable to do the laundry for the medical companies. This has necessitated each company to do its own laundry causing ill spared personnel for these duties.

The colored Army ambulance drivers are not nearly as efficient as the other drivers and the control of them has been poor.

Corps Surgeon was contacted by Colonel Abrams and asked that the division be posted on the locations of Field Hospitals in our sector.

Today two MAC officers replaced assistant battalion surgeons. Lieutenant Ridge⁸ was assigned to the 8th Tank Battalion and Lieutenant Von Lehr to the 35th Tank Battalion. Colonel Abrams will watch these men with interest due to their being the first MAC officers trained as assistant battalion surgeons in this division.

25 August 1944 - Friday.

4th Armored Division elements advancing on Troyes met little enemy resistance. Column of Combat Command A south of Montgueux received artillery fire and developed situation, enroute to objective Troyes. Columns of smoke were arising from Troyes and to the east indicating enemy demolitions. Combat Command B took St. Florentin encountering no enemy resistance. Casualties for today were 24 wounded and 4 exhaustion cases. Returned to duty were 4 wounded and we transferred to hospitals 21 wounded and 2 exhaustion cases.

It has been noted that each Tank Battalion has need for an additional peep in order that each company may have evacuation facilities.

In regard to the transportation difficulties of the letter companies of the medical battalion, it has been noted that one additional 2½ ton truck, 6 x 6, is necessary. These vehicles are needed due to the fact that transportable patients, who may be returned to duty within 24 to 48 hours, must be carried along when the division is advancing rapidly and bed space is not available or the distance is too great or dangerous for evacuation to the reserve medical company.

Lieutenants Kornblau and Krueger who have been with us on temporary duty since 27 July 1944 are being recalled by XV Corps. Necessary orders for their recall will be sent to us by the XII Corps.

Colonel Abrams contacted Army Surgeon upon receipt of orders for transfer of one medical officer. He flew to Army to clarify our situation. The Army Surgeon told him to disregard transfer orders. Colonel Abrams repeated his request for closer support by evacuation hospitals. He was told that Army is afraid to push evacuation hospitals too close to the fighting. He also requested the additional transportation previously noted in this history. Army Surgeon told him that there was an acute shortage of vehicles and that it was not possible to comply with his request at this time.

26 August 1944 - Saturday.

Enemy forces are retreating south and east of Troyes suffering heavy casualties from friendly air action. Combat Command A is in control of Troyes after heavy fighting during the morning. Combat Command A took the city at 2230B. Combat Command B is in Auxon. Reserve Command is in bivouac north of Villeneuve. Casualties for today were 14 wounded. 2 of these were returned to duty and 12 evacuated to hospitals. There were no exhaustion cases today.

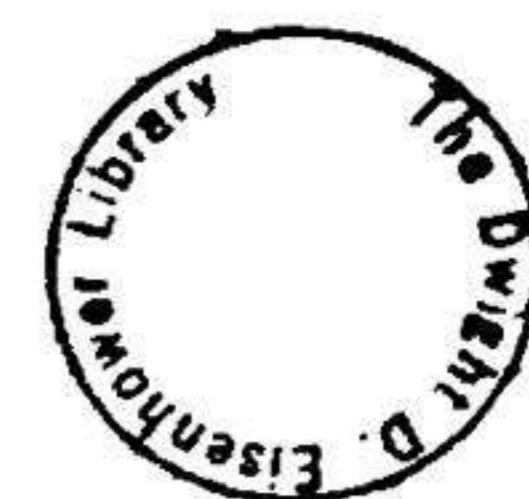
The dental situation still remains critical. Some emergency work is being done by unit dental surgeons, however, it is impossible for them to set up dental treatment stations during the phases of rapid advance. This situation has built up a large backlog of necessary dental work. It is believed that with the information recently received on the repair of broken dentures this situation will soon be alleviated. The Division Dental Surgeon, Major Huguin, is making all efforts possible for relief of these hard pressed cases. Some dental work will be done for divisional units, (those in Reserve Command and bivouac), by the dental surgeon of Reserve Company of the Medical Battalion.

