CHAPTER 5

MEDICAL SUPPORT AT THE BATTLE OF CHICKAMAUZA

THE BATTLE OF CHICKAMAUZA

After crossing the Tennessee River, and believing that Bragg was retreating toward Rome or Atlanta, Rosecrans sent his Army of the Cumberland in headlong pursuit of the Confederates. The line of march south for the three corps was, in the main, dictated by the need to cross five parallel mountain ranges. The available passes through the ranges forced the Union Army to advance along three routes with over 50 road-miles between the north and south axes. The danger of splitting his Army became apparent to Rosecrans as a result of the attacks on Negley's and Baird's divisions in McLemore's Cove. Late on 11 September the Union commander began directing the consolidation of his corps in the vicinity of the Lee and Gordon's Mill. These movements were completed by 17 September with the Army forming a general line from Pond Spring north to Lee and Gordon's Mill. 1

From available intelligence, observations, and speculation Rosecrans realized that Bragg planned to march north and place his forces between Chattanooga and the Army
of the Cumberland. What he did not know was that Bragg had ordered his commanders to cross the Chickamauga Creek and wheel left in order to roll up Rosecrans's left flank.  

On the morning of 18 September, Union forces began moving down Chickamauga Creek, to the northeast, in order to protect the Rossville to La Fayette road. These movements were intended to place George Thomas’s XIV Corps on the left around the Kelly Farm, Thomas Crittenden’s XXI Corps in the center between XIV Corps and the Lee and Gordon’s Mill, and Alexander McCook’s XX Corps on the right at the Mill and in reserve. Bragg, meanwhile, was moving his forces northward
along the east bank of the creek. His plan was to cross the
creek and position his Army between Chattanooga and the
Union’s left flank.

The battlefield was generally quiet as the armies
maneuvered for position on the 18th. Fighting, though, did
break out at Reed’s Bridge, protected by Robert Minty’s
cavalry, and at Alexander’s Bridge, covered by John Wilder’s
brigade of mounted infantry. Bushrod Johnson’s Division
crossed Reed’s Bridge around 4:00 p.m. and advanced to
within 800 yards of the Viniard House before putting his
command to ground for the night. William Walker’s Corps
was driven away from Alexander’s Bridge and crossed the
Chickamauga later that evening at Lambert’s (also known as
Byram’s) Ford. These units camped on the ground they held
following their crossings.

While the Confederates rested the Federals marched.
After marching throughout the night and into the next
morning, 19 September, the lead elements of Thomas’s XIV
Corps had reached the Kelly Farm by sunrise. The Battle of
Chickamauga began in earnest about 7:30 a.m. that Friday
morning when Third Division of XIV Corps ran into the
elements of Nathan Forrest’s Cavalry that had crossed the
creek during the previous night.

The battle raged for the remainder of the 19th and
all of Sunday, the 20th. At about 11:00 a.m. on Sunday
Bragg's left wing, under the command of James Longstreet, advanced and broke through the Union lines at the Brotherton House. Several of Rosecrans's divisions broke under the assault and were routed from the battlefield. Rosecrans, Crittenden, McCook, and the majority of their staffs were also carried away from the field. Many Federal regiments, however, regrouped on Snodgrass Hill, behind Thomas's forces which had not broken and were still on line.

Although the Union right had been defeated, the center and left continued to hold. For the remainder of the day the Confederate units attacked Thomas along his front and flanks. To his advantage, Thomas had the bulk of his
forces behind breastworks or atop the rugged terrain of Snodgrass Hill. As a result, the remaining Union forces were able to hold their ground. Gordon Granger's Reserve Corps arrived by 1:00 p.m. from McAfee's Church at Rossville bringing much needed ammunition and an infantry division to continue the fight. General Thomas retired from the battlefield that night and consolidated the Army along Missionary Ridge around Rossville. From 9:00 p.m. of the following day to 7:00 a.m. Tuesday, 21 September, these forces conducted a withdrawal to a defensive line before Chattanooga. This move ended the Battle of Chickamauga.

UNION MEDICAL SUPPORT AT CHICKAMAUGA

As the battle developed the Army of the Cumberland's medical department went about its mission of coordinating and providing medical support for the wounded. No better summary of this support is found than that provided by Dr. Konrak Sollheim, regimental surgeon, 9th Ohio of Third Division, XIV Corps. 10

'The battle of the 19th was still young, but our regiment had already suffered numerous dead and wounded. I was brigade physician. Under me were a half-dozen physicians and fifteen orderlies in a field hospital, and perhaps as many at the front, to hunt up the wounded, administer first-aid, and so forth. The hospital was about two-and-a-half miles from the battlefield, in a church, a magazine, and a cooper's shop.

