

Editor's Note

Major General Ireland apparently wrote this shortly after retiring in 1931.

I have corrected spelling, standardized capitalization, and changed punctuation to improve clarity of expression but have not changed words or phrasing. Material in brackets and the numbered footnotes are editorial additions.

The original of Maj. Gen. Ireland's autobiography is in the National Library of Medicine. The Office of Medical History thanks the National Library of Medicine for its help in making this material more widely available.

Sanders Marble

Senior Historian, Office of Medical History, U.S. Army



Maj. Ireland, age 38. Courtesy NLM,
<https://collections.nlm.nih.gov/catalog/nlm:nlmu/id-101419515-img>



Maj. Gen. Ireland at his desk. Courtesy NLM,
<https://collections.nlm.nih.gov/catalog/nlm:nlmu/id-101419519-img>

This is a memorandum for file in compliance with Circular 20, April 15, 1924, S.G.O.¹

I was born in Columbia City, Indiana, May 31, 1867, the son of Dr. Martin Ireland and Sarah Fellers Ireland. My father's ancestors came from north Scotland and my mother's from Germany. Father was born in Chillicothe, Ohio, in 1821, and Mother was born in Waynesboro, Virginia, in 1829. I was the eighth of nine children, all of whom were raised, educated, and sent away from home, the brothers to take up whatever occupation they had selected, and the sisters to become the wives of the men of their choice. The first of the children to die was my brother Frank, on December 25, 1882, at the age of 25 years.

My father was a very successful country doctor, having graduated in medicine in 1849 in Cincinnati, Ohio. He made a real effort to keep up with his profession. To my knowledge, he took a postgraduate course at the Western Reserve College, Cleveland, Ohio, the winters of 1866-1867, and received a diploma from that institution. I well remember when he took a postgraduate course in Chicago in 1880 under Professor N.E. Davis. My mother was one of those wonderful women who went to the West in the early days, raised her children, and saw civilization come to them. Father and Mother settled at Columbia City, Indiana, in 1855 in the woods, surrounded by the Indians, and when the principal complaints were malaria, typhoid fever, and dysentery. They lived to see that country cleared and divided into the most beautiful farms. Columbia City grew to be a very pretty hometown of nearly five thousand people.

I was educated in the splendid schools of Columbia City, graduating from high school in 1884. Several of my brothers and sisters had been sent to college, but the train upon the exchequer had been so great that it was not possible for me to receive this consideration. In the meantime, I looked upon it as my business to accumulate enough money by my own effort to go through medical college.

I entered the Detroit College of Medicine in 1887 and graduated in 1890. Before my graduation, I had received an internship in St. Mary's Hospital, Detroit, which was customary in those days. I remained in this hospital until September 1890, when I came to Philadelphia to take a postgraduate course in medicine at the Jefferson Medical College.²

While I was at Detroit I was very fortunate to meet 2nd Lieutenant George D. de Shon, 23rd Infantry, who graduated from West Point in 1886 and had been the roommate of John J. Pershing during his last year at the Point. He was stationed at Fort Wayne, Michigan, and was studying medicine at the Detroit College of Medicine while I was there. He told me frankly that he was studying medicine with the idea of resigning from the line of the Army to enter the Medical Corps of the Army.³ By arrangement we met in Philadelphia in September 1890. He was taking a post-graduate course at the University of Pennsylvania. We roomed together on South 33rd Street. It was through young de Shon that I had my first intimation of the Medical Corps of the Army. As I had always been fond of the military, I readily agreed with him to make special preparation to take the examination in the spring

¹ Circular 20 was an order for colonels and generals in the Medical Department to write a memoir of their service. Ireland was obeying his own directive.

² An internship was becoming more common, but Ireland's second post-graduate course was not customary.

³ De Shon did return to the Army, joining the Medical Corps, and died in June 1917.

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of 1891. I graduated from the Jefferson Medical College in the spring of 1891 and went before the Army Board at 39 Whitehall Street, New York, the week beginning April 13, 1891, and was the only successful candidate of ten taking the examination that week.

I was commissioned a first lieutenant in the Medical Corps to rank from May 4, 1891, and accepted my commission on May 15, 1891. At this period of the Army there was no Army medical school.⁴ The recently appointed medical officers were sent to the larger military posts where they might receive their instruction in the way the Medical Department was conducted.

I had never been at but one military post. One Sunday evening I visited Lieutenant de Shon at Fort Wayne, and during my short call the surgeon of the post, Major H.O. Perley, visited the de Shons. My first station was Jefferson Barracks, Missouri, where I arrived the morning of May 27, 1891. At that time, Jefferson Barracks was a recruiting station for cavalry and field artillery. The commanding officer there when I reported was Colonel Reuben Bernard, a product of the Civil War, a very fine soldier, and he became a very warm friend of mine. The senior surgeon was Major Daniel Caldwell, a bachelor more than sixty years old, a splendid physician and an elegant gentleman. He became a very warm personal friend of mine but at his age he was not giving very much time to the instruction of young medical officers. His assistant was Captain W.O. Owen.

My time was mostly occupied in assisting in the examination of recruits, tending such patients as sought my professional care, and learning my lessons in regard to military matters, mostly from observation of the line officers with whom I was associated. When I reported at Jefferson Barracks I was taken in by Lieutenant Parker W. West. The officers stationed there were a specially selected class and I made friends among them during my few months stay, which have been a source of pleasure to me all of my official career.

The 1st of October 1891, they thought I had completed my tour of training at Jefferson Barracks, and I was ordered to Fort Riley, Kansas, for duty. This post at that period was one of the largest in the United States, eight troops of cavalry and three batteries of light artillery. It was known as a brigade post. It was commanded by General J.W. Forsyth, a distinguished soldier and fine gentleman. His adjutant was 1st Lieutenant J.F. Bell. He and Mrs. Bell were nice to the rookie doctor. I was at their house very often, and the friendship started there has been a source of comfort to me during my entire career. Mrs. Bell is living in Washington now and I never let a week go by without seeing her, or if that is impossible, telephoning to ascertain if she is all right.

Major John van Rensselaer Hoff, the junior major in the Medical Corps, was the post surgeon. He was known throughout the Army as the military doctor. He met me at the station, took me in charge, and never ceased to have an interest in my welfare. Major Hoff was a man of tremendous energy, a distinguished-looking individual, a great organizer, and indefatigable in attention to details. A medical paper never left his office without being carefully inspected and checked to see that it was all right. The same applied to all of the medical returns and reports required even in that early date.

⁴ The Army Medical School began in 1893, teaching a course that was a mix of medical topics not covered in all medical schools (such as bacteriology and public health) and military topics that young doctors would need.

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I was assigned two beautiful rooms in the second story of the hospital, which was about three-quarters of a mile from the main post, and I had charge of the sick in the hospital. I was also made the Commanding Officer of the first company of instruction, Hospital Corps, ever organized in the United States Army.⁵ It was in its infancy when I arrived at Fort Riley. In fact, I learned that I had been sent there for duty because Colonel Charles R. Greenleaf, for some reason or other, thought I would do the work when he inspected Jefferson Barracks in the month of September 1891.

While Major Hoff was a very strict disciplinarian – you might say he was extreme in his views about discipline, rank, etc., – he and Mrs. Hoff were very kind to me. Mrs. Hoff is living in Washington now, and I see her very frequently. My experience at this post was most illuminating. The discipline did not in any way disturb me, for any discipline that I have ever encountered in the United States Army has been child's play as compared with the discipline that Martin Ireland had in his home. I was interested in Medical Department administration and the preparation of papers. Major Hoff took the greatest care in instructing me in this particular work. I have never ceased to be thankful to him for the careful training which he gave me in the duties of a medical officer.

The 7th Cavalry it will be remembered had just returned from the Wounded Knee campaign. Some of the officers injured in that fight (Godfrey and Garlington) were at the post. Major Hoff, after the fight, had demonstrated to these people the thoroughness of his ideas in regard to hospital corps drill and Medical Department preparedness, and had made a great impression on them. They looked upon him as an extraordinary officer, and while they smiled at some of his military performances they had a profound respect for him and his methods.

In April 1902, I was sent to Fort Yates, N.D., to temporary duty during the time the surgeon of that post, Major Chapin, was on sick leave. This was one of the frontier posts, sixty miles from a railroad (Mandan, N.D.). Needless to say, it was my first experience on the old frontier. We stopped our first night out at the Cannonball Ranch. I think I can say that the evening I spent there was the only time I was thoroughly homesick and discouraged. I did not know what it was all about and did not know what the end of my adventure in the military establishment would be. But that feeling was all dispelled when I arrived at Fort Yates the next morning and met the officers of that post.

Lieutenant Colonel William Drum was the Commanding Officer – one of the whitest-souled men I ever knew, and as his family was away practically all the time I was there he had me at his house very frequently. Fort Yates was fairly well built and had quite an interesting Indian history. Old Sitting Bull is buried in the cemetery there. The command consisted of four companies of the 12th Infantry and two troops of the 8th Cavalry. My stay there was very pleasant indeed, but an incident occurred on the 4th of July which I as a youngster thought would certainly ruin my career. They had had the usual 4th of July celebration, and in the evening we were having the troop athletics. During the tug-of-war the Commanding Officer, Colonel Drum, was seized with a very severe pain in his head. We took him to his quarters, and he died in a couple of hours from a cerebral hemorrhage. He was the senior lieutenant colonel in the infantry, and it struck me that a young medical officer losing his commanding officer in such a sudden way was just about through as far as his reputation as a medical officer in the Army was concerned.

⁵ The Hospital Corps was an organization of enlisted medical personnel, created in 1887. The Companies of Instruction were training organizations from which newly trained corpsmen would be sent to their units.

