

UNCLASSIFIED

AD NUMBER

AD874056

LIMITATION CHANGES

TO:

Approved for public release; distribution is unlimited.

FROM:

Distribution authorized to U.S. Gov't. agencies and their contractors;  
Administrative/Operational Use; 14 NOV 1966.  
Other requests shall be referred to Office of the Adjutant General (Army), Washington, DC 20310.

AUTHORITY

AGO ltr 29 Apr 1980

THIS PAGE IS UNCLASSIFIED

THIS REPORT HAS BEEN DELIMITED  
AND CLEARED FOR PUBLIC RELEASE  
UNDER DOD DIRECTIVE 5200.20 AND  
NO RESTRICTIONS ARE IMPOSED UPON  
ITS USE AND DISCLOSURE.

DISTRIBUTION STATEMENT A

APPROVED FOR PUBLIC RELEASE;  
DISTRIBUTION UNLIMITED.

AD874056

DEPARTMENT OF THE ARMY  
HEADQUARTERS, 74TH MEDICAL BATTALION  
APO 96491

130-8-2 (1)  
INDEXED

AVCA MB-GD-BB

14 November 1966

SUBJECT: Operational Report for Quarterly Period  
Ending 31 October 1966 (RCS CSFOR-65)

STATEMENT #2 UNCLASSIFIED

TO: Commanding Officer  
68th Medical Group  
APO 96491

This document is subject to special export controls and each transmittal to foreign governments or foreign nationals may be made only with prior approval of Dept of the Army, Ofc of the Asst. Chief of Staff for Force Development, ATTN: FOR-GI-RD, Wash, D.C. 20310

SECTION I

SIGNIFICANT ORGANIZATION OR UNIT ACTIVITIES

COPY

1. The 74th Medical Battalion performed medical support missions (operations) the inclusive period of the report, a total of ninety-two (92) days.

2. HHD, 74th Medical Battalion provided command, administrative and logistical guidance and operational control, for all subordinate units.

a. Significant personnel changes did occur.

(1) Lieutenant Colonel Robert W. Irvin Jr. was reassigned within the 68th Medical Group on 8 August 1966 and Major Paul E. Wengrovitz assumed interim command of the Battalion.

(2) Lieutenant Colonel D. F. Morse assumed command of the Battalion on 19 September 1966.

(3) Other personnel changes follow:

(a) The personnel officer, Lt Samuel M. Hinton was reassigned 3 September 1966; Lt Robert W. Bateman III was assigned and assumed the duty the same date. He was subsequently reassigned 16 October 1966 and a replacement has not been received.

(b) Captain Jeffrey G. Lynch, S4 Officer, was reassigned on 1 October 1966; Captain Gerard J. Lehoux was assigned and assumed the S4 duties on 21 October 1966.

(c) At the end of the report period, the HHD is operating less two (2) officers of its eight (8) authorized complement; there is no significant enlisted personnel disparity within the HHD nor is there disparity among officer and enlisted categories of assigned units.

FOR OTUT  
660390

b. The battalion command and staff continued its established policy of each representative visiting each subordinate unit a minimum of once monthly. The merit of this policy stems from the basic exigency that organic administrative, supply, training and maintenance personnel are negligible and/or non-existent in dispensary units. Each staff section provides personal and frequent guidance to the units.

c. Incidental and/or miscellaneous training periods (courses) were attended by one individual from each assigned dispensary.

(1) The Medical Records Clerk of each dispensary attended a Medical Records and Reports Orientation of two (2) hours duration on 16 August 1966; the battalion staff's responsible officer was also in attendance. It was beneficial and particularly so from responsible individual/counterpart identification aspects.

(2) A designated individual of each operational dispensary attended a two (2) week sanitary inspection orientation 25 September 1966 - 8 October 1966. The course was presented by the 20th Preventive Medicine Company with an objective of training a Medical Specialist to conduct required periodic inspections in respective areas and thereby relieve medical officers completely of the direct task, except in supervisory capacities as desired. Results of the training period were most gratifying. Sanitary (Preventive Medicine) inspections had been the responsibility of the 20th Preventive Medicine Company.

d. Basic temporary facilities plan for the HHD was completed on 20 October, 1966. Improvements will perpetuate. This accomplishment facilitates ease of all operations. It was accomplished through "self help" so that greater effort is now being directed to organization and unit mission accomplishments. The redirection of primary effort is readily evident.

e. A Command Maintenance Management Inspection was conducted of HHD, 74th Medical Battalion on 3 October 1966 by the area CMM Team. The indicator was a praiseworthy satisfactory. Such inspections are completely unannounced, a meritable characteristic.

