Article Title: Surgeon at Fort Sidney: Captain Walter Reed’s Experiences at a Nebraska Military Post, 1883-1884

Full Citation: Gordon Stelling Chappell, “Surgeon at Fort Sidney: Captain Walter Reed’s Experiences at a Nebraska Military Post, 1883-1884,” *Nebraska History* 54 (1973): 419-443


Date: 4/20/2012

Article Summary: Young Captain Walter Reed spent only ten months at Fort Sidney, but his experience in Nebraska with patients suffering from infectious diseases was the foundation for his famous work in bacteriology. The unusually detailed medical records that he created as assistant surgeon demonstrate his awareness of the link between post sanitary conditions and disease.

Cataloging Information:

Names: Walter Reed, James Peleg Kimball, William James Wakeman


Place Names: Fort Sidney (formerly Sidney Barracks), Lodgepole Creek, Jefferson Barracks (near St. Louis, Missouri), Fort Robinson

Keywords: Walter Reed, Fort Sidney, yellow fever, erysipelas, typhoid fever, bacteriology

Photographs / Images: plan of Sidney Barracks, Nebraska, 1871; Captain Walter Reed; Bachelor Officers’ Quarters, built in 1884; soldiers from Fort Sidney at Camp Conrad in August, 1893; some of the officers assigned to the 21st Infantry in 1884, photographed at Fort Sidney
SURGEON AT FORT SIDNEY:
CAPTAIN WALTER REED’S EXPERIENCES AT A
NEBRASKA MILITARY POST, 1883-1884

By GORDON STELLING CHAPPELL

When Captain Walter Reed, assistant surgeon, Medical Department, United States Army, stepped down from the ornate car of the westbound Union Pacific passenger train at Sidney Station, Cheyenne County, Nebraska, on October 5, 1883, none of the onlookers who noticed the officer wearing the dark blue and gold shoulder straps could have foretold that one day his fame would be nationwide as one of the conquerors of yellow fever, or that one of the army’s greatest 20th century hospitals would be named for him. Walter Reed, that fall day in western Nebraska, was merely another assistant surgeon, a low-ranking army officer changing station from Fort Omaha, Nebraska, to Fort Sidney. But in his brief term of service at that frontier post, one may see, with hindsight, a glimmer of his future greatness.

Fort Sidney, known until 1871 as Sidney Barracks, was one of four military posts that had been established mainly to protect construction crews building the Union Pacific Railroad across the Great Plains in the late 1860’s. A small garrison of troops had camped there on Lodgepole Creek along the line of the railroad survey in the summer of 1867. Their cantonment was considered at first merely a sub-post of old Fort Sedgwick, some forty miles to the southeast on the stage road to Denver. But with the completion of the railroad, Sidney Barracks and its location on the new and vital transportation route rendered its parent post obsolete. In June, 1871, Fort Sedgwick was
abandoned and its garrison moved to Sidney Barracks, soon to become Fort Sidney.³

By the time Captain Reed arrived in October, 1883, the bitter Indian wars in the region were temporarily in abeyance. The last serious conflict nearby had occurred in the fall and winter of 1878 and the opening months of 1879 when Dull Knife’s Cheyenne had slipped north past Fort Sidney to their old hunting grounds, only to be rounded up, to escape, and to suffer a final winter slaughter on the icy bluffs beyond Fort Robinson. Exiled again to Indian Territory, it was not until four years later that the government relented and brought the surviving Northern Cheyenne back to their homeland. Scarcely a month before Reed’s arrival at the town of Sidney, the military post on Lodgepole Creek had played host to a final contingent of the homeward-bound Cheyenne and their 9th Cavalry escort.⁴

But if there were no casualties from Indian conflicts to occupy the new post surgeon’s time, there were certainly enough diseases, including two — erysipelas and typhoid fever — which would later figure prominently in his brilliant career. And, of course, who could say that future conflicts with Indians would not occur, as a tragedy along Wounded Knee Creek would prove eight years later.

The hospital at Fort Sidney, which became Walter Reed’s responsibility on October 8, 1883, was the third such structure to be built at the post, having been erected in 1877. Dr. Calvin DeWitt,⁵ one of Reed’s predecessors, found it in June, 1879, to be

in excellent condition in every respect. . . . The building and grounds were very clean and neat; the furniture and beddings was almost entirely new and in excellent order; the supply of medicines and hospital stores except in the case of a few articles was abundant.

(This statement by Surgeon DeWitt, as well as other direct quotations by military men in the text of this article, are from “Records of the Medical History” of Fort Sidney. See footnote 2.)

However, on October 21, 1880, the medical director of the Department of the Platte, Lieutenant Colonel John Edward Summers,⁶ had made a visit from headquarters in Omaha and
rendered quite a different report. The three-year-old hospital, he said, was

very far from being that which it was designed and intended: was very indifferently built, original plans changed in some respects much to its disadvantage: the Post Surgeon’s office which should be a private room for the investigation of cases and important business, is rendered useless for such a purpose by the open door way out into the main hall, and the fire plan with a part of the chimney, i.e. the flue running up to and immediately under the timbers of the ceiling overhead, and left open at that point, has been the cause of serious alarm, and very nearly the burning up of the building. In many other respects the Hospital is shably [sic] constructed and very far from that which it was believed and hoped it would be.

Still, although it did not please Surgeon Summers, the Fort Sidney post hospital of 1883 was typical of frontier army medical facilities, better than some, no doubt inferior to others.

