

# U. S. Army Nurses in Russia

By ANNA LISA MOLINE, R.N.

SOON AFTER THE INAUGURATION of shuttle bombing between allied airfields in Italy and England and fields specially constructed behind the Russian lines, plans were made to set up field medical units with hospitals at the AAF Stations at Poltava, Mirgorod, and Piryatin. Each hospital consisted of two surgical and one medical tent, each with twenty beds, and a complete surgery with x-ray and sterilizing units. To each of these field units functioning as stationary hospitals were to be assigned three medical officers, one dental officer, one medical administrative officer, and four nurses.

After considerable negotiating with the Russian government, twelve U. S. Army nurses left England in April 1944 in the greatest secrecy and traveled through Casablanca, Algiers, Tripoli, Cairo, to Teheran where they waited for passports until the end of May 1944.

While awaiting permission to proceed into Russian territory we studied the Russian language under a special tutor and had lectures and special films to orient us to the Russian situation. It was an interesting six weeks.

Our flight into Russia was over the Caspian Sea and many ruined cities. From the air the area seemed to be totally devastated. Headquarters at

Poltava was in the only building remaining in the whole city. We were warned about the rough living conditions and the possibility of enemy bombing. We saw a train full of peasants returning from their flight from home and a Russian hospital train crowded with stretcher cases and walking wounded. Russian women doctors and young Russian nurses were in attendance. Linen, pajamas, and dressings were far from clean; equipment was old and worn from hard and long usage.

On our first day in Russia, we were assigned to our proper stations and began to organize the hospital and complete the setting up of ward tents and the surgery which had been begun by the enlisted men. Shuttle bombing between Italy and Russia was to begin next day.

The surgical tents were completely set up and the ward tents were ready when the first mission arrived from Italy. Fortunately the casualties were few. It was thrilling to see the "Flying Fortresses" and fighter planes circle the fields and those who wished to land first drop their flares. The missions continued, short missions from Russia over enemy territory, and from Russia to Italy. We were busy caring for the injured.

The hospital at Mirgorod was set up near a newly plowed field. The windy plains made us think of the dust bowl in the Middle West. The hospital at Piryatin was in a wooded area near a river, a pleasant spot except for mosquitos, bugs, and uncleared underbrush. This hospital was well camouflaged and could not be easily located by the enemy.

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Headquarters AA Station at Poltava.

The hospital was soon developed into well-organized units. Nurses and enlisted men constructed equipment and articles for the wards and operating tents. Tables, linen and blanket closets, clothes racks, basin standards, bedside screens, solution standards, thermometer trays and dressing trays had been made out of old boxes and bomb crates. Small metal bomb crates served as bedside tables. Unbleached muslin sheets used for drapes and covers gave the wards and surgical tents a fresh and finished appearance. Procedures and trays were standardized so that it was possible to give good patient care with the minimum of supplies and equipment.

To facilitate an efficient and smoothly functioning surgery, the tents were divided into four sections:

1. Shock section (equipment for treatment of shock).
2. X-ray and plaster section (x-ray and plaster equipment).
3. Operating section (sterile supplies and medications).
4. Work section (additional instruments, supplies, and equipment sterilizer).

With this plan, the operating section was as detached as possible from the activity in other divisions of the tent which made for good surgical procedure.

We collected old fuse cans for forceps holders, applicator and cotton ball containers; empty soft-soap jars were used for vaseline gauze, suture jars, and on hypodermic and thermometer trays. Dehydrated-potato cans served as waste and soiled dressings pails. Mayo tables were constructed of old pipe and wood. A coat of white and Air Corps blue did wonders for all these articles.

We had some social contact with the Russians.



Improvised Bath House. The water is heated by the sun.

Officers of the Russian Air Forces had visited us often. We were invited to a concert given by the Russians. The remaining four walls of a bombed building served as the theater, with a platform at one end for a stage. There were Russian folk songs, dances, and gypsy music.

Laundering of hospital linen was a problem. Finally the Russians allowed each base two women to assist with the hospital laundry and one to aid in the hospital mess. In the event of increased casualties additional women would be furnished to help care for the sick and wounded. Later, during a



Medical Field Unit at Poltava.

period of great activity, it was necessary to use these women for general ward cleaning and minor nursing duties.