All day countless ambulances arrived loaded with wounded. At 11:00 p.m. those buildings were overfilled. The scene was indescribable . . . .

We could not start amputating until the morning of the 20th, after initial bandages had been applied, and after bullets and bits of clothing had at last been removed from wounds--in short, only after we had done what was critical to minimal care for the many injured and their manifold needs . . . . We were soon under artillery bombardment. Then an order arrived from the chief physician. I was to take all the severely wounded with me in ambulances to Rossville . . . . The rest of the wounded, those not badly hurt, were to walk there.

Too late! The battle already threatened the hospital . . . . Enemy infantry stormed at us, and the word was, Save yourself if you can! Chaos. Ambulances took the lead, some empty, others loaded with patients. Physicians followed afoot and on horseback . . . . Why should the enemy be at all concerned about our injuries, when he had suffered so many of his own?'

Fig. 6. A Surgeon's Observations of the Battle.

The Union Army's medical support began on Friday, 18 September, while units were still marching to positions
for the upcoming battle. Crittenden's XXI Corps was already located at Lee and Gordon's Mill while XIV and XX Corps were on the march to consolidate at that point. Realizing that a battle would break out shortly, William Blair, chief surgeon of First Division, XXI Corps, set to work organizing his division hospital at a site he chose west of the Mill at Crawfish Spring. 11 This was the only established hospital on the 18th. As a result, it received the wounded coming out of the fighting around both Reed's and Alexander's Bridges. Blair reported that 15 wounded soldiers arrived late in the evening from Wilder's Brigade and 15 of Minty's cavalrmen arrived at about nightfall. 12 It appears that the medical officers at both bridges sent their wounded to their rear, where hospitals would normally be expected to be found.

Indeed, on the 18th the divisions were still moving north with their supply and ambulance trains in trail behind them. At this point medical director Perin, now realizing that a general engagement along the Chickamauga Creek was imminent, began directing his corps surgeons to place and establish their division hospitals. 13 Having kept an eye to the topography Perin was able to establish several facts. First, the Army was separated from Chattanooga's general hospitals by Missionary Ridge. Therefore, evacuating patients to the city would require field hospitals to be located in the vicinity of the gaps through the ridge. Second, the springs on the south side of Missionary Ridge
were suffering from an unusually dry period in the region. This meant that the division hospitals would have to be placed at the few running springs available south of the ridge. The only alternatives would have been to locate the hospitals north of the gaps in the ridge, along the Chattanooga Creek, or at the few springs. Perin, after discussing the options with Rosecrans, chose to have the hospitals placed at Crawfish Spring.  

Map 11. Crawfish Spring.

Critics of Union medical support at Chickamauga seem to have chosen Perin's Crawfish Spring decision as the basis for most of what they believe went wrong in that support.  

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The location, they state, left the hospitals exposed along the Army's right flank, was not in line with the route between the battlefield and Chattanooga, and limited and extended escape routes to the roads leading to McFarland's Gap. Though all of these criticisms are accurate, they are also incomplete. Also of importance was the location of Crawfish Spring as it pertained to this particular medical and tactical situation. Medically, the spring offered at least one advantage for the location of hospitals--water.

Civil War medicine was heavily dependent on water as a provision and a treatment. Many wounded soldiers could only swallow liquids. To meet this need required that water be available so hospital personnel could prepare soup, coffee, and tea. As a treatment, water was needed to clean, and then dress, the wound. A typical question on a surgeon's examination board of the period was "How do you treat gunshot wounds?" The acceptable answer was to "apply cold water dressings, after controlling hemorrhage and removing foreign bodies." 17

Unfortunately, the area south of Missionary Ridge was lacking in sufficient water supplies in September 1863. Assistant Secretary of War Charles Dana reported that except for Chattanooga and Chickamauga Creeks there were "no other places near here where an army can find water." 18 Crittenden wrote twice on 12 September that the only water in the region was that available from the Chickamauga. 19
Crawfish Spring flowed directly into the creek and provided "a large and excellent supply of water." 20

As important as a need for water, the tactical situation also provided a rationale for placing the hospitals at Crawfish Spring. Specifically, the battle of the 19th was fought, in contemporary terms, as a meeting engagement with Rosecrans's Union forces, still on the move, meeting the Confederates at an unexpected time and place in an attack from the march. 21 In this situation, and with the divisions moving northward, the hospital supply and ambulance trains had little opportunity to continue the march once the forces deployed into battle lines on the morning of the 19th. Moreover, hospitals had to be established quickly for the reception and treatment of any wounded. Though these hospitals would not be located between Chattanooga and the front units, they would, at least, be operational.

