

SECRET

OFFICE OF THE SURGEON
5230TH COMPOSITE EMERGENCY RESCUE GROUP
APO 719

1 January 1945.

SUBJECT: Quarterly Medical History.

TO : Commanding Officer, 5230th Composite Emergency Rescue Group, APO 719.

1. The 5230th Composite Emergency Rescue Group was activated, 25 October 1944, per General Order No. 115, Headquarters, Thirteenth Air Force and FEAF Radio A-79433, 20 October 1944, for the purpose of increasing the efficiency and coordination of all rescue services of the Thirteenth Air Force.

2. This Group with a total strength of 108 Officers and 372 enlisted men is under the command of Lt Col Wallace S. Ford, ASN 021312, and is composed of the following units:

Group Headquarters	16 Officers, 15 enlisted men.
2nd Emergency Rescue Sq	62 Officers, 250 enlisted men.
15th AAF Emergency Rescue Boat Sq .	30 Officers, 107 enlisted men.

3. The 2nd Emergency Rescue Squadron was activated at Hamilton Field, California, 15 December 1943, per paragraph 1, General Order No. 195, Fourth Air Force, dated 3 December 1945, and equipped with twelve (12) PBV OA-10A Type Amphibious Airplanes. The Squadron began operations from their base on Biak, 27 July 1944, under the Fifth Air Force. On the 30th September 1944, the Squadron was transferred to the Thirteenth Air Force, per paragraph 3, General Order No. 239, Headquarters, FEAF, dated 23 September 1944. On, 9 October 1944, this Squadron was transferred to Morotai Island by air transport. On the 25 October 1944, it became a component part of the 5230th Composite Emergency Rescue Group. Since 25 October 1944, this Squadron has been assigned additional airplanes as follows: Two (2) C-47 type airplanes uses as search planes and equipped to drop sustenance kits and emergency supplies to survivors on land and sea. One (1) C-45 type airplane for general search work and transport. One (1) B-25 for general search and utility plane. During the period covered by this report, one (1) PBV was lost at sea while returning from a combat mission and two (2) were destroyed by enemy action.

4. The 15th AAF Emergency Rescue Boat Squadron was activated at Los Negros, 26 July 1944, per Section I, General Order No. 8, Headquarters, Thirteenth Air Force, dated 22 July 1944, and equipped with fifteen (15) crash and rescue boats, varying in length from 42 to 104 feet. These boats have varying cruising speeds and ranges. This Squadron began operating at Los Negros, 26 July 1944. On 13 September 1944, the Headquarters was moved to Hollandia and on 19 September to Noemfor Island. On 20 October 1944, Headquarters was transferred to Morotai Island, where they were subsequently joined by 11 rescue boats, two remaining at Guadalcanal and two began operating with Flights B & C of the 2nd Emergency Rescue Squadron at Middleburg Island.

5. The primary duty of this Group is to effect the rescue of such members of air crews who may be forced to abandon their aircraft on land or sea as a result of mechanical failure or enemy action. Secondly, they have evacuated sick and wounded from forward areas, often deep in enemy territory. They have transported food and medical supplies and ammunition to advanced bases where the only source of supply is by amphibious planes. The Boat Squadron is equipped with various types of craft, short range, high speed boats for inshore patrol and rescues; medium range, high speed boats for rescues up to 275 miles at sea when it is impractical for a PBY to land on the open sea, patrol shore lines of neighboring islands and effect the rescue of personnel along the shore; the long range patrol rescue boat, much slower than the smaller boats but heavily armed, is capable of remaining away from its base for several days. This craft manned by 14 men is capable of putting up a good fight, to enable them to rescue personnel in enemy territory, far from their base.

6. During the period covered by this report, 15 new Officers have been assigned to the 2nd Emergency Rescue Squadron and 16 have been lost by transfer. Four (4) Officers were killed in action and one (1) died of a generalized dermatitis, the immediate cause of death being acute nephritis. Four (4) Officers are on TD with the Group from the 2nd Emergency Rescue Squadron. During the period, 56 enlisted men have been assigned to this Squadron, 31 have been lost by transfer to other units and three (3) were killed in action.

7. Medical Department Personnel: One (1) Medical Officer was killed in action. Another Medical Officer has since been assigned as a replacement. Five (5) Surgical Technicians have been assigned to the 2nd Emergency Rescue Squadron, one (1) was lost by transfer to another unit, and one (1) Medical Technician was reclassified as a Surgical Technician. The 15th AAF Emergency Rescue Boat Squadron has a total of 14 Surgical Technicians, one assigned to each boat. No Medical Officer has been assigned to the Boat Squadron and at present the personnel are receiving medical attention at the Group Dispensary. Following is a breakdown of Medical Personnel assigned to the 5230th Composite Emergency Rescue Group:

