The 10th Field Ambulance was formed in Winnipeg in January of 1916 and left for England in March. They assembled in Bramshott Camp and during the short time there stood for a company photograph. On April 3, 1916 they boarded the “Maidan” and proceeded across the channel to Havre, France.

They disembarked 11 Officers, 237 other ranks, 54 horses, 10 wagons, 7 motor ambulances, 5 motorcycles and 1 bicycle. They marched off to Rest Camp # 17. They suffered 6 casualties. Major Leask, “Pneumonia”, Pte. Thompson “Bronchitis” Pte Hill “Myalgia of back”, Dvr. Flannery “Pleurisy”, Dvr. Smith Contusion of foot” and Dvr. Martin “Dislocated shoulder” Several days later they would entrain to Poperinge, Belgium. They would slowly but surely progress to the “war”. They would be a “Very Small Link” in a large “Chain Of Evacuation”, for the wounded, from the battlefield, to the hospital and beyond.

Regimental Aid Post. [RAP] Medical treated was to start as soon as feasible, and as near to the front line as possible, for this reason Regimental Aid Posts were set up. The Battalion Medical Officer, his orderlies and stretcher-bearers, attended these. In action, the RAP was situated a few metres behind the front line, this could have been in a dugout, in a communication trench, a ruined house, or a deep shell hole. The Medical Officer and his staff would be augmented by Regimental Stretcher-Bearers, usually the regimental bandmen or others. When under pressure, he could be further augmented with bearer teams from a Field Ambulance. The wounded would be then moved to an “Advanced Dressing Station” (ADS) set up by a “Field Ambulance” unit. The Field ambulance was the most forward of the RAMC units and the first line of documentation. In a textbook situation, the Advance Dressing Station would be sited about 400 yards behind the RAP. In truth many times teams of RAMC stretcher bearers, working in relays were strung out over miles of ground unpassable by motor or horded transport. A "carry" could be anything up to 4 miles over muddy or shell-pocked ground, either in trenches or above ground.

The next CMHS meeting will be held on

**Tuesday, April 18th, 2017**

7:00 pm
At the Petty Officers’ Mess
HCMS Tecumseh
The next CMHS meeting will be held on 
**Tuesday, April 18th 2017**
19:00 (7:00 pm)
At the Petty Officers’ Mess, HMCS Tecumseh.

Members are reminded that an offering of foodstuffs for the Legion Food Bank is considered your unofficial entrance fee to our regular scheduled meetings.

The unofficial agenda of this meeting will be:
Introduction of guests, Minutes of last meeting Correspondence, Membership report Treasurer’s report, Old business / New business Break, Show & Tell

The President, Alan Ross would like to invite everyone to remain after the meeting for an informal time of fellowship.

---

**Notice of Next Meeting**

The CMHS meets once every calendar month at: Petty Officers’ Mess HMCS Tecumseh 1820 - 24th Street SW Calgary AB T2T 0G6

In the weeks before the “Vimy Ridge Battle” the members of the 10th Field Ambulance joined and worked with companies of Canadian Engineers” building this Advanced Dressing Station.

The ADS did not always have a holding capacity and the main object was to gather the wounded from the RAPs and provide sufficient treatment. Some men could be returned to their units in the line where possible or if the casualty was not fit enough, be taken by the Field Ambulance horse and wagon or motor transport, to the “Main Dressing Station” (MDS). The MDS did not at first have a surgical capacity, but did carry a surgeon’s roll of instruments and sterilisers for life saving operations only. It had a holding capacity of up to 1 week for the patient to be fit enough to return to their unit or be able to be transported back to the Casualty Clearing Station (CCS). Later in the war fully equipped surgical teams were attached to the Field Ambulances, and urgent surgical interference could be performed. The CCS was the first large, well-equipped and static medical facility that the wounded man would visit. Its role was to retain all serious cases that were unfit for further travel; to treat and return slight cases to their unit; and evacuate all others to Base Hospitals. A CCS often had to move at short notice as the front line changed and although some were situated in permanent buildings such as schools, convents, factories or sheds many consisted of large areas of tents, marquees and wooden huts. They were often grouped into clusters of two or three in a small area, usually a few miles behind the lines and on a railway line. A typical CCS could hold 1,000 casualties at any time, and each would admit 15-300 cases, in rotation.

