ELSIE OTT MANDOT

Elsie Ott Mandot, called St. James, Long Island, NY home back in 1943. Graduated from Smithtown High School in 1933. Graduated from Lenox Hill Hosp. NYC as a registered nurse. Enlisted in the ANC Sept. 1941 and was stationed at New Orleans. Feb. 1942 left for India where she was stationed with the 1st TCC. Was selected to make a 10,000 mi. evac trip from India to Walter Reed Hosp. at Washington, DC, traveling with five seriously ill men with only the aid of a male medic. This was her first plane ride. While on two weeks leave at home following the trip, she learned of the air evac program at Bowman Field, Ky., applied and was accepted. She was awarded the Air Medal for her spectacular feat, the first woman to receive this award. Following her course in air evac, she returned to Chabua, India with the 803rd MAES.

Receiving 1st Air Medal ever awarded a female — Bowman Fld., Ky. 1943
Elsie Mandot phoned —

I was at Bowman Field June 1943 when she received the 1st F1 Nurse to receive an Air Medal.

She ferried patients from India to Walter Reed — in about 10 days, she told me she had a movie film of her trip. She sent me the movie film. I couldn't see it in 80 so I took it to Memorial Hospital in Bethesda. They put it on DVD, I picked it up last week. Still have not seen the film (No DVD player).

Tonight 12/15/06 7 PM her friend in Calif. phoned to say Elsie died today.
ELSIE OTT MANDOT

An amazing story of military skill evolves from the historical making events of World War II. During the early 1940's, Army Air Force nurses were demonstrating that their vitally needed skills were providing a life saving service to the nation. The contributions of one nurse, Second Lieutenant Elsie S. Ott unfolds in an amazing rendition of her role in the Air Evacuations of military casualties. Ott was born on November 5, 1913 and called St. James, Long Island, New York her home. She graduated from Smithtown High School in 1933. Following her high school graduation she fulfilled her desire for a career in professional nursing and entered Lenox Hill Hospital School of Nursing in New York. She graduated in 1936. Her first nursing position was at Kings Park Hospital, Long Island, New York. Following this experience she traveled to Florida where she obtained additional nursing experience at St. Francis Hospital, Miami Beach, Florida. Following these graduate nursing experiences, Ott decided on a military career. She applied for admission to the Army Air Force Nurse Corps and was commissioned a Second Lieutenant on September 13, 1941. At that time she gave her nearest relative as her mother, Mrs. Anna Ott. She was twenty-nine years old, weighed one hundred and twenty pounds and was five feet three inches tall.

Her first military assignment as an Army ward nurse took her to Barksdale Army Air Field Station Hospital in Louisiana. After a five month period she was reassigned to the 159th Station Hospital at Fort Storey, Virginia. Following these basic Army Nurse Corps experiences she was sent overseas and reassigned to the 159th Station Hospital located in the desert of Karachi, India.

As World War II progressed in the early 1940's on all fronts, evacuation of the
sick and wounded was of prime concern to medical officials. Recognizing the necessity of moving troops rapidly from the front to the Zone of Interior was considered expedient in order to save lives. As aerial flight became a feasible method of transportation, the War Department began to seriously consider moving patients rapidly by air. The Army Air Force was enthusiastic about organizing a battalion of so-called "Air Ambulances". Patients could thus by-pass terrain obstacles, thus increasing speed and efficiency. Regional hospitals were established behind the lines of fire so as to evacuate casualties rapidly where time was a factor in saving lives. The need arose for fast transfer to these hospitals which were prepared for multiple trauma cases. Initially, the Aeromedical Evacuation proposal was not viewed as feasible or economical. There was minimal support for trained medical personnel or flight nurses. The Surgeon General of the Army generally opposed the concept of using female flight nurses while the Air Surgeon supported the use of flight nurses considering them the most highly trained medical personnel urgently needed to care for the seriously wounded military personnel. Although the Air Transport Command was far from ready to undertake any ambitious program of intercontinental air evacuation plans were surreptitiously being developed. Army medical authorities decided to test the intercontinental application of aeromedical evacuation and planned a 11,000 mile flight from Karachi, India to Washington, D.C.