The staff of this sort of establishment typically consisted of one or maybe two trained physicians, one or more enlisted medical attendants with the rank of hospital steward, and on occasion a hospital matron appointed from among the wives of enlisted personnel at a frontier post to do cooking and washing and attend to other tasks. Additional manpower was provided by detailing enlisted men from garrison companies to serve as male nurses and as hospital attendants. Supplies were shipped biannually on requisition by the incumbent post surgeon; the pharmaceuticals were contained in colorful bottles with a medical department designation cast in raised letters in the glass.⁷

The military post in the trans-Mississippi West bore little similarity to the stockaded forts protected by blockhouses portrayed in James Fenimore Cooper’s fiction and the writings of Francis Parkman about a now long-past woodland frontier. Fort Sidney was typical among trans-Mississippi garrisons, consisting of a scattering of buildings set out on the prairie without semblance of fortified protection other than an ornamental picket fence. The central feature of the post was a vast parade ground which the principal structures faced. Officers’ quarters, which looked like ordinary Victorian civilian houses except that they were all alike, were along the west side. Facing them from across the parade were quartermaster and commissary storehouses and offices and the hospital. An infantry barracks stood on the north side, and on the south was a cavalry barracks, with laundresses’ quarters (for married
Plan of
SIDNEY BARRACKS
NEB.

1871

KEY
1. Commanding Officer
2. Officers Quarters
3. Infantry Quarters
4. Commissary & Quarter Master Store
5. Magazine
6. Guard House
7. Hospital
8. Bake House
9. Old Bakery
10. Well
11. Laundress Quarters
12. Flagpole
13. Blacksmith
14. Carpenter
15. Coal House
16. Ice House
17. Cavalry Stable
18. Saddle House
19. Quarter Master Stable

SCALE
0 100 200 300 400
feet

Ditch
N
Lodge Pole
Creek
enlisted men whose wives were the laundresses) behind it. Behind these were the stables and blacksmith shop on the slope leading down to Lodgepole Creek. The buildings of the post were either of frame or "concrete" (lime-grout) construction.  

Life on posts was a military version of life in Victorian America. Soldiers put in a full day of garrison details, drills, guard duty, construction and maintenance, and on rare occasions a foray into the field. Amateur theatrical groups provided intermittent entertainment in the stilted stage of the day. Posts frequently had their own small printing plants to turn out various blank forms required by the military bureaucracy and, in spare hours, perhaps a post newspaper. At posts which were fortunate enough to serve as regimental headquarters, as did Fort Sidney while Walter Reed was there, a regimental band marched through summer days in guard mount ceremonies and evening dress parades and gave periodic concerts on Sunday afternoons. Most posts had libraries which subscribed to all the popular periodicals of the day, not to mention such trade papers as the Army and Navy Journal, newspapers from important cities, and a broad selection of fiction, certain to include in later years the popular army novels of Captain Charles King.  

The uniforms worn in garrison were colorful to an extreme. While on campaign, officers and men might appear to be refugees from a hobo jungle but uniforms worn at military posts in the West, as elsewhere, were generally correct and regulation. A dark blue coat, termed by the army a "blouse," was worn over medium blue trousers, trimmed in the case of officers and non-commissioned officers with yellow for cavalry and light blue for infantry. The "branch color" or trim of the medical department was emerald green piped in white, and hospital stewards wore as insignia of rank a sloping green half chevron on each arm which bore a vertical yellow caduceus in the center. On occasions that called for full dress, the dismounted officers and men turned out in black helmets trimmed with a shiny brass spike, eagle, and sidebuttons, while cavalry and other mounted officers and men wore similar helmets ornamented in addition with colorful horsehair plumes and drooping, tasseled cords. The medical officers, however, were
exempted from this display and donned instead a black, feathered chapeau-de-bras which had but a trace of gold trim. Still, Walter Reed’s army was a much more colorful affair than later generations would imagine.¹⁰

Dr. Reed’s official predecessor as post surgeon at Fort Sidney, Assistant Surgeon James Peleg Kimball,¹¹ had been transferred from Fort Sidney on September 4, 1883, but his departure had been anticipated by department headquarters in Omaha and Assistant Surgeon William James Wakeman¹² had arrived by eastbound train from Cheyenne on August 31. He was assigned on temporary duty from his normal station at Fort D. A. Russell, located on high ground just west of Wyoming’s territorial capital city. A month after his arrival, Wakeman was faced with a medical crisis which Reed would inherit.

On October 1 Private William E. Bundy of Company B, 14th Infantry, died in the hospital of typhoid fever. Bundy had been on duty with troops camped at White River, Colorado, that summer, an aftermath to the violent uprising there of the Ute Indians in 1879. He had returned to Fort Sidney on July 21 and
served with his company in the garrison. On September 18 Bundy had gone on sick call and Dr. Kimball admitted him to the hospital. There were other cases of typhoid at Fort Sidney, but the significance of Bundy's case was that, as far as Dr. Wakeman had been able to determine, it was the first case to originate at the post, an ominous development indeed.

Typhoid itself was nothing new at Sidney. What was remarkable was that it always seemed to occur in detachments of cavalry recruits en route to western commands or to join the Sidney garrison from the general depot of Jefferson Barracks near St. Louis, Missouri. On May 31, 1882, for example, a detachment of fifty-one recruits headed for assignments with the 5th Cavalry at Forts Sidney, Robinson, Niobrara, and McKinney had arrived at the post. By the end of June, a number of them were hospitalized, and all the serious illness at the post was among these recruits.

Dr. Kimball had brought this to the attention of the post adjutant on June 30, indicating what he thought to be the source of the illness:

During the past four years in which I have been on duty with Cavalry troops in this Department, not one of the detachments of recruits received from Jefferson Barracks, Mo., which have come under my observation but has contained a number of men, either suffering at the time of arrival or taken down soon after with fevers—typhoid, remittent, and intermittent—contracted, in the majority of cases I am convinced at Jefferson Barracks. The health of some of these men is impaired for years. The injury done to the health and efficiency of the cavalry arm of the service by the exposure of recruits at Jefferson Barracks to the miasms of malarial and typhoid fevers would I believe, were it fully and accurately known, be found a matter for serious consideration and investigation.

This, then, was the situation into which Assistant Surgeon Reed stepped on October 8, when, as Kimball's regularly assigned replacement, he relieved Dr. Wakeman as post surgeon. The latter, having spent three days to brief Reed, took several more to pack and departed on October 11 for his normal duty station near Cheyenne.

