

“ War is a hellish way of settling a dispute”
Dr. Jonathan Letterman and the Tortuous Path of
Medical Care from Manassas to Camp Letterman

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A battlefield is like no other place on Earth. It is where men come to settle questions, test their resolve, and where the winner lives and the loser often dies. In the blink of an eye, friends are lost forever. In the years afterward, as old men tell their stories to young kin, memories fade; all that carnage, bloodshed, and strife are forgotten, sometimes on purpose. But, then again, who could blame them? We remember the brave ones—the men who stood out amidst the fray. As young boys, we emulate them; as men, we celebrate them.

This is the story of those we do not wish to remember. Those twenty-two-year-old boys mangled for life in an instant: bullets or other projectiles impacting bone, severing arteries, mangling tissue until what once was a thriving life is reduced to a crumpled, disfigured mass of humanity. This scene has been repeated over and over multiple times in warfare through the centuries.

Our microcosm for examining this tragedy is Gettysburg. Chaplain Anson Haines of the 15th New Jersey paints the picture well:

The vast number of the wounded received attention on the 4th, which could not be given them while the battle was in progress. The scenes at the hospitals were often of the most shocking kind. The human body was wounded and torn in every conceivable manner. No description can portray the work of the surgeons at the amputating table. All the nights of the three days, they were busy with their dreadful work. Limbs were thrown in piles outside the hospital tents, and the sufferers were at first stretched in the open air side by side. There were men with both legs gone; men shot through the lungs; men with bullets in their brain, still living; men with their bowels protruding. On the floor of a crowded barn sat a man in gray coat, swaying his body back and forth, with both eyes shot out, and his face all mangled. The tide of human misery around the town of Gettysburg swelled high as never before, perhaps, in our land. We saw the horrors of war, enough to make the heart ache and revolt at the inhumanity of man to man. Yet all these ghastly wounds were received from the hands of their own countrymen. The surgeons were very humane in their treatment, and seemed, in the discharge of their work, to know no difference between Union and Confederate soldiers. Long after we left, the hospital tents remained, and contained the survivors who could not be removed elsewhere.

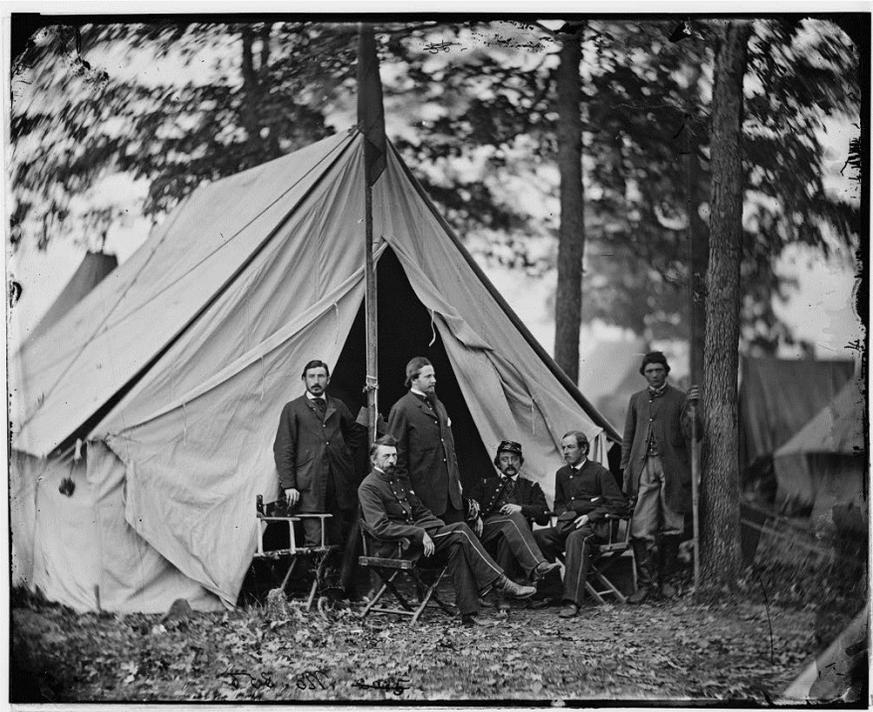
We had the dead to bury—they were on every side of us. Every passing hour added new corpses to the vast number. They were so many that it seemed a gigantic task to the details that were largely drawn from the various regiments. Sometimes a grave was dug beside where the body lay, and it was merely turned over into the narrow pit. Sometimes long trenches were dug, and in single lines, with head to foot, one corpse after another was laid in; then the earth was thrown back, making a long ridge of fresh ground. Whenever names could be ascertained, each grave was marked by a head-board, with name and regiment of the dead soldier. All these dead, so rapidly consigned to earth, were living men but yesterday, or the day before, in full vigor of manhood. We had seen

many of them marching in their youthful prime—the gallant soldiers of their country; while from the missiles of the others, the foeman from the South, we had shrunk in peril of our lives.¹

This scene is how a real battlefield appears and will never change. The paradox is that even as man continues to refine ways to kill, he learns new ways to heal. This paper focuses on the healing aspect of the American Civil War. We will explore the evolution of medical care given wounded soldiers and whether the reforms implemented by Dr. Jonathan Letterman truly impacted the Union army at Gettysburg.

Jonathan Letterman, M.D.

The advent of rifled muskets coupled with antiquated tactics drove the casualty rate skyward in the Civil War. It soon became apparent that a new system for dealing with the wounded would be crucial. Into the carnage stepped Letterman, the man who would become known as the father of modern battlefield medicine.



Dr. Jonathan Letterman (seated at center) & staff, 1862. (LOC)

Jonathan Letterman was born on December 11, 1824, in Canonsburg, Pennsylvania. At a young age, Letterman acquired medical tutelage from his father, who was known as an “eminent surgeon and practitioner of medicine in the western part of the state.” He entered Jefferson College, near Pittsburgh, Pennsylvania, in 1842 and graduated four years later. Letterman eventually enrolled at Jefferson Medical College in Philadelphia, finishing in 1849. With his new medical certificate, Letterman passed the Army Medical Board review and received an appointment as assistant surgeon to date from June, 1849.²

Letterman subsequently travelled to Florida and participated in several campaigns against the Seminoles until 1853. In 1854, orders sent him to Fort Ripley, Minnesota. He then marched from Fort Leavenworth, Kansas, to New Mexico, for duty at Fort Defiance in the Navajo lands. While there,

Letterman accompanied future Confederate general William W. Loring on expeditions against the Gila Apaches.³

In 1858, after four years of frontier service, Letterman asked for a leave of absence. The next two years saw him moving from coast to coast with tours of duty at Fortress Monroe, Virginia, and California, performing service in support of operations against the Pah Ute Indians. With war on the horizon, Letterman traversed the continent one last time in November 1861, this time to accompany troops from California to New York City. The United States Army, being in need of everything and everyone, quickly ordered him to report for duty. In May 1862, Letterman was briefly in charge of the Department of West Virginia before transferring to the position of medical director of the Army of the Potomac. He arrived at his new post while the Union army was encamped at Harrison's Landing, Virginia, at the conclusion of the Battle of Malvern Hill.⁴

Military Medicine in 1862

To understand how Letterman affected the Army medical system, we must first understand the inadequacies of the system he inherited. In the beginning of the war, neither side expected the conflict to last long; therefore no one felt a need to upgrade ambulance and medical care systems. This disregard resulted in catastrophic results when more than 2,000 Federal soldiers were wounded at the First Battle of Manassas. The army had hired civilians to evacuate the wounded from the battlefield, but when the battle "headed south," the civilian drivers abandoned their posts, leaving the wounded to languish on the field. The closest ambulances were in Washington, and it took days for them to arrive. Those soldiers who could walk, trudged the thirty miles back to Washington. The remainder waited for days for a motley assortment of vehicles to make its way from the capital to convey them back. Tragically, no formal hospital system existed for their care in the capital. In many cases, the wounded were deposited in government buildings. For example, the second floor of the U. S. Patent Office building, where a young clerk named Clara Barton was employed, was pressed into service as a hospital.⁵

Dr. Charles Tripler - Letterman's Predecessor

In August 1861, General George B. McClellan assumed command of the Army of the Potomac and appointed an old army officer named Charles Tripler to the position of medical director. Once described as an "energetic, spasmodic, crotchety, genial" soul, Tripler had contemplated many of the problems now confronting the army; he had served in the army since 1830 and had given lectures on military medicine at Cincinnati Medical College. The main areas he attempted to rectify lay in sanitation, hygiene and disease prevention, evacuation and hospitalization, and the proficiency of volunteer surgeons.⁶

Tripler's period of command yielded mixed results. He set up medical review boards to address the quality of surgeons and established a chain of command by designating brigade surgeons with authority over regimental surgeons. On the evacuation and hospitalization issue, he remained a staunch advocate of local care. Though he acknowledged that the quality of care provided at a regimental-level hospital could not match that of a larger facility, Tripler believed that a soldier taken a long distance from the front lines had less chance of returning to his unit in a timely manner. Still, he organized general hospitals in large northern cities such as Philadelphia and New York, though the buildings were often of an inadequate design. Tripler designed a new evacuation system for wounded soldiers by reorganizing the ambulances into their own unit or corps. He also advocated the creation of a trained staff to evacuate the wounded. However, his plans for the ambulance corps and attendants failed to reach fruition in time for the 1862 Peninsula campaign.⁷

Tripler's reform efforts led to open clashes with Surgeon General Clement A. Finley, and the tension between the two men hampered Tripler's reform efforts. His work received a boost when Finley was replaced by the 33-year-old William A. Hammond. Hammond brought new energy, drive, and a thirst for science to the job, but he also suffered from a hot temper and "great self-confidence" that "led him to

inconsiderate action,” especially with Secretary of War Edwin Stanton. Regardless, Tripler and Hammond seemed to get along well, at first.⁸

Tripler faced mounting problems, however. Before Finley left the surgeon general’s post, he asserted control over the accumulated medical supplies designated for the Peninsula campaign, leaving the Army of the Potomac vastly undersupplied. The lack of ambulances, trained staff, and means to evacuate the wounded from the Peninsula all contributed to overcrowding in the hospitals. The main evacuation point at White House Landing had “the stench of rotting flesh . . . rising on the summer air” according to one eyewitness. As Finley’s replacement, Hammond eventually concluded that Tripler, despite his best efforts, had simply been overwhelmed by the task. There were simply too many soldiers, and the army physicians had never dealt with humanity on such a mass scale. Tripler tried to address the problems within the framework of the old army system, but a fresh approach was required. Hammond decided to replace Tripler with Jonathan Letterman.