Medical Officers	5
Surgical Technicians	27
Medical Adm Clerk	1
Clerk, Typist	3

8. Promotions during the period covered by this report are as follows:

Captain to Major	1
1st Lt to Captain	5
2nd Lt to 1st Lt	32
Pvt to Cpl	16
Cpl to Sgt	15
Sgt to S/Sgt	8
S/Sgt to T/Sgt	2

9. Morotai Island, approximately 20 miles wide and 31 miles in length, extends in a North Easterly, South Westerly direction and lies between 2°0' and 2°30' W and 128°15' E and 128°45' E. The Island is apparently of volcanic origin, relatively mountainous and covered with a dense forest of giant gum wood and resinous producing trees with a ground cover of impenetrable tropical plants. Numerous banana and coconut plantations are in evidence along the coast. The rainfall for December amounted to 9.73 inches with an average

temperature of 81° F. The maximum and minimum temperature recorded at the weather station on Pitoe strip was 92° and 71° respectively.

10. The camp area is situated in the jungle approximately two miles inland from the eastern end of Pitoe Strip. The terrain is relatively flat. The soil consists of a superficial layer of heavy black loam overlaying a strata of dense firmly packed red clay. The surface soil readily absorbs rain water, but following prolonged or heavy rains, water collects in pools about the camp area.

11. Prior to setting up camp, the area was cleared of all undergrowth. Standard pyramidal tents house all personnel. The tents are as well dispersed as the size of the area will permit, which is much too small for the number of troops quartered here.

12. A large mess hall has been constructed with ample kitchen and storage space. A 750 cubic foot refrigerator permits the storage of perishable foods. The mess hall has been screened and is fly-proof. Deep pit, fly-proof latrines are situated well beyond the camp area and are kept in a good state of sanitation.

13. Garbage is disposed of by incineration and liquid waste deposited on the loose top soil, several hundred feet from the mess hall. The area on which the waste is emptied is soaked with oil and burned daily. Soakage pits have been persistently unsuccessful due to the firm clay subsoil and the dense strata of underlying coral.

14. Water for drinking purposes is obtained from a designated water point and transported to the area in 250 gallon water trailers. Showers have been constructed to accommodate all personnel and water for this purpose is obtained from a neighboring well, 600 yards south of this area. Laundry facilities have been provided by the construction of a power driven home-made washing machine and is entirely satisfactory. However, the Thirteenth Air Force laundry is utilized by a large number of the Officer personnel.

15. Food, in general, is adequate in quantity and well prepared. However, the deficiency in vitamins is supplemented by vitamin capsules when available, and fresh meat and vegetables procured in Australia. Messing facilities are entirely adequate and very satisfactory.

16. A large dispensary has been constructed which provides adequate facilities for treatment of all Group personnel. The dispensary is of temporary construction, utilizing logs, burlap, and canvas. A sufficient stock of dressings, medicaments and supplies are on hand at all times to meet any emergency. The name, rank, ASN, diagnosis, treatment, prognosis and disposition of all dispensary cases are recorded in the Dispensary Record.

17. Flies have constituted no problem, as vigorous sanitary inspections are a daily routine, and no garbage or decomposing food is permitted to accumulate in the area. The area around wash stands has been covered with sand and coral and is sprayed with oil daily and burned.

18. Few mosquitos are in evidence. All pools of water are sprayed with oil every fourth day and as much rubbish has been burned as is possible between rains and nightly blackout conditions. Large red ants have been troublesome, but persistent oiling, burning, and use of insecticide powder have to a large extent eliminated them as a nuisance. Numerous large field mice

have been seen about the camp area but have constituted no problem. Canned meat, saturated with a poison provided by the QM has been repeatedly distributed around the area. No body lice or ticks have been observed on any personnel of this Group.

19. Medical Supplies: Medical Supplies are obtained from the 321st Service Group. They have been most cooperative and efficient in their desire to provide us with the necessary items. Surplus Medical Supplies are stored in water proof packing cases with the list of contents attached to the lid. The climate has no apparent deteriorating effect on stored medical supplies. There appears to be a shortage of such essential items as: Tincture of Benzoin, Tincture of Merthiolate, Hydrogen Peroxide and Menthol. These items are very essential in the treatment of minor abrasions and skin disease. All personnel are constantly urged to conserve supplies and equipment. All instruments are cleaned and polished daily.

