

MEDICAL HISTORY

FOUR HUNDRED AND FIFTY FIRST BOMBARDMENT GROUP (H)

Colonel ROBERT E. L. EATON, Commanding

I. Previous History

The 451st Bombardment Group (H) was activated by paragraph 1, General Order Number 58, dated 22 April 1943, Headquarters Second Air Force, effective 1 May 1943, at Davis Monthan Field, Tucson, Arizona.

The Group was an OUT organization, flying B-24 type airplanes. Colonel Robert E. L. Eaton (U.S.M.A. June 1931) is the Commanding Officer.

The 444th Bombardment Group (H), with headquarters at Davis Monthan Field was designated as the parent group for the 451st Bombardment Group. However, when the 444th Group was scheduled to be transferred elsewhere, a new group, the 346th Bombardment Group (H), with headquarters at Dyersburg, Tennessee, was designated as the parent group.

It was at Dyersburg, Tennessee that the five medical officers joined the 451st Bombardment Group (H).

General Classification of Medical Officers:

- 1) Wagner, Clyde L., Capt, MC 0-468912, Gp Surgeon, date of rank, 18 April 1943; date of commission, 6 May 1942, age 31; pre-med, Univ. including surgical residency at King Country Hosp System, Seattle, Wash; grad sch of Avn Med, 4 Nov 1942.
- 2) King, Joe W., 1st Lt., MC, 0-496213, 727th Bomb Sq Surg; date of rank, 29 Sept 1942; age 29; pre-med, Univ. of Texas, 1932 to 1935; med, Univ of Tennessee; grad, March 1938; 18 mo. Rotating internship, John Gaston Hosp, Memphis, Tenn; 3 yrs gen. practice, Helena, Arkansas; grad Sch of Avn Med, June 1943.
- 3) Kremers, Marshall Y., 1st Lt., MC 0492241, 726th Bomb Sq Surg; date of rank, 10 Sept 1942; age 35; pre-med, Occidental College, Los Angles, Calif, AB degree: med, Univ of Calif, 1935; one year research and teaching Univ of Calif; 6 yrs gen practice; grad Sch of Avn Med, April 1943.
- 4) McFarland, Ward J., 1st Lt., MC, 0-502114, 725th Bomb Sq Surg; date of rank, 14 Nov 1942; age 29; pre-med, Yale

Univ; med, Yale Univ; grad 1939; internship one year, New Haven Hosp; resident 2½ yrs, New Haven Hosp, Surgery; grad Sch of Avn Med, 22 April 1943.

- 5) Quinn, Henry F., 1st Lt., MC, 0-471539, 724th Bomb Sq Surg; date of rank, 27 May 1942; age 31; pre-med, Univ of Kansas; med, Univ of Kansas; grad High Alt Physiology, Sept 1942; Officer's Tng Wng School at Santa Ana, Oct 1942; grad, Sch of Avn Med, June 1943.

Here personnel began to arrive. Master immunization work sheets and preliminary physical examinations were started.

On 19 June 1943, the five medical officers together with a cadre of key officers and enlisted personnel departed for Orlando, Fla., to attend the Army Air Force School of Applied Tactics. The move was made per authority of Special Order 142, Headquarters, Dyersburg, Tennessee.

The echelon at AAFSAT completed its 10-day series of classroom courses and preceded to Pinecastle, Fla., a satellite field. There under simulated operational conditions, the medical officers received practical instructions.

On 18 July 1943, a portion of the air echelon departed for Wendover Field, Utah, by airplane, the rest by train. On 19 July 1943, Special Order 172 authorized the ground echelon to leave Dyersburg to join the air echelon at Wendover Field, Utah.

Arriving at Wendover, the AAB was found to be overcrowded. The group built its own tent city, all the while carrying on the training program. The medical section consisted of the five medical officers and eight enlisted men. Immunizations, physical examinations and training proceeded as rapidly as possible, with all physical examinations having to be done at night.

Captain Howard C. Peterson, base dental surgeon, was assigned to the group 29 July 1943. His classifications are as follows: Dental Surgeon; date of rank, 16 August 1943; age, 37; pre-dental, South Dakota State College; 3 years TOTC; Northwestern Univ 1930; gen practice, 13 years; completed course on Dental Adm and Emergency Dental Care at Ft. Geo Wright, Washington, Dec 1942.

On the night of 28 August 1943, a young tornado struck our tent city, the final results being 100 tents blown down or destroyed, and worst of practically all our medical records were lost.

Facilities were obviously inadequate at Wendover, and on 8 Sept 1943, the move to Fairmont Army Air Base, Geneva, Nebraska began.

Quarters at Fairmont were vastly superior to those at Wendover. By the middle of November, all the requirements of 2nd Air Force Medical Training Memo 25-25, dated 30 July 1943, had been complied with.

The four squadron surgeons received their promotions to Captain. Our roster of enlisted men, date of arrival, MOS and AGCT is as follows:

<u>NUMBER</u>	<u>RANK</u>	<u>MOS</u>	<u>AGCT</u>	<u>DATE OF ARRIVAL</u>	<u>PREVIOUS STATION</u>
1	Cpl	673	97	6-20-43	Dyersburg, Tenn. (346th Bomb Gp)
1	Pfc	673	99	8-10-43	Salt Lake City, Utah
1	Pfc	409	101	8-10-43	Salt Lake City, Utah
1	Pfc	861	98	8-10-43	Salt Lake City, Utah
1	Pfc	861	95	8-10-43	Salt Lake City, Utah
1	Pvt	699	105	9-22-43	FAAF, Geneva, Nebraska
1	Pvt	409	109	8-10-43	Salt Lake City, Utah
1	Pvt	501	106	9-22-43	FAAF, Geneva, Nebraska
1	Pfc	673	103	9-1-43	Wendover Fld, Utah
1	Pfc	501	89	8-1-43	Wendover Fld, Utah
1	Sgt	855	98	8-16-43	Wendover Fld, Utah
1	Pfc	409	117	8-11-43	Fitz Gen Hosp
1	Pfc	409	105	8-10-43	Fitz Gen Hosp
1	Cpl	673	100	8-10-43	Fitz Gen Hosp
1	Cpl	673	85	6-20-43	Dyersburg, Tenn.
1	Pfc	861	105	8-11-43	Fitz Gen Hosp
1	Pfc	861	98	8-10-43	Fitz Gen Hosp
1	Pvt	501	93	8-19-43	Med Det, FAAF, Geneva, Nebr.
1	Pvt	929	94	9-21-43	Med Det, FAAF, Geneva, Nebr.
1	Pfc	409	106	9-4-43	Fitz Gen Hosp
1	Pfc	861	101	9-4-43	Fitz Gen Hosp
1	Pvt	409	111	9-4-43	Fitz Gen Hosp
1	Pfc	673	99	9-4-43	Fitz Gen Hosp
1	Pvt	929	64	9-4-43	Med Det, FAAF, Geneva, Nebr.
1	Pvt	861	97	9-2-43	Letterman Gen Hosp
1	Cpl	673	85	6-20-43	Dyersburg, Tenn.
1	Pfc	409	85	9-2-43	William Bowen Gen Hosp
1	Cpl	673	93	7-23-43	Dyersburg, Tenn.
1	Pfc	673	118	8-10-43	Salt Lake City, Utah
1	Pfc	501	103	8-10-43	Salt Lake City, Utah
1	Pfc	409	88	8-10-43	Salt Lake City, Utah
1	Pfc	861	115	8-10-43	Salt Lake City, Utah
1	Pfc	409	112	8-10-43	Salt Lake City, Utah
1	Pfc	409	108	8-10-43	Salt Lake City, Utah
1	Pvt	929	60	7-23-43	Dyersburg, Tenn.

