AN INSTRUCTIONAL MEDICAL EXERCISE.

BY COLONEL E. T. F. BIRRELL, C.B., C.M.G.

This exercise, which is based on one of the winter schemes of the 8th Infantry Brigade for 1922, was originally drawn up for the instruction of majors, Royal Army Medical Corps, serving in the South-western Area, Southern Command, who were preparing for examination for promotion to lieutenant-colonel. It is designed to be worked out with the aid of maps, without reconnaissance of the ground, as the officers could not easily have visited the actual places. The practice was to issue a task for the officers to work out; their work was then gone over and criticized, and given back to them with the notes on the task (which have no pretensions to be the correct or only solutions) for further study, together with the next task. This system of instruction was found quite satisfactory.

The exercise, which has now been revised in accordance with Field Service Regulations, vol.-I, 1923, and the Provisional War Establishments of June 1, 1923, is published in the hope that it may be of service to other officers of the Corps preparing for examination for promotion to lieutenant-colonel.

I am indebted to Major B. L. Montgomery, D.S.O., late Brigade Major, 8th Infantry Brigade, for the use of the Brigade winter scheme and for adding Divisional situations to it, and for valuable assistance in converting it to a medical exercise.

References.—Provisional War Establishments, Parts XXIII A, XXIV A, XXV A, and XXVI A, June 1, 1923; Field Service Regulations, vol. I, 1923; Field Service Regulations, vol. II, 1920 (especially Chapter VI, Operation Orders); Training and Manoeuvre Regulations, 1913 (especially Section 14, Appreciations); and R.A.M.C. Training, 1911.

GENERAL IDEA.

Reference 1 inch O.S. Map, Sheet 8.

Eastland (Devonshire) and Westland (Cornwall) are two independent states. The exact boundary between them is the River Lynher as far as Altnarnum, thence to Boscastle. The most important towns in these states are their respective capitals, Exeter and Truro.

The relations between Eastland and Westland have been strained for some years. War seemed inevitable, and finally on August 8, 1923, Eastland declares war on Westland.

Each state can mobilize two divisions, one cavalry brigade, one tank battalion and one squadron, Royal Air Force, in a few days; other troops can be made available after a delay of some weeks.

The moral and armament of the armed forces of Eastland are similar to the British Army; those of the Westland forces are similar to the German Army (1918).
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FIRST SCHEME.

SPECIAL IDEA.

Reference 1 inch O.S. Map, Sheets 140, 148.

On August 8, simultaneously with the declaration of war, Eastland ordered a general mobilization. Her plan was to mobilize as rapidly as possible one cavalry brigade and one infantry brigade group, and to concentrate them at Tavistock in order to protect the frontier and cover the concentration of the Eastland forces. The southern flank was secured by the defences of Devonport and Saltash, which were strongly garrisoned.

General headquarters, Eastland (at Exeter), in preparing the general plan of their offensive against Westland, informed the director of medical services that the Army is intended to advance in the direction of Liskeard and that Devonport is to be the advanced base. It was decided that the Military Hospital, Devonport, is to be immediately expanded to the equivalent of a general hospital of 600 beds, and an assistant director of medical services, advanced base, is to be appointed. Devonport is regarded as unlikely to be seriously threatened, but general headquarters will not agree to more hospitals than the one general hospital being opened there. The 3rd Division will detrain at Tavistock, and the other division at some point north of Tavistock. Tavistock will be railhead for the 3rd Division and 1st Cavalry Brigade, Tavistock or a station north of it for the other division.

Two casualty clearing stations, three more general hospitals, two ambulance trains and two motor ambulance convoys are to be mobilized immediately. Steps are to be taken to form additional war hospitals in the interior of Eastland. The medical base will be Exeter and its neighbourhood.

