

CHAPTER 6

MEDICAL SUPPORT FOLLOWING THE BATTLE

UNION ACTIONS UPON ENTERING CHATTANOOGA

The Army of the Cumberland retreated from the battlefield with about 7,200 of its 9,756 wounded. 'Great numbers' of the walking wounded crossed the Tennessee and headed west for the large field hospital at Stevenson. ¹ The more serious cases, however, fell to Surgeon Moses and the two-day-old hospital system he had established in Chattanooga. Nearly 4,000 casualties were evacuated during and after the battle who were serious enough to require immediate hospitalization and care. ²

The night of 20 September was spent finding room for all the wounded and treating their injuries. Many were served their first food in two days. ³ The long lines of casualties, however, quickly overwhelmed the capacity of the city's few hospitals. As a result, other buildings were soon pressed into medical service (Figure 6). • Meanwhile, the 1st Michigan Engineers and Mechanics continued to build 'bunks' for the patients while each corps provided twenty volunteers, with upholstery and tailor skills, to convert 200 bales of cotton into 'mattresses for the sick and

wounded of this army.' " In the opinion of at least one medical officer 'Chattanooga [had become] nothing but a large hospital.' •

Hosp. 1: Confederate hospital buildings on Cameron Hill,
Hosp. 2: Receiving hospital at the base of the Hill,
Hosp. 3: Crutchfield Hotel,
Hosp. 4: Three churches,
Hosp. 5: Lofts over commissary storehouse buildings,
Hosp. 6: Buildings opposite commissary storehouses,
Hosp. 7: Officer hospital in a large brick building,
Hosp. 8: Officer hospital in a large private mansion,
Hosp. 9: Private houses.

Fig. 7. Union Hospitals in Chattanooga, 21 September 1863.

This medical support situation was not acceptable to Perin or his physicians. First, housing the wounded among so many hospital buildings also spread thin the remaining surgeons. With 52 medical officers left on the battlefield only 43 were available to provide care in Chattanooga. 7 It was clear that some consolidation of patients would have to occur. Second, Bragg's intentions relative to the Army of the Cumberland and Chattanooga were still unclear. If he decided to attack, and was successful, the medical staff and their patients would have to compete with the front line troops for access to the single pontoon bridge across the Tennessee. Third, access to the rail line from Chattanooga to the field hospital at Stevenson, and then to the general hospitals in the north, was cut by Bragg. The only route of evacuation was to cross the River and move by the north bank

to Bridgeport and its railhead. Finally, a siege by Bragg would, as a consequence, reduce the available rations to the Army. The patients in this situation would suffer further, not recover from their wounds as quickly, and be a greater burden to the command. ⁹ Perin's response to this scenario was threefold. He relocated the hospitals, evacuated as many of the patients as possible, and requested more physicians.

The first step was to relocate the hospitals. By Tuesday, 22 September, a single consolidated tent hospital was established at Stringer's Spring. The spring was two miles north of the town in a "pleasant little valley with plenty of good spring water." ¹⁰ The hospital was built using all available tents and pavilions, with "bowers of branches and leaves." It had capacity for about two thousand of the wounded. This facility received all transportable patients from the hospitals in town. Also brought here were those wounded who fell exhausted on the side of the road while trying to walk to Stevenson. ¹⁰ The Stringer's Spring hospital had an immediate effect on overcrowding in Chattanooga. As evidence, Moses's morning report for 23 September shows only seven hospitals still in operation with a total census of just 886 patients. ¹¹

From this facility the transportable wounded were moved to Bridgeport and its railhead. ¹² Evacuation to Bridgeport or Stevenson was primarily in empty supply wagons

using backhaul techniques. The route followed was a rough, mountainous road on the north bank of the Tennessee since the Confederates had control of the south bank. To cover the road distance of 60 miles the wagons required at least four days. ¹³ Such a supply train, supplemented with ambulances, started the trip on the morning of 4 October. Each of the wounded was provided with two crackers which had to last them until corn was made available on 6 October. The train arrived at Stevenson on the 7th. One of the wounded later wrote, of a similar evacuation, that these "were days and nights of the most fearful and causeless suffering, hardship and privation that I ever endured in my life We reached Stevenson . . . at last, starved, wearied, jolted and used up generally" still, after a 24 hour train ride, these same patients were well cared for in a Nashville hospital bed. ¹⁴