After plans were approved for this long distance flight, Ott was selected to make this historic experimental flight. With little more than eight months military experience and no preparation in the transport of patients by air plus no flying experience, Ott was given twenty-four hours to prepare for the trip. An officer informed Ott that she would
leave the next morning immediately after breakfast. She was told she would be responsible for five casualties, only one of whom she had cared for before. Ott immediately set about to gather medical supplies for the trip. She collected a few sodium amytal capsules, aspirin tablets, PAC capsules, one bedpan and one urinal. The Station Hospital contributed blankets, sheets, pillow cases, two mattresses and two Army cots. It is interesting to note that during preparation for take-off no flight surgeon was consulted as to the selection of the patients, type of medical supplies or instruction regarding medical care while in flight. Ott, however, was aware that this was a preliminary test to evaluate the feasibility of Air Evacuation from India to the United States.

On the morning of 17 January 1943 Ott and her five patients boarded a DC-3 type transport which departed Karachi, India at 7:00 in the morning. As the aircraft headed south, the flight plan included stops at Salala and Aden, Saudi Arabia; Khartoum and El Fasher, Egyptian Sudan; Ascension Islands; Natal and Belem, Brazil; Borinquen, Puerto Rico and Morrison Army Air Field, Florida. The date of arrival at Bolling Army Air Field, Washington, D.C. was planned for 23 January 1943.

Once in the air Ott found herself faced with a complexity of medical and nursing challenges, of her five patients, two were seriously ill litter patients. One had a diagnosis of chronic poliomyelitis with paralysis of the lower extremities as well as the left arm. Another had multiple fractures of the vertebrae, ribs and scapula with lower extremity paralysis and multiple deeply ulcerated bedsores. Army cots were strapped to the floor of the aircraft to accommodate these two paralyzed patients. The other three ambulatory patients had respective diagnosis of early active tuberculosis, glcoma and manic-
depressive psychosis considered non-violent for the trip. A Staff Sergeant who had been a recent patient with chronic arthritis was assigned as a medical attendant. This young relatively inexperienced Army nurse provided continuous nursing care for her patients. This included baths, feeding the litter patients, changing dressings and administration of medications. She was also responsible for maintaining security of luggage between overnite stops. Ott arranged for all her patients needs and secured overnite accommodations for them from enroute medical facilities, none of which had been alerted to care for these transient patients.

The first overnite stop was made in Aden, Saudi Arabia. The patients were removed from the aircraft and taken to a British Hospital. Ott stayed with the two litter patients in the same room overnite to provide the necessary nursing care. The Staff Sergeant stayed with the other three patients. Generally, facilities were poor and the food was not particularly appetizing. Overnite meals cost $2.00 per person. When the patients were charged for their meals at stopovers, Ott paid from her own funds for those who had no money of their own.

On arrival at El Fasher, the Egyptian Sudan, the patients were removed to the Sudanese Hospital. The medical personnel were unusually accommodating and assisted her in changing dressings, bathing the patients, irrigating wounds and replacing indwelling urinary catheters. Lunch at this stop consisted of dry sandwiches and oranges. Flying continued day and all night and finally they arrived at Ascension Island. Breakfast consisted of greasy french toast and bacon. The flight from Ascension Island to Natal, Brazil was made at an altitude of approximately 10,000 feet. Ott who was not accustomed
to flying became terribly airsick and had to cope with her own personal health concerns. Flying for days at high altitudes took its toll on this young Army nurse. On the stopover at Natal, Brazil she appeared to be so exhausted that a flight surgeon volunteered to care for the patients overnight. Ott insisted she be allowed to continue the trip. Finally the flight surgeon stated that flying fatigue had taken over and demanded that she rest overnight.

