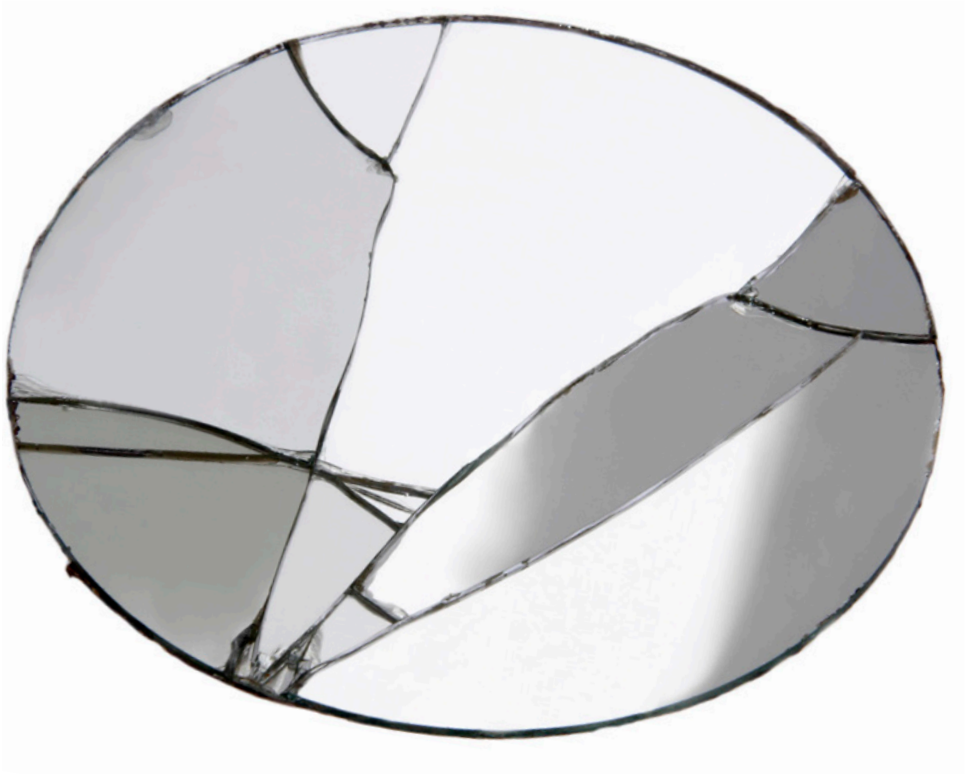
First, do no harm.



Second, have great insurance.

When things go wrong, your coverage really matters. For more than 25 years we have specialized in physicians' insurance. Working with multiple insurers allows us to offer you choice, competitive rates, and the benefit of one-stop shopping. Call us.

401-272-1050

RIMS IBC

RIMS INSURANCE BROKERAGE CORPORATION

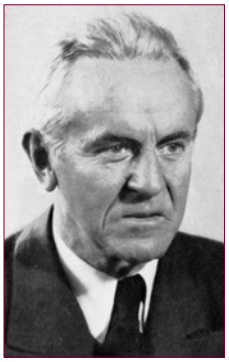
RIMS IBC 405 PROMENADE STREET, SUITE B, PROVIDENCE RI 02908-4811

MEDICAL PROFESSIONAL/CYBER LIABILITY PROPERTY/CASUALTY LIFE/HEALTH/DISABILITY

Dec. 7, 1941: 75 years ago, Japan attacks Pearl Harbor

RIMJ launches special features: Doctors at War & Calling All Battle Stations

MARY KORR
RIMJ MANAGING EDITOR



RHODE ISLAND MEDICAL JOURNAL

Dr. Peter Pineo Chase, a surgeon, served as editor of the *Rhode Island Medical Journal* during the war years.

Seventy-five years ago this month, the United States Congress declared war on Japan after the attack on Pearl Harbor on December 7, 1941. Shortly after this 'day of infamy,' **DR. PETER PINEO CHASE**, a retired surgeon, became editor-in-chief of the *Rhode Island Medical Journal*.

Wherever Rhode Island physicians served in World War II, Dr. Chase made sure the journal was forwarded to them. He also began two columns, "Doctors at War" and "Calling All Battle Stations," which reported news from the front. The following are excerpts:

"From somewhere in Germany **Capt. Donald L. DeNyse** of Cranston informs us that he was in the Normandy invasion, making the landing from an LST (Landing Ship, Tank) on D-day plus 2, and since that time he has been in continuous combat duty with the field service, treating casualties. He now goes on our records as our first member to report to us from inside the Nazi frontiers."

"We are pleased to report that **Major Kenneth G. Burton** writes that he is always happy to receive the *Rhode Island Medical Journal*. 'It has followed me quite regularly considering my many moves.' Just before and for a couple of months after D-day, he was in a field hospital in England treating casualties from the Channel, the beachheads and later the Continent."