Facilities included medical and surgical wards, operating theatres, dispensary, medical stores, kitchens, sanitation, incineration plant, mortuary, ablution and sleeping quarters for the nurses, officers and soldiers of the unit. CCS’s were often dangerously vulnerable with large depots containing munitions and supplies alongside which were targeted by enemy aircraft and artillery. The seriousness of many wounds and infection challenged the facilities of the CCSs and as a result their positions are marked today by military cemeteries.

From the CCS men were transported en masse in ambulance trains, road convoys or by canal barges to the large base hospitals near the French coast or to a hospital ship head...
Minutes of the last meeting of The Calgary Military Historical Society

Meeting held on March 21, 2017 at the Petty Officer’s Mess, HMCS Tecumseh

1. Meeting called to order by President Allan R. at 7:15 PM. 22 members in attendance.

2. Minutes of Previous Meeting. No omissions or corrections. Member Bob M. moves that the Previous Meeting Minutes be accepted. Seconded by Mike C. Approved.

3. Newsletter.

The CMHS should stop sending the newsletter to Winnipeg.

4. Treasures Report. Report by David G. Lists of monies collected from book auctions, donations etc. Listing of expenditures. Member David G. moves that the Treasures report be accepted as reported. Seconded by Mike C. Approved.

5. Membership Report. Report by David G. Total 42 members (2 Life, 1 Hon., 39 Regular). Member Darrell K. moves that the Membership report be accepted as reported. Seconded by Member Mike C. Approved.

6. Correspondence: Military Museums of Calgary - Commemorative Vimy Display - Opens April 9, 2017 and runs through August.

7. Announcements: The MCC of C is hosting its Annual AGM & Convention April 14, 2017 in conjunction with the AACCA Easter Firearm Show. AGM dinner and auction event at the Hotel Blackfoot.

8. Old Business.

Alan Ross gives March 4, 2017 St. Albert Gun Show report.


10. Ticket book auction conducted

BREAK

12. Show and Tell:

Darrell K. - Cdn Para jump smock, sharpening stones & selection of WWII fighting knives
John E. - Large selection of RCMP items from a friend, Staff Sgt. Angus MacAulay, retired.
Brian H. - Framed display of WWII Fire Fighter insignia, discusses fire fighters in WWII.
Gary M. - Royal Navy ceramic decanter, discusses Royal Navy rum “ToT” rationing.
Alan M. - Display Ireland in the WWII.
Alan M. - Selection of model tanks, various materials & scales.
David G. - Framed insignia group WWI, 1st Battalion Cdn Mounted Rifles.
Alan R. - Memorial Cross, Donald Lewthwaite, Air Gunner, RCAF 419 Sq., killed in Action

February 20, 1944 at age 21. From Banff Alberta, Remembrance Runnymede Memorial

Adjournment: President Allan R. calls for motion to adjourn. Member David S. moves to adjourn. Seconded by Neil P. Approved. Meeting Adjourned. 20:30
**Hospital Trains**  These trains transported the wounded from the CCS’s to base hospitals near or at one of the channel ports. In 1914 some trains were composed of old French trucks and often the wounded men lay on straw without heating and conditions were primitive. Others were French passenger trains which were later fitted out as mobile hospitals with operating theatres, bunk beds and a full complement of nurses, Doctors and surgeons and medical orderlies. Emergency operations would be performed despite the movement of the train, the cramped conditions and poor lighting. Hospital carriages were also manufactured and fitted out in England and shipped to France.

So far we have barely covered half the journey of these wounded men. There would be Hospital Barges, Stationary Hospitals, Base Hospitals, Hospital Ships across the channel, Hospitals in England, Hospital ships back to Canada and Canadian Hospitals. It would be a long journey.

And now back to our “Very Small Link” in the “Chain of Evacuation” The 10th Ambulance saw action in virtually every battle fought by the Allied Forces. Many were wounded. Many were killed. Some won bravery awards. They did their duty for Canada. By mid February of 1919 they were back at Havre, France and then began the journey back to Bramshott Camp. There, what was left of the unit, posed last photograph before they headed back to Canada.