Departure from Natal, Brazil was at 7:00 P.M. on January 22, 1943. The aircraft landed at Belem, Brazil where the hospital facilities were poor as was the food. It was impossible to take a stretcher through the doors of the hospital without tilting the stretcher as the doors to the hospital rooms were too narrow, therefore the patients were bathed and cared for in the hallway of the hospital. They left Belem, Brazil at 2:35 A.M. January 23rd and arrived at Borinquen, Puerto Rico at 8:00 A.M. It was cool so the flight surgeon who met the plane suggested they leave the patients in the plane. The first hot breakfast since leaving Karachi, India was served on board and consisted of eggs, ham, toast and coffee. Warm water was provided for bathing the patients face and hands. At various stops it was necessary for Ott to unload the mattresses, pillows, sheets etc. from the aircraft as no assistance was available. Personnel not expecting them were not supportive and were not concerned with the welfare of the patients. There was little interest in the fact that these patients were casualties who were attempting to return to the Zone of Interior after months on the front. Final arrival was at Bolling Army Air Field, Washington, D.C., at 8:00 in the evening on January 23, 1943. Medical attendants met the aircraft and transferred the patients by ambulance to Walter Reed Army Hospital.

Although personally exhausted upon arriving at Bolling Army Air Field, Ott was
highly enthusiastic about the possibilities of organized air evacuation of patients. By using initiative, common sense, compassion and astute nursing judgment, Ott prevailed against all obstacles. Little did Ott realize that the success or failure of her trip would influence the future of air evacuation. This intercontinental movement of seriously ill military personnel confirmed the practicability of air evacuation and enhanced the ability to pursue long range evacuation. It also highlighted the value of flight nurses on aircraft. Although the flight had been poorly planned, its success was highly noted. Commands were ordered to provide the best care available and a high priority was allocated to all patients being evacuated.

In recognition of her meritorious achievement, Lt. Ott received the first AIR MEDAL ever awarded to a woman in the history of the United States Army. The AIR MEDAL ordered by President Roosevelt in 1942 was specifically for heroism and meritorious service in the air. The award ceremony for Lt. Ott took place at Bowman Army Air Field, Kentucky on 26 March 1943. At the ceremony attended by members of the Troop Carrier Command, military commanders and supporters, Brigadier General Fred W. Borum pinned the Medal on Lt. Orr's uniform. Numerous congratulations were heard as the military command were jubilant regarding the success of this historic trip. Lt. Ott was granted a two week furlough following the trip.

In the early 1940's opposition continued in regard to placing nurses on "Air Ambulances." however, General Davis N. Grant took a personal interest in promoting the status of nurses. On 7 October 1943, the first official organization whose mission was the training of flight nurses was activated at Bowman Army Air Field, Kentucky.
The program included a four week course in flight nursing. Ott learned of the course while on leave, applied for admission to the Flight Nurse Course and was accepted. She asked for flight training so she could continue to fly near combat areas and care for evacuees. The course was most strenuous and included didactic instruction in air evacuation nursing, mental hygiene in relation to flying, aeromedical physiology, military indoctrination, ditching procedures and a one day bivouac. The objective of this course was to prepare nurses for risky assignments, later justified by reduced deaths seen among the military sick and wounded. On 18 February 1943, the first group of flight nurses had the distinction of graduating from the first School of Air Evacuation in the world. Ott as a graduate of the program was now a fully prepaed Air Evacuation Nurse.

Although the Army Air Force Medical Service had well trained air evacuation personnel, the need for appropriate Air Ambulances remained. Those aircraft utilized to transport patients were slightly modified to provide safety for patients as well as flight personnel. Problems arose however, relative to the changing barometric pressure, oxygen supply problems, decreased humidity, excessive noise level, turbulence and vibration from the aircraft engines. Research efforts brought about a new aircraft designed specifically for aeromedical evacuation missions. The "Nightingale" was the name chosen for this new aircraft. The C-9 as it was known was named for Florence Nightingale whose kindness and compassion during the Crimean War influenced the advancement of military nursing. Twenty-five years after her famous trip, Ott now Mrs. Elsie Mandot was selected to christen the aircraft. In August of 1965 the first C-9 arrived at Scott Air Force Base, Illinois. At the christening ceremony, Mrs. Mandot poured water from the
Sea of Galilee on the nose of the first "Nightingale." The water was used to accentuate the historical significance of humanitarian and compassionate care.