Combat Command A has been keeping the supporting medical company in front of Maintenance Company. This has proven excellent for control. Combat Command B has been placing the medical company in the rear of Maintenance Company. The column has been long and the control poor. Colonel Abrams discussed this matter with General

Darer who has agreed to move the supporting medical company ahead of maintenance. This will also afford better protection for the supporting medical company.

The Combat Command Surgeons are keeping two to four ambulances with the Collecting Platoon Leader up forward at Combat Command Headquarters. This has worked well since all calls for ambulances have been coming through from units to the Combat Command Surgeons.

Monthly Venereal Report was sent to XII Corps today.



27 August 1944 - Sunday.

Forward elements of the 4th Armored Division are preparing mopping up operations. Combat Command A is in position on high ground north of Vitry with scattered enemy elements along their axis of advance. Combat Command B and Reserve Command are cleaning up groups of enemy north and east of Troyes. Enemy forces are rearing east and southeast of Vitry and East and Northeast from Troyes. Sporadic enemy small calibre fire was encountered. Casualties reported for today included 7 wounded and 2 exhaustion cases. We returned to duty 5 wounded cases and transferred to hospitals 3 wounded and 6 exhaustion cases.

Captain Mabee of the 53rd Armored Infantry Battalion has been reassigned to the 10th Armored Infantry Battalion to replace Captain Silverman who was killed in action. Captain Scotti of the 37th Tank Battalion has been transferred to Combat Command A to replace Captain Cohn who was transferred to the 53rd Armored Infantry Battalion. Captain O'Connor of the 35th Tank Battalion has been transferred to the 53rd Armored Infantry Battalion. Lieutenant Morawski of the 8th Tank Battalion has been transferred to the 10th Armored Infantry Battalion.

WSR 86ab was consolidated and sent forward to higher headquarters.

Division Quartermaster was notified that 12 trucks must be dispatched to the 106th Evacuation Hospital to pick up part of the 16th Field Hospital that has been attached to the 4th Armored Division. This detachment from the 10th Field Hospital will be in the vicinity of the reserve company of the 46th Medical Battalion.

General Order Number 19, 26 August 1944, awarded the Bronze Star to the following named men for meritorious service in action against the enemy: Technician 5th Grade Phillips, 53rd Armored Infantry Battalion, 28 July 1944, Coutances, France; Technician 5th Grade Shaw, 53rd Armored Infantry Battalion, 18 July 1944, Raids, France.

The following is the present composition of the Combat Commands during this phase of operations:

Combat Command A

37th Tank Battalion
35th Tank Battalion Minus
Division Artillery (-22nd AFA)
191 Field Artillery
Company C, 24th Armored Engineer
Battalion (½ 995 Bridge Company)
Troop E, 25th Cavalry Reconnaissance
Squadron Mechanized
Company B, 46th Medical Battalion
Company B, 489th AAA Bn
Company C, 704th Tank Destroyer Bn
Company A, 126th Ordnance Maintenance Bn
53rd Armored Infantry Battalion
10th Armored Infantry Battalion Minus

Combat Command B

8th Tank Battalion
51st Armored Infantry Battalion
22nd Armored Field Artillery Battalion
Company A, 704th Tank Destroyer Bn
Company C, 46th Medical Battalion
Troop A, 25th Cavalry Reconnaissance
Squadron Mechanized
Battery A, 489th AAA Bn
Company B, 24th Armored Engineer
Battalion (½ 995 Bridge Company)
253rd Field Artillery
177th Field Artillery (Headquarters
Group)
Company B, 126th Ordnance Maintenance
Battalion
179th Field Artillery Battalion



Combat Command Reserve

35th Tank Battalion
10th Armored Infantry Battalion
704th Tank Destroyer Battalion

24th Armored Engineer Battalion
696th Armored Field Artillery Battalion

28 August 1944 - Monday.

Combat Command A is pushing north and east of Troyes cleaning up isolated elements of enemy resistance. Combat Command B is in the vicinity of Vitry after taking the city and finishing mopping up operations. Enemy tanks out of gas were found to be dug in and defending the city. Our casualties for today were 15 wounded and 3 exhaustion cases. 8 wounded and 2 exhaustion cases were returned to duty. 12 wounded and 3 exhaustion cases were transferred to hospitals.