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I returned to my station at Fort Riley the early part of July to continue my work there until April 1893, when I was relieved from duty and sent as post surgeon to Fort Apache, Arizona. In the meantime, Major Hoff had been relieved from duty at Riley and sent to Fort Jay, New York Harbor. He in turn was relieved by Major Henry S. Terrill, M.C., who was the post surgeon when I left Fort Riley.

It may be of interest to say that in the fall of 1892 I accompanied the troops sent to Chicago to be present at the dedication of the World's Fair and appeared in the parade with the troops from Fort Riley.

I arrived at Fort Apache April 21, 1893. Fort Apache is 100 miles south of Holbrook, Arizona, where you leave the train. When I stepped off the train in Holbrook I found that town consisted of a general merchandise store and a corral. The driver, who had come for me from Fort Apache in a Dougherty wagon and six mules, was gloriously drunk. He had his mules hitched to the wagon and I told the man at the store that if he could turn them around with upsetting I would go with him. He did that, and before we got to Snow Flake, where we stopped the first night, he was entirely sober.

In getting to the post we went over the mountain, Cooley's Ranch, where you stayed the second night being 7600 feet high. The next morning we drove 24 miles to Fort Apache, and in doing so you drop just 2400 feet.

Fort Apache is situated in the center of the White Mountain Indian Reservation. It is a beautiful spot with a perfectly wonderful climate the year round. Major Adna R. Chafee, the Inspector General of the Department, was there on his annual inspection. The post consisted of four companies of the 11th Infantry and two troops of the 1st Cavalry. The Commanding Officer was Henry Carroll, a product of the Civil War, and a typical, pure paranoiac. He was a good disciplinarian but extremely suspicious of everybody. He would not accept an invitation to his neighbor's house for a meal if he could avoid it, for fear they would poison him. On several occasions this delusion got him into rather serious trouble.

Needless to say the duties of a medical officer at this post were not very exacting, as the sick report was very light, without epidemics of any kind. The post was a congenial one and all the officers and their families took their meals at Sing Lee's mess, as it was impossible to secure servants in this isolated post. We had wild turkey every Thursday and Sunday night. I did a great deal of riding and saw many of the beautiful spots in the vicinity of the post.

In the fall of 1893 I was fortunate enough to secure a leave, and went east to northern Indiana to claim as Mrs. Ireland Elizabeth Liggett, the splendid woman who has been my running mate ever since November 8, 1893. I look upon this event as the most fortunate thing that ever came into my life. At this period, Fort Apache was considered a great deal further from home than the Philippines and China at the present time. Before we left for our station we had passed our word to Mrs. Ireland's people that she should return home for a visit the next summer.

There were seven women at Fort Apache, and they had a perfectly splendid time. During the early summer of 1894 a Lieutenant Backus, who was on sick report at that post in an attempt to break him of his narcotic habit, established a camp

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up the north fork of the White River for the women of the post. They were there for something like ten days. During my stay at Apache I went into the field with troops for the first time. Second Lieutenant William C. River, recently Inspector General of the Army, was in charge of the troop of cavalry.

In August 1894, Mrs. Ireland returned to her home. Shortly afterwards I was ordered to temporary duty at Fort Logan, Colorado, while the surgeon there, Major de Loffre, visited his mother in Paris. During the three months I was at Fort Logan an order was issued relieving me from Fort Apache and assigning me to duty at Fort Stanton, New Mexico. The early part of November I returned to Fort Apache, packed up our belongings and started for Fort Stanton. I met Mrs. Ireland in Albuquerque on her return from the east. We left the Santa Fe [railroad] at a little town by the name of San Antonio, N.M., and started our three days' trip to Fort Stanton by Daugherty wagon and six mules – 120 miles from the railroad. Our first night was at the Mountain Ranch, a rather attractive place. A coyote ran through the yard just after our arrival. One of the girls around the house handed me a gun and much to my surprise, because I thought he was out of reach of the gun, I killed the coyote.

Fort Stanton was another beautiful spot, 6200 feet high, 35 miles from the Mescalero Indian Agency, and occupied by Troop B of the 1st Cavalry. Capt. Peter Bomus was commanding. Mrs. Bomus was there. His troop lieutenants were 1st Lt. J.F. Reynolds Landis and 2nd Lt. William Yates. Lieut. Landis was later replaced by 1st Lt. W.S. Wright.

Troop B of the 1st Cavalry had just arrived at that station from a four-year detail at Fort Myer, Virginia. Just as soon as they came into the high chilly altitude of Fort Stanton they began to come down with malaria, and for some little time most of the troop was under treatment for this trouble. But after they were cleaned up of this infection there was very little illness in the post, as Fort Stanton was considered one of the healthiest posts in the United States Army. During the last three months we were there before its abandonment we did not have a patient in the hospital.

Fort Stanton is located in Lincoln County, N.M., and we were there at the time of the so-called "Lincoln County War," a feud between the sheep and cattle men.⁶ I presume that in its time it was, from the outlaw standpoint, the worst section of the United States, and killing was going on all the time. The entire population was divided between the Dolans and the Murphys, and you had to belong to one of these parties. I was the only doctor in that part of the country. There was a good deal of sickness among the native Mexicans. Many of them came to the post to see me but I made many long trips away from the post to visit the poor people.⁷ I was the only white man in that part of the country who could go everywhere with safety. Sometimes I was stopped, particularly at night, but as soon as they found out that I was the post doctor there was nothing they would not do for me. It was fortunate for me that I did have this practice among the natives for there was practically no professional work to do on the post.

⁶ The Lincoln County War is usually dated to 1878-79. See Clayton D. Laurie and Ronald H. Cole, The Role of Federal Military Forces in domestic Disorders, 1877-1945, (Washington DC: US Army Center of Military History, 1997), 59-73.

⁷ Army doctors were allowed to see civilian patients if doing so did not interfere with their military duties, and could charge the patients as they saw fit. They had to charge the patients for any government-purchased medicines.

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Our child Paul was born at Fort Stanton on the 30th of August, 1895. While I was at this post I felt the necessity of taking out additional life insurance.⁸ The nearest doctor, who was colored, was at the Mescalero Agency, so two or three of us drove up one Saturday night, and this colored doctor examined me for a five thousand dollar policy in the Massachusetts Mutual, and we returned to the post the next day.

Fort Stanton had been slated for abandonment for several years, but the order for its abandonment was held up from time to time for various reasons. It was issued however in October, 1895, and we began at once to make arrangements for the disposition of the property. Most of the medical property was sold right at the post, and as we were so far from a railroad it brought in many instances prices far in excess of what the Medical Department had paid for it originally.

Incidentally, during my stay at Fort Stanton, George Curry, afterwards a national character as a rough rider, the Governor of Samar, the first Governor of New Mexico, and a member of Congress, was the Sheriff of Lincoln County. He was a great friend of mine.

Fort Stanton was finally abandoned January 16, 1896. Troop B of the 1st Cavalry marched overland. Mrs. Ireland and I with the five-month old boy started for the little town of San Antonio with a new driver. When we arrived at Nogales Hill, some thirty miles out, I asked the driver if he knew how to get down the very difficult trail. He allowed he did, but I allowed I was a safer driver of the six-mule team than he was, so I piloted the mules down this very difficult pass. The boy had an intestinal upset on the way overland, and we had stopped for a day at Albuquerque in his interest.

We arrived at Benecia Barracks, California, where I had been ordered, the morning of January 21, 1896, and were received by Major and Mrs. C.E. Munn. Major Munn was the surgeon of the post. Mrs. Munn is now Mrs. Harold Wellington Jones.

Benecia Barracks is about thirty miles east of San Francisco. The medical officers at that post took care of the personnel in the Ordnance Arsenal and the senior surgeon always lived in the Arsenal.⁹ The necessity for having two medical officers there was due to the fact that the junior one marched with the troops from the Presidio of San Francisco each May to guard the Yosemite and Sequoia National Parks.

There was nothing out of the ordinary in my service at Benecia except these two trips to the Parks in the summer of 1896 and 1897. I went to the Yosemite both years. P.F. Straub went with the troops to the Sequoia both years. The troops were used to guard the parks from the cattle and sheep men and from campers who might start fires by their carelessness. It was a very, very pleasant detail but rather monotonous. During the two years I was there, I saw a great deal of the Park and met a great many interesting people.

When I returned to my station in November 1897, I was notified that I would be sent to the Presidio of San Francisco for duty. The order was eventually issued and I reported to the Presidio for duty on January 21, 1898. The Presidio at that time was one the largest posts in the U.S. Army. We had infantry,

⁸ There was no government-provided life insurance for servicemembers at this point.

⁹ Benecia Arsenal was both a manufacturing center and storage center for Army supplies.

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cavalry, coast artillery and a light battery. General “Billy” Graham was in command of the post and Major Robert M. White was the surgeon. Major White was one of the accomplished officers of the Medical Corps of the Army, with polished manners. As I was alone with him at the Presidio from the time I reported in January until I left in April I found myself extremely busy in caring for the sick in hospital and doing the practice with the command which extended to old Fort Winfield Scott, where a great many of the families of the enlisted personnel were housed.

I remained at this very attractive place until April 19, 1898, when I departed for Chickamauga Park with Califf’s Light Battery. Captain Euclid B. Frick was on duty with Pott’s Light Battery. The two commands traveled together to Chickamauga Park. Our stay at the Park was of but short duration. We arrived one morning (April 27) and the next afternoon we were told that we were to move on to Port Tampa. We entrained late the second night and arrived at Port Tampa in due time (May 1) and were encamped in the sand there. Our stay in Chickamauga Park had been long enough to let us see the tremendous confusion that existed there at that time.