1 Pfc 409 98 8-10-43 Salt Lake City, Utah

A total of seventy-eight (78) men had been disqualified for physical reasons. Of these, fifty-five (55) were ground personnel and twenty-three (23) were fliers.

Captain Peterson, the group dentist, by working practically day and night, finished the dental requirement doing:

2,162 Fillings	48 full dentures inserted
96 X-rays	54 partial dentures inserted
102 impressions	200 extractions

On 17 November 1943, the first of the air echelon started for their staging area at Lincoln, Nebraska under the 12th Heavy Bombardment Processing Headquarters.

On 26 November 1943, the ground echelon left for Hampton Rhodes, Virginia, to the staging area at Camp Patrick Henry.

Finally, the air echelon gathered together once again, early in January 1944, at Telergma, Algeria, and for several weeks, polished their technic while living in a lake of mud. The ground echelon in the meantime had arrived and set up the camp at Gioia Del Colle, Italy.

On 20 January 1944, the air echelon joined the ground echelon and preparations for combat missions were made.

II. Present History:

A. Administrative History:

a. One man of the medical section, Pfc Armande Fogliani - Medical Technician, was left behind at Camp Patrick Henry, because of renal calculi and soon after our arrival in Italy, he was replaced by T/Sgt. Turner R. Stevens. Since then, three of our men have been reclassified.

Our present roster is:

1 January 1944:

<u>NAME</u>	<u>RANK</u>	<u>CLASSIFICATION</u>
Peterson, Howard C.	Capt	Group Dental Surgeon
Elefteriades, George	Sgt	Dental Technician

Wagner, Clyde L.	Capt	Group Flight Surgeon
Erwin, William A.	S/Sgt	Group Medical NCO
Bennett, Alphaeus O.	Cpl	Group Adm. & Tech. Clerk
Roquet, Joseph A.	Pfc	Ambulance Driver

Quinn, Henry F.	Capt	Squadron Flight Surgeon
Hecker, George R.	S/Sgt	Medical NCO
Garee, James C.	Sgt	Medical NCO
Dempski, John	Cpl	Medical Technician
Siporiski, Harry J.	Cpl	Surgical Technician
Duke, Aaron W.	Pfc	Surgical Technician
Anderson, Edward V.	Pfc	Medical Technician
Burg, Aubry D.	Pvt	Ambulance Driver
Dussault, John M.	Pvt	Clerk

McFarland, Ward J.	Capt	Squadron Flight Surgeon
Hall, Billy	Sgt	Medical NCO
Duke, Martin E.	Sgt	Medical NCO
Byle, Anthony J.	Cpl	Surgical Technician
Rodgers, James C.	Pfc	Medical Technician
Smith, Thomas F.	Pfc	Surgical Technician
Messina, Joseph B.	Pfc	Ambulance Driver
Alambaugh, Loran T.	Pfc	Clerk

Kramers, Marshall Y.	Capt	Squadron Flight Surgeon
Bridges, Alfred	S/Sgt	Medical NCO
Williams, LeRoy (NMI)	Sgt	Medical NCO
Westeen, Oliver S.	Cpl	Surgical Technician
Hartsfeld, Martin P.	Cpl	Medical Technician
Kolevas, Louis M.	Pfc	Surgical Technician
Lenhert, John H.	Pvt	Medical Technician
Reed, George A.	Pfc	Ambulance Driver
LeRusso, Patrick J.	Pfc	Clerk

King, Joe W.	Capt	Squadron Flight Surgeon
Mason, John R.	Sgt	Medical NCO
Gattity, C. B.	Sgt	Medical NCO
Rosenbaum, Raymond J.	Cpl	Medical Technician
Wilson, Lewis W.	Cpl	Surgical Technician
Zak, John J.	Pfc	Medical Technician
Splettstoesz, Fred O.	Pfc	Medical Technician
Gonzales, Tony C.	Pfc	Ambulance Driver
Williams, Hilary H.	Pfc	Clerk

30 March 1944:

Peterson, Howard C.	Capt	Group Dental Surgeon
Elefteriades, George	Sgt	Dental Technician

Wagner, Clyde L.	Maj	Group Flight Surgeon
Erwin, William A.	S/Sgt	Medical NCO
Bennett, Alphaeus O.	Cpl	Group Adm. & Tech. Clerk