The lines of communication (railheads inclusive) will be administered as one area, with a deputy director of medical services on the headquarters of the commander. General headquarters, in consultation with the commander, lines of communication area (headquarters at Exeter), when deciding the organization of the more forward portion of the lines of communication, asked the director of medical services for his proposals.

REQUIRED.

First Task. Preliminary Arrangements.

As director of medical services, Eastland, state your proposals for the distribution of the two casualty clearing stations and the two motor ambulance convoys now to be mobilized.

Notes on First Task.

(i) The information is purposely partly indefinite. Officers in high administrative appointments must be capable of making contingent plans, easily alterable in detail, and, if necessary, in general. The director of medical services should interview the general staff and the quartermaster-general’s branch of the staff and question them from his point of view,
consult with the deputy director of medical services and the commander, lines of communication area, and then see the commander-in-chief.

(ii) The director of medical services can make definite plans for the 3rd Division and 1st Cavalry Brigade, tentative for the other division. For example, he can propose:

(a) Casualty clearing stations—one to be opened at Tavistock when the 3rd Division detains there, the other to be held ready to go wherever may be best. It is not known how the other division will be supplied, i.e., north or south of Dartmoor. It might be best to locate the second casualty clearing station at the second railhead, if so much to the north of the 3rd divisional railhead that it will not be supplied through Devonport. On the other hand, Tavistock through Devonport might serve both divisions, and the second casualty clearing station might be required later to move forward and act as a stage between the field formations and railhead.

(b) Motor ambulance convoys. Similarly one could be based on Tavistock, the other held in reserve, probably at Devonport, so as to be sent forward where and when required.

(c) The assistant director of medical services, advanced base, should also administer Tavistock. Whether he should administer the other railhead or not cannot be decided at present.

REQUIRED.

Second Task. Special Arrangements.

(1) As director of medical services, Eastland, having formulated your proposals in accordance with the first task, state your requirements in the way of medical store depots, laboratories, and sanitary units for the immediate service of the field troops, with their proposed distribution.

(2) State what arrangements you will make, in the forward portion of the lines of communication, for dental treatment of the field troops, to supplement the dental service with the medical units, assuming that you have available for this purpose at present four officers and six other ranks (including four dental mechanics), Army Dental Corps, with field dental equipment and dental mechanics' equipment in proportion.

Notes on Second Task.

(1) (i) Medical supplies would conform to the general supply route; but it is "in the air" whether Devonport will be the only channel, or if supplies for the other division will come north of Dartmoor. The director of medical services is not necessarily limited in the number and category of medical store depots he can form. He could propose a base medical store depot at Devonport, with an advanced medical store depot at Tavistock and another at the second railhead. Or if general headquarters, or the commander, lines of communication area, consider this too much accumulation of heavy stores near the front, an advanced depot at Devonport with a "dump" attached to the casualty clearing station at Tavistock and another at the other railhead.
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(ii) A mobile bacteriological laboratory at Tavistock, and one mobile hygiene laboratory at Devonport ready to go where required should suffice for the needs of the field troops for the present. A second mobile bacteriological laboratory should be ready in case the other division requires a separate service. A base laboratory (hygiene and pathology) will no doubt be formed at Exeter or near there.

(iii) A sanitary section (lines of communication) at Devonport, supplemented by civilian labour, a detachment at Tavistock, and a second detachment in readiness for the other railhead (temporarily at Tavistock or Devonport) should suffice for the present.

(2) The field troops are provided with a dental service for immediate purposes, attached to field ambulances, and for supply or repair of dentures casualty clearing stations and general hospitals have the necessary personnel and equipment. But a casualty clearing station and a 600-bedded general hospital, as at Devonport, have only one dental mechanic each, and larger dental workshops will be required, and these should be as near the front as will suit the general situation. The casualty clearing stations can conveniently treat the slighter class of denture case, i.e., those requiring a brief period of treatment, but at this stage it is impracticable to retain so near the front cases requiring prolonged treatment. These might go on to Devonport, where the dental service with the general hospital could be reinforced by two of the dental officers, three dental mechanics, and a clerk orderly, with equipment in proportion (the remaining personnel and equipment to be kept in reserve for future developments), to form a dental centre capable of dealing with the greater part of denture work for the field troops, and so avoid sending dental cases farther down the lines of communication. Whilst waiting for dentures, men unfit to return to the front line could be employed at the advanced base.

