EARLY in 1918 taking a woman physician into the United States Army was unthinkable. At that time I was anesthetist in Presbyterian Hospital for Dr. Dean DeWitt Lewis and other surgeons, and was teaching anesthesia in Rush Medical College.

After months of futile correspondence with the office of the Surgeon General of the U.S. Army, Lieutenant-Colonel Lewis, who was then Chief Surgeon of U.S. Base Hospital Unit No. 13, realizing my determination and needing an anesthetist for the Unit, suggested that I go to Washington, D.C., to apply in person. He telegraphed ahead, and Dr. Arthur Dean Bevan, Chief Surgeon, and Dr. Isabella C. Herb, Chief Anesthetist in Presbyterian and Rush, both gave me splendid recommendations.

Arriving in the Surgeon-General’s office April Fool’s morning, 1918, I was informed that my written application and reports of my examinations were among the carloads of mail still on the tracks.

My service naturally falls into three periods of time, viz., that before sailing, that overseas, and that following my return to America.

On April 3, 1918, I was appointed Contract Surgeon, U.S. Army, and ordered to report at Hoboken, N.J., for duty with Base Hospital No. 13, from Presbyterian and Cook County Hospitals in Chicago.

The rank of Contract Surgeon had been created for those men physicians who were not eligible to be commissioned. Not being a man was the only thing which prevented my being commissioned.

On April 10th I was detached from Base Hospital No. 13 and ordered to report for duty at U.S. Army General Hospital No. 1, Williams Bridge, New York, where I gave lectures and was in charge of anesthesia for twelve days, when I was returned to Base Hospital No. 13.

On May 19th I sailed on the Justicia from New York Harbor with the officers of Base Hospital No. 13—the first woman physician in the U.S. Army to be sent overseas.

May 30th we arrived in harbor at Liverpool, England. We docked on May 31st, and next day proceeded to go by train to Southampton.

On June 2nd we left Southampton and crossed the English Channel at night to Le Havre, France.

June 10th, at Limoges, we were housed temporarily with the Unit from New Orleans, Louisiana. Speedily our hospital barracks were erected. Our first convoy of patients arrived before the corps men and nurses could set up all the beds and unpack all necessary pans, trays, and other equipment. In
less than a week our second convoy arrived, making some 900 recently wounded soldiers. Many of them gave me the history of having been wounded in the German drive on Belleau Wood and Chatteau Tierry at midnight, July 14th and 15th. We worked all day and some of us worked all night. Though the number of beds in our hospital was 1,550, the maximum number of patients at one time was 2,323. Our mortality rate was exceedingly low.

I was in charge of anesthesia. As many of our nurses had been sent to the front or to Paris, I trained two enlisted men who attained considerable skill in the administration of ether. Nitrous oxide was not obtainable. Three other corps men were partially trained at different times.

On February 19, 1919, most of our nurses and I left Limoges for La Baule, France, on the Bay of Biscay. On the sea shore were beautiful shells and everywhere many snails; the land around was dotted with Dutch windmills and covered with snow.

On February 28th we sailed from Brest, France, on the Mauretania for New York City, where we disembarked on the evening of March 6th.

After nine months of war in a land of blackouts or poor illumination, the Statue of Liberty, the many sail boats, and other boats filled with people come to give us a friendly and riotous greeting, and the flood of lights in New York Harbor transported us suddenly into the veritable paradise which is America.

On March 15, 1919, I reported for duty at U.S. Army General Hospital No. 28, Fort Sheridan, Illinois. During the four and one-half months at that hospital, I was in charge of anesthetics. We ran six operating rooms in the forenoons, and usually two or three in the afternoons and took our gas-oxygen apparatus to the wards daily for about 10 to 15 painful dressings.

Five nurses were instructed in ether and nitrous oxide-oxygen anesthesia. The largest number of anesthetics which I ever gave in one day was fourteen.

While yet in the Army I reported on a phase of original work done in France in a paper, entitled “Ether Analgesia by Inhalation for Minor Operations,” read before the American Association of Anesthetists, Atlantic City, June 10, 1919, and published in the Anesthesia Supplement of the American Journal of Surgery, October, 1919.

My contract surgeon contract was annulled August 5, 1919.