Roquet, Rollo R.	Cpl	Surgical Technician
Kassa, Joseph A.	Cpl	Ambulance Driver
Quinn, Henry F.	Capt	Squadron Flight Surgeon
Hecker, George R.	S/Sgt	Medical NCO
Garee, James C.	Sgt	Medical NCO
Dempski, John	Cpl	Medical Technician
Siporaki, Harry J.	Cpl	Surgical Technician
Duke, Aaron W.	Pfc	Surgical Technician
Anderson, Edward V	Pfc	Medical Technician
Burg, Aubry D.	Pvt	Ambulance Driver
Dussault, John M.	Pvt	Clerk
McFarland, Ward J.	Capt	Squadron Flight Surgeon
Stevens, Turner R.	T/Sgt	Medical NCO
Hall, Billy	Sgt	Medical NCO
Duke, Martin E.	Sgt	Medical NCO
Byle, Anthony J.	Cpl	Surgical Technician
Rodgers, James C.	Pfc	Medical Technician
Smith, Thomas F.	Pfc	Surgical Technician
Messina, Joseph B.	Pfc	Ambulance Driver
Alumbaugh, Loren T.	Pfc	Clerk
Kremers, Marshall Y.	Capt	Squadron Flight Surgeon
Bridges, Alfred	S/Sgt	Medical NCO
Williams, LeRoy (NMI)	Sgt	Medical NCO
Westeen, Oliver S.	Cpl	Surgical Technician
Hartzfeld, Martin P.	Cpl	Medical Technician
Kolevas, Louis M.	Pfc	Surgical Technician
Lenhert, John H.	Pvt	Medical Technician
Reed, George A.	Pfc	Ambulance Driver
Lerusso, Patrick J.	Pfc	Clerk
King, Joe W.	Capt	Squadron Flight Surgeon
Mason, John R.	S/Sgt	Medical NCO
Garrity, Charles C.	Sgt	Medical NCO
Rosenbaum, Raymond J.	Cpl	Medical Technician
Williams, Lewis W.	Cpl	Surgical Technician
Zak, John J.	Pfc	Medical Technician
Splittstoesz, Fred O.	Pfc	Surgical Technician
Gonzales, Tony C.	Pfc	Ambulance Driver
Williams, Hilary H.	Pfc	Clerk
30 June 1944:		
Peterson, Howard C.	Capt	Group Dental Surgeon
Elefteriades	Sgt	Dental Technician
Wagner, Clyde L.	Major	Group Flight Surgeon
Erwin, William A.	S/Sgt	Medical NCO
Bennett, Alphaeus C.	Cpl	Group Adm. & Tech. Clerk
Roquet, Rollo R.	Cpl	Surgical Technician

Kassa, Joseph A.	Cpl	Ambulance Driver
Quinn, Henry F.	Capt	Squadron Flight Surgeon
Hecker, George R.	S/Sgt	Medical NCO
Garee, James C.	Sgt	Medical NCO
Dempski, John	Cpl	Medical Technician
Siporski, Harry J.	Cpl	Surgical Technical
Duke, Aaron W.	Pfc	Surgical Technician
Anderson, Edward V.	Pfc	Medical Technician
Stern, Abraham L.	Pfc	Surgical Technician
McFarland, Ward J.	Capt	Squadron Flight Surgeon
Stevens, Turner R.	T/Sgt	Medical NCO
Hall, Billy	Sgt	Medical NCO
Duke, Martin E.	Sgt	Medical NCO
Byle, Anthony J.	Cpl	Surgical Technician
Rodgers, James C.	Cpl	Medical Technician
Smith, Thomas F.	Pfc	Surgical Technician
Messina, Joseph B.	Pfc	Ambulance Driver
Alumbaugh, Loren T.	Pfc	Clerk
Kremers, Marshall Y.	Capt	Squadron Flight Surgeon
Williams, LeRoy (NMI)	Sgt	Medical NCO
Westeen, Oliver S.	Cpl	Surgical Technician
Hartzfeld, Martin P.	Cpl	Medical Technician
Kolevas, Louis M.	Pfc	Surgical Technician
Lehnert, John H.	Pvt	Medical Technician
Reed, George A.	Pfc	Ambulance Driver
LeRusso, Patrick J.	Pfc	Clerk
King, Joe W.	Capt	Squadron Flight Surgeon
Mason, John R.	S/Sgt	Medical NCO
Garrity, Charles C.	Sgt	Medical NCO
Rosenbaum, Raymond J.	Cpl	Medical Technician
Wilson, Lewis W.	Cpl	Surgical Technician
Zak, John J.	Pfc	Medical Technician
Splittstoesz, Fred O.	Pfc	Surgical Technician
Gonzales, Tony C.	Pfc	Ambulance Driver
Williams, Hilary H.	Pfc	Clerk

Captain Joe W. King, Surgeon, 727th Bombardment Squadron was awarded the Soldier's Medal for rescuing a flier from a plane crash, by General Order No. 2237, Headquarters, XV Air Force.

- b. The Group remained at Gioia Del Colle until 8 March 1944, when we were forced to move because the runway became inoperational. Two of the squadrons, 725 and 727, shared the field at Manduria, Italy with another group. The other two squadrons, the 724th and 726th shared the field at San Puncrazio, Italy with still another group.

The next and thus far, the final move, began 6 April 1944 to our present station at Castelluccio, Italy.

On 23 April 1944, the group received a commendation for our fine operational record under the difficult conditions at Gioia Del Colle. This commendation is mentioned in General Order No. 12, Headquarters, 47th Wing, dated 23 April 1944.

- c. As in any organization, the duties of the Medical Officers and medical section are those of:

Professional, Advisory and Administrative

Professionally it is our duty to set up and operate dispensaries to provide proper care of sick and wounded: to carry out the provisions of AR 40-110; to medically inspect the personnel, their quarters, the messes and latrines, and to provide for the transportation of the sick and wounded.

Duties, advisory in nature, to the commanding officer and his staff include:

Advising on all matters pertaining to the health and sanitation of the command, and to the territory it surrounds; on matters pertinent to the training of all troops in sanitation, hygiene and first aid.

Administratively, we are charged with submitting various medical reports and maintaining registers.

The Group maintains four separate squadron aid stations and a group dispensary. At present, we provide medical care for a colored guard detachment, a weather squadron and a combat camera unit.

- d. The formal training of the medical detachment was accomplished in the United States in accordance with 2nd Air Force Medical Training Memo 25-25, dated 20 July 1943. Since that time, formal lectures in malaria, malaria control, first aid and hygiene have been given. Films shown have been TF 1-3342 "Three Cadets"; TF 8-953 Malaria, Cause and Control"; TF 1-3335 "Essential Care Air Crew Casualties"; TF 8-999 "The Fly" and TF 8-1179 "Disposal of Human Wastes Sanitation".

B. Environmental History:

- a. Arriving in Italy early in January 1944, some difficulty was encountered in setting up sanitary devices. Our first camp site was a flat area surrounded by low hills and acted as a catch basin for all surface water. Consequently, the area was for all practical purposes a sea of mud. Soakage pits filled within a week's time as did the pit latrines. Handicapped by these conditions and by lack of equipment and transportation, everyone was happy when the runway became inoperational and the Group received orders to move early in March. However, conditions were not improved particularly by the move. Two squadrons shared a field with one group and the other two squadrons with a group at another field. In both cases, we were put off in inaccessible, undesirable locations and the sanitary problems were much the same as before. In both those areas, providing shower and washing facilities was one of the main problems, though temporary systems for heating water for showers were set up at both camp sites.

Finally, the group was transferred to the present camp site. Messes and sanitary devices are of a semi-permanent nature and greatly improved over those with which we first started.