Required.
Third Task. Medical Policy.

(1) The appointment of the following consultants has been approved: two consulting surgeons, one consulting physician.

- State in what areas of the theatre of war you would employ them.

(2) Draft instructions for issue to the medical service laying down the policy, as regards evacuation, to be observed in dealing with the following classes of casualties: (a) wounds of the chest and abdomen, (b) wounds of the head, (c) gunshot fracture of the femur, (d) wounds of the eye, (e) dental cases.

Notes on Third Task.

(Although this task is not exactly within the syllabus of the examination, it serves to complete the medical plans of campaign.)

(1) To ensure the best results for the wounded, expert surgical opinion at the earliest possible moment is obviously necessary; therefore one surgical consultant should be allotted for the front, the other should
supervise surgical work at the base. Devonport would probably be the best centre for the forward consultant, visiting casualty clearing stations and field ambulances as required; the other should visit the base hospitals. They should meet each other and the director and deputy director of medical services frequently.

The consulting physician would probably be best employed normally at the base, but should also visit the front, and be in close touch with the director and deputy director of medical services.

(2) The general medical policy would be to treat cases (a) especially, and also to a less extent (b) and (c) as near the place where they became casualties as possible, to collect (d) in some hospital where expert ophthalmic surgeons could deal with them, and to keep (e) as near the front as might be possible. But the director of medical services should not issue his detailed instructions without consulting the staff, as there may be military reasons why severely wounded or any class of medical casualty should not be retained near the front. The task is designed to bring out this point.

For cases that should not be evacuated farther than is essential to obtain the best treatment, there is the casualty clearing station at Tavistock and the general hospital at Devonport, ambulance convoys and trains for their transport, and the Tamar is navigable in its lower part.

Assuming that there are no present military objections, he should give instructions for cases (a) to be sent to Tavistock and retained there until fit to travel, i.e., for about three weeks at least. He should arrange that the casualty clearing station be reinforced as necessary from the lines of communication. Cases (b) and (c) should go to Devonport, preferably by water transport, and (d) to a selected hospital in Eastland. Class (e) requires special consideration. Reservists will supply most of the dental cases and many of them will be found to need dentures or repair of dentures. Probably the best plan would be to have a large dental workshop at the advanced base as suggested in the notes on second task.

SECOND SCHEME.

SPECIAL IDEA.

Reference 1 inch O.S. Map, Sheets 140 and 148.

The 1st Cavalry Brigade was mobilized rapidly and sent forward (accompanied by the 1st Cavalry Field Ambulance) to the frontier, which it reached on August 14. Its orders were:

(i) To make good the line of the River Lynher as far north as North Hill. From that place northwards the frontier was being guarded by frontier guards and local volunteer units.

(ii) To reconnoitre the roads leading west from the river with a view to finding out the enemy’s dispositions and strength, and to prevent enemy patrols gaining information about the movements of the Eastland forces.

At 09.00 hours on August 14, the 8th Infantry Brigade Group (which included the 8th Field Ambulance) detrained at Tavistock.
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The orders of the brigade group commander were:

(a) To protect the main river crossings over the frontier in rear of the cavalry screen, with a view to forming rallying points for the cavalry should they be driven in.

(b) To cover the forward concentration of the 3rd Division preparatory to an invasion of Westland from Tavistock.

The assistant director of medical services, advanced base (Devonport), received a message at 08.00 hours on August 14, from the deputy director of medical services, lines of communication area, to arrange with the 1st Cavalry Brigade and 8th Infantry Brigade for the evacuation of their casualties. He was informed by headquarters, advanced base, as to the role of the 1st Cavalry Brigade and 8th Infantry Brigade Group.