Letterman’s reform efforts

The new medical director arrived to find 20,000 sick and wounded soldiers along the James River. One nurse recalled her first impression of Letterman:⁹

A new Medical Director of the army has been appointed, for which we are deeply thankful. He . . . has just stood near me for a few moments, talking to some one, so that I could observe him,—one looks *into* faces so much here! His gave me a sad calmness. Such a worn face,—worn in the cause of suffering; full, it seemed to me, of a strong earnestness in his work. How much at this moment is freshly laid upon him!¹⁰

After working tirelessly to clean up the human mess, Letterman eventually turned his focus to reforming the army’s medical system. In this endeavor he had the support of his superior, General George McClellan. First, Letterman focused on the army’s ambulance service, a task that had plagued Tripler. One Army historian summed up the plan this way:

Letterman’s plan specified that two men and a driver, plus two stretchers, be on board each ambulance. Each regiment would be supplied with two light two-horse ambulances, and each corps another two, to provide evacuation from field to depot. Four-horse vehicles carried patients back to field hospitals and beyond. Letterman called for the organization of ambulances and their attendants by Army corps, with a captain in charge at the corps level, a first lieutenant at the division level, and so on down the line, with a sergeant directing the ambulances at the regimental level. The ambulance corps captain, though a line officer, reported to the medical director, an innovation that caused less comment than might have been expected, in view of the long history of controversy concerning the command relationship of medical and line officers. Those named to man the ambulances were neither teamsters nor band members, nor even hospital attendants who might be called away just when they were most needed. They were soldiers permanently detailed from the ranks for ambulance work. Commanders were required to order only “active and efficient” men to serve with the ambulance corps, and all the men of the new organization were to be regularly and carefully drilled in their new duties. Although medical officers from each division accompanied every ambulance train, ambulance corps officers handled all administrative matters. By creating a permanent, disciplined and professional ambulance corps, Letterman guaranteed more efficient evacuation and because surgeons and attendants were no longer responsible for transporting patients, better hospital care for the sick and wounded.¹¹

McClellan forwarded Letterman's ambulance system to Stanton for implementation in all the Union armies. Stanton rejected the proposal out of hand, stating it would only "increase the expenses and immobility of our army ... without any corresponding advantages." General-in-Chief Henry Halleck also snubbed the idea. Consequently, Letterman's new ambulance system was only applied in the area of the Army of the Potomac's operations during the first years of the war.¹²

Before Letterman could begin to implement any of his improvements, the Second Battle of Manassas was fought in August 1862. In addition to elements of the Army of the Potomac, this battle involved another army, the Army of Virginia, under the command of General John Pope. With more than 8,000 wounded, the two days of combat overwhelmed the medical resources of the Union forces. Pope's medical director, Thomas A. McParlin, attempted to take the centralization of medical treatment to the logical end by making one giant facility for the reception of the wounded. Once the fighting began however, the Manassas battlefield proved too vast and the distance too great for the wounded to make the central reception center. As a result, surgeons left the center to treat the wounded on the field, leaving the central treatment point undermanned. The War Department dispatched civilian surgeons and wagon trains, but a series of errors kept most from ever reaching Manassas. One person who did reach the battlefield was Clara Barton. She recorded an estimated 3,000 wounded at one site with overworked surgeons amidst "ghastly heaps of cut off arms and legs." Ten days after the battle, 600 wounded still needed evacuation, and only a cobbled-together assortment of ambulances and wagons got them back.¹³

Only a portion of McClellan's army reached northern Virginia in time to aid Pope in the Battle of Second Manassas. However, the few ambulances that did arrive in time allowed Letterman the opportunity to compare his new system for evacuation of the wounded with that which Pope's army used. In a March 1863 report, Letterman stated confidently that though only a short time had elapsed since the organization of the ambulance corps on August 2:

... the contrast exhibited during the battles fought by General Pope in Virginia in the latter part of August between the action of the ambulances belonging to the Army of the Potomac, a few of which were able to reach the battle-fields, and those of corps in which the system ordered by General McClellan did not exist, I have been informed was very striking in favor of the former.¹⁴

After Pope's defeat, McClellan once again assumed command of the Army of Potomac, which absorbed the Army of Virginia into its organization. On September 2, Letterman was named medical director of this newly combined force. Events moved rapidly from there with Robert E. Lee's invasion of Maryland and the subsequent Battle of Antietam on September 17. The campaign caught Letterman unprepared. Many of his supplies and equipment were still en route from the Peninsula, and the few items that had arrived were often discarded by units on the march. As the Union army moved north, Letterman ordered the incoming supplies stockpiled at Frederick, Maryland. However, the Confederates had burned the railroad bridge over the Monocacy Creek several days earlier, so that when the army moved west of Frederick supplies sent by rail had to be unloaded at Frederick and brought forward by wagon, which further delaying their arrival. Only the timely intervention of the United States Sanitary Commission staved off further disaster with additional medical stock that supplemented the army's meager resources.¹⁵

The Battle of Antietam resulted in the bloodiest day in the Civil War. Approximately 9,500 wounded Union soldiers lay on the field. From the Battle of South Mountain, another 1,500 wounded lay at Middletown, Maryland, with another 500 at Burkettsville. An estimated 2,000 Confederate soldiers were left behind at these locations as well. With such a massive amount of suffering humanity, critics charged the army with "gross mismanagement and inefficiency," as some soldiers lay on the battlefield for twenty-four hours.¹⁶ Letterman did not see the situation this way:

I have already mentioned that the ambulance had been left at Fortress Monroe when the troops embarked, and that no system existed except in the corps which belonged to the Army of the Potomac while at Harrison's Landing. A portion of the ambulances of some

of the corps arrived just prior to the battle. A large number had been distributed in other corps, but were yet unorganized. It was not, therefore, expected that they would prove as efficient as could be desired. Notwithstanding these facts, the wounded were brought from the field on our right before 2 o'clock on the following day. The Second Corps was more fully equipped and did most excellent service ... The troops on our left were those among whom no ambulance system existed, but here, owing to the exertions of the medical officers, the wounded were removed by the evening of the day following the battle. When we consider the magnitude of the engagement, the length of time the battle lasted, and the obstinacy with which it was contested, causing this to be the greatest and bloodiest action that ever took place on the continent, it is a matter of congratulations to speak of the expeditious and careful manner in which the wounded were removed from the field.¹⁷

As soon as possible, and as they were able to travel, the wounded were evacuated to Frederick. Those who remained were mostly housed in barns, houses, or under tents. Letterman claimed that patients exposed to open air did much better than soldiers lying in closed areas. He did not attempt to consolidate any of the wounded into a central hospital however.¹⁸



Dr. Letterman (seated in center without coat) restlessly sits with a group of officers near the Antietam battlefield, October 1862. Among the group are Generals John Buford and John Gibbon, both of whom would garner fame during the Gettysburg Campaign. (LOC)

The Battle of Antietam brought about two major reforms. Letterman felt that too much waste occurred in the distribution of supplies, especially at the regimental level. He therefore changed the distribution system from giving supplies directly to a regiment and instead began to issue them to the brigade. This allowed the brigade surgeon to keep better track of available supplies while at the same time reducing the number of wagons needed.¹⁹

The second reform instituted by Letterman concerned the organization of the field hospitals. At Antietam, there existed little distinction between dressing stations and main hospitals, such as those of the

medical directors of the divisions. The lack of uniformity also left confusion about which surgeons had what duties. Letterman wished to streamline the process; in other words, he wanted the wounded centralized, not on an army level at one location, but on a division level spread out over several locations. This system allowed every surgeon to know his exact duty station while also having the added benefit of allowing the best surgeons to operate on the direst cases.²⁰

The Battle of Fredericksburg on December 13, 1862, provided the first opportunity for the full implementation of Letterman's system. In one day, 9,028 Union soldiers were wounded. Letterman had in place all the tents, ambulances, medical supplies and other equipment needed for treatment. Stretcher bearers and ambulance drivers were trained and the evacuation of the wounded went smoothly with each ambulance knowing where to take its charge. In order to ensure the best chance of survival, Letterman called for the evacuation of the wounded as quickly as possible. This met with problems when the Confederates were not driven from the field and the wounded remained on the front lines. Despite this obstacle, the evacuation of the wounded to the field hospitals went forward with little difficulty. In fact, the vast majority of wounded soldiers were evacuated from the battlefield within twenty-four hours.²¹

Things were running smoothly for Letterman until the Union commander, General Ambrose Burnside, wanted to assume another offensive movement, and on December 16, 1862, ordered the evacuation of all the wounded, including the seriously hurt, to hospitals in the North. Letterman could not have foreseen this contingency. He originally wanted to keep the wounded in field hospitals for an extended period of time. Burnside's order forced Letterman to evacuate the wounded, even the most serious cases, much faster than anticipated. Fortunately, most of the wounded were already on the northern bank of the Rappahannock. The soldiers were transported to the railroad and loaded on open flat cars for transport north. This process was partially disrupted by an estimated 1,000 skulkers who jumped aboard the trains in order to flee the battlefield. This was sorted out but upon the arrival of the first trains at the port of Aquia Landing, it was found there were inadequate numbers of steam ships on hand for transportation resulted in huge backlogs. Though Letterman received some criticism, the arrangement of water transportation for the wounded was outside his responsibility and it is hard to single him out for censure for events beyond his control.²²

On January 26, 1863, Joseph Hooker replaced Burnside as army commander and saw fit to keep Letterman on as medical director. Letterman spent the winter once again reforming army medical practice. He was responsible for the health of any army numbering over 120,000 men and including 56 new regiments. At this time, the sick rate stood at 5 percent among veteran units and 8 percent among the new units. Letterman noted a large number of venereal disease and hernia cases among the new recruits and sought to establish a hospital in Washington for the sole purpose of treating these ailments. Before the hospital was established, however, a newly created department stripped him of supervision over the Washington area.²³

Hooker shared his medical director's concern for the troops and backed Letterman's belief that an improved diet would greatly benefit their health. In early February, the soldiers began to receive daily allotments of fresh bread and vegetables. Letterman felt that diet, along with increased sanitation efforts in both housing and cooking, resulted in a 7 percent drop in the overall army's sick rate. Diarrhea, which had raged through the camps, decreased from affecting 5.4 percent of the army population in February to 3.4 percent in April.²⁴