The death of Private Bundy five days before Reed's arrival, in view of the apparent local origin of the disease, greatly concerned the new post surgeon. Despite the fact that cases of typhoid fever had been under treatment in the post hospital since August 12 of that year, this one was apparently unique. According to Dr. Wakeman's investigation, the late Private
Bundy had not visited those suffering from typhoid in the hospital ward, nor was there any other obvious source of infection, since he had not come from Jefferson Barracks. Reed regretted that Bundy had been buried without Wakeman’s performing an autopsy but sympathized with his predecessor’s reasons for the omission; two officers’ wives were about to give birth and Wakeman thought he might be exposing them to unnecessary danger of contamination in the small post hospital. But although he had performed no post-mortem, Wakeman had harbored no doubts about the accuracy of his diagnosis, and Reed had to accept his judgment.

“Upon taking charge of medical affairs at Fort Sidney,” Reed wrote in that official, calf-bound volume known as the Record of Medical History of Post, “I found the ward rather full of ‘ugly’ cases.” Of eight enlisted men undergoing treatment, however, only three were properly part of the garrison. Among the rest was Recruit Jacob Darmstadt, who had been assigned to Troop H of the 5th Cavalry and was en route to Fort Robinson and who had been put on sick report on October 2 with typhoid. He had come from Jefferson Barracks, where Reed had no doubt he had “imbibed” the germs. Recruit Columba McCaura of the same unit had similarly developed the disease and entered the ward at the Sidney hospital on July 21; his case of typhoid had been serious, with a high temperature range, and Dr. Reed estimated that McCaura would be able to do no regular troop duty for the next three months. Recruit James Hawkins of Troop F of the 5th Cavalry, admitted to the hospital on August 27, was similarly convalescing from the disease. In view of these cases, Reed, perusing records of the past months, found Dr. Kimball’s remarks of June 30 “appropriate and timely.”

Reed could not dismiss the case of the late Private Bundy from his mind. Significantly, his case of typhoid had to be of local origin, yet apparently could not have come from any of the patients confined to the hospital, for he had had no contact with any of them. The “sanitary condition” of Bundy’s barracks, and indeed of the whole post, Reed found to be excellent. In fact, few surgeons in the post’s entire history had found anything to complain about in that respect, in marked contrast to many other frontier garrisons. Nor, commented Reed in his medical report, need one look for local causes, since
for four years cases of typhoid in recruits transferred from Jefferson Barracks had been under treatment at Fort Sidney from time to time. It was not surprising to him that "in spite of watchful care, the disease should become implanted upon this post." But Reed did find it a matter of regret, and deep regret, that the government should retain a Post, & that too a rendezvous for recruits, where typhoid fever has prevailed to such an extent, and from whence recruits have been sent out to scatter the disease, as it were, broadcast over the western Departments.

Jefferson Barracks, he was suggesting, should be closed as a military post.

All of Reed's cases, however, were not so serious. In addition to the officers and enlisted men, he treated the families of soldiers. There was quite a bit of sickness among the children of the post in November. Both boys of the regimental and post adjutant, Lieutenant William Wallace McCammon,¹³ as well as the son of Lieutenant Murphy,¹⁴ all of whom were under 6 years old, contracted "malarial" fevers, characterized by throat infections, sore necks and inflammation, diarrhea, and a complete loss of appetite. Reed administered quinine and mustard plasters together with an anodyne liniment, and the children soon recovered, although one took much longer than the others.

Meanwhile, another really serious medical problem arose. On October 12, 1883, Lieutenant James Anderson Buchanan,¹⁵ 14th Infantry, was admitted to sick report with a severe case of facial erysipelas, a very nasty infectious skin disease. The infection had begun at the tip of his nose and from there spread to his forehead and over the rest of his face and ears. Reed administered liberal doses of tincture of ferric chloride, and the lieutenant eventually recovered and was able to return to duty on October 31. His, like the cases of typhoid, may have been of outside origin, for Buchanan had just returned from Fort Omaha where he had been on duty connected with rifle practice.

That was not the last Dr. Reed was to see of erysipelas at Fort Sidney, for early in November Private Edward C. Updegraff of Company C, 14th Infantry, contracted the disease. Updegraff had nursed Lieutenant Buchanan in October. Subsequently, on November 3 he had been admitted to the hospital
with a bad cut on the left side of his head. Ignoring the post surgeon’s warnings, he had taken the bandage off the wound, and shortly thereafter he developed erysipelas around the cut and Dr. Reed put him in isolation. The case became severe, with the skin infection spreading over both the face and the scalp. At one point Reed was administering medicine every three hours. By the end of the month, Updegraff was convalescing rapidly.

Now there was a chain reaction of erysipelas. On December 5, Private Thomas Dowden of Company E, 14th Infantry, a hospital attendant who had nursed Updegraff, came down with it. The infection spread over the upper part of his face and his scalp and his temperature reached 106 degrees. Reed isolated Dowden in Ward 2, and he began to convalesce on the eleventh day.

Meanwhile, Dowden’s nurse, Private John C. Evans of Company A, 14th Infantry, just appointed hospital steward third class, had contracted erysipelas from patient Dowden and proved to be the most serious case yet, the infection spreading over the whole surface of his body. Then on December 26, Evans’ nurse, Private Marion Kirby of Company E, 14th Infantry, began to show some symptoms of erysipelas that caused Reed to have him relieved. Kirby was given the same medication as the fully developed cases, and when after three days he had no further symptoms, he was returned to company duty.

Reed meanwhile requested from the post commander, Major William Findlay Drum, a detail of three infantrymen to take turns nursing the sick, since he hoped by reducing the length of exposure to the infected patients to minimize the chance of nurses’ catching the disease and thus break the epidemic. One of the three privates so detailed proved to be so afraid of catching it himself that he had to be replaced with another.