One ambulance railway coach (holding twenty patients lying or forty sitting) and two ambulance cars of an auxiliary motor ambulance company were available at Devonport, where there was also one sanitary section.

REQUIRED.

Fourth Task. Rearward Services.

(1) As assistant director of medical services, advanced base, write an appreciation of the situation as affecting evacuation from the 8th Infantry Brigade Group, including evacuation from the 1st Cavalry Brigade, as at 09.00 hours, August 14.

(2) As assistant director of medical services, advanced base, write a message to the officer commanding 8th Field Ambulance, informing him how his casualties will be cleared.

Notes on Fourth Task.

(1) The appreciation required is designed to bring out:

(i) Knowledge of organization—the assistant director of medical services, advanced base, cannot give orders to the 8th Field Ambulance. The arrangement that the advanced base is to clear casualties from the field troops must have been notified by general headquarters to the 1st Cavalry Brigade, and through the 3rd Division to the 8th Infantry Brigade.

(ii) He has to arrange for his garrison sick (strength of garrison not stated in the scheme) as well as casualties from field troops totalling about 7,000, the daily sick requiring admission to hospital averaging probably ten (one half of an average daily sick rate of 0.3 per cent). Fighting is not likely to occur for a day or two, but in that event the field troops might lose five per cent in battle casualties, i.e., by the usual formula five per cent of three-fifths of 7,000 = 210 battle casualties, of which 169 would be wounded, or say between 150 and 200 wounded. He has ample ambulance transport for the sick of the field troops, but will need more ambulance transport if fighting occurs. The field troops have sufficient ambulance transport for the present.
(iii) The general hospital can deal with any kind of casualty, but presumably must be kept fairly clear for battle casualties.

(iv) As a practical measure he should go and see headquarters, 8th Infantry Brigade, arrange for the cavalry casualties to come through them, find out what they want, and tell them what he can do.

(2) The message he has to write must show what the field ambulance should do as well as what will be done for it, e.g., the point to which the ambulance should send casualties, and the approximate time and manner in which they will be cleared. He should also specify any detachments which the ambulance should make for this purpose, or detachments that will be sent up from Devonport to take over pending evacuation, the latter being the preferable arrangement.

SPECIAL IDEA (SECOND SCHEME) CONTINUED.

The frontage allotted to 8th Infantry Brigade was from Golberdon, (2½ miles north-west of Callington) to Clapper Bridge (three miles south of Callington), both river crossings inclusive.

The mobilization of the Westland forces was known to be proceeding apace. Up to August 13 no troops had been observed east of the line Liskeard—Camelford, with the exception of a few weak cyclist patrols.

On arrival of the 8th Infantry Brigade Group at Tavistock on the morning of August 14, it was reported by agents that troops had detrained at Bodmin and Wadebridge the evening before. This was confirmed by aircraft reports, which also stated that troops had been observed on the roads moving eastward from these two places early on August 14. Hostile aircraft were observed over Tavistock at 08.30 hours, August 14.

ORDER OF BATTLE.

8th Infantry Brigade Group.

Headquarters, 8th Infantry Brigade.
8th Brigade Signal Section.
15th Brigade, R.F.A.
1 Section "A" Échelon D.A.C.
8th Field Company, R.E.
1st Bn. Devonshire Regiment.
2nd Bn. King's Own Scottish Borderers.
2nd Bn. Royal Berkshire Regiment.
2nd Bn. South Staffordshire Regiment.
8th Field Ambulance.
No. 3 Company, 3rd Divisional Train.
"A" Company, 1st Tank Division.

The following operation order was issued by the brigade group commander:—
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8TH INFANTRY BRIGADE ORDER No. 6.

August 14, 1923.