Presented with this scenario, Perin seemed to have scant choice but to locate his hospitals where they were, following the line of march. The division's medical assets of XXI Corps were already in the vicinity of Lee and Gordon's Mill, having reached there starting on the 11th. 22 The remaining division surgeons then passed the spring as their divisions followed the march route. When they did Perin and his assistant, Dallas Bache, directed them to stop, choose a site, and open their hospitals. 23 Thus, as...
the battle began on 19 September, seven of the ten division hospitals were located in the vicinity of Crawfish Spring. Given the northerly line of march, this was the Army's rear and a reasonable location for the hospitals.

Map 12. Union Field Hospitals, 19/20 September 1863.
Three division hospitals moved farther to the north and set up to the west of the divisions as they formed into an east facing line of battle. These hospitals belonged to the First and Third Divisions of XIV Corps and Second Division of XX Corps, the first three divisions in the Army's line of march. The official reports do not explain the reasoning behind the positioning of the hospitals. One can speculate, however, that these divisions, and their supply and medical trains, passed Crawfish Spring before Perin chose it as a consolidated site for hospitals.

Locations for the two hospitals belonging to XIV Corps are clearly reported. Surgeon Marks, chief of the First Division, XIV Corps hospital, followed his division's march throughout the night. Early on the morning of 19 September he became aware of the upcoming fight and began to look for a location for his hospital. He chose the Dyer house for the "fine spring of water and quite a number of buildings in which the wounded could be made comfortable; also plenty of straw in the vicinity." Moody Tollman, surgeon of the Third Division, XIV Corps, also followed his division during the night. The next morning, under the guidance of General Thomas, Tollman established his hospital at the Cloud House. This location had "good springs, a church, and several houses." It was also on the main road to Rossville and Chattanooga.
The location of the third hospital, that of Second Division, XX Corps, is not specifically discussed in the official reports. Indirect evidence, and a comparison of the chief surgeon's report to the reports of Union and Confederate commanders, places the hospital southeast of the Mullis House, probably at the edge of the Mullis Field. 27

Regardless of their location the division hospitals remained the second opportunity for care. Wounded soldiers were still first treated by a medical officer in support of their regiment. As the regimental surgeon of the 101st Indiana wrote: "I was at once stationed in a small ravine immediately in the rear of the Brigade, with orders to care temporarily for the wounded, put them in ambulances, and send them to the Field Hospital." 28

Evacuation to the hospitals also followed standard procedures with "ambulances and litter bearers hurrying in from the lines with the wounded." 28 Ambulances, as with the 36th Illinois, trailed closely behind their units until the forces deployed into combat. Then the ambulances would take up a position and the litter bearers, in many cases the regimental musicians, would follow the men into battle. 28

Despite evacuation procedures developed through the actions of previous battles and campaigns, moving wounded soldiers was hampered by the topography of the Chickamauga Valley. The ground of the battlefield was largely broken and rolling while as much as two-thirds of the area was
thick with woods and heavy underbrush. In this terrain, one wounded soldier walked about 110 yards before falling exhausted and being helped further until a litter bearer was found.

Eventually, this soldier and many other wounded troops made their way to the division hospitals. The seven hospitals found in the vicinity of Crawfish Spring treated most of Saturday's wounded. The three XXI Corps hospitals, alone, reported having 1,100 patients of various divisions and corps at the end of the day. Surgeon Tollman, at the Cloud House, stated that his hospital treated nearly one thousand wounded on Saturday. Estimates of the total number of patients treated on the 19th range from less than 2,000, according to Assistant Secretary Dana, to the more realistic 4,500, as reported by Perin. By any estimate it was clear that "the surgeons [had] their hands fully occupied." 

In such a situation, where the number of wounded greatly outstripped the capabilities of the medical system, the physicians were forced to choose which patients were to be treated first, if at all. This need to triage patients was performed in the hospitals time and again. One soldier was (obviously incorrectly) told that any treatment used on him "was useless, as I would never see morning . . . ." As the fighting of the 19th came to a close all ten of the hospitals remained at their original sites. This
included The Second and Fourth Division hospitals, XIV Corps, which had tried to move during the day to stay within reasonable supporting distance of their troops. Exhausted, the combat soldiers slept on their arms in the battle-lines as shown at Map 9, page 70. Members of the medical department, however, continued throughout the night with their task of finding and evacuating the wounded. 37