Once Dowden had recovered and been discharged from the post hospital, Reed had the isolation ward closed and fumigated with burning sulphur. He then had the hospital steward wash down the walls with a solution of carbolic acid. In his sanitary report to Major Drum at the end of the month, he requested that the post quartermaster have the room thoroughly
The Bachelor Officers’ Quarters, built in 1884, was the last addition to Fort Sidney’s officers’ housing. This one and one-half story duplex quartered four men.

kalsomined as soon as possible before he needed the space for other patients. Reed’s first two months at Fort Sidney had indeed been rather rough duty for a post surgeon.

There were, of course, diversions from hospital and post routine from time to time. On October 19 the inspector general of cavalry for the Military Division of the Missouri, Lieutenant Colonel James William Forsyth, arrived at the post, but as there was no longer a cavalry detachment stationed at Fort Sidney, he departed the following day. Four days later, however, the department commander, Brigadier General Oliver Otis Howard\(^1\) and his son and aide-de-camp, Lieutenant Guy Howard\(^1\) arrived on an eastbound train. On the following day the garrison was reviewed in dress uniform. Captain Reed was a lively officer with a happy demeanor characterized by enthusiasm and optimism. He was sociable, companionable, and a good conversationalist. A little above medium height, he had a slim, graceful figure well suited to military uniform.\(^1\) He
generally made a good impression on people, and there is no reason to believe that General Howard was any exception. At any rate, the general proceeded to inspect the barracks and the hospital before departing for headquarters in Omaha.

The weather had been mild in November, but winter finally settled on the post with a six-inch snowfall on December 23, just in time to insure a white Christmas that year. A nastier storm howled around the post hospital on the 30th, driven by a strong north wind which drifted a new four-inch snowfall into deep mounds in the lee of buildings. The year went out with the temperature 5 degrees below zero.

Three weeks of bad weather brought Dr. Reed his share of troubles — nineteen cases of chest and throat infections. Along with seven surgical cases, typhoid, and erysipelas, Reed had treated thirty-seven soldiers and dependents during the month.

Private Evans remained in the hospital in January. He was able to get up and move about by the 18th, and on January 29, he was transferred to duty at Fort Omaha with a promotion to hospital steward second class. His initiation into the medical service (there was yet no medical corps) had certainly not been encouraging — contracting a distressing disease from one of his first patients. By the end of the month the post quartermaster had gotten around to kalsomining and painting the rooms occupied by Evans and other patients with erysipelas.

The Plains winter continued to give Reed medical problems of a minor nature. The temperature dropped to 17 degrees below zero on January 16. As the result of frequent snowstorms, Reed noted that “sleighing has been possible every day in the month,” a statement suggestive of one of his diversions. Much of the illness resulting from the weather Reed attributed to the carelessness of the enlisted men in failing to dress properly. “Men have frequently presented themselves at sick-call without any overcoats or other protection,” he complained, “and that, too, when they were suffering from considerable inflammation of the throat.” But he found that “to caution them, has simply been time wasted.” It did not help that despite the cold weather the post quartermaster was pushing construction of an addition to some relatively new barracks.
In addition to such weather-induced maladies, Reed also treated a case of threatened miscarriage, an infection of the middle ear, acute rheumatism in a boy of 12, tonsillitis, eczema, and intermittent fever.

He had also presided over the birth of several children: a son, Chester Conrad, to musician Joseph Walter and his wife on October 30; a boy, James, to the wife of band leader William Claus the following day; and on November 26, a daughter to the wife of Sergeant George White of Company B, 14th Infantry.

Reed's duties as post surgeon included inspecting the buildings of the post and reporting monthly on their condition with respect to sanitation, as well as the condition of the grounds. The new kitchen-dining hall wing of the new barracks was one item on the list. It was completed early in January and occupied by Company B. The building and its addition were of frame construction on solid sandstone foundations with a board-and-batten exterior. The interior was to be lathed and plastered once the temperature moderated enough so that the water in the plaster would not freeze. The new wing featured not only a dining room and a kitchen, but a cook's room, a wash room, and a barber shop. On February 29 the troops at the post were mustered and inspected, and as his part of the job, Reed found the barracks and guard house "neat and cleanly" and added that the men presented a "neat and soldierly" appearance. ("Soldierly" was a pleasingly vague adjective of which inspecting officers of Reed's era were fond.)

The weather, meanwhile, could cause other casualties than mere colds and sore throats. Private Peter Till of Company B, 14th Infantry, had suffered frostbite of the right hand on the night of February 6 following exposure to frigid temperatures after having passed out dead drunk while on a pass in the town of Sidney. Reed had the hospital steward rub the affected hand vigorously with dry snow to start the circulation, but the frostbite had gone too far — and the patient's debilitated constitution was of no help. Reed painted the dead area with tincture of iodine the next day, and finally on March 4 he anaesthetized and amputated part of three fingers. This, indeed, was a typical winter case at a frontier fort; it was not at all uncommon in winter for for soldiers who had gotten drunk in town or at a nearby "hog ranch" to pass out on the return trip.
Soldiers from Fort Sidney conducted maneuvers at Camp Conrad in August, 1893. The original photograph belongs to Dr. Russell Lyster, grandson of Fort Sidney’s last post commander, Lieutenant Colonel William J. Lyster. (Courtesy of Cheyenne County Historical Society.)

to a post, and if they survived at all, frostbite and amputation were often a price they paid for drink. On the other hand, injury from frostbite in the line of duty was uncommon, as in winter soldiers were issued weighty buffalo overcoats, soft sealskin caps with ear flaps and visors, and muskrat fur gauntlets, as well as buffalo overshoes. Still there were hazards, and some years earlier a soldier returning from Sidney had died of exposure when he lost his way in a blizzard in the short distance between the town and the post.

On March 16, 1884, Colonel Lewis Cass Hunt²⁰ of the 14th Infantry arrived from Omaha and assumed command of both the post and his regiment from Major Drum. On the following day he went on sick report for chronic eczema. From infant to aged, from private to post commander, all in the garrison, not to mention civilians in nearby towns and ranches, depended on the military post surgeon for medical assistance on the western frontier.