With such a vast amount of soldiers, Letterman implemented a medical inspector's position for the army and also one for each corps. He charged the individuals with overseeing the "general sanitary condition of the troops, the attention of Medical officers to their duties, and whatever in any way affects the health of the men instructed to your care, or may be of value in rendering the Medical Department of your corps more efficient ..." Through the inspection service, Letterman sought to obtain a better overview of the condition of the army and the medical services as a whole. He implored his inspectors "to bring to light the good as well as the bad."²⁵

Letterman began weeding out some of the "bad" through a medical board. The panel began its proceedings in October 1862, but the rapid movements of the army frequently interrupted its work. Out of seventeen medical officers reviewed before the board, three were found to be competent and fourteen

incompetent. Through these methods, Letterman instituted a review board that gradually improved the quality of doctors and therefore medical care in the Army of the Potomac.²⁶

All in all, the year 1862 ended with the Army of the Potomac's medical system vastly improved. It had grown from a grossly inadequate 100 medical officers in 1861 to 2,000 surgeons with an additional 10,000 men devoted to the soldiers' care. The large Northern cities contained newly created general hospitals that contained 50,000 beds. These additions, coupled with a revamped ambulance system, meant the Army of the Potomac could efficiently and effectively deal with up to 10,000 casualties, and tend to the general health of an army in the field of over 120,000 men.²⁷ Letterman summed up his goal in maintaining the health of the troops:

I had a twofold object in perfecting the physical condition of the troops. First, that the Commanding General should have an army upon whose health he could rely. Second, that those who might be wounded should be in a condition to bear the shock, and the operation, the suppuration, and confinement, with every prospect of success.²⁸

The Chancellorsville Campaign

In April, as Hooker prepared to start the Chancellorsville campaign, Letterman established tent hospitals along the railway leading north from Fredericksburg to Aquia Landing. He felt the hospitals were "abundantly supplied with officers, nurses, cooks, medicines, etc." Letterman also had the opinion that general hospitals, located in cities, had a detrimental effect on the men's morale and hence, their health. Therefore, as the Union army marched to battle, Letterman did not evacuate the roughly 8,000 wounded and sick soldiers located in the tent hospitals.²⁹

For the Battle of Chancellorsville, Hooker devised a bold scheme to defeat Lee and the Confederates. While holding the Confederate force in front of Fredericksburg with a portion of his army, Hooker's remaining corps marched west to cross the Rappahannock and Rapidan rivers and threaten Lee's flank and rear. The flanking column's initial march went well until Hooker lost his nerve and withdrew into a thickly wooded place called the Wilderness. Lee reacted quickly and moved to attack Hooker. The area in the Wilderness called Chancellorsville became the principal scene of the battle.

To expedite the march, Hooker allowed only two ambulances per division to cross the Rappahannock and reduced the number of wagons, which included valuable medical supplies. To compound problems, stretchers and stretcher-bearers were not allowed to cross until late in the day on April 30; many of the wounded men were carried on blankets as a result. Hooker also forbade medical supply wagons from crossing, which resulted in a shortage of medicine for some field hospitals. To remedy this deficiency, Letterman instructed ambulances, after discharging their loads, to return across the river loaded with medical supplies.³⁰

When Hooker withdrew into the Wilderness on May 1, Letterman claimed to have a premonition about the course of the upcoming battle. His original idea was to have the wounded sent to Fredericksburg, a distance of ten miles, instead of the longer route to the railroad, which covered twenty-five miles. Hooker's retrograde movement into the Wilderness changed Letterman's mind. He instead decided to send the wounded directly to the hospitals along the railroad, a decision which subjected the wounded to a much longer journey, but proved to be an advantageous move in the long run. Hooker's army did not maintain its position for long, and the subsequent driving back of Union forces endangered many field hospitals from both missiles and capture, making the removal of the wounded to hospitals near the railroad all the more important.³¹

Letterman estimated that a total of 9,518 Union soldiers were wounded during the Battle of Chancellorsville. Most were successfully evacuated by the ambulances to the field hospitals. However, Hooker's decision to retreat across the Rapidan River on May 3 forced Letterman to leave behind approximately 1,200 wounded in the care of nineteen surgeons. Letterman worried about the welfare of these men and solicited Hooker to write Lee regarding their evacuation. In characteristic fashion, Lee

agreed to allow Union ambulances and supplies to cross. Letterman assembled 550 ambulances by May 15, and the remaining Union wounded were withdrawn in short order.³²

Gettysburg

Never one to sit idly, Lee took advantage of the victory at Chancellorsville to invade the North. Between June 12 and 14, the Army of the Potomac followed, and the two forces roughly paralleled each other into Pennsylvania. On June 28, Lincoln, in one of the boldest moves of the war, sacked Hooker as army commander and replaced him with George G. Meade. With no time to reorganize, the new army commander kept all of Hooker's staff intact.

As the Union army marched north, Letterman removed the 9,025 sick and wounded soldiers from the Aquia Landing area to the Washington hospitals. On June 25, he dispatched Assistant Surgeon Jeremiah Brinton to Washington to retrieve medical stores stockpiled there. Not knowing where the two armies would clash, Letterman instructed Brinton, along with twenty-five wagons of supplies, to head to Frederick, Maryland. From there, the wagon train followed the army's march north eventually reaching Taneytown, Maryland, before being ordered to halt.³³

Union infantry continued to march north until the vanguard clashed with Lee's army on the ridges west of the little town of Gettysburg. Without retelling the story of the battle fought there, suffice it to say that the fate of a nation hung in the balance from July 1 through 3, 1863. In the end, Union forces pulled off a clutch victory that sent Lee and his army retreating back to Virginia.

The three days of fighting resulted in carnage on a scale not yet seen in any one battle so far in the Civil War. Words cannot describe the sea of dead and maimed humanity spread out over 6,000 acres. The scene was incomprehensible. Sophronia E. Bucklin, a nurse and veteran of numerous battlefield hospitals, made her best attempt to describe the landscape of Gettysburg:

Battered canteens, cartridge-boxes, torn knapsacks, muskets twisted by cannon-shot and shell, rusted tin cups, pieces of rent uniforms, caps, belts perforated with shot, and heaps of death's leaden hail, marked the spots where men were stricken down in solid ranks. Earlier in life it would have been almost impossible for me to walk over such a field of horror, but I had grown familiar with death in every shape. Yet, when right above my head, at one place, so close that it touched me, hung a sleeve of faded army blue—a dead hand protruding from the worn and blackened cuff—I could not but feel a momentary shudder.

Boots, with a foot and leg putrefying within, lay beside the pathway, and ghastly heads, too—over the exposed skulls of which insects crawled—while great worms bored through the rotting eyeballs. Astride a tree sat a bloody horror, with head and limbs severed by shells, the birds having banqueted on it, while the tattered uniform, stained with gore, fluttered dismally in the summer air.

Whole bodies were flattened against the rocks, smashed into a shapeless mass, as though thrown there by a giant hand, an awful sight in their battered and decaying condition. The freshly turned earth on every had denoted the pits, from many of which legs were thrust above the scant covering, and arms and hands were lifted up as though, pleading to be assigned enough earth to keep them from the glare of day.³⁴

Bucklin witnessed the carnage when 164,000 men collided in mortal combat. Lee entered Pennsylvania with 70,136 effectives. His army suffered a loss of at least 22,557 soldiers, or 32 percent of his forces, with 4,559 killed, 12,355 wounded, and 5,643 captured. Meade fought the battle with 93,693 effectives and suffered a total loss of 22,807 soldiers, or 24 percent of his forces, with 3,149 killed, 14,501 wounded, and 5,157 captured. These numbers still stagger us today.³⁵

Letterman had approximately 928 ambulances to evacuate his army's 14,501 wounded from the battlefield. In the discharge of their duties the ambulance crews suffered one officer and four privates killed with an additional seventeen wounded. Despite these hazards Letterman later claimed that not one Union soldier was left on the field by the morning of July 4. "I know of no battlefield from which wounded men have been so speedily and so carefully removed," wrote Letterman, "and I have every reason to feel satisfied that their duties could not have been performed better or more fearlessly." This feat is even more remarkable considering that the main Union hospitals were located several miles in the rear to avoid Confederate artillery fire.³⁶

Letterman's plan for the operation of the ambulance corps and the organization of the field hospitals came to fruition at Gettysburg. The majority of ambulance drivers knew exactly where to take their charges, which saved time and, more importantly, lives. Hospitals were arranged by corps areas and then, within this area, broken down to smaller division infirmaries. The net effect was to distribute the number of wounded more evenly among the doctors.

This is not to say that the surgeons were not overwhelmed by the number of wounded, however. General Carl Schurz, division commander in the Union 11th Corps, recorded a graphic impression of the field hospitals:

Most of the operating tables were placed in the open air, where the light was best, some of them partially protected against the rain by tarpaulins or blankets stretched on poles. There stood the surgeons, their sleeves rolled up to their elbows, their bare arms as well as their aprons smeared with blood, their knives not seldom between their teeth, while they were helping a patient on or off the table, or their hands otherwise occupied; around them pools of blood and amputated limbs in heaps, sometimes more than man-high.

Antiseptic methods were unknown at that time. As a wounded man was lifted upon the table, often shrieking with pain, the surgeons quickly examined the wound and resolved upon cutting off the wounded limb. Some ether was administered and the body put into position in a moment. The surgeon snatched his knife from between his teeth, where it had been while his hands were busy, wiped it once or twice across his blood-stained apron, and the cutting began. The operation accomplished, the surgeon would look around with a deep sigh and then—"Next!"

And so it went on hour after hour, while the number of expectant patients hardly to diminish. Now and then one of the wounded men would call attention to the fact that his neighbor lying on the ground had given up the ghost while waiting his turn, and the body was quietly removed. Or, a surgeon, having been long at his work, would put down his knife, exclaiming that his hand had grown unsteady, and that this was too much for human endurance—not seldom hysterical tears streaming down his face . . .

