TRAINING WITH A CAVALRY FIELD AMBULANCE.

BY LIEUTENANT-COLONEL ALEXANDER HOOD,
Royal Army Medical Corps.

As part of the winter training of R.A.M.C. personnel serving in Egypt a camp was held in the vicinity of Cairo at which a Cavalry Field Ambulance was assembled.

The unit normally consists of a headquarters and four sections, but for this camp a headquarters and one section only were represented.

The camp lasted for fourteen days and the training was divided into periods of seven days, during each of which periods four officers and forty other ranks were under instruction. In addition there was a permanent staff of an O.C., an adjutant, a quartermaster, a R.A.S.C. officer (transport officer) and eight other ranks.

The unit was complete in medical equipment and practically complete in ordnance equipment for headquarters and one section. The transport of one section was always present, but only on five days out of the fourteen was the transport of the headquarters present; this naturally focused most attention on section, that is A.D.S., work, but on the whole detracted very little from the value of the camp.

The objects of the training were:—

For officers: (1) To see a war unit and to make themselves acquainted with its organization and equipment. (2) To take command of a war unit or section in various tactical situations. (3) To practise the giving of verbal orders, the writing of field messages, situation reports, orders, etc. (4) To refresh their knowledge of drill, company, platoon, stretcher and gas, kit inspection, and general military routine.

For N.C.O.'s.: (1) To see and handle the equipment of a war unit. (2) To learn and practise administrative duties in the field.

For Other Ranks: General experience of work of a medical unit in the field with special reference to field ambulance work and their special qualifications, e.g. cooks in field cooking, clerks in clerical duties in the field, etc.

The programme had been prepared for each week, which followed as far as possible the sequence of instruction laid down in Training Regulations, 1934, Chapter I, Section 4 (6), i.e. Explanation; Demonstration; Execution; Repetition.

Explanation.—This was confined to short lectures to all ranks on the schemes to be undertaken, and on the general work of the unit in the field, on such special subjects as gas alarms on convoy, maintenance of motor transport in the field, etc. At the end of each lecture discussions took place and doubtful points were cleared up.
Demonstration.—The first day of each course of instruction was devoted to a very full demonstration of the complete equipment of the unit. The equipment, ordnance and medical, was laid out in lorry loads and each item was gone through thoroughly; the medical equipment, for example, was completely unpacked, and every man had the opportunity of seeing and handling most of it. This demonstration which was conducted by Lieutenant (Quartermaster) C. E. Bull, M.B.E., D.C.M., led to considerable discussion and many valuable lessons were learnt.

At the end of this equipment demonstration a complete section was shown with its two-seater car (containing the O.C. section and his driver), the motor cyclist and the lorry with its personnel and equipment.

Further demonstrations were the pitching of an operating tent (the only tentage carried by the unit), the complete lay-out of an A.D.S., the use of the waterproof covers carried for providing shelter for patients, the space occupied by the unit on the road, the space allotted to the unit in bivouac, the trailer kitchen, the action taken on the approach of hostile aircraft, and while the unit was in bivouac, laager formation of vehicles by day and night, etc.

Execution.—For this purpose schemes which had been set by the general staff for a mechanized brigade operating in country near the camp were modified to suit the unit. These schemes involved advance before contact with the enemy had been made, advance after contact had been gained, withdrawal in face of the enemy, preparation for and conduct of a night march, siting and opening of A.D.S.'s and a M.D.S., the lay-out of the unit in bivouac, intercommunication in convoy, etc.

Officers under instruction were placed in command of the unit or section during these schemes and dealt with various situations as they arose by orders, situation reports or messages. Discussions were held after each situation and the solutions of each problem thoroughly thrashed out. Meanwhile, the other ranks had each situation explained to them and the action the unit was to take. They were kept fully employed in the lay-out of A.D.S.'s, bivouacs, the preparation of an operating tent, loading and unloading lorries and studying the best methods of packing the various lorry loads.

Repetition.—The situations which such a unit can be called upon to meet as practised in peace time tend to repeat themselves when conducted over limited country available within reach of a camp, so that by the end of the week's training most of the more important lessons had been gone over twice and such work as the opening, lay-out and closing of A.D.S.'s came into practically every scheme with the variation of situation only.

The Unit and Its Functions.

Full information on the composition of the unit will be found in the Field Service Manual for the Medical Services of the Army (Expeditionary
Training with a Cavalry Field Ambulance

Force), 1932. This book is a mine of information, and although it is available in all hospitals it is a matter for regret that it is not, as its predecessor of 1914 was, an issue to all officers.

The keynote of the unit is mobility.

It must be mobile and retain its mobility in order to carry out its function of collecting the casualties of a mechanized force. As an illustration of its mobility is the fact that a section, accompanied by motor ambulance cars attached conveying stretcher bearers, can proceed at fifteen to twenty miles an hour along a road and over many stretches of desert at the same pace, on arrival at a suitable site can have an A.D.S. open in twenty to thirty minutes, and after all patients have been evacuated can be ready for the road again in twenty minutes.