Reference 1-inch O.S. Map, Sheet 148.

(1) (a) Aircraft report small bodies of enemy troops moving eastward from Bodmin and Wadebridge this morning. (b) The positions of our troops remain unchanged.

(2) The 8th Infantry Brigade Group will establish outposts to cover the forward concentration of the 3rd Division, and to protect the main river crossings over the frontier in rear of the cavalry screen.

(3) (a) Outpost Line.—Right sector: 1st Battalion Devonshire Regiment, Tredwoodloe—(inclusive) to spur just north-west of Frogwell (exclusive). Left sector: 2nd Battalion King’s Own Scottish Borderers, spur just north-west of Frogwell (inclusive) to New Down (inclusive).

(b) Outpost Line of Resistance.—General line Golberdon—Trevigro—Frogwell—Amy Down.

(c) In Reserve.—2nd Battalion South Stafford Regiment, Downgate. 2nd Battalion Royal Berkshire Regiment, West Harrowbarrow.

(4) Officer commanding 15th Brigade, R.F.A., will select positions from which to cover the outposts and protect the river crossings. Liaison officers will be attached to each sector commander.

(5) No. 2 Company, 3rd Divisional Train, will remain at Tavistock. Baggage wagons will accompany units.

(6) 8th Field Company, R.E., “A” Company, 1st Tank Battalion and 8th Field Ambulance will move to Harrowbarrow.

(7) Reports to the Bell Inn, Harrowbarrow.

Issued at 09.30 hours. (Sgd.) B.L.M. Major.

Brigade Major.

8th Infantry Brigade.

Copies to:—15th Bde., R.F.A. 8th Field Amb.
8th Field Coy., R.E. No. 3 Coy. Train.
1st Bn. Devon Regt. 1st Cavalry Bde.
2nd Bn. K.O.S. Borderers. 3rd Division.
2nd Bn. Royal Berks. Regt. Staff Captain.
“A” Coy. 1st Tank Bttn. File.

War Diary.

REQUIRED.

Fifth Task. Front (Brigade Group).

As officer commanding 8th Field Ambulance, having received the message from the assistant director of medical services, advanced base, referred to in the fourth task, state your proposals for the disposition of your unit in view of 8th Infantry Brigade Order No. 6 of August 14, 1923.
E. T. F. Birrell

Notes on Fifth Task.

(i) The officer commanding 8th Field Ambulance has to arrange for his brigade group, and may have to help the cavalry to clear their casualties. Fighting is expected in the near future. He must so dispose his unit as best to serve the troops holding the River Lynher and keep in touch with them, and also be able to clear or be cleared easily to the railway. On August 14 there will probably only be sick to collect and deal with, say fifteen from his brigade group (5,000 strong) and a few from the cavalry, of whom half may have to be evacuated. If fighting occurs he may have to deal with 150 or 200 wounded (see notes on fourth task).

(ii) The officer commanding 8th Field Ambulance may have to leave a detachment at Tavistock to dispose of sick and care for them until relieved from Devonport.

(iii) He should (a) send four stretcher-bearers with the 1st Battalion Devonshire Regiment and 2nd Battalion King’s Own Scottish Borderers to assist the regimental medical officers and act as runners between the battalions and his unit, (b) arrange for early evacuation of casualties, e.g., by stationing one ambulance car in Callington and one at Amytree, informing the 1st Devons and 2nd K.O.S.Bs., (c) establish a main dressing station in Harrowbarrow.

(iv) He may expect calls from the 1st Cavalry Brigade to clear their sick from across the River Lynher.

(v) In the present situation he should be able to clear his dressing station to the railway, say, at Tavistock or other point selected by headquarters advanced base.

THIRD SCHEME.

SPECIAL IDEA.

The concentration of the 3rd Division was completed by August 16, and it received orders to advance into Westland on August 17 with a view to occupying Liskeard. Early on August 16 the cavalry screen drew off to the north, clearing the front of the 8th Infantry Brigade, with a view to acting independently on the right flank during the advance on August 17.