Air Evacuation was a successful endeavor due to the pioneer flight of Second Lieutenant Elsie S. Ott and the skill of many competent flight nurses that followed. Many gave their lives in the performance of their military duty.

Lt. Ott served as a flight nurse for years after her graduation from flight school. She returned to India in October 1944 as a member of the 803rd Military Air Evacuation Squadron. Later she was promoted to Captain and flew out of Stockton, California to various overseas bases. Her date of discharge from the Army Air Force was May 1946. In later years she married Larry Mandot and settled down in her new role as an American housewife. She and her husband settled in Wheaton, Illinois.

We remember Elsie Ott as a remarkable and courageous trailblazer. Her acts of bravery, compassion and unflagging devotion to duty provides future generations with a unique and outstanding role model.
March, 1989

Dear Friends,

Unfortunately, there wasn't time during our meeting last May in San Antonio to present all the aspects of the publication of this beautiful, hard-bound book. In response to the many letters from those of you who want the Bowman Field book reprinted, we're going ahead with the project, which will be funded by pre-publication payment, at no cost to World War II Flight Nurses Association, Inc. A limited number of the books will be available.

Whether or not you were able to acquire the book, *Wings Over America*, published in 1944, you will want to own this one. In addition to the pages of pictures at the School of Air Evacuation at Bowman Field, there will be a history of air evacuation from its inception, through World War II, and on to the more recent conflicts. Best of all, it will be your story, your memories, the part you played in those history-making times. There will be stories written by your contemporaries and there will be pictures and bios of each of you.

This will be a *quality* publication, a documentation of events, a 100 plus page treasury for future generations. You'll want a copy for yourself...to read and to reminisce...others for gifts to your local library, for your children and grandchildren. Send in your order and your biography now, and give a book as a Christmas gift.

[Signature]

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SAMPLE BIOGRAPHIES
Use as an example in writing yours in 150 words or less.

CLIFFORD J. EMLING, served in CBI as flight technician with 803rd AIR EVAC. SQDN. The 803rd trained at Bowman Field, KY. Sailed from Los Angeles on the U.S.A.T. George Washington Sept. 1943. Arrived Bombay 42 days later and arrived at Chabua in Dec., home base for the next 2 years. Jan 1944, temporarily assigned to Kunming and attached to the 14th Air Force. From there, made flights to various air field in S.W. China.

March, 1944, returned to Cabua. During next few months flew regularly to landing strips in Burma, in support of Merrill's Marauders on their march on Myitkyina, evacuating the wounded to the hospital at Ledo. Decorated with the Air medal. Other awards Presidential Unit Citation, China War Memorial Medal, Asiatic Pacific Medal with 3 Battle Stars.

Remainder of time in CBI, made Hump flights between Chabua and Kunming, as well as flights to Calcutta, Karachi and other points in India and Burma.


ETHEL CARLSON was born in Blue Island Illinois, 23 August 1921. She graduated from Englewood High School of Nursing in 1942 and joined the American Red Cross, was called to active duty 26 April 1943 at Jefferson Barracks, Missouri. She graduated from the School at Bowman Field, Kentucky, 21 January 1944, class of 43H, and was sent to England with 815th MAES, flying patients from France after D-Day.

On TDY in southern France, kidney problems resulted in return to the States, February, 1945. She returned to flying in November 1946 in the Canal Zone, married Anthony Cerace, March 1947, and was discharged as captain, February 1948. Duty as military wife, mother of Steven, Patricia, and Scott, involved stations in Hawaii, Brazil, and others until retirement in Florida, September 1972. She was employed at a nursing home, is Red Cross volunteer, earned an Associate of Arts degree toward a bachelor's in nursing. She arranged Flight Nurses Association in Florida, May, 1986, and became chairman. She was elected president in San Antonio in 1988.