About this time another casualty of the combined effects of whisky and weather came under Reed’s care. Private Matthew Nolan of Company B, 14th Infantry, a prisoner in the guard house,²¹ was admitted to the hospital with double pneumonia
on March 16 and died at 4 p.m. on the 20th. Reed performed an autopsy which confirmed his diagnosis. The man was a confirmed drunk, and liquor had weakened his constitution. A military funeral ceremony was held on March 22, and the body was shipped to the national cemetery at Fort McPherson to be interred.

The worst snowstorm of the season enveloped Fort Sidney on March 31, dropping two feet of snow in twenty-four hours. While a “most terrific wind” howled under the eaves and whipped the snow outside into ten-foot drifts, Dr. Reed sat at his desk writing out the monthly post sanitary report. He suggested better surface drainage around the barracks to keep them from becoming damp from water standing beneath the floors. He also invited the post commander’s attention to the “necessity of providing better means of ventilation for the barrack rooms.” Reed suggested six-foot-six box ventilators on the ridge line of the roof over each room in the barracks. Adjutant McAmmon responded a day or two later that the post commander had directed the post quartermaster to carry out the recommendation “as far as practicable,” but a month later Reed commented that nothing had yet been done. One of a post surgeon’s greatest headaches was trying to get a post administration to carry out the recommendations in the sanitary reports.

Another typical duty of a post surgeon was to provide a medical discharge for soldiers who suffered a disability from which there was little chance of recovery in time or degree to make them useful to the army. To effect the discharge the surgeon drew up what was called a “Surgeon’s Certificate of Disability” specifying the reasons as well as the degree of disability and whether or not incurred in the line of duty. If the latter was the case, the soldier was in severe instances entitled to admission to the Soldiers’ Home in Washington, D.C., although relatively few qualified.

For example, on April 22, 1884, Dr. Reed arranged the discharge of Private Charles Stanton of Company A, 14th Infantry, whose 75 percent disability (unspecified in this case) did not originate in the line of duty. Then there was Private Lie Wanger, whom Reed discharged the same day for a tumor on his
left leg two inches above the knee, a disability of "½," not contracted in the line of duty. Reed had tried to persuade Wanger to let him remove the tumor by surgery, but Wanger, who evidently wanted to get out of the service anyway, found the tumor a convenient escape and would not sanction the operation. In fact, when it seemed to him that the tumor alone might not suffice to get him a discharge, Wanger began complaining of severe neuralgic pains in that leg. Captain Reed doubted the claim, but in view of the tumor, thought it best to recommend a medical discharge, which was granted on April 22.

It is interesting to note that a month and a half earlier on March 3, Reed had issued a Surgeon’s Certificate of Disability, total in degree, to Regimental Sergeant Major Julius Fuerst for persistent and severe neuralgia. He had been suffering from it for ten years, but it had become more frequent, the attacks of longer duration, and relief was possible only through large hypodermic doses of morphine. Reed in this instance had considered the disease as originating in the line of duty, thus qualifying the old soldier for government care in retirement.

A sergeant major is the army’s highest ranking and most prominent enlisted soldier, and Fuerst’s affliction and subsequent discharge must have been common knowledge at Fort Sidney. There may even have been some sort of ceremony for the departing old timer. It is no wonder that Private Wanger’s April claim of “neuralgic pains” encountered skepticism from the post surgeon.

Another certificate of disability and consequent discharge was issued to Private Thomas Donaldson of Troop K, Fifth Cavalry, whose disability, like most, was not in the line of duty. On the night of July 19, 1883, long before Reed had come to Fort Sidney, Donaldson had participated in a drunken brawl in the town, and had been shot through the leg by a revolver ball of a large caliber. When Reed took over the hospital, the wound was draining pus at the points where the ball had entered and exited. Although the leg bone had consolidated, it had shortened about three inches. The soldier’s condition was deplorable; he was practically a skeleton and suffered a fever every evening. Reed pulled him through, however. By November he had gained fifteen pounds, and his wound began to close
up on both sides. By April he was completely recovered, but with one leg shorter than the other he was of no use to the army, even in a cavalry regiment. His general health was excellent and he could walk easily with a cane.

On the other side of the ledger, the post surgeon was called upon to examine civilians seeking to enlist in the service. While most recruits received at western posts were sent out from posts farther eastward—from Jefferson Barracks, Missouri, for instance—citizens who sought to enlist directly at a western garrison were generally not discouraged. Men presenting themselves for enlistment in the spring of 1884 included: Antonie Heintzelman on March 23; Andrew Saners, May 4; Albert Meyers, John C. Harrison, and Clement Hanson, May 30; and George West, June 5. Surgeon Reed had to examine these men before they were accepted to make certain they suffered from no disabling illness or injury, another part of a post surgeon’s routine.

The month of May, 1884, proved to be a quiet one, except that the paymaster, Major Albert Selah Towar, arrived from department headquarters on May 4 and paid the troops. Immediately thereafter there was the “usual amount of drunkenness following pay-day,” according to the post surgeon, who was in a position to know. In view of the approach of hot weather of a Plains summer, Dr. Reed recommended that the vaults and drains of post privies be more thoroughly disinfected with copperas—iron sulfate solution—than had been the practice in the past. He spelled out in detail how the crystals should be dissolved, pointing out that it was a waste of energy to use the disinfectant unless it was used properly. On previous occasions soldiers mixing the solution had been careless about waiting for the crystals to dissolve.

June proved to be a busy month in the garrison, for the 14th Infantry was under orders to move from the Department of the Platte to the Department of the Columbia, changing stations with the 21st Infantry. Much of the month was spent by the soldiers in packing regimental supplies and equipage. On June 25, Headquarters detachment, field and staff officers, band, and Companies A, B, C, and E, some fifteen officers and 192 men of the regiment under Colonel Hunt, left by special trains for San Francisco, where they would embark by coastal steamer for the
Pacific Northwest. Just prior to their departure, Dr. Reed delivered a son to the wife of Sergeant Jacob Keefer. The baby was named William Harrison.