In the center of the line Alva Greist spent the evening listening to "thousands of wounded in our front crying in anguish and pain, some for death to relieve them, others for water." 38 The wounded, in addition to their injuries, had to also contend with an unseasonably cold night as a heavy frost fell to the ground. 39 In response, after dark fell on the battlefield, litter bearers were sent out to find, collect, treat, and evacuate the Federal Army's wounded. John Gordon remembered that "in every direction were dimly burning tapers, carried by nurses and relief corps searching for the wounded." 40

Not all of the searching, however, went smoothly. In reports from the center and right flank of Rosecrans's line Confederate troops were accused of firing on the litter bearers. This sniping even occurred before the Fourth Division, XIV Corps, where a truce, recognizing the litter bearers, had been arranged. 41

These actions ended the medical support of the 19th. During this day the medical priority was to evacuate and
provide treatment to the soldiers of the Army from hospitals initially positioned behind their divisions. This priority would shift the next day to abandoning the battlefield while recovering as many of the patients and as much of the medical equipment and supplies as possible.

The Union right broke just before noon on the 20th resulting in the immediate isolation of the Crawfish Spring hospitals from the rest of the Army. The hospitals were not, however, unprotected. At dark on Saturday, Army commander Rosecrans tasked Robert Mitchell, commanding the Cavalry Corps, to provide support and protection to the Crawfish Spring hospitals. By 2:00 p.m. on Sunday, however, Alonzo Phelps, chief surgeon of XXI Corps and the senior medical officer at Crawfish Spring, realized that his location had been isolated from the Army. He also saw that the cavalry was being pushed back from positions between the hospitals and the Chickamauga.

At this point Phelps issued the necessary orders to evacuate the Spring as a hospital site. Priority for space on the ambulances and supply wagons went to the wounded, even though the surgeons did not want to leave any equipment or supplies behind. In the 99th Ohio, for example, up to half of all medical stores were unloaded from wagons to make room for the wounded. There were, of course, exceptions.
Cavalryman John Wyeth recalled coming upon an ambulance in which some musicians had piled their instruments as they joined the flight.  

Not all wounded were evacuated from the hospitals. Those with injuries serious enough to threaten the soldier's life, should he be moved, were left at the hospitals. When the evacuation had been completed XX Corps reported about 250 patients and six surgeons left at the Spring while XXI Corps reported that 200 patients and 14 surgeons stayed.  

Other surgeons remained in the XIV Corps hospitals and with the three hospitals located to the north.

The number of lost patients and physicians may have been greater if not for the quick thinking of a medical officer with "no military education or experience." Surgeon E.H. Bowman had control of sixty ambulances enroute to Chattanooga. After pausing in a field, this ambulance train was unable to regain the road leading to McFarland's Gap. Bowman wrote that the nearby road was blocked by a seemingly continuous line of wagons fleeing from the Confederates. Bowman solved his problem by positioning the ambulances "in echelon to the road" and finding a gap in the fleeing trains. He then forced a single ambulance onto the road in order to "hold against all comers until I ran the entire train in." Other casualties were recovered when Wilder's
mounted infantry and Mitchell’s cavalry gathered scattered ambulance and medical trains and came off the battlefield between 4:00 and 5:00 p.m. 4

The movement from the Spring was first intended to take the hospitals through McFarland’s Gap and into bivouac in the Chattanooga Valley. When they reached the gap, however, it was uncertain if Bragg would pursue Rosecrans’s Army. To preclude another hasty evacuation, therefore, ‘the ambulances, wounded men, and hospital arrangements were ordered to make their way with all speed to Chattanooga.’ 4 8

Bragg’s men over-ran the Crawfish Spring hospitals minutes after the ambulances and wagons left. 50 Despite the efforts of the remaining surgeons to clearly identify the hospitals the Confederates felt free to steal what they wanted: blankets, clothing, and equipment. The Southern cavalry commander, Joseph Wheeler, put an initial stop to the looting, but it reoccurred on Tuesday, 22 September. 51

The withdrawal of hospitals in the center and left wing (Map 11, page 76) seems to have been accomplished with more planning and success. The First Division, XIV Corps hospital, located at the Dyer House, came under artillery fire on Saturday about 5:00 p.m. Initially the surgeons were forced to evacuate the position, but they soon returned and continued their work. On Sunday morning, however, due to the closeness of the fighting, division surgeon S. Marks chose to evacuate this site and leave the battlefield. The
division's medical support was then provided from Rossville. As a result of this prompt decision First Division, XIV Corps was able to remove all wounded, medical equipment, and supplies, save for one tent, from the battlefield.  