Meanwhile, the quality of medical care available in Chattanooga, though improved, still suffered from too many patients and too few physicians. As late as 30 September Perin still had as many as 6,100 wounded in hospitals around town. ¹⁵ His loss of 52 medical officers had only been partially solved. Two doctors had reported from Nashville, eight were enroute from St. Louis, and four had been paroled by Bragg. At least 30 more were thought to be necessary to

adequately fill the ranks of the medical department. ¹⁶

And, to further dilute the physician-patient ratio, Bragg had accepted the Union request to parole the wounded.

The question of recovering the wounded left on the battlefield was first raised on Monday, 21 September. Perin sent Rosecrans a request asking that a truce flag be sent with the intent of collecting the Union wounded. ¹⁷ Though Rosecrans was in agreement, he cancelled and did not send his initial message to "General J. Johnson a commander of Confederate forces at Chickamauga Valley." The reason is not explained in the Official Records. The message had asked for permission to send the Army's ambulances to gather the wounded as "our badly wounded will probably be a burden on your hands and we are anxious to provide for their comfort." ¹⁸ The Union's first attempt at collecting the wounded occurred on 26 September with a message from Rosecrans to Bragg. In this request Rosecrans proposed sending ambulances to carry away those wounded that could be moved and provide "medical supplies as may be necessary for the comfort of those who remain." Bragg approved the request and the respective Army staffs made arrangements for the movement of the wounded. ¹⁹

The procedure for collecting the wounded called for Union ambulances, loaded with doctors and medical supplies, to be brought to a Confederate staff officer at the picket lines. The Confederate staff officer then took charge and,

with Confederate drivers replacing the Union ones, moved the ambulances and their cargo to the hospitals. Here the physicians distributed crackers and coffee and examined the wounded with "all manner of tests to discover how badly we were injured." ²⁰

Testing the patients seems to have been a precaution of the Union physicians and not a requirement of Confederate leaders. Confederate surgeon Flewellen was clearly "anxious that every one of the Federal wounded whose life will not be positively jeopardized by the transportation shall be sent to Chattanooga." For this reason Bragg allowed the Union physicians to choose which patients would be accepted and which had to stay behind. ²¹ Once the selection was made the patients were required to sign parole papers before being loaded onto the ambulances. Ambulances and wounded then made a difficult six-hour move to the picket line where drivers were again exchanged. The ambulance train then made its way to Chattanooga. ²²

The ambulance trains made three forays into Bragg's camp for the wounded. 250 patients were brought out on 29 September, 800 were recovered on 1 October, and another 700 were received on the 2nd. ²³ Available documents do not tell of the fate that fell to the remaining 750 Union wounded. Many of the critical cases probably died while most of the less seriously injured recovered sufficiently for transfer to a Confederate prison. ²⁴ The Union's

recovery of its wounded was also considered an exchange of wounded prisoners. Rosecrans, therefore, returned the Confederate patients he held, who amounted to just fifty soldiers. ²⁵

Returning to the Union lines and a Union hospital did not necessarily mean a return to complete medical care for the wounded. Unfortunately, triage was an issue again forced upon the surgeons due to a shortage of physicians, medical supplies, and treatment facilities. As seen on the battlefield, medical officers had to choose between those that would benefit from the limited care available and those considered too critical for care. It was unfortunate, but a reality of the situation, that 'the critically wounded (those given up for lost) must be put on camp-beds in the hospital's vestibule, to make room, in the wards, for those thought still to have a chance.' ²⁶

And yet, the medical department of the Army of the Cumberland continued to serve in its role of supporting the Chickamauga Campaign. From early October to the 23 November breakout from Chattanooga, medical director Perin and his staff arranged for the evacuation of patients from the town as transportation was made available. As a result, only 200 of the Chickamauga wounded remained in the Army's hospitals at the time of the Battle for Chattanooga. ²⁷ Similar evacuations were also being pursued by Flewellen and the medical department of Bragg's Army.