3. Dispensary units provided area medical service support in designated areas, on becoming operational. Simultaneously, building and/or building improvement was accomplished. Much of this was accomplished through the "self help" process.

a. 2d Medical Dispensary Commander was given the duty of area surgeon of his area location during October 1966. The unit continued operation from the same location and facility.

b. The 25th Medical Dispensary completed a "self help" dispensary facility and billet accommodations for its assigned personnel, Officer and Enlisted, on 13 October, 1966. Movement was made into these facilities on the same date. "Self help" construction was necessary because of deterioration of initially erected tentage, the progression of the final type engineer facilities plan for the area, increase of personnel strength being supported by this dispensary and to fluctuating priority for permanent construction. These factors dictated expanded facilities and relocation. The results are adequate; facilities are temporary, subject to deterioration in a comparable time length previously experienced.

c. 202d Medical Dispensary facility was expanded during October 1966; the building project was accomplished by engineer work order request and subsequent accomplishment by responsible individuals. Complete division of dispensary functional areas has been accomplished; patient consultation and processing has been enhanced. Responsibility for medical support to a military intelligence battalion was given to this dispensary during August 1966. The nature of the battalion's work, its location in relation to that of the dispensary and the troop strength being supported dictated the unit be relieved of the responsibility and this was done during early September. The Commander of this unit is the area surgeon for his unit area location.

d. Activities of the 229th Dispensary follows:

(1) The unit arrived in Vietnam on 8 September, 1966, was received and staged by the HHD, 74th Medical Battalion.

(2) A medical element, one (1) medical officer and four (4) enlisted men, of this unit were transported to Can Tho on 12 September 1966. These personnel served to augment the medical dispensary (Medical Detachment OA) of the 13th Aviation Battalion, which was providing area type medical support. This mission was not compatible with mission of the aviation battalion, indicating a need for a separate dispensary to be located at Can Tho. The medical element of five (5) personnel provided easement until a dispensary could be so located. In effect, these personnel were the "advance party element" of the to be located dispensary.

(3) Another medical element of this unit, one (1) medical officer and three (3) enlisted personnel, was placed in support of newly located troops at Cat Lai, on 21 September 1966. This unit detachment of personnel was necessary because a medical unit was not immediately available nor justifiable; the detachment served to properly utilize personnel pending arrive of unit organic equipment and continues as a temporary plan pending the scheduled arrival of a small medical unit designated to assume the medical support mission.

(4) Equipment of the 229th Dispensary arrived on 8 October 1966; the unit became operational on 17 October replacing the 346th Dispensary in support of the 90th Replacement Battalion area. This dispensary was retained at Long Binh because it is an MC type dispensary and projected plans indicated best utilization at Long Binh as compared to Can Tho.

e. Activities of the 332d Dispensary follows:

(1) The unit became operational on 22 August 1966.

(2) A newly constructed Quonset type medical facility for this unit was completed on 27 September, 1966; the unit moved into the facility on the same date. The result is a nice facility, a smooth operation also but on the detracting side, too small a building (floor space 20' x 96') for a medical dispensary (MB).

(3) The commander of this unit is the designated area surgeon for the Long Binh area.

f. Release from assignment to the 74th Medical Battalion of the 345th Dispensary and its attachment to the 36th Evacuation Hospital was effected 22 August 1966. Operational control is at Evacuation Hospital, thus relieving the 74th Medical Battalion of the unit's responsibility.

g. The 346th Dispensary discontinued operation in Long Binh on 17 October and moved to Can Tho on 18 October 1966. Equipment and personnel were moved simultaneously utilizing a C-130 Aircraft; two trips (movement increments) were necessary. The unit became operational in its new location on 3 November 1966. It is attached to the 13th Aviation Battalion for rations, quarters, maintenance support and finance administration.

h. 541st Dispensary completed a "self help" dispensary facility and billet accommodations on 14 September 1966. The result is re-directed effort to medical support and mission type accomplishment. The medical facility is temporary, adequate and makes for an easier operation.

1. 673rd Dispensary activities follow:

(1) The unit moved into a quonset type medical facility on 14 August 1966.

(2) A Command Maintenance Management Inspection was conducted on the unit on 23 August 1966 by the area CMMI Team. A ~~very~~ satisfactory rating was attained.

## SECTION II

### OBSERVATIONS (LESSONS LEARNED)

#### PERSONNEL

Item: Officer personnel loss:

Discussion: The battalion, HHD experienced the loss of half (4) of the original officer complement of eight (8) in less than a four month period. While the unit has gained officers by assignment, it operates currently at a net loss of two (2) officers. The fact that the officers of the unit are experienced compensates in part for the shortage, but only in part. Dispersion of assigned units of this headquarters and the type units assigned underlines the need for a full complement to provide completely the guidance the subordinate units require.

Observation: A planned loss of personnel is desirable when units deploy so that personnel turbulence at the time of DEROS is reduced and continuity of operations is improved. It is obvious however that despite the advantages of the method, a major disadvantage is the result that the unit may expect to operate short of authorized strength.

#### PLANS

Item: Dispensary design

Discussion: In instances where dispensary facilities are being constructed by the US Army Corps of Engineers, design is or appears to be at

discretion of the responsible engineer who obtains some basic idea of physical layout from AMEDS laymen (the users). Two quonset type treatment (dispensary) facilities have been constructed under these auspices. Though functional, the products are small for operations. Battalion staff has drafted recommended interior designs at the direction of higher headquarters and these designs are based on previous dispensary functional experience and on peculiarities to this location. These designers are still laymen, however.