The Second Division, XX Corps hospital also came under fire on Sunday morning. The wounded that had been loaded onto wagons in reaction to Adams's flanking movement were taken, first, into hiding behind a hill. They were then evacuated to Chattanooga. That afternoon, after Granger's reserves cleared the area, the remaining moveable wounded were taken to the Cloud House hospital, 1000 yards to the north. Thirty patients and four physicians, with necessary supplies and equipment, remained at the original site after the fighting of the 20th ended.

The Third Division, XIV Corps hospital, in the area of buildings and fields of and between the Cloud House and the Cloud Church along the La Fayette Road, received up to 1,000 wounded soldiers from various divisions. As the Army moved north down the Chickamauga this hospital site became ideally situated behind the front lines. It was also along the one road that led directly to Rossville and Chattanooga. Ferdinand Gross, medical director of XIV Corps, recognized the benefit of this location and called for his reserve medical supplies to be brought forward. Before this occurred, however, Bragg's right wing took the hospital under fire. The corps medical purveyor, assistant
surgeon H.C. Barrell, had heard of the attack and ordered the supplies returned to Chattanooga.

As a result of the Confederate general advance on the Union left, the hospital's once ideal location caused it to become isolated from the rest of the Army early on Sunday morning. After that time it was not able to receive any additional patients. Evacuation orders were issued after a shelling of the hospital killed a wounded officer, set fire to one of the hospital tents, and caused general havoc. Gross claimed that he was able to remove most of the 1,000 patients to Rossville on foot and in ambulances or wagons. His report stated that only 60 patients and three medical officers were left behind.

Actually, this hospital changed hands at least five times. It was first taken by Frank Armstrong's Cavalry Division of Forrest's command at noon, Sunday. Shortly thereafter Gordon Granger's Reserve Corps arrived on its move south and pushed Forrest's forces back from the hospital area. Forrest once again claimed the hospital after Granger passed enroute to aid George Thomas. Philip Sheridan's Third Division, XX Corps, then regained the site at about 6:00 p.m. and held it until leaving the field. The next morning the hospital was captured by Edward Walthall's Brigade of St. John Liddell's Division.

Rosecrans's army lost 16,170 soldiers in the Battle of Chickamauga. Of this 1,657 were killed, 9,756 were known.
wounded and 4,757 were listed as missing, some of which were wounded. Perin and his assistant Dallas Bache reported, respectively, that 2,500 or 2,000 of these casualties were left at hospitals or on the battlefield. The different estimates result, in part, from the confusion of evacuating the hospitals under pressure. Surgeon Tollman, for example, in charge of the Third Division, XIV Corps hospital at the Cloud House, stated that only 60 patients were left behind. Perin reported, however, that 1,500 wounded soldiers remained on the left wing, but not necessarily at hospitals. Regardless of the precise number, these casualties now came under the responsibility of Director Edward Flewellen and his medical department. This system, of course, had numerous casualties of its own.

CONFEDERATE MEDICAL SUPPORT AT CHICKAMAUGA

Samuel Stout's loss of communications with Flewellen shortly before the Battle is symbolic of the problems inherent with studying medical support of the Southern forces for which little primary source material exists. As the battle opened for Bragg's Army, Flewellen was still suffering a shortage of medical officers. In denying a request for surgeons by a receiving and shipping hospital he explained that a "scarcity of Med. Officers in the field puts it out of my power to supply the demand." As previously shown, Stout had detailed surgeons to report to the field. Not known is how many reported in time to
provide support during the actual battle. The officers
detailed from Newnan surely did not as they did not depart
from that hospital until 19 September. **

The available regimental physicians performed the
standard task of providing immediate aid at the front lines
while brigade surgeons supported with additional care in
hospitals to the rear. In fact, one of Flewellen's surgeons
is singled out for "going repeatedly far forward under fire
and among the skirmishers to attend the wounded." **

Ambulances were also used in the routine way. The
Army's movement orders for 18 September allowed ambulances
to follow the units as they crossed the Chickamauga. **
They were then positioned behind the combat forces and
loaded from that point. John Jackman, for instance, wrote
of coming upon his brigade's ambulance to the rear. **
Describing the vehicle as a brigade ambulance is significant
as it supports the belief that they were in too short of
supply to distribute down to the regimental level. Other
accounts state that some regiments did not have individual
ambulances while others, admittedly, had as many as two. **

The shortage of ambulances required that evacuation
to the field hospitals be by any means possible. John Hood,
in command of Longstreet's Corps, was carried on a litter
for the full distance to a field hospital. ** In the
Washington Artillery of Samuel Adam's Brigade the wounded
were carried on the limbers and caissons. ** In many other
cases, wounded soldiers simply limped, hopped, or dragged themselves off the field or were carried off by the less seriously injured. W.G. Allen, for example, suffering from six gunshot wounds, had his horse brought up and rode to the rear for aid. Elsewhere, B.J. Semmes watched as "a soldier wounded in the arms, [led] another to the rear with both eyes shot out. I often saw wounded soldiers carrying off a worse wounded companion." 72