Of course we all expected measles, typhoid fever, malaria, and dysentery in the camps of the South. We had just learned how malaria was transmitted, but we knew practically nothing about the transmission of typhoid fever except that it was a water-borne disease. I remained with the Light Battery until June 1st 1898, when I was transferred to the Division Hospital being organized there and commanded by Major Louis A. LaGarde to accompany the 5th Army Corps to Cuba. We had a busy time in trying to get together the necessary equipment for the Division Hospital. We were I think fairly successful in these efforts.¹⁰

In the meantime, Captain J.M. Kennedy had arrived, and upon my recommendation had been placed in charge of the task to organize an ambulance company.¹¹ Kennedy knew nothing about this particular work but he went at it in his usual thorough manner, and in a comparatively short time had the nucleus of a good organization. Incidentally, this ambulance company did not accompany the 5th Army Corps but came later on the *Louisiana* and disembarked at Siboney the 2d or 3rd of July, and did splendid work in transporting the sick and wounded from the front to the base at Siboney.

The order was finally issued for the 5th Army Corps to embark for Cuba. The confusion of this embarkation is beyond my feeble power of description. Eventually (June 1st) the order came for the Division Hospital to load. I remember very distinctly that we moved our entire hospital three times the day of embarkation. Finally, we got down toward the dock and asked which ship we should take, and were told to go along and get on any ship where we could find the room. It did not take me very long to find that the old *Saratoga* had room enough for us, and we loaded our field hospital and personnel on that boat. Part of the 13th and 21st Infantry were on it. Colonel Chambers McKibbon was the senior officer.

After some delay, we went out in the stream on the 10th of June and thought we would sail at once. All sorts of orders were being received and we were eventually told not to sail until further orders and remained on the boats in the Bay until the morning of the 21st, when we sailed for Key West. We passed Key West late that night. I had never been to sea before. Although the sea was not rough the next morning I did not understand for a little while why I felt so queerly and could not

¹⁰ For more on military medicine during the Spanish-American War, see Mary C. Gillett, *The Army Medical Department 1865-1917*, (Washington, DC, 1995), chapter 6 and Vincent J. Cirillo, *Bullets and Bacilli: The Spanish-American War and Military Medicine* (New Brunswick, NJ: Rutgers University Press, 2003).

¹¹ The Army had no permanently organized field medical units, but organized field hospitals and ambulance companies when needed.

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get around. I learned that before I got to Santiago that I was one of the poor sailors of the U.S. Army. We were convoyed to the south of Cuba by the Navy, and the 5th Army Corps commenced to disembark at Siboney. Our ship belonged to Kent's Brigade, which was supposed to make a demonstration west of Moro Castle.

We remained down there until the morning of the 27th, when we were told to proceed east and disembark at Siboney. While we were bobbing up and down on the sea we saw a bombardment of Moro Castle by the Navy, which was most interesting but did no harm whatever. And incidentally the firing of the Spanish at the fleet during the bombardment was as poor as it possibly could be. Not a single shot hit one of our naval vessels, and most of them were wide of the mark.

The troops on the *Saratoga* disembarked early the morning of the 27th but there were no boats to take our hospital ashore. We started to land our supplies in rowboats, but Colonel Weston of the Commissary Department (and afterwards Major General Weston) had a tug removing commissary supplies from the *Saratoga*, and we persuaded him to let us place the remainder of our Divisional Hospital on this tug.

We landed our supplies and personnel through the surf on the beach at Siboney sometime before dark the 27th, and camped that night right there on the beach. The 33d and 34th Michigan Volunteers, with Major Charles Mancrede and Major Victor C. Vaughan, landed the same day.¹² I gave Major Mancrede my cot that night and slept on a litter and was pestered by mosquitos and sand crabs all night. There was no transportation on the beach to get our hospital on the cliff above, so the personnel started to move it by hand. Eventually a very accommodating major of the 34th Michigan Volunteers was persuaded to let his battalion give us a lift, and by night of the 28th the hospital was up on the high ground overlooking the sea, where we pitched it and did our work until it was dismantled late in August, 1898. In the meantime, the wounded from the fight of June 24th at Las Guasimas had been brought to Siboney and put in buildings there. Major Valery Havard and Captain Francis A. Winter were the medical officers in charge.¹³

As there was a prospect of a fight at the front very soon I was directed on the 29th of June to take over the sick in the buildings so that Major Havard and Captain Winter could go to the front and joint their commands. When I looked through the buildings with Major Havard I asked him if he were not afraid they would contract yellow fever in these buildings, and he said in his peculiar rising tone, "Oh yes."

As the ships unloaded in Siboney Bay the wounded in these buildings were put on board for return to the United States, and in a very short time all of them had been returned or become a part of the Divisional Hospital. I reported back to the hospital for duty on the 30th of June. In the meantime, a representative of the Post Office Department, Mr. Brewer, had taken possession of several rooms in one of the buildings, policed it very thoroughly and established himself to do business. He came down with yellow fever in a comparatively short time, and was removed to the yellow fever hospital and died.

¹² Vaughan was dean of the University of Michigan Medical School, took leave to join the Michigan Volunteer Infantry, served on the Typhoid Board with Walter Reed, and joined the Medical Reserve Corps in 1908.

¹³ Winter would go on to be Chief Surgeon of the Lines of Communication, AEF, July 1917-March 1918) in charge of all medical activities behind the front) and then Chief Surgeon of the AEF forces in Britain (May-October 1918). After the war, Ireland appointed him director of the Army Medical Library and then commandant of the Army Medical School until Winter's retirement in 1922.

During the couple of days I was away from the Divisional Hospital, the tents had been pitched and things were prepared to receive the wounded from the fight which we knew was imminent. I remember very distinctly that on the night of the 30th of June I equipped Major Mancrede with the necessary dressings, etc., to proceed early the next morning with his command, the 33d and 34th Michigan Infantry, to Aquedores Bridge, which it was the duty of this brigade to attack on the morning of July 1st. It will be remembered that they made their attack, had quite a few casualties, and Major Mancrede returned to Siboney early the afternoon of July 1st and brought with him the first wounded who were admitted to our hospital. I assisted him in the first operation performed on a wounded patient. The slightly wounded from the front, those who were able to walk, began to arrive at the hospital the afternoon of July 1st.¹⁴ It looked rather peculiar to see these people, without practically any disability, sitting around the hospital. Needless to say, they were the first battle casualties I had ever seen, except the few I had observed on the hospital ship *Olivette* the afternoon of June 26th.

As night came on more and more wounded arrived, mostly in Army wagons drawn by four mules. We had a fairly efficient surgical personnel and all of us worked the entire night. Of course, we were not prepared to take care of the wounded as we would have liked to have been. Fortunately, the experiments that LaGarde had made in 1892 and 1893 with the new rifle prepared us as to what we might expect with the jacketed bullet.¹⁵ The great mass of the wounds were very simple and needed but one dressing. The fact of it is many of the wounded were sent directly to the transport for their trip home with the dressings that had been put on at the front, and I was told by Captain Munson that when he inspected these cases on the transport the great number of them were clean and had healed by first intention.

The first bone wound that I saw was in Lieut. [John R.] Thomas [Jr.] (now Colonel Thomas) of the Rough Riders, who had been shot through the tibia at a little over 500 feet. No surgeon could have made a prettier wound with a bone drill. The fact of it is he was suffering from no disability whatever. On the other hand, many of the wounds were from ricocheted bullets or from bullets fired at an explosive distance, and were very severe.

Just as soon as the simpler wounds were dressed they were sent to the transports for transportation back home. The hospital ship *Relief* (Major George W. Torney commanding) cast anchor in the bay the afternoon of July 7th. Those on the ship were a little fearful of yellow fever, but we eventually transferred the great mass of our very severely wounded to the *Relief*. This process of disposing of our wounded as rapidly as possible continued until the morning of July 11th when at noon that day the hospital at Siboney was without a patient.

A short time after noon I noticed Victor C. Vaughan coming down the railroad dressed in a helmet, a suit of pajamas, and fair-weather boots. He remarked to me that during the tropical shower that had just passed over us he had been washed out of his place just above our hospital, where he was encamped with his troops, and as he was not feeling very well he thought he would come down and get a bed with us. I told him to go right down the line and go into any hospital tent of his selection, as there was not a patient in the whole hospital. He did not show

¹⁴ In the absence of ambulances to evacuate the seriously wounded, the ambulatory lightly wounded would reach the hospital first.

¹⁵ LaGarde had studied the effects of various bullets on the body, and had established that the high temperatures of a bullet being fired did not render it sterile.

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up the next morning for breakfast. I went down to the hospital ward and asked him why he was not up. He said he was not feeling very well and when I saw Dr. Guiteras, our yellow fever expert, would I please ask him to see him.¹⁶ Needless to say Dr. Guiteras saw his very promptly, and within an hour Major Vaughan was on his way to the yellow fever hospital, where he had a very severe attack of yellow fever, with black vomit.

While we were still on our transports, Dr. Juan W. Guiteras, a Cuban, and probably the best informed man in the United States on yellow fever, went ashore and after consultation with his Cuban friends assured us there was no yellow fever in that part of Cuba. It was a terrible shock to him when yellow fever developed at once among our troops. On the 2nd of July I was asked to see Burr McIntosh, the writer and actor, who for several days had been ashore with the Rough Riders. He gave me a good history of malaria. I prescribed for him and went back to the operating room. On the 3rd I was asked to see him again, and was convinced at once that he was suffering from yellow fever, and asked Dr. Guiteras to see him. This was the first case of yellow fever I had ever seen. Mr. McIntosh went to the yellow fever hospital and after a stormy time was returned convalescent and went away on the newspaper representatives' yacht.