There are many who speak lightly of war as a mere heroic sport. They would hardly find it in their hearts to do so had they ever witnessed scenes like these, and thought of the untold miseries connected with them that were spread all over the land. He must be an inhuman brute or a slave of wild, unscrupulous ambition, who having seen the horrors of war will admit not that war brought on without the most absolute necessity, is the greatest and most unpardonable of sins.³⁷

Letterman saw the horrors described by Schurz. In his report, he described the overall work of the Army of the Potomac's Medical Corps in these words:

Over six hundred and fifty medical officers are reported as present for duty at that battle. These officers were engaged assiduously, day and night, with little rest, until the 6th, and

in the Second Corps, until the 7th of July, in attendance upon the wounded. The labor performed by these officers was immense. Some of them fainted from exhaustion induced by over exertion, and others became ill from the same cause. The skill and devotion shown by the medical officers of this army were worthy of all commendation; they could not be surpassed. Their conduct as officers and as professional men was admirable ...³⁸



Army personnel and civilian workers of the Sanitary Commission at the Second Corps Hospital near Rock Creek, July 1863. (NPS)

As with any clash, not all things went according to plan. While Letterman had plenty of ambulances, he lacked basic medical supplies. Hooker, before his departure, issued orders restricting the number of wagons following the army. As a result, there were only two wagons on average for each brigade. According to Letterman, he protested the order both verbally and in writing, foreseeing that such reduction would necessitate the sending away of “a large portion of its hospital tents, mess-chests, and other articles necessary upon the battle-field ...” On July 1, as John Reynolds’s 1st Corps prepared to make a march to Gettysburg, Meade compounded Letterman’s problems by ordering that “Corps Commanders and the commander of the Artillery Reserve will at once send to the rear all their trains (excepting ammunition wagons and the ambulances), parking these between Union Mills and Westminster.” The next day, Meade ordered the wagon trains still further away, to Westminster, approximately 25 miles from Gettysburg. “The effect of this order was to deprive the department almost wholly of the means for taking care of the wounded until the result of the engagement of the 2d and 3d was fully known,” recalled Letterman. He contended that the order essentially deprived “this department of the appliances necessary for the proper care of the wounded, without which it is as impossible to have them properly attended to as it is to fight a battle without ammunition.”³⁹

Following the battle, the lack of shelter especially hurt the wounded. Despite the enormous size of the Pennsylvania barns, there were simply too many wounded for the space. Every building imaginable was therefore used for a hospital. “There were some in churches, some in barns, some in tents among the fruit trees, some in tents in the fields, some under such shelter as a farmer would be ashamed to show for his cows,” recalled Medical Inspector G. K. Johnston. “It sometimes appeared as if an experiment had been made to see how many wounded could be crowded into a given space in a house.”⁴⁰ The inability to

provide shelter also necessitated that the wounded lay on the open ground. One member of the Christian Commission related that at a 2nd Corps hospital,

... the men were in terrible condition. They were upon the damp ground, many of them with nothing under them. In this hospital there was an unusually large number of amputations, the amputated stumps lying directly upon the ground, except when now and then elevated upon a handful of straw, or a bunch of old rags.⁴¹

Nurse Cornelia Hancock worked among the wounded day and night and described herself as “black as an Indian and dirty as a pig ...” Despite the horrid conditions, she recorded that the 2nd Corps boys retained their fight.

On reading the news of the copperhead [Northern people with pro-Southern views] performance, in a tent where eight men lay with nothing but stumps (they call a leg cut off above the knee “a stump”) they said if they held on a little longer they would form a stump brigade and go and fight them. We have some plucky boys in the hospital, but they suffer awfully. One had his leg cut off yesterday, and some of the ladies, newcomers, were up to see him. I told them if they had seen as many as I had they would not go far to see the sight again.⁴²

The Battle’s Aftermath

After the battle concluded, the Army of the Potomac marched in pursuit of the retreating Confederates. Meade ordered the majority of the surgeons to accompany the army. Letterman left 106 surgeons in Gettysburg while the other 544 packed up their belongings. “No more could be left,” recalled Letterman, “as it was expected that another battle would within three or four days take place, and in all probability as many wounded thrown upon our hands as at the battle ...” Such was his concern that he ordered additional medical supplies and 50 surgeons from Washington to rendezvous at Frederick, Maryland, on July 7. Two days later, 47 had arrived to offset the surgeons staying behind at the battlefield.⁴³

The remaining Gettysburg surgeons would have to tend to the more than 14,000 Union wounded. In their favor, most of the major operations were over. “The greater portion of the surgical labor was performed before the army left,” stated Letterman. “The time for primary operations had passed, and what remained to be done was to attend to making the men comfortable, dress their wounds and perform such secondary operations as from time to time might be necessary.” Fifth Corps surgeon John S. Billings probably would differ on what constituted “secondary operations.” Writing his wife on July 9, Billings stated, “I am covered with blood am tired out almost completely ...” but after operating all day long, “have got the chief part of the butchering done in a satisfactory manner.”⁴⁴

Letterman feared the situation would overwhelm his medical personnel and therefore ordered another twenty civilian surgeons to report to Gettysburg. By this point in the war, he did not hold a high opinion of this class of surgeons, finding “the great majority think more of their own personal comfort than they do of the wounded.” Nevertheless, he did not have a choice in the matter and sent the request, though once he left with the army, Letterman never knew if the surgeons ever reached Gettysburg at all.⁴⁵

Confederate wounded left behind by Lee stretched scant Union resources even further. Letterman reported 6,802 Confederates in his charge, approximately 1,800 of them in Union hospitals. The rest, more or less 5,000 men, were left behind in Confederate hospitals that stretched for miles down the Fairfield and Chambersburg roads. “All the worst cases were left in these hospitals,” recalled Surgeon George T. Stevens of the Union 6th Corps. “Never had we witnessed such sad scenes as we were passing through. The Confederate surgeons were doing what they could for their wounded, but they were destitute of medicines and surgical appliances, and even food.”⁴⁶

The previous paragraphs hopefully leave a sufficient impression of the horrors of the Gettysburg hospitals. The surgeons' difficulties were only compounded by the lack of sufficient medical supplies. As fate would have it, the medical wagon train did not reach the battlefield until July 5 and additional time was needed to distribute the supplies. Like an angel from above, the United States Sanitary Commission stepped in to fill the void.⁴⁷

The United States Sanitary Commission

Just three days after the firing on Fort Sumter, on April 15, 1861, in Bridgeport, Connecticut, a group of women organized the Ladies' Aid Society. Also on the same day, a group of prominent physicians, including Dr. Elizabeth Blackwell, met in New York City to organize their own relief group. The doctors were influenced by the recent Crimean War and wished to avoid those medical disasters here. On April 30, Blackwell formed the Women's Association for Relief of New York City with Vice-President Hannibal Hamlin opening the proceedings. The original mission of the association was to train female army nurses, but the war effort eventually grew to such proportions that the need was felt for more civilian oversight. After much lobbying, including Lincoln's opposition to what he referred to as a "fifth wheel on the coach," Secretary of War Simon Cameron authorized the United States Sanitary Commission on June 9, 1861.⁴⁸

Throughout the war, Reverend Henry W. Bellows presided as the president of the Sanitary Commission. Behind the scenes, however, the real workhorse was the commission's chief executive officer, Frederick Law Olmstead, who served from June 1861 to September 1863. This gentleman is best known today as the architect of Central Park in New York City. During the Civil War, Olmstead's responsibilities included making sure sufficient supplies were gathered near the front lines and reviewing the procedures used to evacuate and treat the Union wounded. The Sanitary Commission had a knack for perceiving where potential battles might occur and, being a civilian organization, was able to bypass army "red tape" to arrive with crucial supplies; never was this more evident than at the Battle of Gettysburg.⁴⁹

The Sanitary Commission at Gettysburg

The Sanitary Commission accumulated supplies at Philadelphia, Baltimore, Washington, and New York in anticipation of the upcoming battle. Meanwhile, a wagon train followed the main army to Frederick. Not being directly part of the army, the Sanitary Commission's wagons did not come under Meade's directive. Therefore, the Commission's medical supplies did not proceed with the main army wagon train to Westminster but headed to Gettysburg, arriving on July 2. Immediately after Longstreet's assault began, Sanitary Commission wagons began to distribute supplies to the different hospitals. The stock consisted primarily of concentrated beef soup, stimulants, crackers, condensed milk, concentrated coffee, cornstarch, farina shirts, drawers, stockings, towels, blankets, quilts, bandages, and lint. In all, twelve wagonloads of supplies were delivered to the hospitals before the railroad was restored to operation. Working in the 2nd Corps hospitals, nurse Cornelia Hancock praised the Sanitary Commission: "Uncle Sam is very rich, but very slow, and if it was not for the Sanitary, much suffering would ensue. We give the men toast and eggs for breakfast, beef tea at ten o'clock, ham and bread for dinner and jelly and bread for supper."⁵⁰

In a change from previous battles, Letterman wished to remove the wounded as rapidly as possible from Gettysburg. With rail service disrupted by the destruction of the railroad bridge over Rock Creek east of the town, it was difficult to move the quantity of supplies needed to Gettysburg. By this time in the war larger Northern cities were equipped with general hospitals. Expecting the railroad repairs to be completed by July 6, Letterman left only six ambulances and four wagons for each corps for transportation of wounded to the railroad depot. Despite this obstacle, the evacuation of the wounded from Gettysburg by rail proceeded quickly.⁵¹



Headquarters of the U.S. Sanitary Commission at Camp Letterman General Hospital near Gettysburg, 1863. (NPS)

Sanitary Commission nurse Georgeanna M. Woolsey recalled how the evacuation process all began:

The surgeons left in care of the wounded three or four miles out from the town, went up and down among the men in the morning, and said, "Any of you boys who can make your way to the cars, can go to Baltimore." So off start all who think they feel well enough, anything being better than the "hospitals," so called, for the first few days of the battle ...