CONFEDERATE ACTIONS FOLLOWING THE BATTLE

With 14,674 of his own wounded soldiers, and 2,500 of the enemy's, Flewellen's attention was turned toward the rapid emptying of the field hospitals. His plan was simple enough: patients were to be evacuated to nearby railheads, loaded onto railcars, and transported to Stout's hospitals in the rear. ²⁰ The execution of that plan, however, would prove to be difficult.

Flewellen's lack of ambulances necessitated the use of supply wagons to backhaul the wounded to the nearest commissary depots, as the depots were the destination of the wagons. ²¹ For the first three days following the battle, therefore, the wounded were sent to meet the railroad at Tunnel Hill, 12 miles to the southeast, or to Dalton, 2 miles beyond Tunnel Hill. Then, as the destroyed railroad bridges were repaired and the depots were moved closer to Chattanooga, the wounded were evacuated first to Catoosa Station, and finally to Ringgold. ²²

The wounded faced several challenges in reaching the general hospitals. First, evacuation in cargo wagons over dirt roads with deep ruts caused by the sudden late-September rains was hard on these soldiers. Kate Cumming remembered wondered how the wounded "could live after such a ride, for it was really harrowing." Logan summarized the evacuation as being "over rough roads in rough vehicles for many miles." ²³ Second, there was a break in the continuity

of care at the depots where the commissary personnel unloaded the wounded. The Army was responsible for evacuating the wounded to the general hospitals. ³² During the days immediately after the battle, however, no provisions were made to move the wounded once they arrived at the commissary depots. As when he moved the general hospitals, Stout claimed an absence of support from the quartermaster staff of Bragg's Army.

The situation resulted in William Burt, Stout's surgeon in charge of the wounded at Tunnel Hill, having to coordinate with railroad engineers for room on the trains while he also caring for the soldiers. ³³ Stout, himself, went forward to evaluate the Army's needs. He later contended that the Army showed no concern for evacuating its soldiers until at least 27 September. "Prior to this cars had been obtained by my own exertions and those of my subordinates chiefly." ³⁴ Finally, a messenger sent by the quartermaster to Stout. When the messenger reached Catoosa Spring and asked for medical guidance Stout claimed he responded that "as chief quartermaster of the army he ought to know without asking, that when there are wounded soldiers to be transported the chief quartermaster ought to provide a subordinate of his to attend that transportation." ³⁵

Finally, a scheme of evacuation began to take shape. Hospitals for receiving and then distributing the soldiers were set up at Chickamauga Station, Ringgold, and Dalton.

From these shipping hospitals up to 700 wounded were taken daily, by scheduled day and mail trains, to the general hospitals. An equal number were sent via irregular backhaul on troop transport trains. ³⁶

On board the scheduled trains were medical officers to care for the patients and ensure they arrived at their proper destination. On one train, for example, 160 patients were picked up at Chickamauga Station and delivered to the general hospitals in Ringgold, Dalton, Kingston, Cassville, Rome, Marietta, and Atlanta. ³⁷

Once developed, this system succeeded in quickly moving the wounded to Stout's general hospitals. Burt, who had sent as many as 800 wounded from Tunnel Hill in a day, had only 200 patients for the 27th and expected no more after the 29th. ³⁸ In fact, Flewellen claimed that by 29 September 'as nearly, if not quite, all who will for some time bear transportation [had] been sent forward'³⁹ And, in the next day's paper, the Atlanta Appeal reported that only 2,500 Confederate wounded were still on the field. These were the wounded that were too seriously injured to be immediately evacuated. ⁴⁰

All of these soldiers went into Stout's network of general hospitals, which extended beyond Atlanta and had soon treated over 13,000 patients. ⁴¹ Accomplishing this feat was made possible by procedures and policies mandated by the situation. Specifically, as many of the wounded as

possible were treated away from the hospitals in order to optimize the 7,500 beds that were available. Malingerers or 'hospital rats' were returned to their commands while the less seriously injured were sent to convalescent camps or on furlough. Many other patients were cared for by families who lived near the hospitals. The remaining patients, those which required a hospital bed and daily medical care, were cared for in the Department of Tennessee's hospitals or sent to medical facilities in other military departments. ⁴²