From the front lines the wounded were carried, or found their own way, to field hospitals in the rear. For this particular battle both brigade and division hospitals were formed. The particular reason for choosing one method of establishment over the other is not reported, however. While most available buildings were probably used as medical facilities, determining specific hospital locations must be based on the casual remarks and reports of the participants to the battle. Some of the hospitals may have been near the lines, such as the field hospital of Henry Benning's Brigade, Hood's Division. 73 Other hospitals were two or more miles to the rear. 74 Most, however, wisely took advantage of Chickamauga Creek. In W.H. Cunningham's words: "we had plenty of good water, and that to a wounded and bleeding man is more acceptable than nectar to his lips." 75

Several divisions chose to establish division-level hospitals. Three separate accounts identify the fact that William Preston's Division had such a hospital. Both
Robert Bullock, of Robert Trigg’s Brigade, and John Palmer, of John Kelly’s, reported the division hospital as being behind or near their positions to the south of Snodgrass Hill. To the southeast of these units, below the hill, was a draw that opened on the Dyer Field. When John Wilson of Trigg’s Brigade was borne off the battlefield he was taken to a “farmhouse in [the] valley temporarily converted to a hospital.” The facts, though incomplete, place Preston’s division hospital at the Dyer Farm.

Map 13. Selected Confederate Field Hospitals, 19/20 September 1863.

Additionally, the chief surgeon of Lafayette McLaws’s Division is reported to have placed his division hospital “on the ridge above Alexander Bridge and opposite
hospital "on the ridge above Alexander Bridge and opposite to Alexander's House," while Patrick Cleburne's division hospital was "to westward of and near Alexander's Bridge on the Chickamauga River." 76 Finally, W.H. Cunningham spotted Hindman's "Division Infirmary on Chickamauga Creek" at the site of Hunt's (Dalton's) Ford. 77 In fact, Kate Cumming visited Hindman's wounded at the Hunt House, 500 yards north of the ford, and identified it as being Arthur Manigault's Brigade hospital of Thomas Hindman's Division. 80 Carlyle Terry, Hindman's chief surgeon, reported only that his wounded were "treated mostly in a stable, and most of them in rooms without fire." 81 It is possible, therefore, that the brigades of Hindman's Division formed a division hospital in the area of both Hunt Houses.

Another mentioned hospital was that belonging to Thomas Harrison's Brigade of John Wharton's Cavalry Division. The brigade fought on the Confederate left flank across from Crawfish Spring. Elder Womak's account placed the hospital in a log house two or three miles to the rear of his unit. Since his unit did not cross the Chickamauga until Sunday its hospital was probably one of those found two to three miles east of the Creek. 82

Hospitals of unspecified size were established at the Alexander and Thedford Houses. The wounded of the [1st Tennessee] regiment were carefully gathered up and carried to Dr. Buist's field hospital in the rear, at the Alexander
To the south lived Mrs. Thedford, "a Southern heroine who made her house a hospital and fearlessly ministered to many a soul shot in battle."  

Bragg's losses were much higher than Rosecrans's. Livermore puts the Southern casualties at 18,454: 2,312 soldiers killed, 14,674 wounded, and 1,468 missing. Additionally, there were about 2,500 Union wounded to care for. Clearly, wherever the Army's hospitals were located, they were kept extremely busy. Following the two days of fighting, Cleburne's division hospital, alone, reportedly held over 1,200 wounded soldiers.  

Because of the great number of patients and shortage of medical officers in the field, medical director Flewellen had but one option. He had to evacuate as many patients as possible to the general hospitals, and he had to move them before the shortage of physicians or the increasingly cold autumn weather took their toll. As soon as the first day after the Battle, Monday, 21 September, the evacuations started. A Union signal station noticed on that Monday that "covered wagons or ambulances can be seen on the road toward Ringgold . . . ." In the same vein, surgeon Perin, of Rosecrans's army, was having to make arrangements for the wounded the Federals took off the field.
ENDNOTES

CHAPTER 5


2. OR 30/2: Circular (Battle Orders), Brent to Field Commanders, 18 Sept. 1863, qtd. in Battle Report, Bragg to Cooper, 28 Dec. 1863, 31.


5. OR 30/1: Brannan’s Battle Report, 29 Sept. 1863, 400; Both Rosecrans’s (30/1: 56) and Thomas’s (30/1: 249) battle reports state 10:00 a.m.