Malaria control has presented quite a problem for, although everyone has been impressed with the importance of malaria control, it has been difficult to maintain proper discipline. Unfortunately, the camp site is surrounded on two sides by quite large rivers with wide rocky beds. The rivers became quite low in June, leaving many small pools and pot holes. Soon anopholine larva were found. Despite frequent inspections by the malarial control units, it has been impossible to entirely control the breeding. The pot holes are filled and drained; river bed and pools sprayed, but our efforts have not been entirely successful. To counteract this, every effort is being made to maintain Malaria Discipline.

C. Operational History:

- a. The group began operating in January 1944, running the first mission on 30 January 1944; by the end of February, the group had completed its tenth mission. Ten missions were run in March, sixteen in April, twenty in May and sixteen in June.

One of the main problems has been the transportation of wounded. Our fields have always been at least sixteen miles from a hospital and the roads have been terrible. The main difficulty has been the lack of ambulances. For the first three and one half months, we operated with three ambulances, all in extremely poor condition. For this reason, we had to make arrangements to land out seriously wounded at fields near hospitals.

During the period of this history, only three men have been brought back dead. All three were due to head injuries. Two of the men did not wear their protective equipment.

In the table are listed the WIA, KIA and MIA cases by month:

	WIA					MIA	KIA				
	Missiles			Take-off Ditching			Take-Off	Ditching	Enemy Action		
	Head and Face	Body	Extremities	Take Off	Ditching				Head	Body	Extremities
Jan.	0	0	0	0	0	0	0	0	0	0	0
Feb.	1	2	2	4	0	60	7	0	1	0	0
Mar.	0	0	0	0	1	11	20	3	1	0	0
Apr.	0	1	1	1	0	134	9	0	0	0	0
May	4	0	9	1	0	51	0	0	1	0	0
June	2	2	2	0	7	39	0	2	0	0	0

Well over 50% of the injuries were minor in nature. In take-off crashes and ditching procedures, the greatest danger lies in the top turret which falls, killing, trapping and injuring the men.

The use of dried plasma has undoubtedly been a factor that has saved the life of many of the severely wounded and burned men.

One man severely burned about the face in a take-off crash was saved by a tracheotomy done at a hospital, but conversely, one man might have been saved has a tracheotomy been done. It should be emphasized that men trapped in burning planes, after apparently, inhaling the fumes burning the laryngeal and tracheal mucosa, in from 6 to 8 hours may strangulate if a tracheotomy is not performed.

b. Save for fifteen enlisted men, none of our original group of fliers had to be taken before the Medical Disposition Board. With officers, it has been the rule that, if the men could be carried past the first 10 - 15 missions, they would go ahead and finish their tour.

When we first arrived in the theater, the men had heated equipment issued them at the Post of Embarkation, and which many of them had worn to sleep in on the way over. Consequently much of it was defective and missing. Soon it became apparent that the flying personnel could not be trusted with the care of this equipment. As a result, the fliers, particularly the waist gunners, suffered some quite severe frost bites. The cases of frost bite were localized to the malar region of the face, the ears, the fingers and the toes. They were all due to either failure of equipment, failure to provide protection for the exposed portion of the face and exposure to wind blasts.

Fliers Hospitalized or Grounded

	Frost Bite				Aero-otitis	Anoxia	Upper Respiratory Infection
	Ear	Face	Finger	Toes			
Jan.	1	2	1	2	2	0	7
Feb.	5	5	7	8	10	0	11
Mar.	1	1	2	2	16	0	9
Apr.	0	1	1	0	7	0	9
May	0	0	0	0	10	0	13
June	0	0	0	0	10	2	11

Many of the cases of aero-otitis media and those listed as upper respiratory infections during the month of April, May and June were rightfully due, I believe, to allergic rhinitis. During these three months a surprising number of men, both ground and flying, show conjunctivitis, rhinitis, complained of itchy eyes, cough and sneezing.

The two cases of anoxia reported were both mild and due to carelessness on the part of the individual.

c. Dentist Report: This Group left the States with every man in dental class four.

MD Chest 60 has sufficient equipment, and supplies in this theater have been ample to afford adequate dental service with the exception of prosthetics. This Group has been in need of very little prosthetic service while in the theater. Apparently there is more prosthetic requirements than the laboratory facilities can accommodate.

From my observation, too large a percentage of the fillings are too hastily done. More thorough operative procedures would eliminate the need for much refilling, and also reduce the need for prosthetic restorations.

The practice of preventive dentistry and educating the soldier to proper oral hygiene is as important in the Army as in

civilian practice. The rate of Vincent's stomatitis in this group has been very low, and the cases were mostly new replacements.

Patients can be so treated that it is inducement for all the men to desire dental health; a situation more gratifying than the need for pressure to accomplish ones obligation,, as a member of the Dental Corps.

To justify the character and ability that is needed for an able dental assistant, the T/O should certainly be higher than corporal.

Assuming that dental service is of some importance to the efficiency of an Army and considering the time and cost in school and years of practice in preparation of becoming an efficient dentist, the overall rank of the Dental Corps is unjustly low.

The larger Bomb Group rightfully should have two Dental Officers.

It is my opinion that the value of the Dental services rendered cannot be appraised by statistics indicating the quantity of production, but rather by the merits of the work rendered.

Dental Statistics:

	Jan	Feb	Mar	Apr	May	June
Sittings	H	137	127	166	187	193
Tooth Extraction	O	22	20	37	38	50
Calculus Removal	S	27	30	43	30	49
Prlx.	P	15	23	37	30	46
Caries	I	67	138	162	162	180
Gum Treatment	T	27	3	20	26	9
Examination	A	123	94	124	142	110

D. Statistical Historical Material:

Admission rates per 1000 per annum.