Retention of mobility will depend on the efficiency of the system of evacuation in rear.

The sections are therefore very mobile. The twenty-six stretcher bearers are all carried in the transport of, and belong to, headquarters; they are attached as necessary to sections. It is doubtful if there are sufficient stretcher bearers, because although the unit has twelve six-wheeler motor ambulance cars and these cars can get practically anywhere (on the desert), a personal experiment as a lying-down case in one of them across country proved that even when moving slowly, and a certain pace has to be kept up to get through bad patches, the excessive jolting could not be borne by seriously wounded and they would have to be hand carried to roads.

Recommendations on this point have been made. The problem, of course, is to transport any additional personnel, but it may be pointed out here that a field ambulance has 76 stretcher bearers, whereas a Cavalry Field Ambulance has only 26, while both units have the same number of stretchers, i.e. 48, exclusive of those carried in ambulance wagons and cars. Again, it is not advisable to have the lorries of headquarters fully loaded as regards weight or bulk for two reasons:

(1) In the event of a mechanical breakdown of a lorry (and this happened on more than one occasion during training) its load may have to be distributed among other lorries and the defective lorry temporarily abandoned.

(2) In moving across country full loads are not desirable.

As at present constituted the loads are easily and quickly packed into the lorries, and the load of any one lorry can be temporarily distributed among the remainder with very little difficulty or inconvenience.

These facts must be borne in mind when making any recommendations for additional equipment or personnel.

Two trailers (kitchen and water cart) are included in the transport, and it was found that while the light lorries could draw these comfortably along roads a 3-ton lorry was necessary for desert work.
INTERCOMMUNICATION WITHIN THE UNIT.

Each section has a motor cyclist and headquarters has three motor cyclists for this purpose. These are adequate, but all other units of mechanized formations are now using radio-telephony for intercommunications within the unit and its introduction in a Cavalry Field Ambulance might effect an economy in personnel with increased efficiency and should be considered.

It is of interest to note that thirty-six gallons of boiling water can be provided by the trailer kitchen in half an hour, a matter of great importance to a M.D.S.

Definite times occupied in the opening and closing of a M.D.S. cannot be given for many reasons, but it can be said that after all patients are evacuated the time taken to pack and be ready for the road would be approximately ninety minutes, while opening would require less than that.

Many other points regarding the unit were noted and have been reported elsewhere.

AIR EVACUATION OF CASUALTIES.

This was practised during the training. Flight-Lieutenant Perkins, R.A.F.M.S., gave a short talk on the subject of evacuation by air, and on the marking out of landing grounds for aircraft, this proving to be much simpler in the desert than one had imagined.

A Vickers-Victoria troop-carrying plane was landed in the desert, a demonstration was given by Flight-Lieutenant Perkins of the Neil Robertson stretcher for carriage of patients on the top of the fuselage of two-seater 'planes, the loading of stretcher cases into the Vickers-Victoria was shown and men of the unit acting as sitting cases were taken for short flights. This was a most instructive and interesting part of the training.

Camel cacolets were introduced into one scheme and were used for carrying wounded (guardsmen) over country unsuitable for wheeled transport, a marked contrast to aeroplane transport.

CONCLUSION.

"The two main channels of instruction are by the eye and ear. The usual tendency is to train too much by the ear and not enough by the eye. The brain retains more readily and firmly what it sees than what it hears."

(Training Regulations, 1934, Chapter 1, Section 4 (6).)

As a Corps we are seriously handicapped in having to do most of our training for war by the ear.

All officers who took part in the training camp in Egypt this year were greatly impressed with the value of seeing and handling such a unit and all ranks learnt a very great deal.

It can be commended as a form of training to other commands and is probably most valuable when carried out, as this camp of instruction was,
Training with a Cavalry Field Ambulance

without any other branches of the Service, but with a R.A.S.C. Officer as transport officer—his advice and opinion are very valuable.

It entails a very considerable amount of preparation in order that as much as possible may be done in the time; on the other hand too much must not be attempted.

Whoever undertakes such a camp will find a great deal of assistance in Training Regulations, 1934, and may one specially commend the following: “Provided encouragement follows correction, criticism of faults due to slackness or neglect should be unsparing, but criticism of shortcomings after an honest attempt must be such as will produce a further and better effort. Good work should always be acknowledged.”

I am indebted to Colonel J. H. Campbell, D.S.O., Deputy Director of Medical Services, British Troops in Egypt, for permission to send this note for publication and for his unfailing interest and encouragement, and to Major R. E. Barnsley, M.C., R.A.M.C., whose great knowledge and experience freely placed at our disposal contributed very largely to the success of the training.