As soon as we knew we were in a yellow fever epidemic, a camp was established about two miles up the railroad, where all our yellow fever patients were sent as rapidly as they were diagnosed by Dr. Guiteras. It was there that I arrived at the dream of my childhood, when I thought the man who controlled a railroad train was the most important person in the world, for the hospital train was turned over to me.

After the 23rd of July the hospital at Siboney became a hospital for fever, and as we had so much yellow fever the authorities at Santiago would not take our war convalescents away from us. In other words, we not only had to take care of the sick but provided in some way for the convalescents that were accumulating on us every day. The doctors on duty at Siboney were victims of the disease like everyone else, so that in the early part of August I was the only non-immune doctor who had not had yellow fever. Some of the doctors like Laurence and LaGarde and Parker, who considered themselves immune, came down with a sharp attack.

Along about the 10th or 12th of August very strong recommendations were made to General Shafter by Major William C. Gorgas that the keeping of the convalescents at Siboney instead of sending them north was costing lives every day. As a result of these representations an order was issued that 375 convalescent patients would be sent north on the steamship *Catania* on the 15th of August. I was placed in charge of them, and as I was a poor sailor, Contract Surgeon L.P. Williamson was sent along to look out for the sick enroute.¹⁷ We proceeded to Santiago on the morning of the 15th and placed our patients on the *Catania*, but for one reason or another, we were not able to sail for Montauk Point until August 17th. We had quite a stormy passage and lost 9 patients enroute, including Major McCreary of the Medical Corps, who died August 22nd. They were all buried at sea. But we landed at Montauk Point on August 28th, 1898.

General Nelson Miles with the command he intended to take with him for the Porto Rican campaign anchored off Siboney on July 11th. His Chief Surgeon, Col. Charles R. Greenleaf, came ashore that afternoon. As soon as he saw our conditions at Siboney he wrote an order in General Miles' name for the destruction of the old

¹⁶ Dr. Juan Guiteras was a yellow fever expert who had moved from Cuba to the United States and worked with both the Navy and Army. He later worked with Walter Reed and the Yellow Fever Commission.

¹⁷ Contract Surgeons were civilian employees who still had some disciplinary authority. They had less than a commissioned officer, which may have been why Ireland was sent even though he would be seasick.

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buildings there. Captain Powell C. Fauntleroy, Medical Corps, was entrusted with the destruction of these buildings by fire, and he carried out his mission in a most thorough manner on July 11th and 12th.

When the *Relief* dropped anchor Major W.C. Gorgas, Medical Corps, came ashore.¹⁸ He was immune as a result of an attack of yellow fever in the 1878 epidemic at Brownsville, Texas. He was placed in charge of the yellow fever hospital and remained there until the hospital at Siboney was converted into a fever hospital, when he came to Siboney and took LaGarde's place, who was really disabled on account of the attack of yellow fever he had had.

In looking back over the work at Siboney it seems to me that the Medical Department made a very good showing when we consider our entire lack of preparation and our primitive knowledge of preventive medicine as compared with what we knew when we went into the World War. Moreover the conditions under which the Army was landed in Cuba must be taken into consideration. If we were sent down there today with our present knowledge, and had to live under the conditions we lived under then, our men would become infected with malaria, typhoid fever, and yellow fever.

We were placed in a detention camp at Montauk Point for three days. I was then transferred to the general hospital commanded by Colonel William H. Forwood, one of the officers of the Civil War, who knew exactly what ought to be done in an emergency. He had established and was running a splendid hospital. I remained there until October 10th, when but few patients were left in the hospital and I availed myself of a month's leave of absence.

After spending my leave of absence I received orders to report to the Surgeon General for instructions. This I did on November 10th, and after some discussion was assigned for Fort Wayne, Michigan. I had escaped the Santiago campaign without any sickness whatever, but during the time I was at my home in northern Indiana on leave I developed an acute catarrhal jaundice. General Sternberg remarked when I reported to him that several of his officers, including Colonel John van Rensselaer Hoff, who had been in to see him, were suffering from the same trouble.

On my way to join my station at Fort Wayne I was seized with a very persistent presentiment that I ought to make a little by-trip to visit my home in Indiana where Mrs. Ireland and the boy were staying and where we had spent our month's leave of absence. Upon my arrival I found that the boy was ill. As soon as morning came and I could examine him it was perfectly evident that he was suffering from scarlet fever.

Upon arrival at Fort Wayne, I found the post occupied by the headquarters and eight companies of the 7th Infantry. There were only a sufficient number of barracks there to properly accommodate four companies of Infantry. This regiment had been in the Santiago campaign and the entire personnel was thoroughly infected with malaria. The hospital was small. We took the patients suffering with malaria in the hospital, got them over their immediate severe symptoms by heroic treatment and then sent them back to their company so that others who needed hospitalization could be admitted.¹⁹ All of the men were required to come to the hospital each morning for large doses of quinine. There was very little illness at Fort Wayne,

¹⁸ Gorgas was an experienced Army medical officer who would go on to oversee sanitation and public health work in Cuba and the Panama Canal Zone. His good work there would see him selected as Surgeon General of the Army, and Ireland's immediate predecessor. They were not close.

¹⁹ At the time, the sick were usually kept as inpatients during convalescence rather than discharged as soon as the acute phase of a sickness was over.

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except malaria, and nothing of interest to note during the time I was there.

The middle of August 1899, I received a telegram from the Surgeon General's Office asking if I would accept appointment as major [and] surgeon of one of the volunteer regiments then being organized for duty in the Philippines. I replied in the affirmative and joined the 45th Infantry at Fort Snelling, Minnesota, the morning of August 27, 1899. Colonel [Joseph H.] Dorst of the cavalry, who had been General Joe Wheeler's adjutant general in the Santiago campaign, was the colonel of the regiment, colonel James Parker was the lieutenant colonel, and D.A. Frederick was one of the majors. Colonel Dorst was a very good commanding officer to work with.

Our camp on the Fort Snelling reservation was a model. From the experience of the previous summer and winter, we had learnt how to keep typhoid fever out of our camps. The men from the 45th Infantry were recruited from the northern states. They were kept in training until the 22nd of October, 1899, when we entrained for San Francisco on our way to the Philippines. We had one case only of typhoid fever. This man had enlisted in Peoria, Illinois, and we ascertained that he had had the fever before he was admitted to the camp. He was immediately sent to the post hospital and really never entered the 45th Infantry camp.

We remained in the big camp on the Presidio of San Francisco reservation until the morning of November 15th when we were put aboard the ships *Senator* and *Ben Moore* for Manila. There was such a terrific storm at sea on that day that they would not let us go out, but we did sail early on the morning of November 16th. We were ten days getting to Honolulu and were in rough seas for nine of the days. I got down to the dining room for my first meal the night before we docked at Honolulu. I was so weak from lack of food that it was not possible for me to get around Honolulu the first day.

We docked Sunday morning and remained until late Thursday evening when we put to sea and ate our Thanksgiving dinner. While in Honolulu, we found out that there had been a few cases of bubonic plague in the city. The health officer took this occasion to burn down a part of the Chinese section, much to the future welfare and improvement of Honolulu.

The trip from Honolulu to Manila was with a smooth sea all the way. We anchored in Manila Bay late the evening of the 22nd of December. The next day we were taken ashore and were broken in as most green volunteer regiments were, by being placed on a line extending from Caloocan, La Loma Church, and Deposito. We remained here until the afternoon of January 3rd 1900, when the regiment was assembled at Caloocan and on the morning of January 4th went by train and by marching to old Camp Dewey, where we joined General Bates' brigade for the Cavite campaign.²⁰

Of course the stay with green troops on the firing line at Caloocan and La Loma Church (my headquarters were in the La Loma Church) was very interesting. There was a tremendous amount of night firing at imaginary objects, and incidentally a couple of youngsters who were homesick and discouraged with their future prospects managed to get their finger over the barrel of an exploding gun.

²⁰ An overview of the Philippine-American War is in [American Military History, Volume I, The United States Army and the Forging of a Nation, 1775-1917](#), (Washington, DC: US Army Center of Military History, 2009), 360-66.

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The officers of the 45th Infantry had the laugh on the officers of the 42nd Infantry, which regiment relieved us when we assembled at Caloocan the afternoon of January 3rd. The 42nd had just disembarked and this was their first night on the front line. We of the 45th Infantry always spoke of it as the second battle of Caloocan, for they kept up a continuous fire at imaginary objects the entire night. At one time during the night, the excited guard became so hysterical that he had to be taken off.

We remained at Camp Dewey until the morning of January 8th when we started on our march for Imus. We caught up with the 38th Infantry (Major James D. Glennan the surgeon) at Bacoor, where we were supposed to have a hospital that would take care of our wounded from the Cavite campaign. Major Ira C. Brown was supposed to be in command of the hospital. Noisy Jim Glennan and I went over to inspect the hospital to see what arrangements had been made for us, and I never saw so much confusion in my life. Poor Lieutenant Cheney, who had been shot at five o'clock that morning, was dying from hemorrhage. I did my best to save his life by the injection of a salt solution, but they had no facilities for that simple procedure.²¹ Glennan and I immediately sent a telegram to the Chief Surgeon that the arrangements were inadequate and that help should be sent at once.

That night about seven o'clock after we had camped at Imus, that fine field soldier Major Henry P. Birmingham sent word around to us to meet him in conference at the Imus church. He had arrived in compliance with the orders issued by the Chief Surgeon of the Philippine Division, Colonel C.R. Greenleaf, as a result of the telegram Glennan and I had sent from Bacoor. He notified us at the conference that the hospital ship *Relief* would drop anchor early the next morning to act as a base hospital for the Cavite campaign. The *Relief* would have on board an ample stock of supplies. I think that was as quick action as I have ever seen in converting a wholly inefficient, inadequate organization into a very efficient going machine.

