

“The Fighting 21st”

As the clouds of WWII gathered in Europe and the Pacific,
28 OU physicians and dentists formed an elite
medical field unit that would serve with distinction
until the last battle was won.

BY JUDY FOSSETT KELLEY



Courtesy D. B. Pearson

Members of the U.S. Army's 21st Evacuation Hospital were sent to Bougainville, the linchpin in the Solomon Island campaign, in the winter of 1944 to prepare for the inevitable casualties that would result when Japanese forces launched their counterattack to retake the island. During the intense fighting from March 8 to 31, the 21st admitted 1,500 wounded to its beachfront hospital.

The unmistakable shriek of an artillery shell flying overhead broke the early morning silence of March 8, 1944, and roused Lt. Daniel B. Pearson from sleep.

"Is it coming in or going out?" Pearson whispered to his tent mate. It was a reasonable question, given the circumstances.

Hidden in bunkers in the jungle that began less than a mile from Pearson's tent were nearly 30,000 tenacious Japanese soldiers, determined to retain their stronghold on the Pacific island of Bougainville.

Behind him were the artillery batteries of the 37th and Americal Divisions of the U.S. Army, there to protect airfields built after the Marines gained the beachhead six months earlier.

Sandwiched between the combatants was the University of Oklahoma's 21st Evacuation Hospital—"The Fighting 21st."

The frightening sound that woke Pearson was the opening salvo in the "holy hell" that the group of physicians, dentists and nearly 500 enlisted men had come for—the long awaited Japanese counterattack and the U.S. infantry's furious response from big guns and its own jungle combat positions. Within an hour and a half, as many as 150 injured soldiers arrived for surgery on the hospital's 12 operating tables, Pearson recalled.

Between March 8 and March 31, when intense fighting ended in an American victory, OU's 21st Evac admitted 1,500 patients to its hospital on the beach.

The story of OU's 21st Evacuation Hospital has been almost forgotten in the 60 years since World War II ended in the Pacific. America turned its attention to other matters and to other wars on other continents. Most of the physicians and dentists who served with the 21st died as the decades rolled past, taking their memories to the grave. Most, but not all of them.

Two members of the original medical team, both alumni of the OU College of Medicine, survive to tell the tale of the 21st Evac and its vital work, not just on Bougainville but earlier on Guadalcanal and later near Manila in preparation for an invasion of mainland Japan.

Pearson, '41 M.D., is 91, yet still practices psychiatry three days a week in



Courtesy Paul Lingenfelter.

A long way from his practice in Clinton, Oklahoma, Dr. Paul Lingenfelter had a love for adventurous assignments, but nothing prepared him for the battlefield surgery he performed on the jungle island of Bougainville.

his office near downtown Dallas. Paul Lingenfelter, '33 M.D., will celebrate his 100th birthday in January. He retired long ago from his practice in Clinton and lives with his wife in a lakeside condominium in Oklahoma City.

Their story begins on May 3, 1940, when a group of College of Medicine faculty members and residents on staff at

University Hospital quietly resolved to form the 21st Evacuation Hospital of the U.S. Army. This act was in response to a nationwide call by the Surgeon General for universities with related hospitals to form medical units that would serve if the United States entered the war raging in Europe and the Pacific.

Although America was officially neutral at the time, and the attack on Pearl Harbor still 19 months away, the physicians and dentists who signed up were well aware of world events and knew that eventually they would be in the thick of battle.

On July 5, 1942, the 21st Evac was called to active duty. Among the group were Pearson, who had completed only his internship, and Lingenfelter, by this time practicing at a tuberculosis sanitarium in Clinton.

Lingenfelter had completed a residency in thoracic surgery at UCLA and had already experienced enough adventures to last a lifetime. He attended the famous 1936 Berlin Olympics and, just a few months later, took the China Clipper's first transpacific flight as Pan Am airline's resident physician in the Pacific. He no longer can recall how he happened to join the 21st.

Pearson's memories are crystal clear, even after 64 years, and he recalls petitioning to join the 21st after learning from the draft board that his low number would be called the day he finished his residency. Joining the medical unit then and completing his residency later seemed like the better option.