On June 21 planes of the Eighth Air Force from British bases arrived and it was reported that enemy planes had been overhead but that they had left. We felt anxious and an additional nurse was on duty to care for the wounded who had arrived that day. At midnight there was another warning, and in the distance we could see the tracers of anti-aircraft fire. News came that planes were over Mirgorod, fifty miles away. We hurriedly began to evacuate patients into trenches which had been constructed wide enough to accommodate stretchers. Before the last patient had reached the trenches, planes were overhead, flares dropping.

The bombing started; patients were nervous and needed reassurance. The planes circled and returned; more bombs were dropped. The noise was deafening, anti-aircraft shells bursting, bombs exploding, and planes droning. Someone said that bomb dumps were directly hit. The whole earth was aglow with the light of fires. Some planes were hit directly and their gasoline tanks ignited and blazed high.

From the distance came cries for help. Doctors and nurses climbed out of the trenches and ran in the direction of the call. Injured men were lying near one of the hospital tents. A bomb had burst near by. One was dead, others critically wounded. The wounded men were placed on stretchers and taken to the nearest trench where they were given first aid and plasma while the bombing was still at its height.

The bombing was over by about 3:00 o'clock in the morning. Patients were returned to the wards that were in great disorder and confusion. Great holes were torn in the top of the tents and flying fragments and blast had done much damage. In the surgery there were patients on the shock tables, fracture table, x-ray table, and on stretchers on the floor. Plasma and blood transfusions were given, instruments boiled and trays set up, operations performed and splints applied. The nurses went continuously from one patient to the next, never stopping. There were constant explosions on the airfield from anti-personnel and delayed-action bombs. More patients were brought in; the chaplain came to surgery to see the seriously wounded. Dawn finally came. The nurses washed their faces, had a cup of coffee, and started in again. All through the next day it seemed that there was no end to the number of men who were injured.

That afternoon there was another alert and then more reconnaissance planes. The patients were moved to a new hospital site in an orchard about a mile away, where there might be more protection. Linen and equipment, emergency sets, and necessary medications were packed and moved. The ward tents were set up on a rough field beneath

apple trees where the patients felt safer and were made as comfortable as possible for the night. Tents were erected for the nurses; we dropped on our cots from sheer exhaustion.

The next day we completed clearing up the damage. Two of the hospital tents were unusable. Linen, pajamas, equipment, and drugs were beyond salvage.

At Mirgorod, where the hospital had been moved into a near-by wood on the first night of enemy action, casualties were few though the base was bombed several times. At Piryatin the enemy planes circled for hours but were unable to locate the air strip and, in error, part of the village was bombed. Few of us will forget when flares hung over the hospital tents for hours.

After several weeks of intense activity the bases settled down to a calmer routine.

The hospitals were painted in odd moments and brick-lined walks constructed. The commanding general added to our comfort by donating a radio and records for our recreation tent.

The days continued to be beautiful and warm, and between missions all officers and nurses from the other stations came to Poltava for a picnic and conference. There was swimming in a near-by river. Some of the Russian officers and their wives were our guests.

The rainy season began about the middle of July and for two weeks it rained until the area was almost a mud flat. We wore boots and raincoats in hospital wards, mess and living tents. It was almost impossible to keep the ward and patients clean and dry. The wooden floors of the tents were cleaned with a shovel.

In August, winter clothing was ordered for all nurses and in September frost appeared. There was no heat in our pyramidal tents, but oil-burning stoves were installed in the ward tents and in the recreation tent.

On a visit to Moscow we enjoyed the ballet and saw Red Square, Lenin's tomb, the Kremlin, and the city's modern subway system. We now had a truer picture of Russia than we could obtain from the total destruction near the bases. While in Moscow, we were guests at the Embassy.

Soon after our return from this trip the planes began to bring food supplies into Warsaw instead of bombs and our usefulness as a bomber base came to an end.

We had learned to like the Russians as a people, and we had a feeling that they liked us. They were very interested in our methods and equipment and eager to learn. We had found them a sincere, honest, tactful, and hard working people with a sense of fair play and sportsmanship and a sense of humor.

We had enjoyed building up our hospital and making a home for ourselves on the Russian plains. Not without regret we left Russian soil where we had learned to know a kindly people.