

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

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

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

When we were told that we would move as above referred

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

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

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

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

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

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

With the final transfer to Little Baguio on May 13th, most of us turned our backs, with mixed emotions, on hospital No. 2 forever. Many of us felt that the best work of our lives had been done here. That this small group in less than 3½ months had built and operated hospital facilities for 16,000 patients is we believe a truly remarkable record. And a total of only 303 deaths is also an enviable record. Probably 1/3 of those were dead upon arrival at the hospital. Here I desire to express my appreciation of the harmony and good feeling which existed among the hospital personnel. I have never seen the equal of it. The doctors, nurses and enlisted men all worked to accomplish as much as possible for those who needed our professional care. I heard not a single complaint about long hours and I cannot recall a single instance where there was any personal grievances among the officers nurses or enlisted men. Chaplains Dawson and Talbot administered to the spiritual needs of our people in a most satisfactory way. They were busy at all times helping some one.

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

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

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

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

On May 26, 1942 we were ordered to move. Each officer was allowed a barracks bag and ~~17~~ foot locker. In addition a dental chest and a foot locker filled with surgical instruments and some medicine, especially quinine were also loaded. Many fine typewriters, much clothing, shoes, tools, etc., were left behind. (All hospital records had been left at No. 2 hospital, with a large quantity of medical supplies.) We loaded in trucks along with several patients from hospital No. 1 and left Bataan. We arrived at Bilbid prison about 10:00 PM May 26th where we remained until May 30th.

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

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

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

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

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

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