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Left Top: 818 MAET Squad
Left Center: Lt. Elsie S. Ott, First Air Medal recipient with Gen. Fred W. Borum
Below: Bobbie Ruminski and Jean Rutkowski get ready for duty.

Left: Practicing Air Evacuation

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The Chronology of Air Force Nursing Services

World War Two and Its Aftermath

1941

December 7: Japanese planes bombed Pearl Harbor, Hawaii. In all, approximately 59,000 nurses served in the Army Nurse Corps in World War Two. More than 200 Army nurses died, 16 from enemy fire. Many of these Army nurses supported the Army Air Forces (AAF), and one of their new specialties was flight nurse.

1942

November 30: The War Department directed the 349th Air Evacuation Group to train flight surgeons, flight nurses, and enlisted personnel for aeromedical evacuation (aerovac) duty aboard troop and cargo carriers. Squadrons consisted of medical personnel but no planes. Headquarters, the housekeeping section, consisted of a commanding officer, chief nurse, and medical administrative corps officer. Each squadron had a headquarters and four flights. A flight surgeon with six flight nurses and six flight technicians headed each flight. A flight team included one nurse and one enlisted technician. Squadrons were assigned to either troop carrier or air transport groups.

December 22: The 77th Congress authorized relative rank for Army Nurse Corps officers from second lieutenant through colonel by passing Public Law 828. Previously, the highest rank a nurse could hold was major. Public Law 828 also provided for pay and allowances approximately equal to those granted commissioned officers who had no dependents.

1943

January: The first strategic aerovac flight had a medical crew of two: one technician and Lt. Elsie S. Ott (Mandot), an AAF nurse. The mission transported five patients from Karachi, India, to Bolling Field, Washington, D.C., a trip of 11,000 miles which lasted six and one-half days. For this mission, Lieutenant Ott received the first Air Medal ever awarded to a nurse.
February 18: The first class of flight nurses graduated from the AAF School of Air Evacuation, 349th Air Evacuation Group at Bowman Field, Kentucky. The first flight nurse ever awarded flight nurse wings was Lt. Geraldine Dishroon-Brier. The first flight nurse on the island of Guadalcanal was Lt. Mae E. Olson.

July 27: AAF flight nurse Lt. Ruth M. Gardiner was the first nurse to be killed in a theater of operations during the war. She was on an aerovac plane that crashed in Alaska while on a mission. She was 28 years old, originally from Pennsylvania, and assigned to the 11th Air Force of the Alaskan Defense Command of the AAF. An Army Hospital in Chicago, Illinois—Gardiner General—was named in her honor.

1944

February 8: The Overseas Replacement Depot for flight nurses was activated at Randolph Field. Nurses reporting overseas were assigned there to ensure that their records, clothing, equipment, health, and training were up to date.

February 12: Female nurse prisoners of war (POWs), including flight nurses, were liberated on Luzon after three years of captivity. They were evacuated to Leyte en route to the United States.

June: For the duration of War World Two all military nurses were given a temporary commission.

Capt. Leontine Stroup, a flight nurse, authored “Aero-Medical Nursing and Therapeutics,” one of the first articles published on this topic, in The American Journal of Nursing.

June 6: After the invasion of Normandy, Army medics began to cope with many casualties with severed spinal cords, severe head wounds, and pulmonary wounds. With no hospitals ashore, the sick and wounded needed to be evacuated to England, but heavy surf hindered sea evacuation. By June 8 aviation engineers in Normandy completed an emergency landing strip in the mud behind Omaha Beach.

June 9: Flight nurses of the 816th Medical Air Evacuation Squadron (MAES) flew “blood runs” to Normandy, airdropping fresh blood.

These Army Air Forces nurses, imprisoned on Bataan and Corregidor, Philippine Islands, were freed after three years of imprisonment, Manila, Luzon, Philippine Islands, February 1945.