After spending a month with the 53rd Evacuation Hospital in San Luis Obispo, the officers and enlisted men of the 21st (of which the 53rd became a part) were ordered to the Desert Training Center at Needles, Calif., to prepare to join Gen. George Patton in North Africa. But after a nearly 14-month wait in searing heat, they were ordered to the Pacific. (Pearson's older brother, Murble Pearson,



Dr. D. B. Pearson, at 91, still maintains a psychiatry practice in Dallas.

'38 M.D., did serve with Patton's army in Africa and Europe.)

Radiologist Bert Ernest Mulvey, M.D., of Oklahoma City, commanded the 21st, succeeded by Col. Rex G. Bolend, a urologist, in January 1943, then a year later by Lt. Col. Robert E. Allen of Pennsylvania. Internist William W. Rucks Jr., M.D., of Oklahoma City, was chief of medicine. Neurosurgeon Jess Herrmann, '31 M.D., of Oklahoma City, doubled as the unit's psychiatrist during training in Needles.

On August 28, 1943, 28 OU physicians and dentists, another 35 physicians and administrators assigned to the unit by the Army, and 500 corpsmen sailed for New Caledonia aboard the U.S.S. *Lew Wallace*, an "old tub that moved at 8 knots an hour." When they arrived at Noumea Harbor on September 23, Pearson, who had ROTC training, was sent by Bolend to take three officers and some enlisted men to Guadalcanal where the Seabees would set up a hospital. The rest arrived a week later.

"They were still actively fighting, still having air raids and alerts," Pearson said. "We were in Guadalcanal about seven or eight weeks before the colonel called me in again and said to take three officers and 150 enlisted men to Bougainville to set up a hospital there."

Bougainville was considered the linchpin in the Solomon Islands campaign to eliminate Japanese air power before in-



Long retired from medicine, Dr. Paul Lingenfelter will turn 100 in January.

vading the Philippines. U.S. Marines had invaded Bougainville during the fall and gained the beachhead. There was no doubt that the Japanese, who were holed up in jungle bunkers and tunnels, would eventually try to reclaim the area. The 21st Evacuation Hospital would be needed to care for casualties when the counterassault came and the Army responded. The long-anticipated fighting began on March 8.

"We had an underground surgery with 12 operating tables," Pearson recalled. "We operated those tables day and night for three weeks."

Because the 21st Evacuation Hospital was only 4,000 yards from the front lines at the nearest point of attack, the majority of the seriously wounded patients could be sent directly to the hospital to avoid delay at jungle clearing stations. Roads that Army engineers had earlier cut through the jungle made quick evacuation possible, and many patients were on the operating tables of the 21st within two hours of being wounded.

Virtually all the patients treated by the 21st were Americans. Withering fire from ground troops, artillery on the beach and destroyers in the bay killed 9,000 Japanese and left few of the enemy alive to treat, Lingenfelter said.

As shells flew over their tents, the unit performed 264 general surgical procedures and 278 orthopedic surgical procedures

during the period of intense fighting.

Pearson said the physicians and dentists worked three to a team. Austin Bell, M.D., Oklahoma City, was the chief of Pearson's team, and Evans Talley, M.D., Enid, was the third member.

Unit members operated around the clock during the battles, and "you'd lie down and snooze for a minute" between patients, Pearson recalled.

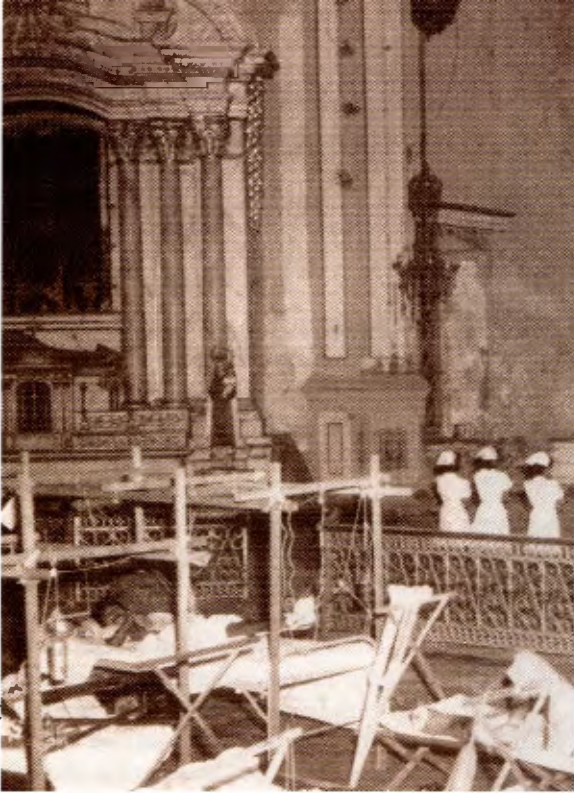
Surgical tents were underground so they could be isolated, both Pearson and Lingenfelter explained. Wards for the sick and injured were rows of large, above-ground tents on the beach.