For the first few days the worst cases only, came down in ambulances from the hospitals; hundreds of fellows hobbled along as best they could in heat and dust, for hours, slowly toiling, and many hired farmers' wagons, as hard as the farmers' fists themselves, and were jolted down to the railroad, at three or four dollars the man. Think of a the disappointment of a soldier, sick, body and heart, to find, at the end of this miserable journey, that his effort to get away, into which he had put all his remaining stock of strength, was useless; that the "the cars had gone," or "the cars were full" ...⁵²

On July 8, Medical Inspector Edward P. Vollum arrived at Gettysburg to find an estimated 2,000 wounded waiting by the railroad tracks for transportation. Sanitary Commission members erected an aid station, located roughly across the road from the future site of Camp Letterman, and began to dispense food to the soldiers. The aid was much needed as the railroad continued to have setbacks. The railroad bridges east of Gettysburg, which were quickly reconstructed after the Confederates destroyed them, collapsed with the summer rains or otherwise proved too weak to hold even the lightest of engines. With the telegraph wires down and the local railroad agents seemingly unable to come to grips with the situation, the government summoned Military Railroad Superintendent Herman Haupt to make order out of chaos. Haupt quickly untangled the mess and had the trains running efficiently. The only other mishap

occurred on July 18, when a bridge in Harrisburg collapsed under the weight of a cattle car, causing all of the Gettysburg wounded, bound for New York, to be diverted to Baltimore and York.⁵³

Still, the trains kept rolling, two times a day—one in the morning and evening. By July 22, 11,425 soldiers (7,608 Federals and 3,817 Confederates) had departed Gettysburg via the rails. Someone once stated, “to the victor go the spoils,” and thus Federal cases were evacuated first, by a 2-to-1 ratio. Another 4,000 Union wounded left from Littlestown and Westminster. By July 24, a total of 16,125 Union and Confederate wounded had been evacuated from Gettysburg. During the ride to the main Union hospitals, one source estimated that on a daily basis, family members and friends removed an average of 800 wounded from the trains along the route. As the Confederate wounded gained strength and were able to undergo the rigors of travelling, they were transferred by rail to DeCamp General Hospital on David’s Island in New York. Between July 17 and 25, the site received approximately 3,000 wounded Confederate prisoners. The prisoners had to be rerouted around the draft riots occurring in New York City to reach the hospital.⁵⁴

Camp Letterman

Union medical personnel estimated that after July 24, there were 4,217 Union and Confederate soldiers remaining in Gettysburg. Although some of this number continued to be evacuated, the majority were deemed to be dangerously wounded to travel any distance. These cases were mostly wounds to the head, chest, abdomen, and pelvis as well as compound fractures of the thigh, leg, and arm. Since these men were scattered across a large area at different field hospitals it was necessary to consolidate them in one hospital where they could be treated more efficiently and be more easily resupplied and evacuated when able to travel.⁵⁵ In a note to her husband, nurse Emily Souder added:

We learn this evening that the ambulances are all ordered to join the regiments to which they belong. At all events, the Second Corps [hospital] is being moved to the General Hospital with all convenient dispatch. Dr. Duinelle said that the surgeons were wanted with their regiments, which made concentration necessary.⁵⁶

The first mention of establishing such a camp came from Meade’s headquarters on July 5: “The medical director [Letterman] will establish a general hospital at Gettysburg for the wounded that cannot be moved with the army.” Eventually a site was chosen on the York pike, roughly a mile east of Gettysburg, on the farm of George Wolf. The location had great attributes for a camp or general hospital. There were woodlots both to the north and south, the ground sloped allowing good drainage, and a natural spring existed on the property. These advantages, combined with the railroad being only a short distance across the pike, led to its selection. In honor of their medical director, the camp staff named the site Camp Letterman.⁵⁷

This was not the first time the Wolf farm had been used as a camp site. In February 1862, the 10th New York Cavalry moved from town to newly constructed barracks amidst the trees on the Wolf property. The cavalrymen did not stay long however, and the barracks were dismantled in May 1862. Strong evidence also exists that Jubal Early’s division used the farm as a campsite on its first trip through Gettysburg on June 26, 1863. Private Charles C. Williams of the 26th Emergency Militia was captured by Early’s men but paroled shortly thereafter. In an article for the *New York Herald*, he related:

After the enemy took us prisoners we were conveyed to Gettysburg. 2,500 rebels passed through Gettysburg on Friday afternoon, and encamped on the road to York. Generals Gordon and Early were with these troops. The former made a speech, in the woods, to his men.

Historian William Frassanito states that the Wolf farm woods were the only stand of timber located along the York pike in the near vicinity of Gettysburg.⁵⁸

Surgeon Henry Janes selected the Wolf farm somewhere between July 9 and 14, but it took time to assemble the needed equipment. On July 9, Surgeon Henry Janes wrote Letterman:

We have been short of nurses, surgeons, and transportation, both ambulance and railroad. I shall be able to begin the permanent hospital soon, if I can get the hospital tents. There are not enough in the corps hospitals for the purpose.⁵⁹

On July 14, Janes wrote a follow-up letter to Letterman informing that “a fine site” had been selected for the camp but no tents had arrived yet.⁶⁰

The exact date that Camp Letterman began operation is hard to ascertain. The evidence shows that it took approximately a week, from July 14, to accumulate and place the necessary supplies, equipment, and tents. One early medical historian listed the opening of the camp as July 22. Nurse Sally Myers also noted “people took the soldiers into their houses and cared for them until Camp Letterman, the hospital camp, was opened on July 22.”⁶¹ Chaplain William C. Way of the 24th Michigan wrote on July 24:

The wounded are being sent off as fast as they become able to travel, and soon all those who are not able to be moved far will be carried to the general hospital that is being established here. Long trains of ambulances are to be seen each day, moving toward the depot, filled with rebels, who, as a general thing look somewhat dejected—even those who are not seriously wounded.⁶²

Dr. William F. Norris noted that the orders to move the patients in the 1st Corps hospitals were received on July 22. Preparations took time though, and the soldiers were not moved until the next day.⁶³ On July 26, 1863, Norris wrote:

At 4 o'clock A. M. our Hospital was astir, and by 8 A. M. all wounds had been dressed, the patients had had their breakfast and we were beginning to move. I sent those cases capable of transportation to Harrisburg and most of our stumps by ambulance to the General Hospital, our comp fractures of thigh and leg I had carried in stretchers and as the distance was a mile and a quarter it was a considerable undertaking. By stirring up the Provost Marshal for a detail of men and keeping every available man steadily at work I succeeded in having everything moved out by 7 P.M. I then started and walked out myself. Our patients bore the journey better than I had anticipated, those carried on stretchers did not appear to have suffered at all.⁶⁴

Emily B. Souder, a nurse in the 2nd Corps hospitals, also noted that the actual movement of the wounded took place on July 23:

... to another location, known as “the clover field,” a change which was very needful on every account. The moving was a very serious matter. It was necessary to carry every man on a stretcher, about a third of a mile. The tents were taken down and moved beforehand. It was pitiful to see the faces of many of these men, who feared and dreaded to be moved, and yet exhibited a degree of fortitude which was truly wonderful ...⁶⁵

Although this could have led to a traffic jam, it appears that the wounded were transferred at one time from all the corps hospitals over the course of several days. On July 27, Souder recorded, “The Third and Fifth Corps are being brought into the General Hospital ... The Twelfth Corps is entirely removed; the Eleventh nearly so. The ambulances and litters are constantly passing through town.”⁶⁶

Camp Letterman was located on present-day U. S. Route 30, about a mile and a half east of the Gettysburg square. The vast area covered by the hospital left a vivid impression on those who visited, and their writings describe the systematic organization. Surgeon William F. Norris noted,

The Hospital consists of hospital tents on the slope of a hill near Gettysburg and on the railroad; plenty of good water and woods on two sides of the encampment. Dr. Goodman formerly resident at the Almshouse is in charge. He has put me in charge of the row of tents appropriated by the 1st Corps, 16 tents holding 192 beds. These are sub-divided into wards, 48 beds to the ward, each under charge of an assistant surgeon.⁶⁷

Chaplain Way visited the hospital on August 7 and came away quite impressed by the operation:

Today we visited the General Hospital, and found it, as far as the arrangements of the tents are concerned neat, clean and systematic. The hospital is located on a rise of ground skirted on two sides by an oak grove, as fine a stand as I ever saw. The tents are pitched in an open field, which descends gently toward the west and north. A fine spring, sufficient for a bountiful supply of good water, is located near the cook-house. There are about one-hundred and twenty-six tents already up, each of which is occupied by twelve persons. The prospect is that the area of the hospital will be materially enlarged, as tents are being put up daily. The patients are in good spirits, and those with whom I conversed say they have good care and medical [illegible]. The Sanitary and Christian Commissions have depots on the ground, from either of which supplies of delicacies, clothing and reading matter are being constantly issued to meet the wants of our own wounded as well as the rebels—who, by the way receive the same care and treatment as our own men ...⁶⁸



Tented hospital wards at Camp Letterman, 1863 (NPS)

Nurse Sophronia E. Bucklin also served at Camp Letterman. She left the most detailed account on all aspects of life, death, and daily routine. Even after six years had passed since her time at Gettysburg, Bucklin seemed to recall almost every detail, especially the deaths, that occurred in her ward. She described Camp Letterman in these words:

The hospital lay in the rear of a deep wood, in a large open field, a mile and a half from Gettysburg, and overlooking it, the single line of rail which connected the battle town with the outer world ... In this open field our supplies were landed from Washington. Whole car loads of bread were moulded [sic] through and through, while for a time we were sorely pinched for the necessaries of life ...

The hospital tents were set in rows—five hundred of them—seeming like great fluttering pairs of white wings, brooding peacefully over those wounded men, as though to shelter them from further evil. Walks were thrown up between those rows, in order that they might dry quickly after the summer rains. The ground, now sodded [sic]—soon to be hardened by many feet—was the only floor in the wards or in our quarters.⁶⁹

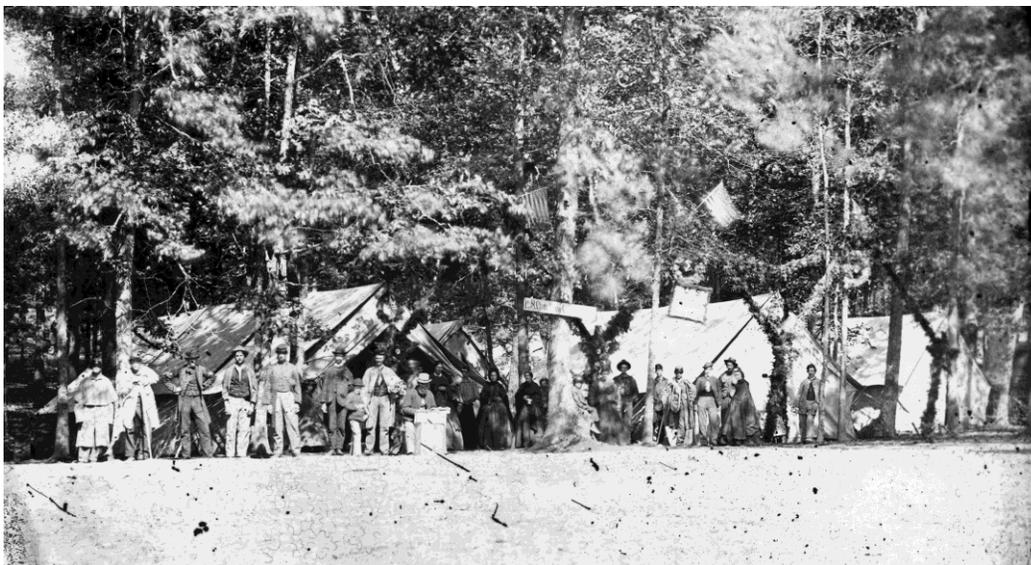
Letterman assigned the supervision of this vast general hospital to Dr. Henry Janes. Born in Waterbury, Vermont on January 24, 1832, Janes earned his medical degree from New York's College of Physicians and Surgeons in 1855. In 1861, Janes entered the army as the surgeon of the 3rd Vermont volunteers and two years later gained an appointment as a regular surgeon in the U.S. Army. Before Gettysburg, Janes oversaw the hospital operations at Burkettsville, Maryland, in the fall of 1862; Frederick, Maryland, in the winter of 1862; and the 6th Army Corps the following spring of 1863. He was well prepared for his duties at Camp Letterman. By mid-August, one assistant superintendent, seven division surgeons, and twenty-six ward surgeons were present to assist Janes in his work.⁷⁰