I spent the night at Imus in the quarters of Captain Cowls of the 4th Infantry. We were entertained during the entire evening by the Filipinos shooting through the house. The next morning the 45th and 38th Infantry marched to Dasmariñas, which we occupied without casualties. Later that evening the 45th Infantry was directed to march to Quintana, a distance of ten miles. We promptly took the wrong trail and went into camp in a cornfield at one o'clock that night and the next morning were in plain sight of the church tower at Dasmariñas, which we had left at seven o'clock the night before. We arrived at Quintana that afternoon and made our headquarters there for a week or ten days, when orders were issued for the 45th Infantry to assemble at Naic on the mainland, just west of Corregidor.

During our stay there we spent our time in scouting. As we were returning to camp from one of these scouts on the morning of January 19, 1900, our command of four companies and a troop of the 11th Cavalry were attacked in Magallanes Canyon. Fortunately, we had no casualties in this fight. I was suffering from a severe attack of dengue fever at that time. When the fighting began, I went into the Canyon at once. When I found there were no casualties I laid down behind a rock and after the fight was over the adjutant of the regiment, Captain Patrick, came along and woke me up. I can therefore truly say that I went to sleep in the first fight that I was in with my regiment in the Philippine Islands.

²¹ Ireland is apparently referring to using normal saline as a volume replacement; transfusion of whole blood was technically possible but exceptionally rare at this period.

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The 17th of February we were loaded on the transport *Tartar* for transfer to San Miguel Bay on the Pacific coast, to occupy the Camarines. We were piloted around through the straits of San Bernardino and then up the Pacific Ocean to San Miguel Bay by the Navy, who apparently knew something about the soundings in that part of the ocean. We anchored in San Miguel Bay during the night of the 18th of February. The Navy promised to disembark at high tide the next morning the battalion of the 45th Infantry which I accompanied and which was to march in to Nueva Cáceres.

I went ashore with Colonel Parker in the last rowboat. The tide had receded. We had to take off all of our clothes and wade out through the mud, which was up to our armpits. In the meantime the Bicol²² were shooting at us with guns and arrows. When I arrived at the shore an enlisted man came up to me and scraped the mud off me with his bayonet, just as lather is scraped off a racehorse after his tryout. With that process of cleansing, I got into my clothes and started for Calabanga carrying four days' rations and the surgeons' equipment. The Filipinos fired on us all the way, and poor Bellis was shot in the right groin with a tumbling 45-caliber bullet. It severed his iliac artery and he bled to death on the spot.

The night at Calabanga was a noisy one as the Filipinos fired into the town the entire night, but without doing us any great harm except to keep everybody awake. The next day we started for Nueva Cáceres. We were lost on the trail and wound up by sleeping in a rice field until daylight. We then marched into Nueva Cáceres on the morning of February 22nd. The first thing I saw was a Britisher dressed in white coming out of a house which flew the British flag. It turned out to be Mr. Urquhart, the British Consul at Nueva Cáceres. He invited Colonel Parker and his staff to dinner. I thought maybe we would have something out of the ordinary to eat, but when we sat down to table he apologized for giving us cornbeef hash, saying that it had been difficult to get supplies in Nueva Cáceres during the last few months.

We remained in Nueva Cáceres until nine o'clock the night of the 24th when Colonel Dorst and eight companies of his regiment started on the march for Iriga, twenty-four miles away. We failed to arrive that night. The next morning we had quite a sharp fight with the natives and entered Iriga at noon where we established our headquarters for the remaining period I was with the 45th Infantry.

On the trip to Iriga we had with us John McCutcheon, writer and cartoonist for the *Chicago Herald*, and Oscar K. Davis, the war correspondent, both polished gentlemen.

From our headquarters at Iriga I accompanied many scouting parties, the most important being the march to Legaspi to relieve the 47th Infantry which was practically besieged in that town. We made this march just at the time old Mayon, a volcano with the most crater in the world, was in eruption. It was during this eruption that one side of this perfect crater was blown off. Many peculiar incidents occurred on this march to Legaspi and return which will remain fresh in my memory all the days of my life.

On the day's march from Guinobatan to Legaspi we were attacked by the natives on four different occasions. When I returned to Iriga from this march I found an order relieving me from duty with the 45th and directing me to proceed to

²² The 45th Infantry was operating in Bicol Province.

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Manila and assume charge of the medical supply depot there. I reported in Manila the latter part of April 1900, and remained on duty at the supply depot until March 25, 1902, when we embarked on the transport *Grant* for home. I severed my connection with the 45th Infantry with a great deal of regret. It was a splendid organization and I had formed many warm personal friendships in the regiment. Quite a few of them are officers in the United States Army today.

The stay in Manila was a very hectic one. Medical supplies had not been shipped from the United States rapidly enough to meet the demands of the army, which was occupying new territory every day and establishing new posts. A great many supplies had to be bought in Manila, Hongkong, and some in Japan, I believe, but eventually medical supplies were shipped in great abundance from the United States.²³

A cablegram came from the War Department in December 1901, to the effect that every volunteer sent home for discharge would be replaced by a regular. But this policy was changed almost overnight, and in a very short time we found ourselves down from an army of about 70,000 to an army of 25,000, and this reduction of the army and the number of posts went on very rapidly. As a result the Medical Department had a surplus of supplies which the then Surgeon General could not understand. But an officer of the Inspector General's Department (Colonel Joseph P. Sanger) reported after he had looked into the matter that the army in the Philippines had been most fortunate in having as wise and as experienced an officer as Colonel Chas. R. Greenleaf for the Chief Surgeon.

During my time in Manila the supply depot was greatly enlarged, and the supplies which had been scattered in different storehouses of the supply depot grounds were assembled in one place and stored in an orderly manner. Mrs. Ireland and Paul joined me in Manila in November 1900. We established ourselves in very comfortable quarters in Calle Nozaleta, where we lived in a very comfortable manner if you could forget the mosquitoes and the bugs which hovered around the lights at night.

Early in 1902, cholera broke out in the Philippine Islands, and quite a severe epidemic resulted. Before leaving Manila I asked that my departure be delayed as I thought it would be appropriate that I should remain in the Islands during this epidemic. But the Chief Surgeon replied that owing to the reduction of the command in the islands and the great number of volunteer officers present my application to remain could not be approved. In fact at the time I left there was a surplus of medical officers in Manila.

I had permission to stop at Japan for twenty days on the return trip, but owing to the prevalence of cholera in the Philippines, Japan asked that our transport should not stop at their ports. As a result, I returned to the United States exactly the same way I went to the Philippines two and a half years before, sailing from Manila March 31, 1902. After leaving Manila Bay we went north in the China Sea to the northern point of Luzon, turned directly east to Honolulu and from there to San Francisco, where we arrived April 27, 1902. I found an order there directing me to proceed to St. Louis to assume the duties of Attending Surgeon and Examiner of Recruits in that city. After a month's leave, I reported in St. Louis the latter part of May and assumed my duties.

I was then one the senior captains of the [Medical] Corps. The principal object in sending me to St. Louis was to comply with the policy of the Surgeon General's Office to give the senior captains an opportunity in a city to prepare themselves

²³ Ireland was simultaneously disbursing officer of the Public Civil Fund, but apparently that duty did not take much of his time.

for examination for promotion. After examining the recruits, which did not take up a great part of the day, I spent the rest of my time in study and in clinics in St. Louis. I spent most of my time with Dr. Harvey Muhn, one of the outstanding surgeons in St. Louis who had as his young assistant in those days Dr. Malcom Clopton.

Within a month of the time I reported in the city I received an order to report to the President of the Examining Board in Washington, upon his call, for my examination for promotion to the grade of major. I was not asked to report to Washington under this order until the 8th of September, 1903, the day after Gen. O'Reilly was sworn in as Surgeon General. I had met General O'Reilly at San Francisco when I returned from the Philippines in April 1902, as he was then the Chief Surgeon of that Department. I had no acquaintance with him.

When I paid my respects to General O'Reilly on coming to Washington in September he asked me to see him again after I had completed my examination. This I did on the Saturday of that week. He then told me that he intended to request orders for me to come to his office for duty. I learned while I was in Washington that General O'Reilly intended to relieve all the older officers from duty in his office and replace them with young officers of the [Medical] Corps. I returned to my home immediately after passing the examination and made my preparations to come to Washington. In my conversation with General O'Reilly I had told him I had no desire to come to Washington for duty, that in my opinion I would do better at a military post, but he said he would take his chances that I might be successful as an office man.

I reported for duty in the Surgeon General's Office the early part of October 1902, and I found that Major J.R. Kean and Major Walter D. McCaw had already reported for duty.²⁴ I was assigned to the duties which Colonel John van Rensselaer Hoff had been carrying on, which had to do with the Hospital Corps. At that time there was no personnel division in the office. The work was all new to me and it took me some time to find my way around and learn what it was all about.

I think the afternoon before Thanksgiving Day of 1902 was rather an important one in the history of General O'Reilly's administration. The War Department had declared this afternoon a holiday, but General O'Reilly told his assistants that they must remain with him to assist in making assignments of medical officers, a vast number of which had accumulated on his desk. Under the policy then in existence this very important duty was performed by the Surgeon General in consultation with the Chief Clerk, and as a result many customs had grown up which, to my mind, were inimical to the interests of our commissioned personnel.

That afternoon was one of the most distressing that I had ever experienced. Commissioned officers were moved here or there without any regard to the time they had been at their present stations or the work they were engaged in. The interests of the officers were not consulted in any way. The fact of it is the Chief Clerk made the assignment, and the assignment was governed by correspondence that he had had with officers throughout the [Medical] Corps.