The enemy was known to be massing in considerable strength about Liskeard; information from spies and through intelligence was to the effect that he intended to offer a very stubborn resistance at that place; aircraft reported on the evening of August 16 that entrenchments were being dug on the ground to the east of the town.

Owing to the proximity of the enemy the general officer commanding, 3rd Division decided to advance on a two-brigade front. The 7th and 9th Infantry Brigades were to pass through the 8th Infantry Brigade on the early morning of August 17, and were to advance on either side of the main Callington—Liskeard road, 7th Infantry Brigade on the north, 9th Infantry Brigade on the south, dividing line the main road inclusive to.
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7th Infantry Brigade. The 8th Infantry Brigade was to reform and follow in reserve along the main road.

Considerable resistance was encountered during the advance on August 17. The enemy disputed the crossing of the River Lynher, and after this had been forced he delayed the advance by dropping machine-gun posts which fought to the last.

By 15.00 hours the advance was brought to a standstill on the general line Middlehill—Trebeigh Wood—Westdown Wood—Quethiok. The divisional commander decided to halt on this line and to organize a determined assault on the enemy position at dawn on August 18. The main enemy position was on the general line Crows Nest—Fursdon—Merrymeet—Pengover Green—Trevartha.

At 15.00 hours on August 17, the general medical situation was as follows: The director of medical services was with general headquarters at Tavistock. The 1st Casualty Clearing Station and 1st Advanced Depot of Medical Stores under the assistant director of medical services, advanced base, had opened at Tavistock on August 16. The 1st Motor Ambulance Convoy at Tavistock was at the disposal of the director of medical services and employed in evacuating casualties of the 3rd Division to the casualty clearing station at Tavistock.

The field ambulances of the 3rd Division were located as follows: 8th Field Ambulance parked in reserve at Callington; 7th Field Ambulance (which had been allotted to the area of 7th Infantry Brigade) main dressing station at Newbridge, advanced dressing station (one company) at Kenson; 9th Field Ambulance (which had been allotted to the area of 9th Infantry Brigade) main dressing station Amytree, advanced dressing station (a detachment waiting to clear the remaining wounded from the fighting early in the day) at Clapper Bridge, second advanced dressing station (one company) at Hammet.

The division had had 500 casualties, of whom 400 were wounded, most of them in the area of the 9th Infantry Brigade. All wounded were in process of being cleared to Tavistock, and the assistant director of medical services of the division required no additional ambulance transport.

During the action of 17th the enemy used gas shell (for the first time) about 14.00 hours, on the extreme left of the 9th Infantry Brigade, causing thirty casualties. As a result of a subsequent enemy counter-attack the medical officer of a battalion was reported missing, and the regimental medical equipment in enemy hands. A message to the above effect reached the assistant director of medical services from the 9th Field Ambulance at 15.00 hours.

REQUIRED.

Sixth Task. Front (Division).

As assistant director of medical services, 3rd Division, state what action you would take on receiving this message.
Notes on Sixth Task.

(i) Presumably general headquarters knew the enemy might use gas, and probably its nature. They would therefore have planned defensive measures and got material ready near the front. But they may not have had information. In any case the assistant director of medical services would immediately see the general staff and the quartermaster-general's branch, obtain any information available as to the probable greater use of gas by the enemy, and ask that stocks of fresh clothing, blankets, and chloride of lime be obtained, and material be provided for protecting dressing stations from gas where liable to be shelled. Divisional headquarters would no doubt warn all troops, report to general headquarters, and put defensive measures in train according to the arrangements made. The assistant director of medical services would warn field ambulances and give orders as to what material they could get, and where it is. He would inform the director of medical services of the occurrence and action taken or proposed, and ask for any special medical stores required for treatment, if not already supplied.