Women at Camp Letterman

Sophonra Bucklin estimated that forty women served in one capacity or another at Camp Letterman. Unlike the majority of women at the hospital, Bucklin did not serve with the Christian or Sanitary Commission; instead she served as one of the seven U.S. Army nurses. Regardless of position, daily life in Camp Letterman meant few comforts. Cornelia Hancock noted that she lived in a large hospital tent with three other women. Nevertheless, she felt, "I am better than I am at home. I feel so good when I wake up in the morning."⁷¹ Bucklin described the interior of her living quarters in these terms:

My tent contained an iron bedstead, on which for a while I slept with the bare slats beneath, and covered with sheets and blanket. I afterwards obtained a tick and pillow, from the Sanitary Commission, and filled them with straw, sleeping in comparative comfort. I soon found, however, that the wounded needed these more than I, and back I went to the hard slats again, this time without the sheets, which were given for the purpose of changing a patient's blood-saturated bed.

As time passed, and the heavy rains fell, sending muddy rivulets through our tents, we were often obliged in the morning to use our parasol handles to fish up our shoes from the water before we could dress ourselves. A tent cloth was afterwards put down for a carpet, and a Sibley stove set up to dry our clothing. These were oft times so damp, that it was barely possible to draw on the sleeves of our dresses. By and by I had the additional comfort of two splint-bottomed rocking chairs, which were given me by convalescent patients, who had brought them to the hospital for their own use, and on departing left them a legacy to me. With these a stand was added to my furniture. I here learned how few are nature's real wants. I learned how much, which at home we call necessary, can be lopped off, and we still be satisfied; how sleep can visit our eyelids, and cold be driven away with the fewest comforts around us.⁷²



Headquarters of the U.S. Christian Commission at Camp Letterman. (NPS)

Life at Camp Letterman

During the course of Camp Letterman's operation, an estimated total of 4,000 patients passed through the facility. On August 10, the hospital held 1,772 patients, with almost half of those soldiers being Confederates. A staff of approximately 400 personnel attended to the soldiers' needs. Still, Camp Letterman did not hold all the patients. The first week of August found approximately 200 soldiers still held at the seminary, 30 more wounded at the "Express Office" hospital, and 40 Union and 30 Confederate wounded at the "School House" hospital. There also may have been a few more Confederate wounded still located in the farms around the county. At some point, all of these wounded were consolidated. In October, 112 officers and 1,235 enlisted men from the Confederate army alone were at Camp Letterman.⁷³

Cooking for several thousand men at one time proved an art in itself. "Our cook-house alone is a sight," remarked Cornelia Hancock. "They have meals cooked for thirteen hundred men, so you may know that they have to have the pots middling size. If you ever saw anything done on a large scale, it is done so here." Justus Sillman, of the 17th Connecticut, was equally impressed with the operation; he and his comrades not only didn't have to cook, but their underclothes were washed for free also. He wrote on August 19, "Our cooking is carried on, on a grand scale, the cooks at every meal set a table for about 700 nurses and workmen and furnish all the wounded with half a dozen different kinds of food. They had five large boiler stoves, six large cooking ranges & three immense ovens besides innumerable pots & kettles." Sophronia Bucklin noted three different operations within the building—a government kitchen, a low diet, and an extra diet kitchen. Soup was always served for dinner. "One set of men were detailed for soup-making, another for roasting beef, another for cooking vegetables, and when the great oven was prepared, the bread for the whole hospital was baked in its heated depths," she recalled. A voucher submitted by Henry Janes noted thirteen cords of wood being utilized for the third quarter of 1863. In February 1864, Janes returned eleven stoves and 119 kettles to the United States Quartermaster at Gettysburg.⁷⁴

As with any staff or workforce of any era or type, there was drama. Overseeing the "extra diet" kitchen operation was a Mrs. Holstein. This woman considered the kitchen her area and no one else's. When staff attempted to prepare extra food for personal consumption, Holstein posted a guard with fixed bayonet at the entrance to ward off all intruders. She even refused to comply with a certain doctor's orders for nutrition saying, "he was the most unreasonable man she ever saw." One nurse claimed that

this particular surgeon often personally went to the kitchen and fixed the food himself. Holstein must have possessed certain skills and qualities however, because she survived in her position.⁷⁵

Doctors, nurses, hospital stewards, ward surgeons, wound dressers, and night watchmen worked dawn to dusk every day. The first round in the morning was to administer “stimulants” and distribute food. In the early days of Camp Letterman, nurses also had to change bandages, but eventually wound dressers were assigned to each ward. The nurses made a total of nine visits per patient each day to the two hundred men under their charge—three visits each to distribute beef tea, stimulants, and extra diet. Each tent housed an average of twelve men and, of course, each individual patient had his own specialized needs and medicines. One nurse wrote home concerning her Confederate patients that she was “not obliged to give them anything but whiskey.”⁷⁶ Jacob Shenkel served as a nurse at Camp Letterman. His diary for this time period captures some of the daily routine in one tent:

August 1—Today I have been pretty busy, I dressed ten wounded—five with amputated limbs—it was my first trial dressing an amputation

August 3—the Doctor told George that he would have to lose the other foot but he wouldn’t let him take it off

August 4—the boys have been carrying on at a high rate today—have five with amputated limbs—two fractured thighs—one shot through the left shoulder—one through the left ankle and one in the back

August 5—Jim Hurdle of Fourth Michigan had his leg amputated just below the knee—he was wounded on Second of July through the ankle joint—have six amputations in the tent now.

August 6—have been very busy today—George Arnsberg had two chills today—to [sic] hard for the poor fellow to lose one leg—get shot through the foot also on the shoulder

August 9—Inspection this morning—Saw a fight between one of the Feds and a Confed—the latter got used up pretty bad—made box for George’s foot—Miss Dix General Superintendent of USA Hospital visited this Hospital today

August 21—today has been very warm—Calvin P. Laviorin was up on his crutches for the first time since he was wounded

August 28—Dr. Jones examined George Arnsberg’s foot—took out several pieces of bone – the largest was about the size of a common sized marble

September 3—the attendants were reduced to two a tent ... wrote letter for George Arnsberg

September 11—Miss Bucklin baked a nice cake for the boys

September 12—Have been busy today—Dressed five stumps—one foot—one wrist—one spine—one shoulder—one fractured thigh—Shaved eight of the boys—Change all their shirts, drawers also their sheets—Rained pretty heavy—Had corn bread for supper

September 15—got Pretty Boozy this morning—took too much beer—Has been warm today

September 21—telegraphed to Mr. Laird to come on—His Son was very Low

September 24—Corporal David C. Laird died about five o'clock this morning—was buried in evening at five⁷⁷

Death at Camp Letterman

All those who worked at Camp Letterman confronted death on a daily basis; although each came to accept death as a matter of routine, none ever grew used to it. “A perpetual procession of coffins is passing to and fro” is how Souder described the scene. “Very often through the day we see dead men carried out,” she added. “Indeed I have learned to know whether is dead or living, by noticing whether he is carried with his head or his feet toward the shoulders of his bearers.”

Hancock noted another death that affected her greatly. “I think war is a hellish way of settling a dispute. Oh, mercy, the suffering!” she wrote home. “All the worst are dying rapidly. I saw one of my best men die yesterday. He wore away to skin and bone, was anxious to recover but prayed he might find it for the best for him to be taken from his suffering. He was the one who said if there was a heaven I would go to it.”⁷⁸ Even in October, Union soldier Frank M. Stoke estimated an average of seventeen soldiers were dying a day. There were close calls too. Stoke related that a Confederate soldier was being carried to the “dead house” when he rose up on the stretcher and “asked what they intended to do with him; they took a hearty laugh and turned about and carried him back to camp.” As for the truly dead, Stokes commented:

Those who die in the hospital are buried in the field south of the hospital; there is a large graveyard there already. The dead are laid in rows with a rough board placed at the head of each man (they are nearly all Confederates); the name of each man is written on the board and also the state and regiment to which he belonged. The amputated limbs are put into barrels and buried and left in the ground until they decomposed, then lifted and sent to the Medical College at Washington. A great many bodies are embalmed here and sent to their friends. Close to the grave-yard is a large tent called the deadhouse, another where they embalm.⁷⁹

Some might argue that the dead were the only ones who were truly free of suffering. As stated earlier, only the worst cases were in Camp Letterman. “It is heart rendering to pass through the streets and hear the cries of agony that burden the air,” Stokes related. “I have heard them when I was away from the hospital a half-mile.”⁸⁰

Scores of family and friends came to Gettysburg in search of loved ones. According to Bucklin, three wives and two mothers were present in her ward. One mother witnessed a surgeon take twenty-six pieces of shattered bone from her son’s wounded shoulder while “his face was bloodless as that of a corpse, and cold sweat-drops stood on his brow, in evidence of the terrible agony which he endured.” Nevertheless, “the friends of men who have died seem so grateful to me for the little that it was in my power to do for them,” noted Cornelia Hancock. “I saw a man die in half a minute from the effects of chloroform; there is nothing that affected me so much since I have been here; it seems almost like deliberate murder. His friends arrived today but he had to be buried before they came. Every kind of distress comes upon the friends of soldiers.”⁸¹

Among the many sad tales in the aftermath of the battle, one story, concerning a wife and eighteen-month-old baby, was especially touching. The wife arrived at Gettysburg in search of her husband and found him, stupefied with morphine, because of “a horrid fissure, through which a man’s head might pass, had been made by a shot tearing through his bowels, and rendering it impossible to do anything to relieve him.” She sat for hours by his bedside, clutching that little baby, and waiting for some kind of faint recognition that the husband knew she was there. Finally, a surgeon allowed the soldier to regain consciousness by allowing the effects of the morphine to wear off.