The post settled into a quiet week—too quiet with only a few more-or-less permanent garrison fixtures such as the post surgeon and the hospital steward, a post quartermaster and his civilian employees, the ordnance sergeant, and a handful of soldier caretakers. But on July 2 more special trains on the Union Pacific whistled into Sidney Station bearing Headquarters Detachment, field and staff officers, band, and Companies E, F, G of the 21st Infantry. The regimental commander, Colonel Henry Andrew Morrow, assumed command of the post, and two days later Post and Regimental Adjutant Lieutenant Daniel Cornman requested from Reed a full written report on the sanitary condition of the post along with any recommendations for improvement. “Your report should extend to details & should embrace sewerage, drains, water-supply & disposition of surplus water, sinks, privies, condition of officers quarters & men’s barracks as to ventilation, light, dampness, &c.,” Reed was instructed in writing. The post surgeon did a careful job of it, submitting his report eleven days later, a document which embraced his earlier suggestions regarding ventilation and drainage.

Captain Reed had been at Fort Sidney a little over nine months when Special Orders 58, dated July 11, 1884, came down from department headquarters ordering his transfer from Fort Sidney to Fort Robinson. On July 17 Dr. Clarence Ewen arrived at Sidney Station to relieve Captain Reed. The latter was able to hand over a much tidier sick ward than he found when he arrived; there were no really serious cases awaiting Dr. Ewen’s services. And on August 5, 1884, precisely ten months after his arrival, Assistant Surgeon Walter Reed rode a stage north out of Sidney en route to his new assignment.

Those ten months spent at Fort Sidney were merely an episode in the early career of an army physician—but that physician was no ordinary army doctor. His frontier years were short on intellectual contacts and opportunities for research but were filled with experiences demanding initiative and ingenuity.
Fifteen of the thirty-eight officers assigned to the 21st Infantry in 1884 were photographed at Fort Sidney: (from left to right, back row) Almon L. Parmenter; John S. Parks, Jr.; Edward H. Brooks; Charles H. Bonesteel; Daniel Cormman; Charles A. Williams; Fredrick H. E. Ebstein; George H. Burton; Joseph W. Duncan; (front row) Evan Miles; Ebenezer Whiton Stone; Soloman E. Sparrow; Henry A. Morrow; William H. Boyle; James A. Haughey.
They provided food for thought that would be the foundation of his career as a medical pioneer.

In 1890 Reed asked for leave of absence to permit post-graduate study. Instead the army assigned him to duty as attending surgeon and examiner of recruits at Baltimore, Maryland, but with special authority to study at Johns Hopkins Hospital while there. At Johns Hopkins, Reed took a course in clinical medicine and then specialized in the relatively new field of bacteriology. In 1892, drawing on both his research and his Fort Sidney memories, he published his first article, entitled "The Contagiousness of Erysipelas."

In 1893 Reed was promoted to major and surgeon in the Medical Corps and detailed as curator of the Army Medical Museum in Washington. He also became professor of bacteriology and clinical microscopy at the Army Medical School. For the next five years he studied the bacteriology of diphtheria and pursued a continuing interest in erysipelas. In 1898 when the Spanish-American War broke out, he was appointed chairman of a committee of physicians charged with investigation of the causes and means of transmission of typhoid fever, then rampant in troop encampments as it had once been at Fort Sidney.

Major Reed, of course, went on to head the commission of medical officers investigating yellow fever in Cuba, and it is here that his principal fame rests. With experimentation conducted on soldier volunteers in 1900 and 1901, the group proved that mosquitoes were the carriers and thus pointed out a means of its eradication.

In February, 1901, Dr. Reed returned to resume work at the Army Medical School and to take up a professorship of pathology at Columbia University Medical School in New York City. How ironic it is that, preoccupied with his work, he, a distinguished physician, ignored the growing pains of his own acute appendicitis until, on November 17, 1902, a fellow medical officer diagnosed the condition too late. Thus Dr. Walter Reed, surgeon, Medical Corps and major, United States Army, died on November 22, 1902. He was buried in Arlington Cemetery near Washington, D.C.

Fort Sidney, Nebraska, can by no means be considered the
only post to have left an impression on young surgeon Reed. Yet, for the perspicacious reader the faded pages of the "Record of Medical History of Post, Fort Sidney" are instructive. Captain Reed's entries in 1883 and 1884 are more detailed, more literate, more thorough, more inquiring, and more speculative than those of most post surgeons who served there both before and after him. Others had dealt with typhoid, and Dr. Kimball was aware of its connection with Jefferson Barracks, but it was Walter Reed who went on to suggest the discontinuance of that old depot. And certainly it was more than mere coincidence that after his experience with erysipelas at Fort Sidney, Dr. Reed was so concerned with it after he became a bacteriologist.

The Indian wars were a passing phase of frontier America, and the United States Army played an important role in these experiences in limited warfare. But its contributions were far more lasting than merely the removal of a native element hostile to American settlement and economic development. The services of Captain Walter Reed and a host of other army medical officers rate high among the lasting contributions of the frontier army to a growing nation.

NOTES

The author wishes to express his gratitude to Dr. Robert G. Athearn of the University of Colorado; Edgar M. Howell and Don Kloster of the Smithsonian Institution; Thomas E. White of the National Park Service; and most of all, to Sarah Jackson of the National Archives for assistance rendered in the preparation of article. Thanks are also due Major General James A. Wier, M.D., M.C., commanding general, Fitzsimons General Hospital, Denver, who kindly read the manuscript and made suggestions for improvements which I have followed.