7. OR 30/1: Granger’s Battle Report, 30 Sept. 1863, 855.

8. OR 30/1: Thomas’s Battle Report, 30 Sept. 1863, 255.

9. Three of the many secondary source presentations of this battle are in: Timothy Donovan, Roy Flint, Arthur Grant, and Gerald Stadler, The American Civil War (West Point, NY: Avery, 1986); Tucker, Chickamauga; Van Horne History.


11. MSH 1/APP: 279.

12. Sunset for this period was around 6:00 p.m.


15. Duncan "Medical" 370-1; Gillett, Army 221; Adams, Doctors 94.


17. James Flake, Examination Papers, 7 May 1863, Box 2G424, Stout Papers, University of Texas, Austin, TX; similar
responses are found throughout this collection of examination papers.

18. OR 30/1: Telegram, Dana to Halleck, 24 Sept. 1863, 200.


20. MSH 1/APP: 288.


22. MSH 1/APP: 279.

23. MSH 1/APP: 267, 269, 288.


27. Author Louis Duncan, however, and subsequent researchers incorrectly place the Second Division, XX Corps hospital at the Cloud House, with the First Division hospital, XIV Corps. [A] Charles Schussler, the chief surgeon of the division, reported that the hospital's initial site was distant [from the division] nearly a mile on the left side of the Chattanooga [La Fayette] road." This would place him along a line from the Brotherton House to the Alexander Bridge Road-La Fayette Road intersection.

Next, he reported that on the morning of the 20th arrangements were made to amputate in a log house near by." This would not have been necessary if he was already located at the Cloud House. Moreover, before the operations could begin, Schussler's hospital was cut off from the rest of the Army by "Louisiana troops." [B] The Second Division was fighting on Rosecrans's left flank with Thomas. Around 10:30 on Sunday morning, Adams's Brigade of Breckinridge's Division, with five regiments and one battalion of Louisiana troops and an Alabama regiment rolled around the left flank and advanced from the Mullis Road-La Fayette Road juncture to the northern edge of the Kelly Field, on the west side of the La Fayette Road. [C] The Cloud House, on the other hand, was attacked by Armstrong's Brigade of Kentucky, Arkansas, and Tennessee soldiers. [D]
Finally, Schussler was freed by skirmishers of Granger's Reserve Corps. At this point one of Granger's officers recommended that Schussler move the wounded "a thousand yards to the rear, where there was a house and temporary hospital." The Cloud House was about 1000 yards on a line to the rear of Granger's advance southward. [E] Other, though indirect, evidence of the placement of the Second Division's hospital is found in Thomas Wood's battle report for the First Division, XXI Corps, and an examination of the local road network. Attached to Wood's report is a sketch map of the battlefield. The map shows an unnamed hospital located a little more than a mile north of the Dyer House. [F] The Mullis House was a mile and a quarter north of the Dyer's. The road network also supports the area of the Mullis House and Field. The Second Division entered the battle by marching east from the Kelly House and establishing its initial lines at the intersection of Jay's Mill and Alexander's Bridge Roads. [G] The logical route of evacuation would have been by these roads. To prevent backtracking his wagons and obstructing the movements of follow-on units, Schussler would have placed his hospital near the mouth of the nearest road not in the line of march. This was the Alexander Bridge Road.

Completing the indirect evidence discounting The Cloud House as the site of the Second Division, XX Corps hospital are the official reports. The battle report of the chief surgeon known to be at the Cloud House, Moody Tollman of Third Division, XIV Corps, makes no mention of a co-located division hospital. Neither does Schussler mention being in the proximity of another hospital. [H]


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30. (Ambulances) Lyman Bennett and William Haigh, History of the Thirty-Sixth Regiment Illinois Volunteers. During the War of the Rebellion (Aurora, IL: Knickerbocker & Hooder, 1876) 471. (Musicians) William Patterson, Diary Entry, 19 Sept. 1863, Patterson Papers, Illinois State Historical Library, Springfield, IL; Bennett, History 491; MSH 1/APP: 279.

31. Chickamauga, Campaign 5.

32. Bennett, History 491.

33. MSH 1/APP: 273, 279, 280.

34. OR 30/1: Telegram, Dana to Halleck, 19 Sept. 1863; MSH 1/APP: 267; Michael Fitch, Echoes of the Civil War As I Hear Them (New York: P.F. Fenno, 1905) 146.