(ii) He would order the nearest or a selected field ambulance to detail an officer in replacement of the missing medical officer, and to send a supply of surgical dressings and, say, a medical companion to the unit pending replacement of the equipment.

(iii) To obtain early replacement of the officer and equipment and of any other casualty in the R.A.M.C., he should report the total personnel required to the director of medical services, and, as regards equipment, ask for a set of medical equipment for a unit to be sent forthwith to the battalion, indents to follow. He could assume that the director of medical services could order issue of the equipment from the medical stores at Tavistock.

(iv) He should ask the unit to indent through him for the equipment, informing the officer commanding meantime of the action taken.

Special Idea (Third Scheme) continued.

The following orders were issued for the attack (the assistant director of medical services was consulted as to paragraph 6).

3rd Division Order No. 2.
August 17, 1923.

Reference 1 inch O.S. Map, Sheet 148.

1. (a) The enemy is holding a strongly entrenched position on the general line Crows Nest—Fursdon—Merrymeet—Pengover Green—Trevartha. (b) Our advanced troops have reached the line Middlehill—Trebeigh Wood—Westdown Wood—Quethiock.

2. The 3rd Division will attack the enemy's position to-morrow morning.
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(3) (a) The attack will be carried out by the 7th Infantry Brigade on the right and the 9th Infantry Brigade on the left. Dividing line: main Liskeard road, inclusive to 7th Infantry Brigade. (b) The attack will cross the following line at 06.00 hours August 18: road running north from Point 511—west edge of Trebeigh Wood—w in Trevartha—2nd t in Trenant. (c) First objective: the line Newton—g in Trengrove—v in Trenartha. Second objective: St. Cleer—Liskeard inclusive. The attack will leave the line of the first objective at 07.30 hours.

(4) The attack will be supported by 3rd Division artillery (artillery plan omitted).

(5) The 8th Infantry Brigade will be in reserve at Kenson, and will be prepared to move at half-an-hour's notice after 06.00 hours August 18.

(6) Advanced dressing stations will be established at Gang and St. Ives.

(7) Divisional headquarters will be at Kenson.

(8) Acknowledge.

(Sgd.) A. B. Lieutenant-Colonel, General Staff, 3rd Division.

Issued at 16.30 hours.

Copies to:—7th Inf. Bde. 8th Inf. Bde. 9th Inf. Bde.

Train. Signals. D.A.P.M.

C.R.A. “Q.” C.R.E. G.O.C.

A.D.M.S. File. War Diary.

REQUIRED.

Seventh Task. Front (Divisional Attack).

(1) As assistant director of medical services, 3rd Division, write an appreciation of the situation in view of 3rd Division Order No. 2.

(2) Write an R.A.M.C. order for issue to your field ambulances in view of the above divisional order.

Notes on Seventh Task.

(1) (i) The assistant director of medical services knows how many wounded he had to deal with from the action August 17, and they are being evacuated. There may be a few left over as unfit to travel on the evening of 17th, but by next morning his field ambulances should be clear. If not, he can make temporary arrangements for non-transportable cases and report to the director of medical services.

(ii) For next day's action strenuous fighting may be expected. He may have to deal with casualties at the rate of 10 to 15 per cent of the troops engaged. As the division (17,500) lost 500 on the 17th, his calculation of probable total casualties would be 10 or 15 per cent of three-fifths of 17,000 = 1,020 or 1,530, or say between 800 and 1,200 wounded.

(iii) For the first objective he can give fixed points for the medical
service, but for the second he can only have medical troops close behind the attacking troops ready to go forward and open farther advanced dressing stations as the action develops. In view of this, also, he should keep a medical unit in reserve, probably the 9th Field Ambulance, as it had most of the wounded and had difficulty in clearing on August 17. With this unit, he can form main and advanced dressing stations farther forward as the attack proceeds. He will probably not require to bring up the ambulance in reserve until after 07.30 hours.