Slowly it passed away, and his mangled body was racked with intensest suffering. He lay on his face, with his eyes turned toward her, that, when his senses revived, she might be the first to meet his gaze. After a while he looked up—the wild glare of pain in his eyes—and said, as he saw whose face bent over him, “Oh! Mary, are you here?” His groans were terrible to hear, and in mercy he was again given the opiate, and slept his life out in the deep breathing of unconsciousness.

How our hearts were pained for that wife, sitting motionless beside his body, holding in her lap the little boy who was so soon to be fatherless, tearless in her great agony ... Broken hearted she returned to the desolate home which should never know the sunlight of pleasure again, while her soldier’s body rested under the distant sod on which was split an ocean of heroic blood.⁸²

Recovery at Camp Letterman

As heart wrenching as many stories turned out, occasionally there were somewhat bright spots for family members. One Pennsylvania soldier arrived with a bullet wound through both eyes after his comrades had written him off as dead. The resulting inflammation from the wounds left him incapacitated and he lay for weeks unconscious with no one knowing his identity. When hungry, he would call for “Mother” and, at times during his delirium, talk at long lengths about people at home with statements such as, “What do the girls say about me, now I have gone to the war? Does Jenny miss me?” Hospital personnel sent the soldier’s description over the wires to the rest of the North in hopes that someone would know him. “At length his parents heard of him, and from the description thought it might be the son they mourned as dead. ... [H]is father came, and recognized in the blind, deranged man his handsome, brave boy. Eventually his mind would be restored, but his sight never. In this state he took him home to his mother he talked of so much.”⁸³

Confederates at Camp Letterman

Today, the Civil War is long past, the reconciliation between the two sides achieved, and the hatchet long buried. During the war, however, the nurses who served in front-line hospitals like Camp Letterman were both extremely patriotic and in possession of firsthand knowledge of what Confederate marksmanship could inflict on a Union soldier. In other words, the Confederates were their mortal enemies, and when they wrote their letters and memoirs, recalled their Confederate patients in a most unfavorable light. Bucklin described the Rebels as “grim, gaunt, ragged men—long haired, hollow-eyed and sallow-cheeked” who were “too indolent to pluck from their garments the vermin that seemed to be swarming in every seam” and possessed a “hydrophobic fear of water.” Bucklin also had an interesting theory regarding the difference in disposition between Union and Confederate wounded:

It was universally shown here, as elsewhere, that these [Confederates] bore their sufferings with far less fortitude than our brave soldiers who had been taught, in sober quiet homes in the North, that while consciousness remained, their manliness should suppress every groan, and that tears were for women and babes.

With the same care from attendants, and the same surgical skill, many more of the rebels died than of our own men—whether from the nature of their wounds, which seemed generally more frightful, or because they lacked courage to bear up under them, or whether the wild irregular lives which they had been leading had rendered the system less able to resist pain, will always remain a mystery to me.⁸⁴

Bucklin claimed that of a total of 22 Confederates in her ward, 13 died. Of course, the underlying reason lay in the fact that only the most severely wounded ended up in Union hospitals.

Souder also had the impression that the Confederates acted differently than the Union men. She noted that some of the officers were “intelligent and gentlemanly” while most of the privates were “perfectly abject.” “They whine, and cry, and complain,” she noted, “and their own men, who have been detailed as nurses, will not wait on them. They may well be called ‘white trash,’ for they are lacking in nearly all those qualities that we respect and value.” Through it all though, none of the nurses ever recorded that they refused to tend to the Confederate soldiers. “I have waited upon them hour after hour, as kindly as I ever did upon our own loyal men,” claimed Anna Holstein. “All this was before I had been among those who were starved in Southern prisons; after having seen them, the task might have been a difficult one. The orders were imperative in the hospital; no difference was permitted in the treatment of the two.” In contrast though, another nurse recalled a widow who came to Gettysburg only to discover that her husband lay in an unmarked grave on the field. The wife’s grief was so great that she refused to wait upon the Confederate soldiers viewing them as “wanton murderers of her beloved husband.” The widow, even though “good and faithful among our own men” was “necessarily discharged.”⁸⁵

The majority of the tents at Camp Letterman mostly held either Union or Confederate soldiers exclusively. However, in a few instances, soldiers from both sides could be found under one roof. For most wards, the close proximity of enemies did not pose a problem. Souder recalled Union and Confederate soldiers “lie side by side, friendly as brothers. I said to some of them yesterday, that the North and the South would surely know each other better than ever before, when this war was over.” However, one must remember that only a few weeks ago these men were trying to kill each other. In a few isolated situations, some soldiers had a hard time letting go of their hatred. In one instance, a wounded Confederate soldier was being brought into a predominantly Union tent when one patient began to strenuously object. When attendants did not pay any heed to the protestations, he remarked that “he enlisted to kill rebels, and certainly as they left him there, his crutches would be the death of him—he could use them, if not the musket.” Finding the Union soldier “in earnest” and the poor Confederate scared out of his wits, attendants “took him among his own countrymen.” In a similar circumstance, this same nurse recorded that a Union captain insisted on being removed from the tent and placed under a tree until the Confederate was removed.⁸⁶

Nurses noted that many women of Southern persuasion made the journey to assist and succor the Confederate wounded and, in some instances, aid in their escape. “Some *ladies* from Baltimore made themselves a name and a fame, a few days since, by furnishing citizens’ clothes for some rebels to flee in. They stole several horses, and made their escape, but most of them were retaken.” Probably as a result of this abetting, militia units were placed at the camp. During Camp Letterman’s operation, the 36th Pennsylvania Militia had the first duty, followed by the 51st Pennsylvania Militia, and finally the “Patapsco Guards” of Howard County, Maryland. The soldiers had strict orders that all civilians must leave the camp by four in the afternoon. Cornelia Hancock came across these guidelines when one guard asked whether she was a civilian or a nurse. “As it was before I was sworn in, I had to say ‘No.’” The guards were in the act of escorting Hancock off the grounds when a steward appeared and vouched for her credentials.⁸⁷

On September 23, one of the more memorable events for the staff and patients occurred at a picnic held on the grounds. With the approval of Dr. Janes, the Christian Commission solicited fruits and delicacies from Philadelphia citizens, and the local population also added contributions. The staff decorated the camp streets in beautiful evergreen and the day proved “bright and balmy,” tempting “many, who had not yet ventured outside their tents, into the open air.” “Hospital life, with its strictest military rule, is so wearisome and monotonous, that what would be the most trivial pleasure at other times and places, is *here* magnified into a matter of great importance,” wrote Anna Holstein. Long tables were placed in the middle of the camp and “hundreds moved upon crutches with feeble, tottering steps to the table, looking with unmistakable delight upon the display of luxuries. Bands of music enlivened the scene.” A reporter for the *Adams Sentinel and General Advertiser* noted: “Four or five hundred chickens, 20 or 30 hams, 50 tongues, oysters in abundance, pies, cakes, peaches, grapes, watermelons, cantaloupes,

loaded the tables.” Around dark, the nurses served ice cream to all the patients inside their tents. The festivities were enlivened by various entertainments, including greased pole climbing, sack races, foot races, and cavalry demonstrations. According to Holstein, the soldiers deemed the African American minstrels performed by white soldiers in black face “the crowning pleasure of the day.” In the end, “everything passed off most harmoniously” according to the newspaper.⁸⁸

At a previously held picnic, much smaller in nature, however, Confederate soldiers had rushed the food tables and crowded their Union counterparts out. One soldier estimated that two-thirds of the soldiers present were Confederates and “were entertained while feasting, by the choir who occupied themselves in singing patriotic songs. They emphasized particularly such parts as “Down with the traitors,” “We’ll rout the rebel horde,” etc. The rebels seemed to relish the delicacies better for spice.” By the September 23 gathering, organizers had learned their lessons; guards held the Confederates in check until the Union wounded had been served.⁸⁹

Documenting Camp Letterman

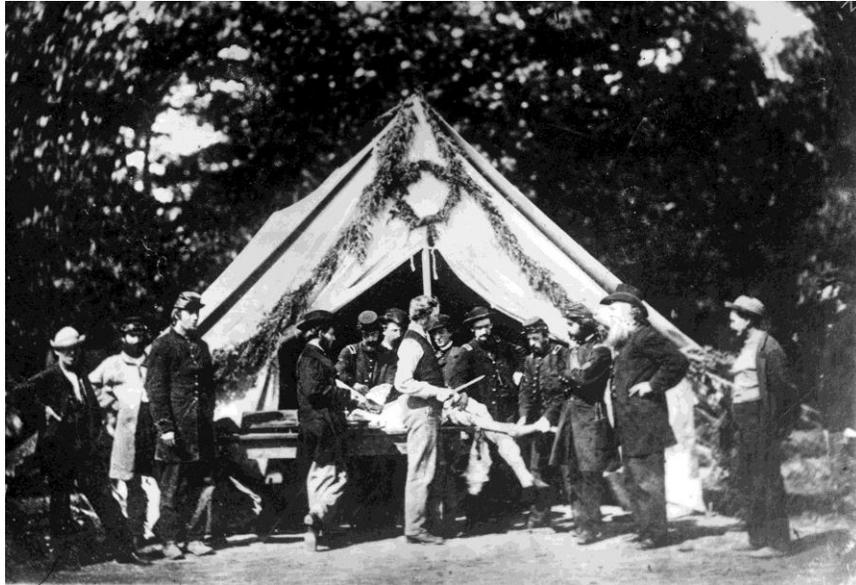
At least two different photographers visited Camp Letterman—the Tyson Brothers and Peter Weaver. They came in search of tangible images of an aftermath of a battle. The Tysons chose to take multiple pictures in different directions of the camp, creating a unique panoramic view. Weaver, on the other hand, preferred scenes of people in action. He took photographs of the embalming tent and several operating scenes.⁹⁰ While most of these images were staged, at least one operation was probably not. Bucklin recalled one soldier’s harrowing ordeal in front of the camera.