On my way home that night Major Kean asked me what I thought of the afternoon's work, and I told him very frankly that I thought it was perfectly terrible, that the conditions under which the future of medical officers was determined were the worst that could possibly be invented. After some reflection

²⁴ On Kean, see his autobiographical sketch, also written in response to Circular 20, and online at <http://history.amedd.army.mil/memoirs/JeffersonRandolphKean.pdf>.

Major Kean remarked that we must have a personnel division in the office, and that I would undoubtedly be placed in charge of it. It was also arranged that one of the important things in establishing the division would be to divest the Chief Clerk of any authority whatever in the assignment of officers. In a very short time the office order for the establishment of the Personnel Division was issued, and I was placed in charge.

It is not at all necessary for me to recount the changes that occurred under this new order of things. Suffice it to say that officers and senior non-commissioned officers were assigned to duty as the interests of the service demanded and as the qualifications of the officer indicated; that favoritism was abolished entirely; that a foreign service roster was established at once, and officers were sent to foreign service by this roster, notifications being sent out months in advance when they might expect an order for foreign service. The good effect of such a procedure was manifest at once, and was approved by all the members of the [Medical] Corps except those who for years had been receiving special assignments on account of their personal relations with the Chief Clerk.²⁵ Incidentally, the Chief Clerk in question was a very high-toned efficient man, and this poor administration had sprung up by forcing on him duties which he was not qualified and should not have been expected to perform.

I have no intention of reviewing the work done in General O'Reilly's administration, which in my opinion gave the Medical Department a standing which it had never had before.²⁶ General O'Reilly was an officer of rare attainments and of great vision, and his entire administration was devoted to developing a medical organization that would give a good account of itself in time of emergency. In the first place, the report of the Dodge Commission, which was appointed as a result of the failure of the Army in the Spanish American War, was thoroughly studied, and General O'Reilly started out to comply with all of the wise conclusions of the Dodge Commission with reference to the Medical Corps. Before he went on the retired list January 14, 1909, he had put into operation, either through legislation or administrative action, practically every one of the recommendations of that commission. He put through after years of work, in a bill approved April 23, 1908, the reorganization of the Medical Department, which I think made possible to a very considerable extent the good account we were able to give of ourselves in the World War.

It will be remembered that our reorganization bill of 1908 contained a provision for a Medical Reserve Corps. It is strange now to think of the opposition this paragraph received from the line of the Army. It was distinctly said on many occasions that "those damned doctors were just working up some additional schemes to further their own interests," and when the first board of reserve officers was convened in January, 1909, which recommended that immunization against typhoid fever be begun in the Army, comments were even made in Congress that some very deep scheme must have been under way that prominent members of the profession who were in the Reserve Corps should be brought here by the War Department for consultation for just one day.²⁷

The General Staff came into operation on August 15, 1903, and we were successful in establishing relations with that organization, in spite of the fact that the great mass of officers assigned to General Staff work had not the slightest conception of the duties of a General Staff officer.

²⁵ Perhaps it was popular initially, but keeping officers in the SGO off the foreign-service roster led to complaints that went as far as the Chief of Staff of the Army, who ordered SGO staff put on the foreign-service roster. That order would put Ireland top of the list to go overseas. See Mary C. Gillett, The Army Medical Department 1865-1917, (Washington, DC, 1995), 318.

²⁶ See Gillett, Army Medical Department 1865-1917, chapter 12.

²⁷ Eminent civilian physicians accepted Medical Reserve Corps commissions, and were activated for one day to give their imprimatur to mandatory typhoid vaccination, which proved extremely successful.

In looking back over General O'Reilly's administration, I cannot think of a single policy established by him that did not prove to be far-reaching for the future welfare of the [Medical] Corps. The relations between all the officers on duty in the Surgeon General's Office was a most friendly one, and General O'Reilly looked upon us as his personal family. He was always referred to among his assistants as the Little Chief.

I was in charge of the Personnel Division until the 1st of October, 1906. In August of that year I had become hungry to get back into professional work, and had asked the Surgeon General to allow me to go to the Letterman General Hospital on temporary duty until December 1st. He agreed to this and I went there in August. But the 1st of October our troops went to Cuba for the second intervention, and the Secretary of War took Maj. J.R. Kean, the Executive Officer and in charge of the Property Division, with him as Chief Sanitary Officer.

I received a peculiar telegram at the Letterman General Hospital – "Come arunning. Troops have been ordered to Cuba – O'Reilly." When I arrived in Washington, a very rainy morning on October 4th, the Little Chief was there at the train to meet me and told me he wanted me to become the Executive Officer of the office and take charge of Major Kean's desk during his absence. So, until the troops came out of Cuba in the spring of 1909, I occupied that position. It is still a great inspiration to review my association with the splendid men General O'Reilly and General Torney had in their office – McCaw, Lynch, Straub, Winter, Darnall, Fred Russell, Mason, Havard, LaGarde, and Heizman.²⁸

General O'Reilly went on the retired list for age January 14, 1909, and was succeeded by Colonel George H. Torney. It was thought by a great many that Col. Kean should have been made Surgeon General, but the final decision was that he was young enough to wait, as he was then one of the senior majors. General Torney decided that he would keep the same personnel in his office that General O'Reilly had. This meant that some of us had been around the War Department for a good many years, and some disgruntled officers called attention to that fact. Finally, in 1911 it was decided that the Surgeon General would have to give up his longtime assistants, and I was slated to go to foreign service in 1912.

I had become a lieutenant colonel of the Medical Corps on May 1, 1911. I was relieved from duty in the Surgeon General's Office May 12, 1912, after a service of nearly ten years. I took a four-months leave, which I spent at the Letterman General Hospital, before sailing for the Philippines on the 4th of August, 1912. As I drove down Massachusetts Avenue to the depot with Mrs. Ireland on the 11th of May – it was a beautiful day and Washington never looked prettier – I remarked that I hoped I would never see Washington again, that I wanted to go back to the Army and spend the rest of my life in a professional career.

The service at the Letterman General Hospital was a very pleasant one. I lived in the hospital. During the time I was there I got in touch with professional work again and went to the Philippines in an enthusiastic state of mind thinking that I would for the rest of my life do what I loved more than anything else. We arrived in the Philippines on September 1st, and I reported for duty as Surgeon at Fort William McKinley September 4, 1912, and entered on three years of the most pleasant duty I have had in the Army.

²⁸ Walter McCaw, Charles Lynch, Paul Straub, Francis Winter, Carl Darnall, Frederick F. Russell, Charles Mason, Valery Havard, Louis LaGarde, and Charles Heizman.

I think it is fair to say that the medical service at this big post had not been well administered for several years. I was fortunate in securing the confidence of the commanding officer of that brigade post, Colonel George K. Hunter, at an early date. In a very short time, we had a good hospital running and a medical service that was a credit to the Medical Corps. That post was divided into garrisons – infantry, artillery, cavalry, and medical – and it was but a very short time until the Commanding Officer was suggesting to the other garrison commanders that they had better go down to the medical garrison and find out how to keep a place in order.

I eventually secured a perfectly splendid professional staff of young men. We not only gave a good medical service but we had a fine time together in our recreation, riding horseback, playing tennis, or in the bowling alleys. Some of the sanitary defects that had been allowed to remain from the occupation of that big post were corrected. The sick report was immeasurably reduced, and I left the post on the 15th of June, 1915, with the feeling that I had done a piece of work during the three years there which was a real credit to the Medical Corps.

On my return Mrs. Ireland and I spent a month in Japan, with a short side trip to Korea. We landed in San Francisco the latter part of August 1915. I found an order waiting for me to proceed to San Antonio as the Sanitary Advisor of that Department.²⁹ I had three months leave and attended the Association of Military Surgeons which met in Washington in September, 1915. Colonel J.R. Kean, then on duty with the American Red Cross, was the President of the Association that year.

When I visited the Surgeon General's Office Colonel Noble asked me if I would rather be the Surgeon at Fort Sam Houston than the Sanitary Advisor of the Department. I promptly told him I would, and I joined that station in October 1915. The post had been without a senior surgeon for some time, and the acting surgeon, Major Thomason, had been a sick man. I found plenty to do for the first few months in rearranging things at the hospital.

It was perfectly evident that sooner or later we were going to have trouble on the border and I at once asked that I be given money to construct temporary buildings for any emergency that might occur.³⁰ In this respect I was only successful in a measure. I did not get the money to construct a dining room and kitchen. This was most fortunate for the Medical Department, for in June 1916, the mobilization of the National Guard on the border was ordered overnight. I was on my way back to my post from attending the meeting of the American Medical Association at Detroit when this mobilization was announced in the Sunday paper. The next morning I was at the Chief Surgeon's Office demanding money to start temporary wards, which I received. The work was started in an incredibly short time, and the temporary construction that was built before we stopped gave us 968 beds. At one time, we had 716 patients in the hospital, which in those days appeared to be a very large general hospital.

My service at Fort Sam Houston was very very interesting. Thousands of National Guard troops were camped on the reservation, and it gave me a great insight into the handling of troops in the field. This splendid service continued until May 1917. I was made a medical member of the board of which General Charles Morton was President, to select camp sites in Texas for the National Army.³¹ This board was on a trip visiting Austin, Waco, Dallas, and McAlester, Oklahoma. We returned to

²⁹ It is not clear if Ireland was to be a roving sanitary inspector or the departmental surgeon, a staff officer to the departmental commander.

³⁰ Mexico had a civil war. In June 1916 one of the contenders, Francisco "Pancho" Villa, would attack Columbus, NM, causing President Woodrow Wilson to send Brigadier General John Pershing and a 'Punitive Expedition' chasing after Villa. The hospital at Fort Sam Houston would be the base hospital for the expedition.