For the 2 week period during the month of January:

All cases	172	N.P. Diseases	8.7
All diseases	121	Common Respiratory	109.2
Injuries	0	Malaria	0
Battle Casualties	0	Infectious Hepatitis	0
Intestinal Diseases	17.3		
Venereal Disease	26.0		

For the 4 week period of February:

All cases	507	N.P. Diseases	0
All diseases	292.5	Common Respiratory	175.5
Injuries	130.0	Malaria	0
Intestinal Diseases	52.0	Infectious Hepatitis	26.0
Venereal Disease	26.0		

For the 4 week period of March:

All cases	429	N.P. Diseases	0
All diseases	299	Common Respiratory	91.0
Injuries	84.5	Malaria	0
Battle Casualties	45.5	Infectious Hepatitis	45.5
Intestinal Diseases	78.0		
Venereal Disease	57.5		

For the 4 week period of April:

All cases	260	N.P. Diseases	0
All diseases	195	Common Respiratory	91.0
Injuries	45.5	Malaria	0
Battle Casualties	19.5	Infectious Hepatitis	21.0
Intestinal Diseases	52		
Venereal Disease	39.1		

For the 4 week period of May:

All cases	400	N.P. Diseases	0
All diseases	289.9	Common Respiratory	55.9
Injuries	61.1	Malaria	0
Battle Casualties	44.2	Infectious Hepatitis	6.5
Intestinal Diseases	65.0		
Venereal Disease	43.7		

For the 4 week period of June:

All cases	364.0	N.P. Diseases	0
All diseases	274.6	Common Respiratory	58.24
Injuries	49.9	Malaria	0
Battle Casualties	24.6	Infectious Hepatitis	0.4
Intestinal Diseases	104		
Venereal Disease	24.6		

Patients Treated:

	Jan	Feb	Mar	Apr	May	June
Total Patient Days for Quarters Patients	120	267	42	0	0	0
Total Patient Days for Hospital Patients	98	173	173	150	215	315
Number of Out-Patients	378	804	829	543	748	943
Number of Out-Patients Treated	494	809	415	875	1206	1461

Physical Examination:

	Jan	Feb	Mar	Apr	May	June
64	0	5	9	5	26	64
63	0	0	6	14	21	42
Monthly	1423	1900	1424	1116	1622	1822

Immunizations:

	Jan	Feb	Mar	Apr	May	June
Smallpox	295	207	26	-	266	73
Typhus	393	346	48	-	847	252
Typhoid	-	-	-	-	548	59
Cholera	-	-	-	-	-	344
Tetanus	-	15	22	-	-	198

Admissions:

	Jan	Feb	Mar	Apr	May	June
To Quarters	36	69	19	0	0	0
To Hospital	9	45	44	40	61	78

Venereal Disease:

	Jan	Feb	Mar	Apr	May	June
Total Number of days lost	46	61	56	42	53	62
Average Number of Days lost by each patient	11.5	2.0	5	.7	7.5	8.8
Number of Cases - Gonorrhoea	3	3	11	2	6	6
Syphilis	-	-	-	1	1	1
Chancroid	1	-	-	3	-	-

Prophylactics given: Since our camp sites have always been located some distance from towns, always from sites of contacts, we do not give many prophylactics. In the six month period, 163 prophylactics have been given.

Quarters Beds:

	Jan	Feb	Mar	Apr	May	June
Available	20	20	20	0	0	0
Occupied	11	14	16	0	0	0

No Quarters beds have been set up at our present location.

An American officer or soldier, if asked in an American way, can and will do what is asked of them.

It doesn't take long overseas to make one realize just the ideal for which he is fighting and for what it stands. Believe I can speak

for the average soldier along those lines, so I shall attempt to lib a line or two on our social life over here.

Nature has it that there aren't any two things alike, so it's only natural that as individuals, we have different outlets for peace of mind. (Morale, as the Army knows it.) Too, we Americans have always been taught to build rather than destroy and upon our arrival December 27, 1943 on these shores, to most of us guys, it was a tremendous let-down, but seeing is believing and with a big job to do, we set forth. We never thought much about social life as we had known it, because the radical change kept one's mental capacity pretty well occupied.

Our first place to operate from was Gioia Del Colle and as the saying goes, "Home is what you make it", but here, home, dispensary and quarters was where we made it. Nevertheless, as was said before, we as individuals under those conditions chose our own means of relaxation and all got along just dandy.

One thing especially I'd like to mention is, the hot and cold shower we improvised. Most of which was made out of enemy planes, etc. With a "touch" of finances from "most everyone" for a few odds and ends we had to buy. Finally we completed it. Two showers were taken. "Bang!" came the orders to move.

Too, while there, I came back from town one day and found the Major with a pick and shovel just digging away. I said, "Major, won't any of the enlisted men do that?" He said, "Oh, I love flowers and just thought I would dig up this place here in front of the dispensary and in the meantime have my wife send me some flower seeds. Then we will have something to remind us of home this summer."

Having a sister in the florist business back home, and being a great lover of flowers myself, I did likewise.

We moved to San Pancrazio from Gioia and after about six weeks of mud, mules and mountains, as Bill Mauldin puts it, the only thing one could like about that place would be a verse in the song "America" which goes like unto this: "I love thy rocks and rills, thy woods and templed hills." We didn't love it so much there, however, but those circumstances were taken on the chin and believing "a quitter never wins and a winner never quits", we made it social and otherwise.

Soon we moved here, and I would say we "hit the jackpot."

The seed we ordered, which totaled three times as many as we asked for, caught up with us here. It seemed to be synchronized or destined, because we have a beautiful garden spot here that can be irrigated at will and at present, we have at all times fresh bouquets of various flowers in the office. The garden has been an inspiration to our entire group.

Within our first month here, headquarters and all the squadrons had their mess halls, showers, clubs, movies, etc., pretty well up to par. I would say that there isn't one soldier who will say one word about the field conditions under which we live, and having completed our 100th combat mission recently, as a whole, we're a pretty proud bunch of buddies.

I. Previous History

The 451st Bombardment Group (H) was activated by paragraph 1, General Order No. 58, dated 22 April 1943.

The 451st Bombardment Group (H) finished their training in the United States and on 3 December 1943, left the continental limits of the United States to reassemble in Italy in January 1944. The first mission was run on 30 January 1944.

II. Present History

A. Administrative History:

The quarterly roster for 30 September 1944 is as follows:

<u>NAME</u>	<u>RANK</u>	<u>CLASSIFICATION</u>
Group Headquarters		
Peterson, Howard C.	Captain	Group Dental Surgeon
Elefteriades, George	Sgt.	Dental Technician
Wagner, Clyde L.	Major	Group Flight Surgeon
Erwin, William A.	T/Sgt.	Medical NCO
Roquet, Rollo R.	Sgt.	Surgical Technician
Bennett, Alphaeus O.	Cpl.	Group Adm. & Tech. Clerk
Kassa, Joseph A.	Cpl.	Ambulance Driver
724 th Squadron		
Quin, Henry F.	Captain	Squadron Flight Surgeon
Hecker, George R.	S/Sgt.	Medical NCO
Garee, James C.	Sgt.	Medical NCO
Dempski, John	Cpl.	Medical Technician
Siporski,, Harry J.	Cpl.	Surgical Technician
Mooney, Joseph F.	Cpl.	Surgical Technician
Duke, Aaron W.	Pfc.	Surgical Technician
Anderson, Edward V.	Pfc.	Medical Technician
725 th Squadron		
McFarland, Ward J.	Captain	Squadron Flight Surgeon
Stevens, Turner R.	T/Sgt.	Medical NCO
Hall, Billy	Sgt.	Medical NCO

