

ARMY MEDICINE'S LEGACY OF CARE

COMBAT READY CARE ... THIS WE'LL DEFEND!

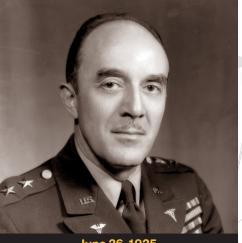
YESTERDAY, TODAY, ALWAYS - SAVING LIVES SINCE 1775!



JUNE 23 - 29, 2025



June 23, 1917 The U.S. Army Ambulance Service (USAAS) is established, marking a significant development in the Medical Department during World War I. This new service was created in response to the French government's request for continued medical and ambulance support for the French Army. The USAAS utilized both motorized and animal-drawn vehicles to transport wounded Soldiers.



George E. Armstrong joins the U.S. Army Medical Reserve Corps as a First Lieutenant. Armstrong advanced through the ranks to become the U.S. Army Surgeon General from 1951-1955.



Roger Brooke joins the U.S. Army Medical Corps as a First Lieutenant. He later advances through the ranks to Brigadier General. Brooke Army Medical Center is named in his memory.

WEEK IN REVIEW

June 24, 1893

General Orders No. 51, Adjutant General's Office grants authority for the establishment of an Army Medical School. Originally, it was located in the same building with the Army Medical Library and Museum in Washington, DC.

June 25, 1876

Two doctors and three medical enlisted men are killed during the Battle of Little Bighorn.

June 27, 1958

The course in operating room nursing and administration at Letterman General Hospital, San Francisco, California, and Walter Reed General Hospital, Washington, D.C., were discontinued. A 22-week course in basic operating room nursing was started at two hospitals: Letterman General Hospital, San Francisco; and the U.S. Army Hospital, Fort Benning, Georgia.

Congress allows for four surgeons and ten surgeon mates to be added to the Army. The Law only partially alleviated the shortage of physicians in the Army. To guarantee care for the Army's sick and injured, restrictions on the leave taken by Army surgeons soon became necessary. After 1835, granting any leave longer than seven days required approval of the secretary of war.

250TH U.S. ARMY MEDICINE EVENTS

JBSA PT run led by MEDCoE CG, MG McQueen July 25

JBSA Museum Tour and Cake

National Museum of Health and Medicine Display at DHHQ Salon A

July 28 **DHHQ Cake Cutting**

July 30 Twilight Tattoo (Fort Myer)

> Night at the Museum (Events are subject to change



July 31

FEATURE - U.S. ARMY AMBULANCE SERVICE (USAAS)

The history of the USAAS spans from its informal beginnings as battlefield stretcher bearers to the formalization of dedicated ambulance corps and the eventual establishment of the USAAS. Key developments include the introduction of the Letterman Plan in the Civil War, which established a dedicated ambulance corps and triage system, and the subsequent creation of the USAAS during World War I, which incorporated civilian volunteer units.

Since WWII, there has been increased emphasis on patient care enroute, rather than simply moving injured personnel. This required increasingly specialized equipment and more medically trained transport personnel.

Today, the U.S. Army employs various ground ambulances to evacuate and transport patients, particularly in combat zones. These vehicles are vital for battlefield emergency medical evacuation, also known as MEDEVAC. Some newer medical treatment vehicles, such as the M1285 MTV (Medical Treatment Vehicle), part of the Armored Multi-Purpose Vehicle family, are designed to function as mobile "Role 1" aid stations. Role 1 medical care provides essential primary healthcare, including immediate lifesaving measures, triage, resuscitation, and stabilization of casualties. These vehicles are equipped with features like deployable tents and tarps, which can be quickly set up in the field to expand their footprint and create a battlefield aid station. This allows for efficient on-the-spot treatment and preparation of casualties for further evacuation to higher echelons of care.



W/W/TT