20. Sick and Wounded:

a. All minor ailments are treated in the Group Dispensary by a Medical Officer or by a Surgical Technician under supervision. Seriously ill or injured patients are transferred to the 9th Portable Surgical Hospital or the 155th Station Hospital for treatment and disposition. The cooperation of the hospital staffs has been most satisfactory.

b. Fungus diseases of the skin have been the only prevailing tropical disease encountered and at no time have they been of such incidence as to affect the efficiency of the organization. Strict attention to personnel hygiene and regular monthly inspections of the feet of all personnel have materially aided in their control. One flying officer, while stationed at Middleburg Island, APO 159, developed a generalized dermatitis, which resulted in his death from acute nephritis. One enlisted man at the same station also developed a generalized dermatitis and was evacuated to the United States. One ground Officer while stationed at Middleburg Island, developed an indolent ulcer of the foot. He was hospitalized for treatment and disposition. Another ground Officer at Middleburg developed a fever of undetermined origin of approximately six weeks duration. He was confined to the 14th Portable Surgical Hospital at APO 159. He made an eventual recovery and was returned to duty. One enlisted man, while stationed at Biak, developed large indolent ulcers involving both feet. Treatment controlled the disease but failed to cure it. He was a chronic alcoholic. This man was transferred with the Squadron to Morotai and was eventually hospitalized for further treatment and disposition. There have been no new cases of Malaria, Dengue or Typhus Fever in this command during the period covered by this report. The two cases of Malaria reported in previous Quarterly History have been returned to duty during the period of this report.

c. Two Officers were killed and ten injured, four seriously, as a result of enemy action, 23 December 1944, when a stick of 50 Mg bombs were dropped across the area, one bomb obtaining a direct hit on a tent in the Officer's area. All of those killed or injured had been sleeping and has insufficient time to reach their bomb shelters. No one in any of the shelters was injured. One pilot, one Flight Surgeon, and three enlisted men were killed in an airplane crash at sea, 26 October 1944.

d. Number of cases hospitalized during the period covered by this report are as follows:

Disease 19
Injury 7
Battle Casualties 12

Number of treatments in dispensary ... 603
There were no quarters cases.

e. During the period covered by this report a total of 335 days have been lost from flying due to the following causes:

(1) Injuries (non-aircraft) 201 days.
(2) Gastric Disorders 47 days.
(3) Flying Fatigue 31 days.
(4) Malaria 31 days.
(5) Arthritis, rheumatoid 19 days.
(6) Jaudice, catarrhal 6 days.

21. All flying personnel, with the exception of those recently assigned to the Group, have had combat leave in Australia. This leave has materially increased the morale and efficiency of the flying personnel. The majority of the flying personnel have an average of 500 hours of combat flying and are eagerly looking forward to the arrival of replacement crews in order that they may be returned to the United States for rest and recuperation.

22. No serious or insurmountable problems have confronted the Medical Department. All personnel are well trained in their respective duties. The Surgical Technician or Flight Surgeon is a component part of every combat crew. They have performed their duties in an exemplary manner, giving first aid and comfort to all rescued air men. During the bombing of the area, 23 December 1944, the Medical Department Personnel performed their duties efficiently and courageously. All wounded personnel were given adequate first aid and the first ambulance was on its way to the hospital before the alert was terminated. All wounded had been transferred to the hospital within an hour following the explosion. It is a certainty that prompt and adequate first aid saved the lives of at least two of the severely wounded Officers. The 9th Portable Hospital staff are to be commended in the manner in which they performed their duties. None of the wounded Officers died.

23. Physical Inspection and Health: All enlisted personnel have been inspected monthly. Their general physical condition, state of nutrition, and health have been satisfactory. No venereal disease is present in this command. All personnel are properly immunized.

24. Training of Personnel:

a. Personnel of the command have received a total of seven hours lectures on the following subjects:

(1) Individual protective measures for control of Malaria.
(2) Scrub Typhus, control and individual protective measures.
(3) Cholera and diseases of the intestinal tract.

b. Personnel of the Medical Section received a total of 27 hours of instruction during the period. Subjects included were:

(1) Personal Hygiene and Sanitation.
(2) Anatomy and Physiology.
(3) Field Medical Records and Vital Statistics.

- (4) Treatment of Gas Casualties.
- (5) Medical Aid (splinting, bandages and dressings).
- (6) Field Sanitation and Sanitary Appliances.
- (7) Materia Medica and Pharmacy.
- (8) Emergency First Aid for Rescued Survivors.
- (9) Control of Fungus diseases.
- (10) Food Borne Diseases of the Intestinal Tract.
- (11) Care of Medical Equipment and Supplies.
- (12) Treatment of Shock and Administration of Plasma.

25. The morale and spirit of the personnel of this Group are of the highest character. Their health, in general, is excellent and their courage unexcelled. Practically all rescue missions are carried out deep in enemy territory, frequently without fighter protection and on occasions, the rescue crew have been attacked by enemy fighters, and frequently fired on by shore and ship batteries. In spite of these hazards, the missions have been successfully completed and a total of 173 sea and 14 land rescues are credited to this Group, during the period.

26. Conclusion: Many seriously wounded or injured men have been rescued from the sea or from the coast line. Medical care to all injured personnel has been very satisfactory, and has on many occasions been carried out before the man could be removed from the life raft. Many men are in extreme shock and it has been necessary to administer plasma, immediately following the rescue no rescued personnel have died aboard the rescue plane. Each rescue plane is equipped with sufficient medical supplies to meet all emergencies.