"During fighting time, we did more surgery than medicine," Pearson said. "But when it was quiet, there was more medicine," primarily aimed at quelling malaria outbreaks and keeping the number of evacuations low. The oral surgeons performed general dentistry for the troops. In the 11 weeks between February 15 and April 21, the 21st Evac admitted an astounding 10,000 patients, according to unit records.

Pearson described the 21st as an "elite unit," a description echoed in the diary of Ashley W. Oughterson, M.D., clinical professor of surgery at the Yale University Medical School and Army surgical consultant in every major command in the Pacific theater. In *Wound Ballistics*, published by the Army in 1962, Oughterson wrote: "Perhaps never in the history of jungle warfare were professional talent and medical facilities so excellent and routes of evacuation so favorable as in the Bougainville campaign. Hence, the care of the wounded did achieve a very high standard.

"The 21st Evacuation Hospital was staffed with well-qualified specialists, and no patient here failed to achieve adequate specialized care. . . . Even the unavoidable errors of judgment incident to war surgery were at a minimum. Only one death could be attributed to an error of surgical judgment. The total operative mortality was 3.5 percent."

After six weeks of fighting followed by



As American forces invaded the Philippines in January 1945, the 21st Evac set up a hospital in this 1587 Spanish church in San Marcos, having scooped up seven truckloads of bat guano from the floor to make it habitable.

eight months of relative calm, the 21st—without Lingenfelter, who had been ordered to language school at Princeton University—pulled out of Bougainville and headed for the Philippines.

When 68,000 American troops made a surprise, unopposed landing on the island of Luzon at Lingayen Gulf north of Manila on January 9, 1945, the 21st Evac was just two days behind, aboard the U.S.S. *President Polk* with the 37th Division. The unit unloaded the *Polk* by rope ladders into small landing craft carrying 30 men each. They waded the last few yards to shore and began a three-mile hike to just-captured Binmaley, site of their first bivouac.

Within three days, an advance detail had begun setting up a hospital for wounded soldiers inside a church built by the Spanish in 1587 in nearby San Marcos. Pearson recalled that the sanctuary floor first was thought to be covered by the dust and dirt of centuries; instead, the covering was a layer of bat guano so thick

John F. Kuhn, '31 M.D., was a faculty obstetrician and gynecologist when ordered to join the 53rd Evac Hospital, which became part of OU's 21st. Also a general surgeon, Kuhn was delighted to return to delivering babies after seeing so much death in WWII.

that “we scooped up seven truckloads.”

On January 21, the unit's 300-bed hospital at San Marcos began receiving patients at such a rapid clip that within a month, the patient census hit 1,400. With no beds available for them, both patients and hospital personnel slept on mattresses or litters on the newly cleaned tile floor.

Meanwhile, American troops who had landed on Luzon unopposed found that the closer they approached Manila, the more fiercely the Japanese resisted. February 1945

is remembered as the “month of horror,” when the streets were washed in blood, and the Japanese had to be wrenched out, block by block, building by building, room by room.

As the 37th Division pushed the battle lines too far away for the 21st to give quick service to the wounded, orders came for the unit to move south. On February 24, 1945, after all patients at San Marcos had been transferred or evacuated, the 21st began moving silently and without ceremony in a long convoy of trucks headed for Manila and New Bilibid Prison nearby.