Duke, Martin E.	Sgt.	Medical NCO
Byle, Anthony J.	Cpl.	Surgical Technician
Rodgers, James C.	Cpl.	Medical Technician
Smith, Thomas F.	Pfc.	Surgical Technician
Alumbaugh, Loren T.	Pfc.	Clerk

726th Squadron

Kremers, Marshall Y.	Captain	Squadron Flight Surgeon
Williams, LeRoy	Sgt.	Medical NCO
Westeen, Oliver S.	Cpl.	Surgical Technician
Hertzveld, Martin P.	Cpl.	Medical Technician
LoRusso, Patrick J.	Cpl.	Clerk
Lenhert, John H.	Pvt.	Medical Technician
Kolevas, Louis M.	Pvt.	Surgical Technician
Reed, George A.	Pvt.	Ambulance Driver

727th Squadron

King, Joe W.	Captain	Squadron Flight Surgeon
Mason, John R.	S/Sgt.	Medical NCO
Garrity, Charles C.	Sgt.	Medical NCO
Rosenbaum, Raymond J.	Cpl.	Medical Technician
Wilson, Louis W.	Cpl.	Surgical Technician
Zak, John J.	Pfc.	Medical Technician
Splettstoesz, Fred O.	Pfc.	Surgical Technician
Gonzales, Tony C.	Pfc.	Ambulance Driver
Williams, Hilary H.	Pfc.	Clerk

Pfc. Joseph B. Messina was transferred to the refueling section as a heavy equipment driver.

Civilian labor is used to maintain latrines and to control mosquito breeding.

The following named officer and men of the Medical Department were awarded the Soldier's Medal by General Order #2361, Headquarters XV Air Force, 7 August 1944.

Wagner, Clyde L.	Major, MC
Mason, John R.	S/Sgt.
Reed, George A.	Pfc.
Kolevas, Louis M.	Pfc.

B. Environmental History

A large amount of work was done in the control of mosquito breeding. The camp is surrounded on three sides by two large rivers with numerous pot holes and swamp areas. We were assisted in the work by dusting of the areas by airplane.

In the last two weeks of July, there were fifteen (15) cases of malaria. Six (6) new cases developed during the first week in August, four (4) the second week, one (1) the third week, and since then there have been no cases of malaria. Increased malaria control measures and strict malaria discipline were responsible for bringing malaria under control.

C. Operational History

The group flew twenty-two (22) combat missions in July, twenty (20) in August and fourteen (14) in September. Eight (8) of the missions flown in September were ferry missions, carrying gasoline and ammunition into south France to supply our armies operating in that area.

The Group received the Presidential Citation by General Order #67, War Department, 16 August 1944 and two other Unit Citations by General Orders 2332 and 3757, Headquarters XV Air Force, dated 5 August and 2 October 1944 respectively.

The battle casualties sustained during this period are shown in the following chart.

Month	WIA			MIA					
	Missiles			Take-off					Take Off
	Head & Face	Body	Ext.			Head & Face	Body	Ext.	
July	3	1	4	4	93	1	2	0	6
August	4	1	0	16	190	0	1	0	4
September	0	0	0	7	0	0	0	0	0

The three boys killed by wounds of the body all wore flak suits. Two of the missiles struck low and ranged upward into the abdomen. The other man was struck just above the left clavicle and the missile ranged down into the chest cavity.

The causes for temporarily grounding or hospitalizing flying personnel are shown below.

Month	Aero-etitis	Upper respiratory	Venereal Disease	Gastro-enteritic	Non Operational injuries	Psychoneurosis	Miscellaneous
July	11	13	1	28	4	9	21
Aug.	5	9	2	15	12	6	22
Sept.	7	12	2	3	6	2	8

There were no cases of frost bite during these three months.

MEDICAL DISPOSITION BOARD CASES

Month	Officers	Enlisted	Mission	Cause	Disposition
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		Men	Level		
July	1	-	6	Traumatic event followed by anxiety state, severe	Permanently grounded and reassigned
	-	1	13	Post traumatic right personal nerve paralysis and associated foot drop	Permanently grounded within squadron
Aug.	1	-	12	Anxiety state, severe manifest by intractible pain in the ears	Permanently grounded and reassigned
	1	-	8	Neurosis, anxiety type, severe, recurrent	Permanently grounded and reassigned
	1	-	5	Dislocation articular cartilage, left knee chronic	Reassigned to operational flying in lighter aircraft
Sept.		1	37	Operational stress due to repeated traumatic episodes	Transfer to Zone of Interior
		1	31	Anxiety state, moderately severe due to combat stress	Transfer to Zone of Interior
		1	7	Anxiety state, moderately severe	Permanently grounded and reassigned
		1	17	Anxiety state, mild	Returned to combat flying
	1	-	12	Anxiety state, mild	Returned to combat flying
	1	-	23	Anxiety state, mild	Returned to combat flying
	1	-	16	Anxiety state, moderately severe	Permanently grounded and reassigned
	1	-	23	Cardiac arrhythmia, parozsymal techy-cardia chronic severe	Permanently grounded and reassigned

D. Statistical Historical Data

1) Admission rate per 1000 per annum

	July	Aug.	Sept.
All Cases	500	468	286
All diseases	416	370.5	234
Injuries	52	65.0	41.6
Battle casualties	32.5	32.5	10.5
Intestinal Diseases	32.5	45.5	15.6
Venereal	13.0	32.5	15.6

Disease			
N. P. Disease	13.0	0	20.8
Common	26.0	0	0
Respiratory			
Malaria	6.5*	6.5*	0
Infectious	6.5	0	10.4
Hepatitis			

*6.5 represents cases sent in with diagnosis of malaria. Actually for the month of July the rate was 97.5. Summarily the rate for the month of August was 71.5.

2) Non effective per 1000 per annum

July	14.8
Aug.	16.8
Sept.	11.6

3)

	July	August	Sept.
Patients treated	921	841	1034
Total patient hospital days	916	1032	696
Number of out patients	903	826	994
Number of out patient treatments	1082	1011	1116

4) Physical Examinations

	July	August	Sept.
63	42	83	43
64	64	103	89
Monthly	1822	1642	1714

5) Immunizations

	July	August	Sept.
Smallpox	73	317	84
Typhoid	59	1017	0
Tetanus	196	133	49
Typhus	252	0	859
Cholera	344	973	304

6) Admissions to Sick Report

	July	Aug.	Sept.
Admission to Hospital	77	72	55
Admission to sick book	826	759	939

7) Venereal Disease

	July	Aug.	Sept.
Total days lost	9	37	3
Average days lost	3	3.7	0.12

Average number of days lost for each disease

	July	Aug.	Sept.
Gonorrhoea	3	3	12
Syphilis	0	9	0

Number of prophylactics admission

July	Aug.	Sept.
27	41	33

8) During the quarter, no quarters beds were available. A group aid station is in the process of being set up that will provide twenty (20) beds.