36. Bennett, History 491.

37. Schussler reports going out after the wounded as late at 3:00 a.m. Sunday Morning; MSH 1/APP: 276.

38. Alva Greist, Diary Entry, 19 Sept. 1863, Greist Diary, 72nd Indiana Regimental file, Chickamauga-Chattanooga National Military Park, Fort Oglethorpe, GA; McGee, History 189-90; this relates the "pitiful plea for help, and the cry for water."


41. John Patterson, Diary Entry, 19 Sept. 1863, Patterson Papers, Illinois State Historical Library, Springfield, IL;

42. OR 30/1: Orders, Garfield to Mitchell, 19 Sept. 1863, 68.

43. MSH 1/APP: 278; The chief surgeons for XIV and XX Corps attempted to move to the Spring but were turned back by Confederate skirmishers, MSH 1/APP: 270.


46. MSH 1/APP: 275, 277, 278.

47. E.H. Bowman, Personal Letter to Rosecrans, 28 June 1882, Rosecrans Papers, University of California, Los Angeles, CA.


49. Bennett, History 472.

50. MSH 1/APP: 278.


52. MSH 1/APP: 271.

53. MSH 1/APP: 276.


55. MSH 1/APP: 270.

56. MSH 1/APP: 273; The wounded officer was Lieutenant Colonel Rockingham, a close friend of Whitaker, who later
freed the hospital of Confederates, OR 30/1: Whitaker’s Battle Report, 28 Sept. 1863, 862.


61. OR 30/1: Revised Casualty Report, n.d., 179; Thomas Livermore, Numbers and Losses in the Civil War in America (Boston: Houghton, Mifflin and Company, 1900) 105; The reports of losses vary from author to author. Livermore is useful as he documents his numbers from the original reports. He also explains the Civil War era use of such terms as present for duty, present for duty equipped, and effective strength.

62. MSH 1/APP: 267, 288; Dana uses Perin’s count of 2,500, OR 30/1: Telegram, Dana to Halleck, 3 Oct. 1863, 205; Bragg reports that 2,000 wounded were left in his possession, OR 30/2: Message, Bragg to Cooper, 24 Sept. 1863, 23.

63. MSH 1/APP: 273, 267.

64. Letter, Flewellen to Ramsey, 29 Sept. 1863, Stout Papers, Southern Historical Collection, University of North Carolina, Chapel Hill, NC.

65. Harwell, Kate 143.

66. OR 30/2: Cleburne’s Battle Report, 18 Oct. 1863, 158.

67. OR 30/4: Circular, Headquarters to Major Subordinate Commands, 18 Sept. 1863, 663.


71. Chalaron, "Vivid" 24.


73. Tucker’s version of the battle tells that the hospital was close enough to be accidentally fired on by Union artillery, Tucker, *Chickamauga* 171.

74. Elder Womak, "Chickamauga as I Saw It," *Confederate Veteran* 25 (1917): 74


78. Without knowing the author’s meaning of the word ‘opposite’ the McLaw hospital can only be placed on high ground in the vicinity of where the Alexander House stood. Unidentified fragment, Ticktin Papers, North Carolina Division of Archives and History, Raleigh, NC; John Dismukes, "Some Personal Experiences and Recollections of the Past," *The Southern Practitioner*, 24 (1902): 491.

79. W.H. Cunningham, Letter, 27 Sept. 1863, Cunningham Letters, *Confederate Veteran Papers*, Duke University, Durham, NC; In mid-afternoon of 19 September the Division had crossed the Creek at Hunt’s (Dalton’s) Ford. Hindman’s hospital, therefore, was probably in the area of this crossing site, OR 30/2: Hindman’s Battle Report, 25 Oct. 1863, 302.

80. Harwell, *Kate* 150.

81. Carlyle Terry, "Report of Wounded Treated in Field Hospital of Hindman’s Division, Army of Tennessee, After the Battle of Chickamauga," *Confederate States Medical and Surgical Journal* 1 (1864): 75.

82. Womak, "Chickamauga" 74.
83. Anonymous, "A Brother's Tribute," Confederate Veteran 14 (1906): 566; Doctor Buist was the chief surgeon for George Maney's Brigade, Benjamin Cheatham's Division, Jones, "Roster" 178.

84. B.L. Ridley, "Southern Side at Chickamauga," Confederate Veteran 6 (1898): 409; Mrs. Thedford had two sons serving in Longstreet's Corps in Virginia. Unknown to her, both came to Chickamauga as part of the reinforcements sent by Lee. The first Mrs. Thedford knew of this was when both sons were wounded and carried into her house.

85. Livermore, Numbers 106.

86. Harwell, Kate 150.

87. OR 30/3, Message, Jones to Seiter, 21 Sept. 1863, 762.