Information received today from Colonel Abrams clarifies the situation at Troyes the 28th of August. Combat Command A, marching in two columns from Sens, attacked the city. The enemy had blown all bridges and it was necessary for our Engineers to construct the necessary bridges. After the bulk of the Combat Command had left, the enemy infiltrated from the north and isolated two companies of infantry left as a holding force in the city. The Clearing Platoon was situated north and east of Troyes and unable to move in and evacuate 20 casualties that were in the town. Colonel Abrams finally managed to send 7 ambulances and 1 doctor into the town to evacuate casualties. In addition to the death of Captain Silverman, 3 aid men were killed, 4 aid men wounded and 7 aid men were missing. Captain O'Connor was slightly injured when his 3/4 ton truck hit a mine. He was returned to duty after treatment. Vehicular losses for the action were two peeps missing, two 3/4 ton trucks destroyed with medical supplies, and one ambulance burned when it struck a mine. After the death of Captain Silverman the 10th Armored Infantry Battalion was without a medical officer until the 53rd Armored Infantry Battalion Surgeon came in with relief. French civilian doctors worked with the isolated task force helping considerably with the medical problem. Casualties in the city were kept in a civilian hospital until we were able to evacuate them with the relief ambulances.

According to the latest information from Colonel Abrams we are short one medical officer, three medical administrative corps officers, and approximately twenty-one enlisted men. Replacements are expected within the next few days.

29 August 1944 - Tuesday.

Combat Command A took Chalons Sur Marne at 1200H. The 25th Cavalry screen is in contact with elements of the 15th Pz Gr Division in the vicinity of Lusigny. French Forces of the Interior report an unknown number of enemy with cannon in the vicinity. Engineers attached to Combat Command B destroyed a gasoline and ammunition dump in Forest De Garand Orient. One column of Combat Command A crossed at foot of Bromilly and the second column crossed south of Chalons and hit the enemy escaping from Chalons. Combat Command B took Piney without incident. Casualties reported today were 12 wounded and 1 exhaustion case. Returned to duty were 2 wounded men and we transferred to hospitals 17 wounded and 3 exhaustion cases.

A Field Hospital is located northwest of Creney with the reserve company, Company B, of the 46th Medical Battalion. We are evacuating to the 101st Evacuation Hospital east of Sens. Colonel Abrams has both Combat Command A and Combat Command B evacuate patients to Company B, 46th Medical Battalion. Patients are being relayed by Army ambulances that are distributed in the following manner: 15 to Company A, 46th Medical Battalion; 15 to Company C, 46th Medical Battalion; and 10 to Company B, 46th Medical Battalion. The ten ambulances at Company B, 46th Medical Battalion are evacuating patients to the 101st Evacuation Hospital.

In recapitulation, we had one medical officer killed, one medical officer injured slightly, three aid men killed, four aid men wounded, and seven aid men missing in the

taking of Troyes.

The Surgeon's Office in the Administrative Center moved from Autry to the vicinity of Marcilly. We are now located approximately thirty miles northwest of Colonel Abrams in the forward echelon. It has been noted that necessary reports come in much more satisfactorily when we are closer to the forward echelon.

U. D., M. D. Form 52b, (ENT), and A & D Form 324A are improving gradually. It is believed that this is due to the short informal notes sent to the unit surgeons showing them the errors found in their reports. The unit surgeons have cooperated excellently and returned the needed information as quickly as the lines of communication permit.

It has also been found that we do not know where the XII Corps Surgeon is located on these moves. Contact with Rear Echelon of Corps proves of no value.

Message Center functions have not improved. There is considerable delay and loss of reports. Today we finally received a number of reports dated the 28th of July.

General Order Number 20, 28 August 1944, awards the Silver Star to the following named officers for gallantry in action against the enemy: Lieutenant Colonel Morris Abrams, 18 - 26 July 1944, Raids, France; Major Leon P. Gardner, Combat Command A, 16 August 1944, Orleans, France; 1st Lieutenant Conway, 20 July 1944, Raids, France.