³¹ The National Army was the force mobilized in WWI that was separate from the Regular Army and the National Guard.

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Fort Sam Houston the night of May 17th. When I went to the house things were in disorder as though the people were moving out, and the colored servant remarked to me that she was sorry I was going to Washington. Mrs. Ireland had gone to the wrong [railroad] depot in San Antonio to meet me. I found out very shortly that a telegram was been at the post for two days directing me to proceed at once to Washington and report to the Adjutant General.

With the usual hunch that has gotten me through life I understood at once what the telegram meant, in spite of the fact that it had not been published in any way that we were going to send troops to France. I spent the next day in turning my hospital over to Major Raymond F. Metcalfe and left San Antonio the morning of May 19th for Washington. It seemed to me that the train ran slower and slower and that I would never get there. I had the fear all the time that the two days delay in transmitting to me the telegram to report to the Adjutant General would result in my arriving in Washington after General Pershing and his staff had left.

I arrived in Washington the morning of May 21st, and when I reported to the Adjutant General I was told to report to General Pershing, who had an office in the War Department. General Pershing told me at once that he had asked for me as his Chief Surgeon, and that Birmingham, who was the Acting Surgeon General during the absence of General Gorgas, was enthusiastic that I should be assigned to that duty. But, as soon as General Gorgas returned, he made several trips to see General Pershing, insisting that I was too junior an officer to receive such a responsible assignment, and moreover Colonel Alfred E. Bradley, M.C., was an observer with the British forces in Europe and was my senior.

Rather than start with a misunderstanding with one of the principal bureau chiefs of the War Department, General Pershing acceded to General Gorgas' plan but said he wanted me to go along as he had use for me. Needless to say, I was only too glad to go in any capacity. I spent a hectic week in Washington, about as hectic a week as I ever spent in my life, trying to get an understanding with the Surgeon General's Office with reference to personnel and supplies, the necessary force to start an office, etc.

Secret orders were passed to us to meet the Commander in Chief at Governors Island the morning of May 28th, where we were to embark for France. I left Washington the night of the 27th with Major Henry Beeuwkes, one of the medical officers assigned to General Pershing's staff, and we met in New York Major James R. Mount and Major George P. Peed, the two other officers assigned to me. We were also met there by Master Sergeant Robert A. Dickson and Corporal Aylor, Medical Department, who were on duty with me at Fort Sam Houston and for whom I had asked to be assigned to me.

I never saw it rain harder than it rained in New York on May 28th. We were taken on a tug about noon, and after long maneuvering were placed on the *Baltic* about four o'clock, and put to sea that evening. The *Baltic* was a 22,000 ton boat and it was loaded to the waterline with supplies. Comparatively speaking there were few passengers. There was nothing exciting about the trip. There were no submarine alarms. The last three days before landing at Liverpool the sea was as smooth as it could possibly be.

We went into the harbor at Liverpool about ten o'clock the night of the 8th and disembarked the next day. General Pershing was met by a guard of honor. After the necessary ceremonies we were put on a special train and proceeded to

London, where we arrived about five o'clock in the afternoon. We were put up at the Savoy Hotel. That night Lord Brooke gave a dinner to the officers of General Pershing's party. We met very many interesting officers and learned a good deal about what was going on in France, but not a single soul intimated to us that things were in a bad way over there and that the French and British had been whipped to a standstill. The fact of it is two or three days before the British had blown up some very important positions occupied by the Germans, and had accomplished one of the greatest surprises since the beginning of the war.³² Their talk was all about that.

Colonel A.E. Bradley met us at the depot and became General Pershing's principal [medical] adviser. Saturday, June 9th, was spent in getting some uniforms and a few things necessary to take with us to France, and on Sunday, June 10th, I proceeded to Paris with the so-called "Port Board." This board consisted of Taylor of the Engineers, McCarthy and Moore, Q.M.C., Drum of the Infantry, Porges of the [Quartermaster Corps] National Army, and Ireland. We were supposed to visit the different ports in France to ascertain where we could land our troops and the necessary dock construction that would have to take place to facilitate the work.

We were royally received at Boulogne by the French. We arrived in Paris early the morning of June 11th and were met by the Military Commission headed by Colonel James Logan. Colonel S.H. Wadhams, M.C., was a member of this commission. He had been in France for several months as a military observer, and spoke French well, had gained the entire confidence of the French Sanitary Service, and was to become in my opinion one of the most valuable, if not the most valuable, medical officers in the American Expeditionary Force.³³ We spent June 11th in making official calls and making our arrangements to proceed with our duties the next morning.

When we called upon our Minister, Mr. Sharp, we were told in very plain language that we had not come too soon and that maybe America had entered the war too late, as the French had been bled white. I remember what a shock that was to me, as the newspapers had told us all the time the fine spirit of the French Army. Colonel Wadhams told us in detail of the terrible misfortune of General Nivelle's April drive and how they had mutinied in many sections of the French Army.³⁴

We started on our mission the next morning, visiting Nantes, Savenay, St. Nazaire, La Rochelle, Bordeaux, and La Pallice. I was particularly struck with the primitive conditions that existed at all of these ports as compared with the facilities at our own ports. We returned to Paris on Monday, June 18th, and found that General Pershing had arrived the afternoon of June 13th and had established his headquarters on Rue Constantine, where the Chief Surgeon found small and inadequate offices even for our small force. Later on, the Chief Surgeon's Office was moved to Rue St. Anne, where we continued our work until the 1st of September when we moved our permanent headquarters to Chaumont.³⁵

It is needless for me to repeat here that as far as our organization and equipment were concerned we started at zero. With this statement it can be well understood the hectic time we had in completing an organization that would fit in with the Army organization, which made it possible for us to have 192,000 patients in our hospitals when the armistice was signed seventeen months later, and which were being taken care of in a most acceptable way by the cream of the profession of America that had been sent over to France. The boards that were convened, the visits that were made to see what the French were doing, the efforts to secure

³² The British had exploded around one million pounds of high explosive under German positions on Messines Ridge, a prelude to capturing the ridge on 7 June 1917.

³³ Wadhams would hold several key medical staff positions in the AEF and during WWII he would be selected from retirement to head an official investigation of the Army Medical Department.

³⁴ General Robert Nivelle had promised a great breakthrough and when that failed the French troops were deeply disheartened, many units refusing to attack.

³⁵ For an overview of the medical support to the AEF, see Johnathan H. Jaffin, Medical Support for the American Expeditionary Forces in France during the First World War, online at <http://history.amedd.army.mil/booksdocs/wwi/Jaffin/default.htm>. The multi-volume official history is online at <http://collections.nlm.nih.gov/catalog.nlm:nlmuid-14120390R-mvset>.

hospital trains, which we finally procured from the English, and the ever-present problem of developing our hospitalization plan.

Along in the early part of 1918 it became evident that most of the departments were to be sent away from Chaumont. On the 21st of March all the services left for Tours except the Inspector General and the Adjutant General. We established ourselves there very rapidly in a French barrack. The order sending us down there said that the chiefs of services and departments should organize their offices so that they could spend most of the time in the field at the front.

On the first of April I received a note from the Chief of Staff that General Pershing was recommending me for advancement to the grade of brigadier general when the next list of officers for advancement was cabled to the United States. I felt dreadfully that I should be selected for advancement before Kean, McCaw, and Glennan, who were right there in the office with me, and I kept this letter from General [James G.] Harbord a secret for a considerable length of time. In April 1918, General Pershing directed that all general officers in France should be examined physically to determine whether they were able to carry on physically. As a result of this examination General Bradley was found physically disqualified. Colonel Wadhams telephoned to me that the Commander in Chief intended to make me Chief Surgeon. I immediately telephoned to General [George van H.] Moseley asking if he would present my plea to the Commander in Chief, through General Harbord, that Colonel McCaw be made Chief Surgeon and let me be his assistant.

Just the last days of April I was directed by the Commander in Chief to go to London to meet Mr. Henry P. Davidson and Mr. J.H. Perkins of the Red Cross to develop a plan for hospitalizing our troops over there. I received a cable while there announcing my advancement to the grade of brigadier general and my detail as Chief Surgeon of the A.E.F.

It is impossible for me to go into detail of the work in France during the time I remained as Chief Surgeon. That would be writing the history of the Medical Department, which has already been published, for I was mixed up directly or indirectly with all of the work. I want to say, however, that no man in any position ever worked with such a splendid loyal lot of officers as I worked with, and it is needless for me to say that they are the people who put over the tremendous job we accomplished in France. Moreover, no Medical Department of any army in the history of the world ever had the support of a commander in chief that we had in France. General Pershing had been a general officer for many years, and he had spent practically all of his service as a general officer in the field. He knew better than anyone else, from personal experience, the value of an efficient Medical Department and it is fair to say that no proposition was ever put up to him for the welfare of the Medical Department that was not accepted and approved at once.³⁶

My numerous interviews with General Pershing will always remain as bright spots in my life. I have often thought that some of his statements and some of his actions should have been made of record by a talking movie. In my first interview after I returned from London I remarked to him that he had made me his Chief Surgeon against my advice, and that he would have to stand by the Medical Department if he wanted success. I can see him yet shaking his long finger at me and saying that no living man stood between him and me, and that his door was always open whenever I had anything of importance to discuss relating to the welfare of the sick.