Until its liberation by the 37th on February 4, New Bilibid had been used by the Japanese to hold civilian and military prisoners, including 80 percent of the survivors of the Bataan Death March. It was the transit point for boarding Allied POWs on the infamous “hell ships” bound for slave camps on

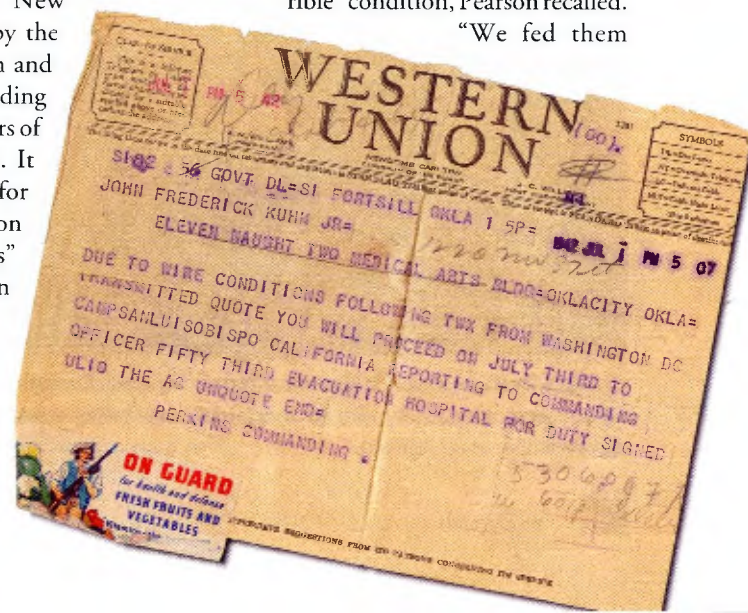
“Perhaps never in the history of jungle warfare were professional talent and medical facilities so excellent and routes of evacuation so favorable as in the Bougainville campaign.”

the Japanese mainland; relatively few POWs survived the journey.

Among the American prisoners freed from New Bilibid was the late William A. Berry, '40 Law, who had been captured at Corrigedor in May 1942. Berry, who became chief justice of the Oklahoma Supreme Court, tells of his harrowing 33 months in captivity at Cabanatuan POW camp and New Bilibid in the book, *Prisoner of the Rising Sun*.

Cabanatuan was liberated on January 30 in a spectacular, lightning raid by Army Rangers and Philippine guerrillas, freeing 512 POWs, mostly Americans. It was the sight of the sickest and most malnourished “litter patients” from Cabanatuan that greeted Pearson and the 21st when they arrived at New Bilibid a few weeks later. The men were in “terrible” condition, Pearson recalled.

“We fed them





The fighting on Bougainville was fierce for Hill 260 where Maj. Owen Royce and Maj. John "Robby" Robertson stand in this photo. Royce was a resident and Robertson taught oral surgery when they joined OU's 21st Evac Hospital.



Dr. D. B. Pearson sent home photos from Bougainville showing the work performed in an underground surgery with its dozen tables operating around the clock for three weeks of the worst fighting.


and got them better so they could be sent back to the States."

The unit's hospital at the prison was in full operation by March 3, and it grew quickly from 1,500 to 2,000 beds. In early June, the Army ordered the hospital closed, and the 21st was directed to "the finest set-up that the hospital had ever had" in prefabricated buildings on the grounds of the Wack Wack Country Club.

OU's 21st was not to remain in the relative luxury of the Wack Wack Club for long, however. An American invasion of the Japanese mainland was on the horizon, and the 21st was to be there to help treat the tens of thousands of expected casualties. These plans evaporated with the bombing of Hiroshima and Nagasaki and Japanese surrender on August 15, 1945. The war was over at last.

On September 27, the final entry in the Unit Diary was made when the receiving section admitted the 21st Evac's 30,601st patient.

By the end of 1945, the physicians and dentists of the 21st were en route to home and family and their interrupted careers. If their heroic service changed their lives or the way they practiced medicine, as it surely did, nothing was written, and little is known.

But there is this: Late in his life, neurosurgeon Jesse Herrmann confided to an interviewer that he never again walked into an operating room without the black, high-top "GI boots" he had been issued as a proud member of OU's Fighting 21st. 

Judy Fossett Kelley, '65 B.A. Journ, is writer/editor of OU Medicine, the magazine of the OU College of Medicine.

Primary written sources for this article are the Memory Book, 21st Evacuation Hospital, written by medical corpsman Beuna Chaney in October 1945 for the officers and enlisted personnel of the 21st; and Wound Ballistics and Surgery in World War II, both published by the Medical Department of the U.S. Army and available online.