For the Surgeon:

DANIEL R. FITNER
Captain, MAC
Office Executive



AWARD OF SILVER STAR TO
MEDICAL DEPARTMENT PERSONNEL

General Order #11, 29 July 1944:

- ✓ Captain Frank Allen Jr., Dental Corps, 24 July 1944, France.

General Order #16, 15 August 1944:

- ✓ Captain John K. McLeod, Medical Corps, 2 August 1944, France.
- ✓ Tec 4 Fred A. Gaudenti, Medical Corps, 2 August 1944, France.

General Order #17, 17 August 1944:

- ✓ Captain Silvio J. Giovale, Medical Corps, 31 July and 8 August 1944, France.
- ✓ S/Sgt Leslie L. Wellman, Medical Corps, 1 August 1944, France.
- ✓ Tec 5 Paul G. Kelliher, Medical Corps, 1 August 1944, France.

General Order #20, 28 August 1944:

- ✓ Lt Col Morris Abrams, 18-26 July 1944 at Raids, France.
- ✓ Major Leon P. Gardner, Medical Corps, 16 August 1944 at Orleans, France.
- ✓ 1st Lt Conway, Medical Corps, Administrative, 20 July 1944 at Raids, France.

General Order #21, 30 August 1944:

- ✓ Captain Isadore Silverman, Medical Corps, 1 August 1944 at St. Lorient, France.
- ✓ Captain Sidney Grace, Medical Corps, 1 August 1944 at Rennes, France.
- ✓ S/Sgt John O. West, Medical Corps, 1 August 1944 at Rennes, France.
- ✓ Tec 3 Vecchio, Medical Corps, 1 August 1944 at St. Lorient, France.
- ✓ Cpl Canelli, Medical Corps, 28 July 1944 at Coutances, France.
- ✓ Pfc Miley, Medical Corps, 30 July 1944 at La Ferroniere, France.
- ✓ Pfc Tetenbaum, Medical Corps, 1 August 1944 at Rennes, France.
- ✓ Pfc Gilbert, Medical Corps, 20 July 1944 at Saintenny, France.
- ✓ Pfc Ayotte, Medical Corps, 18 July 1944 at Raids, France.

AWARD OF BRONZE STAR TO
MEDICAL DEPARTMENT PERSONNEL

General Order #16, 15 August 1944:

- ✓ Tec 3 Ernest J. Biondo, Medical Corps, 2 August 1944, France.
- ✓ Tec 5 Francis J. Burns, Medical Corps, 2 August 1944, France.

General Order #19, 26 August 1944:

- ✓ Tec 5 Phillips, Medical Corps, 28 July 1944 at Coutances, France.
- ✓ Tec 5 Shaw, Medical Corps, 18 July 1944 at Raids, France.



JOURNAL
DIVISION SURGEON'S OFFICE

From: 0001 30 August 1944
To : 2400 5 September 1944
Place: France

4th Armored Division Office of Surgeon Journal, August 2
1944 - February 22, 1945

30 August 1944 - Wednesday.

Combat Command A attacked enemy forces in the vicinity of St. Dizier. Some enemy motorized columns and numerous enemy bicycle troops were destroyed. It was noted that great stores of enemy construction material was in the railroad yards of this city. Combat Command B attacked the enemy in the vicinity of Brienne. The enemy was driven back with small losses to our troops. Total casualties reported today were 5 wounded and 2 exhaustion cases. 5 wounded and 2 exhaustion cases were transferred to Army hospitals.

The location of the Reserve Company, (Company B), of the 46th Medical Battalion was ideal for the shuttling of patients from Combat Command A and B. The Field Hospital Platoon in the vicinity of the Reserve Company of the Medical Battalion operated on four cases during the last forty-eight hours.

With the beginning of tomorrow's operations we will have attached to each Combat Command a clearing section provided by Army Medical Service. Each of these sections will have two medical officers, seventeen enlisted men, four 3/4 ton trucks, four ambulances, two peeps, and one 2 1/2 ton truck, 6 x 6. This clearing section will have a bed capacity for fifteen to twenty patients.