June 11: Official aerovac began on D+5 when 2d Lt. Grace E. Dunham, chief nurse of the 806th MAES, flew into Normandy in a C-47 that was still painted with invasion stripes. Upon landing, she jumped from the airplane wearing her oversized flight suit, provided care to the wounded, and flew with them to England. By the end of the month, flight nurses had helped evacuate about 7,500 patients from France to England.

Lt. Reba Whittle after her return to the United States from captivity by the Germans during World War Two.

**September 27:** Lt. Reba Z. Whittle was the first flight nurse to be imprisoned by the Germans. Her plane was shot down by antiaircraft artillery fire behind German lines near Aachen. Every person on board was injured, but Whittle ignoring her wounds, helped move the medical technician out of the burning plane. Germans soon arrived, provided first aid, and escorted Whittle to Stalag 9C, a prison camp near Frankfurt. When she was not nursing British, American, and Australian prisoners, Whittle, the first female Allied prisoner of the Germans, remained secluded in her prison cell and never saw another woman. She was exchanged in January 1945 for German prisoners held by the Allies.

**1945**

As the war in Europe ended, more flight nurses were needed for domestic aerovac and duty in the Pacific.

**April 14:** Flight nurse Wilma (Dolly) Vinsant was killed when her evacuation plane, ferrying wounded Americans to hospitals behind the front line, was shot down over Germany. She was one of three women in the Army Nurse Corps killed by direct enemy action. Buried in the United States Military Cemetery at Margraten, Netherlands, she was the only woman so honored.

**1946**

Before the AAF separated from the U.S. Army in September 1947 to become the United States Air Force (USAF), it had already acquired its own medical staff, a distinct sector of the Army medical community directed to provide nondefinitive medical care for AAF bases worldwide. Definitive care for AAF personnel, however, was still provided by the Army general hospitals.

**1947**

**April 16:** The Army-Navy Nurse Act of 1947 (Public Law 36–80C) provided permanent commissioned officer status for members of the Army Nurse Corps in the grades of second lieutenant through lieutenant colonel, and provided for the Chief of the Army Nurse Corps to serve in the temporary grade of colonel. The act also established the Army Nurse Corps Section of the Officers Reserve Corps.

**1948**

**February:** Air Surgeon Malcolm Grow noted that his monthly memorandum, “Comments for United States Air Force Surgeons,” was not being distributed to nurses in the field stations. He requested special care be taken to insure that copies were made available to nurses. He repeated his request six months later in August.

**March:** The procurement of new nurses with no previous military experience was beginning to make definite progress. The number of nurses on active duty who were receiving their officer reserve commissions was increasing daily as well.

**September:** General duty and administrative nurses in Air Force station hospitals who had been trained as flight nurses were given the opportunity of practicing their specialty in aerovac duties with the Military Air Transport Service. They replaced flight nurses who had been on duty with that organization.

**1949**

**May 12:** Secretary of Defense Louis Johnson directed the U.S. Air Force to assume responsibility for its own medical support, with the single reservation that the Army would continue to operate the general hospitals. Secretary Johnson created a Medical Service Division within the National Military Establishment (later called the Department of Defense) through which medical activities of the Army, Navy, and Air Force would be coordinated through the Joint Army and Air Force Adjustment Regulation No. 1–11–62 dated May 16, 1949.

**June 8:** Department of the Air Force General Order No. 35 established the Air Force Medical Service, its six officer corps, and the Office of the Air Force Surgeon General. Air Force Regulation 21–10 described the general principles and organization of the Air Force Medical Service.

**July 1:** An independent Air Force Medical Service was established with the Air Force Nurse Corps as an integral part. The Air Force Nurse Corps was formed by the transfer of 1,199 Army nurses, most of them already on active duty (307 regular and 892 reserve officers), working in support of the AAF. Of this total, 389 became “joint staff” in Army general hospitals. The Army hospital system continued to provide definitive care for the Air Force, and 30 per-