The Confederate wounded from Chickamauga, amounting to over 20 percent of Bragg's Army, ultimately received care despite the initial coordination and communication problems encountered among Flewellen, Stout, and Army staff officers. In fact, by 10 October as few as 500 wounded men still lay in battlefield hospitals. And, by the end of the month the Army was able to close all brigade and division hospitals in favor of a return to duty or evacuate policy. ⁴³

SUMMARY

The aftermath of the Battle of Chickamauga required that medical directors of both the Union and Confederate Armies provide for the recovery, treatment, and evacuation of their command's wounded. Yet, in both cases, numerous problems were encountered with the accomplishment of those tasks. Clearly, surgeons Perin and Flewellen had developed systems and planned medical support to provide care during the battle. Neither, however, seemed to have adequately or

fully considered their Army's medical needs beyond the firing of the guns. As a result, needless deaths occurred in both camps until lessons and experiences of prior battles and campaigns were recalled and applied to the critical needs of the situation at hand.

ENDNOTES

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1. MSH 1/APP: 267.
2. MSH 1/APP: 282.
3. Bennett, History 476.
4. MSH 1/APP: 282.
5. Fox qtd. in Boynton, Dedication 305; OR 30/3: Message, McMichael to Thomas, 29 Sept. 1863, 930.
6. Grebner, We Were 152.
7. MSH 1/APP: 282; Four of the medical officers were Confederate.
8. MSH 1/APP: 267, 288.
9. John Russell, Personal Letter, n. pag., Civil War Times Illustrated Collection, U.S. Army Military History Institute, Carlisle Barracks, PA.
10. MSH 1/APP: 267, 277, 288.
11. Morning Report, 23 Sept. 1863, Department of the Cumberland, Letters Sent, November 1862-June 1865, Record Group 393, Entry 908, National Archives, Washington, D.C.
12. MSH 1/APP: 267.
13. MSH 1/APP: 267; Albert Hart, Papers, Western Preserve Historical Society; OR 30/3: Message, Goddard to Sweet, Message, Goddard to Ravenscroft, 21 Sept. 1863, 771. Eventually the Confederate presence on the south bank would force the supply and ambulance trains to detour over the mountainous terrain of Walden's Ridge and down into the Sequatchie Valley. In addition to the damaging effect of the terrain on the wounded's physical condition, the duration of the trip was nearly doubled, MSH 1/APP: 288-9.
14. William Blair, Letter to Wife, 30 Sept. 1863, Blair Papers, Indiana Historical Society; Dryden qtd. in Bennett, History 493; William Patterson, Diary Entries, 20 Sept. to 1 Oct. 1863, Patterson Papers, Illinois State Historical Library, Springfield, IL.
15. OR 30/1: Telegram, Dana to Stanton, 30 Sept. 1863, 204; Dana reported that 4,000 wounded had already been sent to

Bridgeport. This may be a bit high but does show the speed with which the wounded were moved, OR 30/1: Telegram, Dana to Stanton, 22 Sept. 1863, 196.

16. Headquarters to Thruston, 18 Sept. 1863, Department of the Cumberland, Telegrams Sent, Record Group 393, Entry 916, National Archives, Washington, DC; MSH 1/APP: 288; OR 30/1: Telegram, Dana to Stanton, 3 Oct. 1863; The remaining 48 surgeons were paroled after reporting to the post commandant of Atlanta, Department of the Cumberland, Letters Received, 1862-1865, Herrick to Gross, 29 Sept. 1865. Record Group 393, Entry 925. National Archives. Washington, D.C.; OR 30/1: Telegram, Dana to Stanton, 3 Oct. 1863, 205.

