A Brief History of Air Evacuation

Mae Mills Link and Hubert A. Coleman, “The History of Air Evacuation,” 1955 (excerpt)

*Medical Support of the Army Air Forces in WWII*
United States Air Force Medical Service

The origin of air evacuation of the sick and wounded by military air transport is rooted in the period when the Wright Brothers developed the airplane. The first known report of aircraft to be used in transportation of patients was made by Capt. George H.R. Gosman...and Lt. A. L. Rhoades... United States Army, to the Surgeon General of the Army in 1910…

During WWI, the service type evac planes were unsatisfactory as the patient was wedged into the narrow cockpit of the open plane. In Feb. 1918, at Gerstner Field, La., Major. Nelson E. Driver... and Capt. William C. Ocker, Air Service (as the Air Force was then known) converted a “Jenny” airplane into an airplane ambulance by changing the rear cockpit so that a special type litter with patients could be accommodated. They are credited with the first transportation of patients in an airplane in the U.S. and aided in demonstrating the practicability of transporting patients by air. July 6, 1918 an improved airplane ambulance was designed at Ellington Field in which the standard U.S. litter could be used…

In the Spanish Civil War (1936-1938), the Germans transferred Nazi casualties of the Condor Legion in transport planes. These evacuations made an impression on Dr. Richard Meiling, a young American doctor studying in Germany. Returning to the states, he was commissioned in the army and became the first and only “Air Evacuation Officer” in the Office of the Air Surgeon. In 1940, Headquarters AAF proposed the organization of an ambulance battalion to consist of an AT Group together with medical personnel. The Medical Air Ambulance Squadron was authorized Nov. 19, 1941…

Within three months the country was at war and it became a matter of military necessity to evacuate patients by air, even though it was not an accepted practice. The first mass movement of patients occurred in Jan. 1942, during the construction of the Alcan Route to Alaska. C-47 type aircraft were utilized in evacuating these patients over long distances to medical installations. The medical personnel involved were largely untrained and on a volunteer basis. The second mass evacuation of personnel by air, occurred in Burma in April 1942. Ten C-47s evacuated 1,900 individuals from Myitkyina, Burma to Dinjan, India in a ten day period…In June 1942, the 804th MAES arrived in New Guinea to aid in air evac operations...

On June 18, 1942 the AAF was given responsibility for developing the air evacuation system, with primary planning responsibility delegated to the Air Surgeon. There was a need for transport planes capable of mass evacuations, yet there was an acute shortage of aircraft. Experience demonstrated that regular transport planes using removable litter supports (brackets) could be successfully used for air evac as well as for transporting material and combat troops to theaters of operation. This is how the AAF came to decide the troop and cargo airplanes would have not only their primary mission, but the secondary mission of providing air evacuation.

On May 25, 1943, the AAF activated the 38th Air Ambulance Battalion at Fort Benning, Ga…the personnel of the cadre consisted of a commanding officer and 17 enlisted men. Because of the proximity of Bowman Field, Ky. to First Troop Carrier Command in Indianapolis, Ind., it was decided to establish a training program there using the 38th Air Ambulance Battalion organization as the nucleus for the first unit…

The early training afforded these units was haphazard and consisted of basic training, squadron administration, the use of the litter and loading of air evac aircraft…The personnel of the 801st and 802nd MAES…were desperately needed for overseas evacuations of war casualties, necessitating cutting their training short. They continued to train and improve their skills and techniques in the theaters of operation…On Christmas Day 1942, the first of the squadrons departed for the North African Combat Zone. Similar units followed to every area where American fighting men were engaging the enemy and to overseas stations along the global routes of the ATC.
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The flight nurse emerged as the counterpart of the flight surgeon. Credit for the original idea of the flight nurse belongs to Miss Laurette M. Schimmoler, who as early as 1932 envisioned the Aerial Nurse Corps of America. She suggested an organization composed of physically qualified and technically trained registered nurses, who would be available for duty in “air ambulances,” as well as other aerial assignments...November 30, 1942, an urgent appeal was made for graduate nurses for appointment to the Army Air Forces Evacuation Service...

An evacuation plane could be loaded and airborne within 10 minutes, usually with one flight nurse and one medical technician. A flight surgeon briefed the nurse on each patient’s condition prior to takeoff, and during the flight she was responsible for the safety and comfort of the patients. Here, Lt. Katye Swope checks patients being evacuated from Sicily to Africa for further medical treatment in July 1943. U.S. Air Force photograph, courtesy of the National Museum of the U.S. Air Force.

On Feb. 18, 1943 the first formal graduation of nurses of the 349th Air Evac Group was held at the base chapel at Bowman Field, Ky. The 30 members of this group had completed a program of instruction that was definitely in the experimental stage. The 4 week course included class work in air evac nursing, air evac tactics, survival, aeromedical physiology, mental hygiene in relation to flying, training in plane loading procedures, military indoctrination, and a one day bivouac.

At the AAF School of Air Evacuation at Bowman Field, Ky., student flight nurses learned how to handle patients with the aid of a mock-up fuselage of a Douglas C-47 transport. U.S. Air Force photograph, courtesy of the National Museum of the U.S. Air Force.