E. Dental Statistics

	July	Aug.	Sept.
Fillings			
Amalgam	122	105	102
Oxyphosphate & amalgam	38	22	29
Silicate	22	32	31
Oxyphosphate	3	13	7

Type of Treatment	July	Aug.	Sept.
Examinations	105	152	154
Calculus	49	40	42
Prophylaxis	45	36	37
Gums, Treatment	18	14	7
Tooth, extraction	39	41	33
Pulp, devitalization	0	1	0
Sittings	150	149	198
Admissions	77	90	84

REMARKS:

Each man should have bite-wing x-rays upon entering the Army and once a year thereafter.

F. Laboratory Examinations

	X-ray	Urines	G.C. Smear	Dark Field	Kahn	Malaria	Sed. Rate	Sputum
July	62	37	36	4	47	9	1	0
Aug.	37	49	48	16	40	23	1	0
Sept.	35	27	70	5	28	3	0	30

Regardless of which of the many theaters or fronts of war that we might be in or on, there is, and always will be that longing for the life we might have been used to. (The American way)

Seeing life in so many different ways other than that, personally I think that alone puts a certain drive or force into an individual which naturally makes a better soldier out of him.

In all of the 48 states we have many towns and cities that have from 1200 to 12 thousand population and that would make up 'most any unit or division in the greatest army on earth.

In all your towns or cities you have mayors, your attorneys, your aldermen, bankers, doctors, drug stores, wholesale, warehouses, garages, service stations, etc. Too, you have your clubs, tournaments, movies and various means of entertainment for the moral wellbeing of the individual and for the city as a whole.

Likewise by an army. One of the first things that is done under most conditions is to see that the soldier's morale is up to a level.

Within a city, all these different organizations, etc. make up the daily business and social world, which is truly applicable of an army, especially in this global struggle?

We have our commander-in-chief, and down through echelons we run into the private. All of these for the same purpose.

It is quite different overseas than in the States. From an individual standpoint, regardless of rank and the fascinating part is the fact that in most cases a fellow will put forth that extra effort just because he figures it will bring nearer the day that he will see his wife, baby, mother, sweetheart, etc. "All of which is very true."

We have been here at this field some time and have been ordered to winterize.

Most everyone took it upon themselves to finance the building of their homes, most of which are made out of sand stone rock. Some have gone as far as to tile the floors, etc. What is definitely a military secret is where the material came from. You just can't beat these

yanks. We didn't ask for all this, but you can bet that last dime we will come out on top. We have built this camp up to a little metropolis over a period of a few months. Too, we rank pretty well up toward the top as far as achievements from a military stand point are concerned, in this air force.

All of this proves one thing: The fact that morale is still on the incline and as long as you have that, you have a worthwhile organization.

I. Previous History

The 451st Bombardment Group (H) was activated by paragraph 1, General Order No. 88, dated 22 April 1943.

The 451st Bombardment Group (H) finished their training in the United States and on 5 December 1945, left the continental limits of the United States to reassemble in Italy in January 1944. The first mission was run on 30 January 1944.

II. Present History

On 4 October 1944, our Group Commander, Colonel Robert E.L. Eaton was replaced by Colonel James B. Knapp. Colonel Knapp was replaced by Lt. Colonel LeRoy L. Stefonowicz on 24 December 1944.

Under the new T/O a E 1-112, medical personnel have been reassigned. At the present time, the men are being re-examined and trained for new classification.

The quarterly roster for 31 December 1944 is as follows:

<u>NAME</u>	<u>RANK</u>	<u>CLASSIFICATION</u>
Group Headquarters		
Peterson, Howard C.	Captain	Group Dental Surgeon
Elefteriades, George	Sgt.	Dental Technician
Wagner, Clyde L.	Major	Group Flight Surgeon
Erwin, William A.	T/Sgt.	Medical NCO
Stevens, Turner R.	T/Sgt.	Medical NCO
Hecker, George R.	S/Sgt.	Medical NCO
Garrity, Charles C.	Sgt.	Medical NCO
Hall, Billy	Sgt.	Medical NCO
Roquet, Rollo R.	Sgt.	Surgical Technician
Bennett, Alphaeus O.	Cpl.	Clerk
Dempski, John C.	Cpl.	Medical Technician
Hartzveld, Martin P.	Cpl.	Medical Technician
Westeen, Oliver S.	Cpl.	Surgical Technician

Byle, Anthony J.	Cpl.	Surgical Technician
Splettstoesser, Fred O.	Pfc.	Surgical Technician
Anderson, Edward V.	Pfc.	Medical Technician
Gonzales, Tony C.	Pfc.	Ambulance Driver
Stern, Abraham L.	Pfc.	Surgical Technician
Williams, Hilary H.	Pfc.	Clerk
Zak, John J.	Pfc.	Medical Technician
Smith, Thomas F.	Pfc.	Surgical Technician
Lehnert, John H.	Pvt.	Medical Technician
Kolevas, Louis M.	Pvt.	Surgical Technician

724th Squadron

Quin, Henry F.	Captain	Squadron Flight Surgeon
Garee, James C.	Sgt.	Medical NCO
Duke, Aaron W.	Pfc.	Surgical Technician
Burgman, John P.	Pfc.	Clerk

725th Squadron

McFarland, Ward J.	Captain	Squadron Flight Surgeon
Duke, Martin E.	Sgt.	Medical NCO
Rodgers, James C.	Cpl.	Medical Technician
Alumbaugh, Loren T.	Pfc.	Clerk

726th Squadron

Williams, LeRoy	Sgt.	Medical NCO
LoRusso, Patrick J.	Cpl.	Clerk
Reed, George A.	Pvt.	Ambulance Driver

727th Squadron

King, Joe W.	Captain	Squadron Flight Surgeon
Mason, John R.	S/Sgt.	Medical NCO
Wilson, Louis W.	Cpl.	Surgical Technician
Rosenbaum, Raymond J.	Cpl.	Medical Technician

Captain Marshall Y. Kremers was transferred to the Zone of the Interior for medical reasons by SO 339, par. 2, 26th General Hospital, 8 December 1944.