One fine looking fellow, a son of Erin’s isle, whose name was Peter Brock, was provoked by the neglect, and declared, with emphasis, that he would have his wounded shoulder examined by a surgeon—if he couldn’t get one to look at it there he would go where he could. He finally succeeded, by perseverance, in obtaining an examination.

He was found to be in a very critical situation, and one after another of the surgeons were called in, till a regular council of doctors was held over him in the ward. It was found necessary to take off a section of the bone, and the operation was begun in full view of the other patients.

After mangling him there for a time, partly holding him under the influence of chloroform, they removed him to the amputating room, where they paused awhile to have their photographs taken, the suffering patient lying in this critical condition. My blood boiled at the cruelty of the scene, but I could not avert the torture for a moment. For three hours he was kept under the knife and saw, and I was directed to hold my peace. He was brought back to his bed, as white as a dead man in his coffin, no semblance remaining of the ruddy-cheeked soldier who lay there three hours before, with strength in every part of his body, save the wounded shoulder.

“I give him into your special charge, Miss Bucklin,” the doctor said, “and I shall be proud if you raise him.” And raise him I did ...⁹¹



Open air surgery at Camp Letterman- amputation of a diseased leg by a surgeon with assistants nearby. (NPS)

Closing Camp Letterman

In the fall, the time finally came to close Camp Letterman. The patients had grown stronger, and there was no need to maintain a hospital so far from the immediate front and Northern cities. Patients were sorted and shipped according to type of injury. Sixty were sent on one car that all had arm amputations. The next train took leg amputations including “one little cavalry boy” who had lost both legs at the knee.⁹² The maimed were placed on pillows and pads to ease their journey. Soldiers yelled such things as “Come to Ohio, Miss Bucklin, I will take care of you as long as you live,” and “Come out to Michigan, you shall always have a home with me.” As the last goodbyes were said, Sophronia Bucklin did not know what to do with herself:

All were gone—my occupation was gone; the strain of months was suddenly let go, and I found how much strength of my hands depended on keeping them steadily employed.

The hospital tents were removed—each bare and dust-trampled space marking where corpses had lain after the death-agony was passed, and where the wounded had groaned in pain. Tears filled my eyes when I looked on that great field, so checkered with the ditches that had drained it dry. So many of them I had seen depart to the silent land; so many I had learned to respect, and my thoughts followed them to other hospitals, and to the fresh battle fields, which would receive them, when health was fully restored.⁹³

The end of Camp Letterman coincided with Lincoln’s visit to Gettysburg. Many of the staff attended the ceremonies on November 19, 1863. Whether by luck or design, one nurse recalled that the staff had a position directly in front and within a few feet of the President when he spoke the Gettysburg Address. The dedication of the National Cemetery “had to *us* a deeper interest than to many of the lookers-on: many of the quiet sleepers, by whom we were surrounded, we had known, and waited upon until care was no longer needed,” recalled Anna Holstein.⁹⁴

In the aftermath of Gettysburg, the War Department continued to remove officers appointed by Gen. George McClellan. Surgeon General Hammond, Letterman's friend and fellow reformer, fell victim to army politics. The War Department also viewed Letterman as part of the McClellan camp, and the new surgeon general reassigned him to menial tasks. Therefore, Dr. Jonathan Letterman, the man who reorganized the ambulance system and medical supply system, created a more efficient division hospital, and became known as the father of modern battlefield medicine, resigned in January 1864. Perhaps Major General Paul Hawley summed up Letterman's contribution best:

I was the Chief Surgeon of the European Theatre of Operations during World War II, a position similar to that of Letterman in the Army of the Potomac. At that time I often wondered whether, had I been confronted with the primitive system which Letterman fell heir to at the beginning of the Civil War, I could have developed as good an organization as he did. I doubt it. There was not a day during World War II that I did not thank God for Jonathan Letterman.⁹⁵

Endnotes

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- ⁵ Alfred Jay Bollet, *Civil War Medicine: Challenges and Triumphs* (Tucson: Galen Press, Ltd., 2002), 117.
- ⁶ Mary C. Gillett, *The Army Medical Department, 1818–1865* (Washington: Center of Military History, 1987), 166–67.
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- ⁸ *Ibid.*, 177–79.
- ⁹ *Ibid.*, 188–90; Bollet, *Civil War Medicine*, 117–120.
- ¹⁰ Katharine P. Wormeley, "The Other Side of War," *Massachusetts Commandery*, vol. 3 of *Military Order of the Loyal Legion of the United States* (Wilmington, N.C.: Broadfoot Publishing Company, 1993), 181 (hereafter cited as *MOLLUS*).
- ¹¹ Gillett, *The Army Medical Department*, 191.
- ¹² *Ibid.*
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- ¹⁴ United States War Department, *War of the Rebellion: A Compilation of the Official Records of the Union and Confederate Armies*, 70 vols. in 128 parts (Washington, D.C., Government Printing Office, 1880–1901; reprint, Harrisburg, Penna.: The Historical Times, Inc., 1985), Series I, 11(1):219 (hereafter cited as *OR*).
- ¹⁵ *OR*, Series I, 19(1):106–110.
- ¹⁶ *Ibid.*, 110; Louis C. Duncan, *The Medical Department of the United States Army in the Civil War* (n.p.; reprint, Gaithersburg, Md.: Butternut Press, 1985), 159; Gillett, *The Army Medical Department*, 192–3.
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- ¹⁸ *Ibid.*, 112.
- ¹⁹ *Ibid.*, 114.
- ²⁰ *Ibid.*, 114–116.
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- ²³ Letterman, *Medical Recollections*, 94–5.
- ²⁴ Gillett, *The Army Medical Department*, 208–9.
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- ²⁶ Ibid., 92–3.
- ²⁷ Gregory A. Coco, “A Laborious and Vexatious Task: The Medical Department of the Army of the Potomac from the Seven Days through the Gettysburg Campaign,” in *Mr. Lincoln’s Army: The Army of the Potomac in the Gettysburg Campaign, Programs of the Sixth Annual Gettysburg Seminar* (Gettysburg, Penna.: National Park Service, 1997), 300.
- ²⁸ Letterman, *Medical Recollections*, 112.
- ²⁹ Gillett, *The Army Medical Department*, 209.
- ³⁰ Ibid., 210; Letterman, *Medical Recollections*, 124.
- ³¹ Letterman, *Medical Recollections*, 125–6.
- ³² Ibid., 138–44.
- ³³ Ibid., 151–3.
- ³⁴ Sophronia E. Bucklin, *In Hospital and Camp: A Woman’s Record of Thrilling Incidents Among the Wounded in the Late War* (Philadelphia: John E. Potter and Company, 1869), 187–88.
- ³⁵ John W. Busey and David G. Martin, *Regimental Strengths and Losses at Gettysburg* (Hightstown, N.J.: Longstreet Publishing House, 1986), 239, 280, 312. Compiling accurate figures for Gettysburg is almost an impossible task because no two sources agree. Even Letterman revises his figures as months go by. The reader should not be surprised to find other historians quoting different numbers. In other words, these are “ball park” figures.
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- ⁴² Cornelia Hancock, *South After Gettysburg: Letters of Cornelia Hancock, 1863–1868* (New York: Thomas Y. Crowell Company, 1956), 14.
- ⁴³ *OR*, Series I, 27(1):197–8.
- ⁴⁴ Fielding H. Garrison, *John Shaw Billings: A Memoir* (New York: The Knickerbocker Press, 1915), 65.
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- ⁴⁷ *OR*, Series I, 27(1):197–8.
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- ⁴⁹ Ibid., 459–60.
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- ⁵² Georgeanna M. Woolsey, *Three Weeks at Gettysburg* (New York: Anson D. F. Randolph, 1863), 4–5.
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- ⁵⁷ *OR*, Series I, 27(3):533; William A. Frassanito, *Early Photography at Gettysburg* (Gettysburg: Thomas Publications, 1995), 354.
- ⁵⁸ Frassanito, *Early Photography at Gettysburg*, 354–5.
- ⁵⁹ *OR*, Series I, 27(1):620.
- ⁶⁰ Ibid., 700.
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- ⁶² William C. Way, “From Gettysburg,” *Detroit Advertiser and Tribune*, July 30, 1863.
- ⁶³ Norris Letters, Gettysburg National Military Park.

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- ⁶⁵ Souder, *Leaves From the Battle-field of Gettysburg*, 56.
- ⁶⁶ Ibid., 62.
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- ⁶⁸ William C. Way, "From the 24th Michigan Infantry," *Detroit Advertiser and Tribune*, August 7, 1863.
- ⁶⁹ Bucklin, *In Hospital and Camp*, 143–4.
- ⁷⁰ Harry C. Whitehill, *History of Waterbury Vermont, 1763–1915* (Waterbury: The Record Print, 1915), 143; Gregory A. Coco, *A Vast Sea of Misery* (Gettysburg: Thomas Publications, 1988), 170.
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- ⁷² Bucklin, *In Hospital and Camp*, 144–5.
- ⁷³ Gregory A. Coco, *A Strange and Blighted Land, Gettysburg: The Aftermath of the Battle* (Gettysburg: Thomas Publications, 1995), 227, 229; Way, "From the 24th Michigan Infantry."
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- ⁷⁵ Bucklin, *In Hospital and Camp*, 174–5.
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- ⁷⁷ Jacob Shenkel, "Diary of Jacob Shenkel for the Year 1863," Timothy Brookes Collection, United States Military History Institute.
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- ⁷⁹ Elden E. Billings, "The Fields Had The Appearance of a Vast Boneyard," *Civil War Times Illustrated* (October 1961).
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- ⁸² Bucklin, *In Hospital and Camp*, 156–7.
- ⁸³ Anna Holstein, *Three Years in Field Hospitals* (Philadelphia: J. B. Lippincott & Company, 1867), 48–9.
- ⁸⁴ Bucklin, *In Hospital and Camp*, 146 – 150.
- ⁸⁵ Souder, *Leaves From the Battle-field of Gettysburg*, 34; Holstein, *Three Years in Field Hospitals*, 44; Bucklin, *In Hospital and Camp*, 157–58.
- ⁸⁶ Souder, *Leaves From the Battle-field of Gettysburg*, 36; Holstein, *Three Years in Field Hospitals*, 43–4.
- ⁸⁷ Holstein, *Three Years in Field Hospitals*, 44; Souder, *Leaves From the Battle-field of Gettysburg*, 59; Hancock, *South After Gettysburg*, 20; Coco, *Strange and Blighted Land*, 229.
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