1. Walter Reed was born on September 13, 1851, at Belroe, Gloucester County, Virginia, the youngest of six children of a Methodist minister. At the age of 16 he entered the University of Virginia, which granted him a medical degree in 1869 before his 18th birthday. He studied at New York City Bellevue Hospital Medical College, which awarded him a second M.D. in 1870. After an internship at Kings County Hospital in Brooklyn, Reed was employed by the Board of Health of New York and the Board of Health of Brooklyn. In 1874 he was commissioned first lieutenant and assistant surgeon in the U.S. Army Medical Department. "Assistant
surgeon" was a rank which did not subordinate him to anyone. "Post surgeon," on the other hand, was a position which an assistant surgeon could hold. On June 26, 1880, he was promoted to captain while remaining in the same medical grade of assistant surgeon. While at Fort Sidney he was thus entitled to any of four forms of address: doctor, captain, assistant surgeon, post surgeon. Dumas Malone (editor), Dictionary of American Biography, (New York: Chas. Scribner's Sons, 1935), XV, 459-461; W. O. McCaw, "Walter Reed, A Memoir," Annual Report of the Smithsonian Institution, 1905 (Washington: 1906); Senate Document 822, 61st Congress, 3rd Session; Francis B. Heitman, Historical Register and Dictionary of the United States Army, (Washington: Government Printing Office, 1903), I, 821.

2. Except where otherwise cited, this article is drawn from the "Record of Medical History of Post, Fort Sidney, Nebraska," Vol. 109, 139-172, Records of the War Department, Office of the Adjutant General, Record Group No. 94, National Archives, Washington, D.C. The "Medical History," is a book of inscribed pages bound in calf. It was issued blank to each military post surgeon beginning in 1868 with instructions for him to make monthly entries of events at the post hospital, statistics on cases handled other medical matters, notations on arrivals and departures at the post, troop movements, and any other important occurrences. These volumes in effect tell the history of a post and are a gold mine of information, for the medical officers were characteristically among the best educated, most literate and intelligent officers in the army. For a general history of the medical department, see P. M. Ashburn, A History of the Medical Department of the United States Army. (Boston: 1929).

3. Documents pertaining to the history of Sidney Barracks and Fort Sidney are found in Record Group 94, National Archives. Those prior to June, 1871, are filed with the Fort Sedgwick records.

4. George Bird Grinnell, The Fighting Cheyennes (Norman: University of Oklahoma Press, 1956), gives an account of the 1879 Northern Cheyenne war from the standpoint of the Indians. Mari Sandoz, Cheyenne Autumn, presents a more detailed emotional and romantic account of the same story. No satisfactory history has been written.

5. Captain Calvin DeWitt, a native of Pennsylvania, served with the 49th Pennsylvania Volunteer Infantry in the Civil War from 1861 to 1863. He was assistant surgeon general by May 7, 1901, and always stood higher in rank than Reed. Heitman, Register, 371.

6. John Edward Summers, a Virginian, was appointed assistant surgeon in the Regular Army in 1847. He remained loyal to the Union in the Civil War, serving for a time as a medical inspector. He was a full colonel on retirement in 1886. Heitman, Register, 936.

7. The memoirs of army surgeons give a good picture of post hospital routine and the problems. See for example Rodney Clisan, Journal of Army Life; R. H. McKay, Little Pils; and Bernard J. Byrne, A Frontier Army Surgeon.

8. For the best physical assessment of frontier military posts in the trans-Mississippi West, see Herbert M. Hart's three volumes, Old Forts of the Northwest, Old Forts of the Far West, and Old Forts of the Southwest, all published in Seattle by the Superior Publishing Company. See also, Robert W. Frazier, Forts of the West, (Norman: University of Oklahoma Press, 1965).
9. Manuscript records of Fort Sidney and other western posts (Fort Laramie, Fort Lewis, Fort Sanders, and many more) give a detailed picture from which generalizations may be drawn; all are in Record Group 94 in the National Archives. The correspondence columns of The Army and Navy Journal, a military "trade" newspaper published every Saturday in New York, carry social gossip and report on entertainment, social affairs, and other diversions at western posts. Memoirs of officers or their wives are instructive; among the best are Elizabeth Custer's Boots and Saddles, Following the Guidon, and Tenting on the Plains; Martha Summerhayes, Vanished Arizona; Eugene F. Ware, The Indian War of 1864, and Mrs. Orsemus Bronson Boyd, Cavalry Life in Tent and Field.

10. Uniform and Dress of the Army of the United States, (Philadelphia: The Quartermaster General, 1882). This consists of the regulations adopted in 1881 which constituted some modification of the uniform regulations of 1872, and includes detailed color plates of a large number of the uniforms, some of them medical uniforms.

11. In 1865 James Peleg Kimball served briefly as regimental assistant surgeon of the 121st New York Volunteer Infantry and the 65th New York Infantry Regiments before being mustered out the service. In 1867 he was commissioned assistant surgeon (captain) in the Regular Army, in which capacity he served at Fort Sidney. Shortly before his death in 1902, he was promoted to colonel and assistant surgeon general. Heitman, Register, 598; See also, Maria Brace Kimball, A Soldier-Doctor of Our Army, James P. Kimball (New York: Houghton-Mifflin Co., 1917).

12. William Jones Wakeman, a native of Connecticut, was appointed assistant surgeon in 1882. At the outbreak of the Spanish-American War in 1898, he was commissioned brigade surgeon of volunteers (major), a position he held until discharged in 1899. He was promoted to surgeon in the Regular Army in 1900. Heitman, Register, 994.

13. William Wallace McAmmon, a native of Ohio, was a first lieutenant in the 22nd and 24th Missouri Infantry Regiments in 1861-1862. He held the rank of captain between 1862 and 1866. He was a Regular Army first lieutenant and regimental adjutant at Fort Sidney. He served as a major of volunteers during the Spanish-American War and was promoted to major of the 6th Infantry (RA) in 1900. In 1896 he was awarded the Congressional Medal of Honor for Civil War heroism. McAmmon retired in 1902, and died in 1903.