Cpl. Joseph A. Kassa, 36808713, was transferred to the 2616th Investigating Detachment by SO 194, par. 1, Hdq. 49th Bombardment Wing (H), 8 November 1944.

Cpl. Harry J. Siporski was transferred to Air Corps by SO 257, par. 6, Hdq. 451st Bombardment Group (H), 26 November 1944.

Captain Henry F. Quinn was awarded the Soldiers Medal by General Order 3570, Headquarters, XV Air Force, 23 September 1944.

B. Profession

The group aid station was opened 2 December 1944. Since then, the available beds have been occupied most of the time and there has been a marked decrease in the number of patients evacuated to nearby Station Hospitals. Similarly all urethral smears, red and white blood cell counts, urines and other minor laboratory examinations are now done at the group aid station. The pharmacy section provides most of the simple tinctures, syrups and mixtures used by the units.

C. Operational History

The group flew thirteen (13) missions in October, sixteen (16) in November and nineteen (19) in December, making a total of one hundred seventy six (176) flown during the year of 1944.

Battle Casualties are shown on the following chart.

<u>BATTLE CASUALTIES</u>									
	WIA			MIA		KIA			
	Missiles			Aircraft Accident		Missiles			Aircraft Accident
Month	Head & Face	Body	Ext.			Head & Face	Body	Ext	
October	1	2	12	19	101	1	2	0	11
November	3	0	6	8	65	1	0	0	21
December	7	0	7	18	138	0	0	0	0
Total	11	2	25	42	302	2	2	0	32

Aircraft accidents include injuries resulting from parachuting.

<u>FROST BITE</u>				
Month	Face & Ears	Hands	Feet	Number Hospitalized
October	0	1	3	0
November	11	13	8	3
December	5	4	1	2
Total	16	18	12	5

The causes of temporarily grounding or hospitalizing flying personnel are shown below:

Month	Aero-otitis	URI	VD	GI	Non-oper. Injuries	Psycho-neurosis	Miscellaneous
October	26	35	2	11	7	4	10
November	20	27	0	15	9	7	26
December	17	29	2	14	21	4	33

<u>MEDICAL DISPOSITION BOARD CASES</u>						
Month	Off.	EM	Mission	Cause	Disposition	

			level		
October		NG	27	Psychoneurosis, anxiety type due to traumatic experience	Transfer to Zone of Interior
October	Bomb.		41	Psychoneurosis, anxiety type due to combat stress	Transfer to Zone of Interior
October	Bomb.		11	Laceration of cornea & ipitis-battle casualty	Transfer to Zone of Interior
October		Rog	5	Psychoneurosis, anxiety B-24 phobia	Transfer to B-17 craft
November	Nav.		1	Air sickness, chronic, severe	Permanent removal from flying
November		WG	30	Psychoneurosis, anxiety type due to combat stress	Transfer to Zone of Interior
November		TG	29	Psychoneurosis, anxiety type due to combat stress	Transfer to Zone of Interior
November		F	30	Psychoneurosis, anxiety type due to combat stress	Transfer to Zone of Interior
November	P		32	Psychoneurosis, anxiety type due to combat stress	Transfer to Zone of Interior
November	Nav.		25	Fractured 1, 2, 3, & 4 transverse proceres	Return to duty
November	CP			Macular degeneration left, cause unknown	Permanent removal from flying
December		WG	29	Psychoneurosis, anxiety type due to combat stress	Transfer to Zone of Interior
December	P		20	Psychoneurosis, anxiety type due to combat stress	Transfer to Zone of Interior
December		NG	30	Psychoneurosis, anxiety type due to combat stress	Transfer to Zone of Interior

D. STATISTICAL HISTORICAL DATA

1) Admissions rate per 1000 per annum

	October	November	December
All Cases	413.6	362.9	593.6
All Diseases	236.6	247.5	489.6
Injuries	118.2	60.5	30.0
Battle Casualties	59.1	41.7	65.0
Intestinal Diseases	17.7	8.7	17.4

Venereal Diseases	35.0	48.8	147.4
N. P. Diseases	5.1	0	0
Common Respiratory	17.7	8.7	69.3
Malaria	0	0	0
Infectious Hepatitis	11.8	0	4.3
Frost bite	0	16.2	8.7

2) Non affective rate per 1000 annum

October	14.6
November	12.2
December	11.2

3)

	October	November	December
Patient's Treated	1048	814	1160
Total Patient Hospital days	983	881	597
Total Patient Quarters days	0	0	1064
Number of out patients	994	764	1064
Number of out patient treatments	1116	1005	1407

4) Physical Examinations

	October	November	December
63's	61	53	103
64's	63	61	33
Monthly	1448	1414	1641

5)

	October	November	December
Smallpox	24	6	34
Typhoid	17	39	39
Tetanus	18	15	26
Cholera	307	109	404
Typhus	165	147	799

6) Admissions

	October	November	December
Hospital	54	50	53
Quarters	0	0	43

7) Venereal Disease

	<u>October</u>	<u>November</u>	<u>December</u>
Total days lost	0	11	22
Average days lost	0	1.1	0.63
Number of cases	0	2	3
Syphilia			
Gonorrhoea	6	7	31
Chaneroid	0	1	1

Number of prophylactics administered:

<u>October</u>	<u>November</u>	<u>December</u>
31	45	65

8) Patient beds (Quarters)

	<u>October</u>	<u>November</u>	<u>December</u>
Number available	0	0	20
Average number occupies	0	0	15

E. Dental Statistics

<u>Fillings</u>	<u>October</u>	<u>November</u>	<u>December</u>
Amalgam	110	107	111
Oxyphosphate & Amalgam	26	21	30
Silicate	25	31	33
Oxyphosphate	13	6	3
Type of Treatment	141	149	153
Examination			
Calculus	40	30	30
Prophylaxis	33	37	43
Gums, treatment	12	14	13
Tooth extraction	43	31	45
Pulp Devocalization	0	0	0
Sittings	156	180	178
Admissions	86	79	92

F. Laboratory Examinations

	X-ray	Urines	C. C. Smear	Dark Field	Kahn	Malaria	White Blood Count
October	51	35	52	10	63	5	
November	62	42	67	14	75	3	

December Hosp.	92	12	12	19	105	6	
December Disp.	0	52	64	0	0	14	22

YEARLY SUMMARY

During the past year, the group has established three (3) camps in Italy and flown one hundred seventy-six (176) combat missions.

Medically, the health of the command has always been good.

The group aid station has been set up and will not only provide excellent medical facilities for the members of the command, but greatly aid in continued and improved training for the medical section personnel.