(iv) Should there be many walking wounded, he can ask the quartermaster-general's branch for lorry transport, otherwise his own transport may suffice.

(v) Prisoners of war may be available to help in clearing the field or in loading ambulance vehicles at dressing stations.

(vi) He has a main road to which to clear the field, and by which wounded can be evacuated to Tavistock by ambulance transport arranged by the director of medical services.

(2) Considering the above, and having asked the director of medical services to commence clearing the main dressing stations, say, an hour after action begins (or he may arrange direct with the motor ambulance convoy if the director of medical services has so ordered), he would frame his R.A.M.C. order as follows—

SECRET.
Copy No.

3RD DIVISION R.A.M.C. ORDER No. 2.
Issued Reference 3rd Division Order No. 2.

Reference 1 inch O.S. Map, Sheet 148.

August 17, 1923.

(1) (a) The enemy’s position is on the general line Crows Nest—Fursdon—Merrymeet—Pengover Green—Trevartha.

(b) Our advanced troops are on the line Middlehill—Trebeigh Wood—Westdown Wood—Quethiock.

(2) The 3rd Division is to attack the enemy’s position at 06.00 hours on August 18, 7th Infantry Brigade on the right, 9th Infantry Brigade on the left, dividing line main Liskeard road inclusive to 7th Infantry Brigade. First objective the line Newton—g in Trengrove—v in Trevartha, second objective St. Cleer—Liskeard inclusive. The attack is to leave the line of first objective at 07.30 hours. The 8th Infantry Brigade is to be in reserve at Kenson.

(3) At 06.00 hours field ambulances will be established, as follows—

(a) 7th and 8th Field Ambulances each less two companies will form a combined main dressing station under the senior ambulance commander at Newbridge.

(b) Two companies 7th Field Ambulance (each less stretcher-bearers and one officer) will be at Gang and form an advanced dressing station with
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one company (less stretcher-bearers) keeping one company (less stretcher-bearers) in reserve. The stretcher-bearer parties of these two companies will be at Hay Barton. These companies will clear the area of 7th Infantry Brigade.

(c) Two companies of 8th Field Ambulance (each less stretcher-bearers and one officer) will be at St. Iwe and form an advanced dressing station with one company (less stretcher-bearers), keeping one company (less stretcher-bearers) in reserve. The stretcher-bearer parties of these two companies will be at Point 547. These companies will clear the area of 9th Infantry Brigade.

(d) One company 9th Field Ambulance less stretcher-bearers under an officer, will form a divisional collecting station for walking wounded at Kenson, which will be cleared under arrangements of A.D.M.S.

(e) 9th Field Ambulance less collecting station party detailed in (d) will be in reserve at Newbridge, ready to march at half-an-hour's notice.

(f) Motor ambulance cars of 7th and 8th Field Ambulances will clear advanced dressing stations Gang and St. Iwe to main dressing station Newbridge under the orders of officer commanding main dressing station.

(4) D.M.S. has been asked to commence clearing main dressing station Newbridge at 07.00 hours.

(5) As troops move to second objective advanced dressing stations farther forward will be formed by the companies (less stretcher-bearers) of 7th and 8th Field Ambulances in reserve (para. 3 (b) and (c)), and sites reported to A.D.M.S.

(6) Reports of numbers remaining in the main dressing station and divisional collecting station at 08.00, 12.00, 16.00 and 20.00 hours will be sent to A.D.M.S. at divisional headquarters, Kenson. The report at 08.00 hours will also state the numbers evacuated, subsequent reports will state the numbers evacuated since previous report.

(7) Acknowledge.

Issued at 18.30 hours.

(Sgd.) H. J., Major.
D.A.D.M.S., 3rd Division.

Issued to:—7th F. Amb.
8th F. Amb.
9th F. Amb.

Copies to:—“G.”
“A.” and “Q”
D.M.S.
File.
War Diary.