A boy Walter Reed treated at Fort Sidney, William Wallace McAmmon, Jr., enlisted as a private in Company E, 14th Infantry, his father's old regiment, in 1898. He was a corporal in 1899 when commissioned a second lieutenant and assigned to the 23rd Infantry. He was promoted to first lieutenant in 1901. Heitman, Register, 654.

14. John Murphy, an Irishman who enlisted in the dragoons in 1858, was soon promoted to first sergeant and transferred to the 5th Artillery. After discharge in 1863, he re-enlisted in the cavalry and again was promoted to sergeant in the 5th Artillery. In 1867 he was a lieutenant in the 14th Infantry and served at Fort Sidney in 1883. Murphy was major and paymaster in 1899 on retirement. Heitman, Register, 737.

15. James Anderson Buchanan, a native of Maryland, served as lieutenant of the 14th Infantry from 1867 to 1873. He followed Lieutenant McAmmon as regimental
adjutant at Fort Sidney in 1886 and 1887. He later served in the 11th, 12th and 15th Infantry Regiments and as lieutenant colonel in two Porto Rican regiments. Heitman, Register, 258.

16. William Findlay Drum, a New Yorker, attended the United States Military Academy at West Point from 1850 to 1852 without graduating. When the Civil War broke out in 1861, he enlisted with the 3rd Ohio Infantry before being commissioned a second lieutenant in the Regular Army 2d Infantry Regiment. By 1865 he was a colonel of the 5th New York Volunteer Infantry, but soon thereafter he returned to civilian life. He 1882 he was commissioned a major in the 14th Infantry, the rank he held at Fort Sidney. Drum became a lieutenant colonel of the 12th Infantry in 1886 and died in that rank in 1892. He held two brevets for Civil War services. Heitman, Register, 384.

17. Oliver Otis Howard was one of America’s distinguished soldiers in 1884. A native of Maine, he was graduated fourth in his class at West Point and commissioned a brevet second lieutenant of ordnance. When the Civil War broke out, Howard was appointed colonel of the 3rd Maine Infantry. In the volunteer service he became a brigadier general in 1861 and a major general in 1862. He had lost an arm at the Battle of Fair Oaks in 1862, for which he was awarded the Medal of Honor. His valor at Gettysburg in 1864 gained him the “Thanks of Congress,” and he had the limit in brevet rank. In 1864 he was commissioned a brigadier general in the Regular Army but remained in the volunteers until 1869 to head the Bureau of Refugees, Freedmen and Abandoned Lands. Always a pious man and known to some of his men as “Bible-reading Howard,” it was he who arranged the truce with Cochise in 1871 in Arizona. He later served as department commander in the Nez Perce War of 1877 in the Northwest. Howard was promoted to major general in 1886, and retired in 1894. Heitman, Register, 546-547.

18. Guy Howard was commissioned second lieutenant of the 12th Infantry 1876 promoted to first lieutenant in 1882. In 1888-1889 he served as regimental adjutant. He was brevetted for gallant service in the Nez Perce War of 1877. He was promoted to captain in 1893, and specialized in quartermaster service. He was killed in action near Arayat in the Philippine Islands in 1899. Heitman. Register, 546.


20. Lewis Cass Hunt was a native of Wisconsin. He entered the Military Academy in 1843, was graduated thirty-third in his class, and was appointed brevet second lieutenant of the 3rd Infantry in 1847. He was a captain in the 4th Infantry at the outbreak of the Civil War. He became a colonel of the 92nd New York Infantry in 1862 and shortly thereafter a brigadier general of volunteers, the rank he held when mustered out of the volunteer service in 1866. Meanwhile he had been assigned in absentia to the 14th and 4th Infantry (Regular Army). He was a lieutenant colonel in the 20th Infantry in 1868 and a colonel of the 14th Regiment in 1881. He held four Civil War brevets. Colonel Hunt died on September 6, 1886. Heitman, Register, 556.

21. On March 5, 1884, Private Nolan was charged before a garrison court martial with being “drunk on duty and violation of the 38th Article of War.” He pled guilty and was sentenced to forfeit of his monthly pay and to be confined at hard labor for thirty days. “Post Orders, Fort Sidney,” Book 38, 26-28, Record Group 94, National Archives.

22. Albert Selah Towar, born in Canada, eventually settled in Michigan. On March 3, 1875, he was commissioned major in the Pay Department. He served as
paymaster until 1899, when he was promoted to lieutenant colonel and deputy paymaster general. In 1901 he was promoted to colonel and assistant paymaster general. Heitman, *Register*, 966.

23. Henry Andrew Morrow, a native of Virginia, enlisted as a private in Company C of the Battalion of District of Columbia and Maryland Infantry in 1846 to serve in the Mexican War. He was mustered out on May 30, 1847. Colonel Morrow assumed command of the 24th Michigan Infantry in 1862. He received two brevets during the war. In 1866 Morrow obtained a commission as lieutenant colonel of the 36th Infantry but when it was disbanded transferred to the 13th Infantry in 1869. He was in the 21st Infantry in 1879. He died in January 31, 1891. Heitman, *Register*, 729.

24. Cornman, a native of Pennsylvania, was graduated twenty-seventh in his class at West Point and was commissioned second lieutenant in the 21st Infantry in 1873. As first lieutenant, he served as regimental adjutant from 1882 to 1887. He had risen to a lieutenant colonelcy of the 24th Infantry by 1901. Heitman, *Register*, 328.

25. Clarence Ewen, a native of New York, was appointed assistant surgeon of the 54th New York Infantry in 1862. He served in the same capacity with the 182nd New York and the 29th U.S. Colored Infantry before the end of the war. Ewen's first appointment to the Regular Army was as an assistant surgeon in 1868. He was promoted to major and surgeon in 1889 and retired in 1897. Heitman, *Register*, 411.

26. See Howard A. Kelly, *Walter Reed*. (New York: McClure, Phillips & Co., 1906). There is no agreement on the date of Reed's death among biographers, some stating that it was November 22, others November 23, 1902. Kelly, who also wrote the biographical sketch for *Cyclopedia of American Medical Biography*, used November 22.