Colonel Abrams has taken the two surgical teams, (two medical officers and two enlisted men), from the Field Hospital and attached them to each clearing section. When it will be necessary for our medical companies to move it will be possible to leave behind the Army Clearing Section and Field Hospital Surgical Team. It will then be the responsibility of the Medical Group supporting us to supply and protect these people left behind us. It is the belief of Colonel Abrams that this may prove to be a solution to our evacuation problem.

Colonel Abrams has also requested the attachment of a mobile dental laboratory to the division. If this request is granted we should then be able to accomplish much of the needed dental work.

It has been found advisable to have two ambulances move with each of the Combat Command Surgeons. When the column is marching in two divisions it has been found advisable to keep one ambulance in the rear of the first division and one ambulance at the end of the column. Since the action may start at any point of the column the Combat Command Surgeon can then quickly cover the scene of the action with one or both of his ambulances as it is called for by the situation.

31 August 1944 - Thursday.

Forward elements of the division are mopping up in the areas of St. Dizier and Brienne. Isolated pockets of enemy are offering resistance to these operations. Generally these groups prepare their positions in clumps of trees. If these enemy groups are far enough from the main axis of advance they are bypassed by our Armored Columns. Casualties reported for today numbered 9 wounded and 1 exhaustion case. 3 exhaustion cases were returned to duty and we transferred to hospitals 12 wounded and 1 exhaustion case.



Major Frank has been preparing the data necessary for the monthly sanitary report. He has also been contacting hospitals that have had patients from our division evacuated to them.

We received one medical corps officer today, Captain Cheim, as a replacement for Captain Silverman. Capt Cheim has been temporarily assigned to the 46th Medical Battalion and further assignment will be made by Colonel Abrams.

Third Army directive on the preparation of fresh vegetables for eating has been received. Details for drawing rations have been notified to draw sufficient germicidal powder to comply with the existing regulation. Major Frank, in his capacity as medical inspector, has been inspecting all fresh vegetables that have been given to us for consumption. The Division Surgeon, Colonel Abrams, has notified all unit surgeons of the procedure to be followed. When sufficient copies of directives and circulars are received distribution is made to cover each divisional unit and separate unit surgeon.

1 September 1944 - Friday.

Both Combat Commands have jumped off from their previous areas and are on their way to new objectives. Combat Command A is moving forward in the direction of its objective Commercy. Combat Command B is moving forward to Vaucouleurs. Little enemy resistance is being reported. We received 7 men wounded in our clearing stations and no exhaustion cases. We returned to duty 1 wounded man and transferred 8 wounded to hospitals.

It has been the policy of this office to send memos to unit surgeons requesting corrections on A & D Form 324A. Cooperation and response have been excellent. The same procedure is followed with the Clearing Stations of the Medical Battalion. A noticeable drop in errors has been found due to this action.

We received today an EMT from Third Army on Lieutenant Whitaker; we had previously received the same EMT and forwarded it to Army Locator Service. This casualty occurred on 7 July and this division had not yet come to France at that time. This EMT was dispatched to the 4th Infantry Division who had been occupying the area Southwest of Carentan at that time.

Representatives of the Army Surgeon's Office visited us at Forward Echelon today. They notified us that the WSR 86ab was arriving at Army late. Colonel Abrams has been forward and is trying to speed up the submission of the 86ab to his office in the Administrative Center. Army also stated that CSR Form 323 was tardy. This was checked and was found that the Group Courier was at fault. The Army Medical Inspector inquired about skin diseases and pediculosis pubis. We have had no outbreaks of either of these conditions in our division. It was also reported to Army that no cases of lice infestation has been found in this division.

Circular 101, Office of the Chief Surgeon, ETO, 30 July 1944, concerning care of battle casualties, was extracted and copies sent to each Infantry Battalion Surgeon.

Colonel Abrams is persisting in his request for mobile dental laboratory. We have great need for this service since the rapid movement of this division has not permitted any occasion for proper dental service.

Colonel Abrams is moving the Field Hospital Platoon to the Vicinity of St. Aubin, (West of Commercy). This will locate the installation to the rear and between both Combat Commands and will be ideal for evacuation purposes. Some difficulty is being encountered in gathering transportation for the movement of the Field Hospital Platoon.