17. OR 30/1: Message, Perin to Rosecrans, 21 Sept. 1863, 143.

18. Rosecrans to Johnson, 21 Sept. 1863, marked: Not Sent--Cancelled, Department of the Cumberland, Letters Sent, Record Group 393, Entry 908, National Archives, Washington, DC.

19. OR 30/3: Letter, Rosecrans to Bragg, 26 Sept. 1863, 872; OR 30/1: Telegram, Dana to Stanton, 28 Sept. 1863, 203.

20. Dryden qtd. in Bennett, History 491-2.

21. Flewellen to Mattingly and Herbert, 28 Sept. 1863, Army of the Tennessee, Medical Director, Letters Sent, Record Group 109, Vol. 749, Chapter 6, National Archives, Washington, DC.

22. Bennett, History 490-5; Grebner, We Were 158; John Kane, From Chickamauga to Chattanooga. The Battlefield Account of Sergeant John M. Kane ed. Joseph Suppiger (NP: East Tennessee Historical Society, ND) N. pag.; OR 30/3: Message, Garfield to McKibbin, 27 Sept. 1863, 893; OR 30/3: Orders, McMichael to Thomas, 29 Sept. 1863, 930.

23. (250 wounded), MSH 1/APP: 282; (800 wounded), Robert Walker, 'A Union Soldier's Diary [The Diary of L.W. Mann], ' Chattanooga Times 25 Apr. 1937, N. pag.; (700 wounded), OR 30/4: Telegram, Meigs to Stanton, 3 Oct. 1863, 58.

24. Campbell qtd. in Bennett, History 496.

25. MSH 1/APP: 288; On 1 October Bragg requested that Rosecrans release non-wounded Confederate prisoners in a one-to-one ratio to the paroled Union wounded. This request was quickly denied by Rosecrans, OR 30/4: Message, Rosecrans to Bragg, 2 Oct. 1863, 32.

26. Grebner, We Were 158.
27. MSH 1/APP: 283.
28. Baird qtd. in Cunningham, Doctors 283.
29. Stout, "Outline" 71-2.
30. Stout qtd. in Cunningham, Doctors 279.
31. Harwell, Kate 156; Letter, Logan to Stout, 24 Oct. 1863, Stout Papers, University of North Carolina, Chapel Hill, NC.
32. Stout, "Outline" 72.
33. Letter, Burt to Stout, 22 Sept. 1863, Stout Papers, Emory University, Atlanta, GA.
34. Stout Endorsement qtd. in Message, M.B. McMicken to Gribble, 2 Sept. 1863, McMicken Directives, Medical Service File, Combat Studies Institute, Fort Leavenworth, KS.
35. Stout, "Outline" 72.
36. (Hospitals), OR 30/4: Report, Stout to Moore, 11 Oct. 1863, 737; (Trains), Dennis qtd. in Cunningham, Doctors 282.
37. Report, Patterson to Stout, 2 Oct. 1863, Box 2G426, Stout Papers, University of Texas, Austin, TX.
38. Letter, Burt to Stout, 22 Sept. 1863, Stout Papers, Emory University, Atlanta, GA; Status Report, Burt to Stout, 27 Sept. 1863, Stout Papers, Duke University, Durham, NC.
39. Letter, Flewellen to Ramsey, 29 Sept. 1863, Stout Papers, University of North Carolina, Chapel Hill, NC.
40. OR 30/1: Telegram, Dana to Stanton, 3 Oct. 1863, 206.
41. Monthly Hospital Report, Sept. 1863, Box 2G426, Stout Papers, University of Texas, Austin, TX.
42. Circular 9, [Housing the Wounded With Private Families,] Stout to Surgeons in Charge of Hospitals, 29 Sept. 1863, Stout Papers, Box 2G432, University of Texas, Austin, TX; Cunningham, Doctors 280; OR 30/4: Public Release, Stout to the Public, 5 Oct. 1863, 738.

43. Cunningham, Doctors 280; Orders, Flewellen to Corps Medical Directors, 30 Oct. 1863, Army of the Tennessee. Medical Director, Letters Sent, Record Group 109, Vol. 749, Chapter 6, National Archives, Washington, DC.