"On assignment to a hospital following Gen Patton's Army, **Capt. Thomas A. Egan** of Providence reports: 'It is not the surgery that saves the lives of the severely wounded, but the pre-operative care that is given them in the use of penicillin, sulfa drugs and plasma.' "

RIMJ also reported on **Commander William P. Davis** after the invasion at Mindoro: "Japanese planes attacked the LST on which Commander Davis was the medical officer in charge and scored a hit…He and crew were trapped on the fantail of the craft as explosions cut off all escape forward. Swiftly administering morphine and caring for casualties, Commander Davis and another surgeon worked at their task until the heat of the deck plates became unbearable and the men had to go over the side. They were picked up by a destroyer escort."

US NAVY/LIBRARY OF CONGRESS

The USS *Arizona* was totally destroyed by the Japanese attack on Pearl Harbor on December 7, 1941.

MARY KORR

Today, at the USS *Arizona* Memorial, one can look through the windows and see the remnants of the ship and the final resting place of its crew of 1,102.

RHODE ISLAND MEDICAL JOURNAL

John Dziob, MD, left, published a memoir of his experiences with the Rhode Island Hospital Army's 48th Evacuation unit in the China-Burma-India Theater during World War II.

Members of the RIH unit included, front, from left, Drs. Edward Greuninger, Irving Beck, William Leet, John Dziob; back, from left, Isadore Garber and unidentified men.

RIH Unit in Burma

When the war broke out, Rhode Island Hospital (RIH) sprang into action and formed the Army's 48th Evacuation Hospital with volunteers from its staff and attending physicians. On Jan. 20, 1943, the RIH unit boarded the USS *Monticello* in California, bound for Bombay. The curtain of the China-Burma-India (CBI) Theater of World War II was about to rise on the RIH unit of 69 doctors, nurses and technicians.

The ship, a seized and refitted Italian luxury liner, traveled unescorted and blacked-out. Lighting a cigarette at night meant instant court martial. In his memoir, *A Young Surgeon Goes to War,* **DR. JOHN S. DZIOB** describes "the dreaded moonlit nights crossing the Pacific that exposed the ship to possible enemy submarines…the sudden shrieking of the alarm horn sending the crew frantically to battle stations."

Six weeks later, the transport with more than six thousand military and medical personnel arrived safely in Bombay. From there, the RIH unit crossed the Indian subcontinent by rail and riverboat, and arrived in Margherita, 40 miles from Burma and 18,000 miles from home.

Ledo Road

The 48th was designated a semi-mobile evacuation hospital of 750 beds, to service Chinese, American, British and Indian troops fighting in Burma under Gen. Joseph "Vinegar Joe" Stilwell and along with Merrill's (Gen. Frank Merrill) Marauders. But the Japanese had them on the run, and Stilwell and the Marauders had retreated into India to regroup.

As a result, the RIH unit was declared "surplus," **DR. IRVING A. BECK** recounted at the Rhode Island Medical Society's annual meeting in 1946. The unit was dispersed.

Some physicians in the 48th accompanied the Army engineers laying the Ledo Road – the lifeline to China – deemed necessary after the Japanese had sealed off the Burma Road. The alternative was flying over the "dreaded Himalayan Hump," Dr. Beck reported.

At Ramgarh

Meanwhile, **DR. THOMAS PERRY, JR.**, along with 18 other RIH physicians, backtracked a thousand miles to Ramgarh, the location of the U.S. Army Chinese Training and Combat Command, northwest of Calcutta.

Surgeon **Frank Cutts** (who left his appendix there) described the Chinese recruits as "poorly nourished, suffering from beri-beri, dysentery, relapsing fever and malaria; they had no conception of sanitation and were constantly spitting on the floor." The latter was of great concern to staff; pulmonary tuberculosis was prevalent among the Chinese.

The tropical heat brought unexpected challenges. "We had no anesthesia machines and open-drop ether at 110 degrees was almost impossible; the ether vaporized so quickly. Fortunately we could get chloroform from the British," Dr. Perry later wrote in the *Rhode Island Medical Journal.*

The RIH unit reassembled a year later, in March 1944, in Ledo, near the Burma-India border. The long-awaited push into Burma by Gen. Stilwell was about to begin and the 48th was deployed.

"The entire hospital and its equipment, including 2 ½- ton trucks, were flown over the mountains into Myitkyina just recently cleared of Japanese. Here another hospital was set up on the Irrawaddy River for American, British, Chinese and Indian troops," Dr. Beck said.

According to Dr. Cutts, "disease consistently produced more disability than did injury or battles casualties." He reported that in the two-year period, which ended on June 30, 1945, the 48th Evacuation Hospital admitted slightly more than 37,500 patients: 7,500 Americans, 2,000 Indians and 28,000 Chinese. ❖