The way

³⁶ There were certainly arguments the Medical Department lost, so perhaps Ireland is being politic or perhaps they did not get to Pershing.

he handled business can be well illustrated by my last interview with him before the St. Mihiel drive. We were fairly well prepared except for transportation. We had 30 sections of the U.S. Army Ambulance Service in Italy doing nothing. They were there simply for the morale their presence produced with the Italians. On my visit to G.H.Q. I told Colonel Wadhams that we should have 15 of those at once. He wished me success in my interview with the Commander in Chief but said that Moseley had already attempted it and been turned down. I presented my case to General Pershing and he told me to have his aide, Major Boyd, send the cable at once. The 15 sections, comprising more than 300 ambulances, were sent immediately. They arrived at the front the day before the St. Mihiel drive and were invaluable to us in that fight and in the Meuse Argonne.

I was advanced to the grade of major general in August, 1918, and about that time rumors indicated that I might be made Surgeon General to succeed General Gorgas. I paid no attention to these rumors but went about my work. On the 8th of September, the Secretary of War landed at Brest with a party including General Gorgas.³⁷ He had one of General Pershing's aides, Colonel Collins, telegraph me to meet him at General Pershing's house in Paris early the next morning and before I saw General Gorgas.

I had never seen Mr. Baker but he told me that the President was going to make me Surgeon General upon the retirement of General Gorgas the 1st of October, but that he was not announcing it at the present time as that was one of the perquisites of the President. I told Mr. Baker very frankly that I did not care to be Surgeon General, that I now occupied the most responsible position that any medical officer had ever occupied in being the Chief Surgeon of an army of two million men in the field, with a Medical Department that was apparently working satisfactorily. Moreover, I told him that in my opinion the present Surgeon General's Office was rotten and that I would be an embarrassment to him every day.³⁸ He simply remarked after these statements that he hoped the President would not change his mind during his absence in France. I had several very interesting interviews with Mr. Baker before he left France.

I saw General Gorgas later on the 9th of September and found that he was far advanced in old age, as Mr. Baker had told me I would find him. The fact of it is I think it is fair to say that General Gorgas did not know what was going on. The only real subject he could discuss during my visit with him was the fact that he wanted to continue as Surgeon General during the war.³⁹

I was present at the St. Mihiel drive and went to the front again to see the Meuse Argonne drive start. General Kean was with me on the first trip. I started for the front again from Paris on the 8th of October with Colonel McCaw. We visited the evacuation hospitals around Chalons (3 and 5), later [base hospital] #110 and finally stayed all night at [base hospital] 114. We spent the entire next day at the front. We had our lunch with the Chief Surgeon of the 32nd Division, Colonel Gilbert Seaman, at his field hospital. We had apple pie (think of the suffering at the front). A short time after we left this hospital to continue our journey a shell exploded nearby which killed and wounded several men.

³⁷ Gorgas had testified to Congress in a way that annoyed Secretary of War Newton Baker, who apparently resolved not to reappoint him Surgeon General, but simultaneously would neither remove him nor get a replacement announced. Gorgas had been sent on an inspection of the front.

³⁸ Ireland had a low opinion of Major General Robert Noble, the Executive Officer at the Surgeon General's Office, and the main day-to-day administrator of the Army Medical Department.

³⁹ Gorgas had been about to retire in January 1917, but with a war on the horizon had been retained as Surgeon General.

We arrived at Souilly that evening (October 7th) in the rain, and I received there a copy of the order to General Pershing saying I had been appointed Surgeon General and to send me to the United States at once. The next morning I had a long interview with General Pershing extending over an hour or an hour and a half. When I left him it was the understanding that I was to come back in March if another drive was put on at that time, but during the conversation General Pershing told me that he was “afraid this damn thing would be over in the next ten days.”

Saying goodbye to General Pershing was most distressing to me, and I think to him. He told me to notify Colonel McCaw that he would be announced as Chief Surgeon as soon as I left. We proceeded to Chaumont and remained there for the night, when I said goodbye to some of my associates, and then to Tours when we arrived late the night of the 9th. I immediately made inquiry about transportation to the United States. I had several hectic days at my headquarters but finally left for Paris the morning of October 13th. There I met General Benjamin Alvord who was returning to the United States and we went to London together where we arrived at noon on the 14th of October.⁴⁰ I learned there that I would not be able to sail until October 21st.

General Kean was accompanying me back to the United States. We were busy in London during the week we were there looking after many matters of interest to the Medical Department. We finally sailed from Southampton for New York on the *Aquitania* the afternoon of October 21st. Just as we were about to sail a Captain Henderson of the U.S. Navy came aboard. He said he had just come from the Information Bureau in London that morning, that in his opinion the war was practically over and that the British Intelligence had assured him that every German submarine was on the way home just as fast as they could go. He gave it as his opinion that it was perfectly safe for us to proceed to New York without convoy. This all proved to be true. We landed in New York at noon October 28th, just exactly 17 months almost to the hour after we had left for France.

In the meantime, I had picked up a severe attack of grippé.⁴¹ General Kean was disabled with the same trouble. I had cabled Mrs. Ireland from London to go to the Kennedys in New York. They were all at the dock to meet me. I was very busy the 28th and until the afternoon of the 29th getting information about the base port and about the Medical Department. I found that Kennedy was doing a tremendous job at the base port.

We started for Washington on the Congressional Limited [train] the afternoon of the 29th arriving in Washington about nine o'clock. Darnall with a lot of my friends, including William, met me. I stopped by the War Department to tell Peter Harris, the Adjutant General, that I was here. The next morning, October 30th, I went to my office and was sworn in as Surgeon General.

As stated above I had brought General Kean home to be my executive officer, but in my first interview with Mr. Baker he said unkind things about General Kean and said he did not want him as my executive officer.⁴² The way I replied to the Secretary of War, as I looked at it afterward, was about as rough a talk as any Army officer ever gave the Secretary of War. Instead of telling me to get out of the room, he was nice enough to say that if I thought that way about General Kean he would withhold his judgment until he had looked into the matter further. About a week afterwards, he told me in the nicest possible way that he did believe I would do better without

⁴⁰ Alvord had been Adjutant General of the AEF but was sent back to the US because of illness.

⁴¹ Grippé is another term for influenza; this is a reference to the 1918-19 influenza pandemic.

⁴² See Kean's autobiography.

Kean, that in all probability I would have to return to France in the spring and that he would not feel at ease with Kean in charge of my office. I told him that settled it, that I did not want anyone around my office in whom he did not have confidence, but my statements to him had just been to let me know that his estimate of General Kean and mine were not the same.

In making Colonel C.R. Darnall my Executive Officer I think I did one of the most fortunate acts of my tour as Surgeon General of the Army.

I have no intention whatever of reviewing my long service as Surgeon General.⁴³ I am not content to do that as my view might not be the view of other people. But I think it is fair to say that the development of hospitalization to take care of the sick and wounded returning from France by the thousands was fully as difficult as similar work had been in France, and the tearing down of this tremendous organization which we had built up was a much more difficult problem than building it up. We had to work with that so-called "post-war psychology," whatever that is, which made many of the best men in our country difficult to handle. But taking it all together the support of the Medical Department by the medical profession of this country was superb, and the job the profession put over during the World War will be a monument to us for all time to come. Tremendously interesting problems were developing all the time. We had our ups and downs but we had more ups than downs.

Although the Secretary of War had not been so friendly to me at first as I thought he might have been, Mr. Baker finally became one of the best friends I have, and I look upon him as such today. I think he is a great man, one of the great men of this country, and I think that his first impressions of Kean and myself were received from March and the Gorgas crowd. General [Peyton] March was a brilliant man but a most difficult Chief of Staff to do business with.⁴⁴ I accomplished a great deal of my work in the Medical Department until he left through my contacts with Secretary Baker.

I was fortunate in establishing friendly relations with Congress, and I believe it is fair to say that I maintained that confidence as long as I remained Surgeon General. I also believe it is fair to say that I have had the entire support of the medical profession of this country, which I think the Medical Department has retained to this day. I think the Medical Department had the confidence of the General Staff and all succeeding Secretaries of War (Mr. Weeks, Mr. Davis, and Mr. Hurley) except one. I had no contacts with Secretary Good. I knew him only. I do not think he had any interest whatever in the United States Army, and if it was destined that he should die, I think it was most fortunate for the Army that he died early in his career as Secretary of War.

I know that all of the Chiefs of Staff after General March were my warm personal friends and had confidence in what the Medical Department was doing, except General [Charles P.] Summerall. I believe General Summerall was very friendly to us, but he was a peculiar man, with his destructive tendencies in organization. I think it is fair to say that he was a psychopathic individual, with paranoid tendencies, and when anybody opposed him in what he wanted to do he never could be exactly friendly to them afterwards. He was a great believer that no bureau chief should serve over four years, and when he learned that the Secretary of War was reappointing me on

⁴³ See Mary Gillett, The Army Medical Department 1917-1941 (Washington, DC: US Army Center of Military History, 2009), chapters 14 and 15.

⁴⁴ See Edward Coffman, The Hilt of the Sword: The Career of Peyton C. March (Madison, WI: University of Wisconsin Press, 1966).

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October 30, 1930, his feelings were dreadfully hurt. It will be remembered that I was appointed Surgeon General of the Army by President Wilson, reappointed Surgeon General in October, 1922, by President Harding, reappointed October, 1926, by President Coolidge, and reappointed October, 1930, by President Hoover. That is a long period for one person to be Surgeon General. I think it is probably correct to say that it is too long, but I know that my reappointment as Surgeon General in 1930 met with the approval of all the good substantial officers of the [Medical] Corps. They wanted it.⁴⁵

No officer every worked with an organization that has been as loyal as my corps has been to me. I believe the [Medical] Corps has made great progress since the war. It has been wonderful to see this development, and I am proud of it. I regret more than I can tell the things that should have been done and that we have failed to do during my administration, and I hope coming generations will just believe that I attempted to do the best I knew how.

⁴⁵ Ireland's reappointment in 1930 may have been a courtesy to him, as by law he had to retire at age 64, in May 1931.