Observation: Experience was gained that can be applied in subsequent dispensaries of each type. It is anticipated, however, that responsible engineers will not respect these designs coming from laymen as much as would coming from AMEDS architects or otherwise authorities. Such a consultant would expedite construction and adequate facilities.

#### LOGISTICS

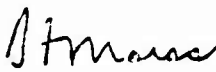
##### Item: Medical Supply Accounts:

Discussion: Group headquarters has established the policy that medical supplies for dispensaries located in closer proximity to hospitals than to platoons of the Medical Depot, will procure/obtain needed supplies from these hospitals; the phase in dates are established. The objectives are to decrease the number of accounts at depot and to simultaneously make more readily available, the needed supplies.

Observation: Travel distances to the depot platoon have been excessive. The numerous accounts at depot coupled with excess telephone queries to determine supplies available prior to making a trip for pick-up certainly detracted from depot operations. This plan appears plausible.

#### SECTION II Part 2 RECOMMENDATIONS

None.

  
D. F. MORSS  
LTC, MC  
Commanding

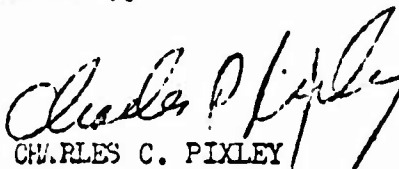
AVCA MB-GD-PO (14 Nov 66) 1st Ind  
SUBJECT: Operational Report for Quarterly Period Ending 31 October  
1966 (RCS CSFOR-65)

HEADQUARTERS, 68th Medical Group, APO 96491 17 November 1966

TO: Commanding Officer, 44th Medical Brigade, APO 96307

1. Reference paragraph 3e (2) and item on Dispensary Design, page 4, of basic report. In the absence of a qualified medical facility designer, the experiences gained by the 74th Medical Battalion will be invaluable in providing designs for future dispensary facilities. Additional space is now being requested for the 332d Med Det (MB).

2. Reference item on Officer Personnel Loss, page 4 of basic report. The shortage is recognized by this headquarters. Replacements will be provided as soon as available.

  
CHARLES C. PIXLEY  
Colonel, Medical Corps  
Commanding

DISTRIBUTION:

4-CO 44th Med Bde  
(1-ACSFOR, DA)  
(1-1st Log Comd)  
(1-Surgeon, USARV)  
(1-Historian, 44th Med Bde)  
2-ACSFOR, DA, Washington, D.C. 20310  
1-CINCUSARPAC ATTN: APOP MH APO 96558  
3-CG, USARV ATTN: AVC DH APO 96307  
1-CO, USASC, Saigon, APO 96307  
1-CO, 74th Med Bn, APO 96491



AVCA-MB-PO (14 Nov 66)

2nd Ind

SUBJECT: Operational Report for Quarterly Period Ending 31 October 1966  
(RCS CSFOR-65)

HEADQUARTERS, 44th Medical Brigade, APO 96307, 26 November 1966

TO: Commanding General, 1st Logistical Command, ATTN: AVCA-GC-0, APO  
96307

Concur with comments contained in the basic report, and the 1st  
Indorsement.

*Ray L. Miller*  
RAY L. MILLER  
Colonel, MC  
Commanding

7

AVCA GO-O(14 Nov 66)

3d Ind

SUBJECT: Operational Report for Quarterly Period Ending 31 October 1966  
(RCS CSFOR-65)

Headquarters, 1st Logistical Command, APO 96307

1 DEC 1966

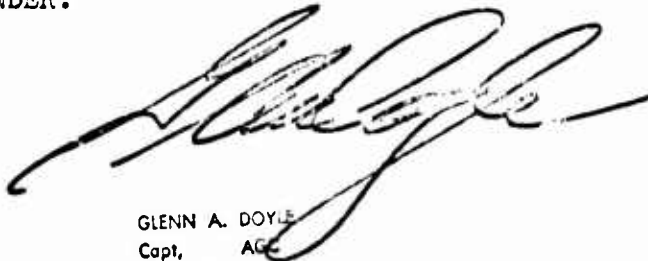
TO: Deputy Commanding General, US Army, Vietnam, ATTN: AVFCC-DH, APO 96307

1. The Operational Report - Lessons Learned submitted by the 74th Medical Battalion for the quarter ending 31 October 1966 is forwarded herewith.

2. Concur with the basic report as modified by the comments contained in the preceding indorsements. The report is considered adequate.

FOR THE COMMANDER:

TEL: LYNX 782/930



GLENN A. DOYLE  
Capt, AGC  
Asst. AG

AVHGC-DH (14 Nov 66) 4th Ind  
SUBJECT: Operational Report-Lessons Learned for the Period Ending  
31 October 1966 (RCS C3FOR-65)

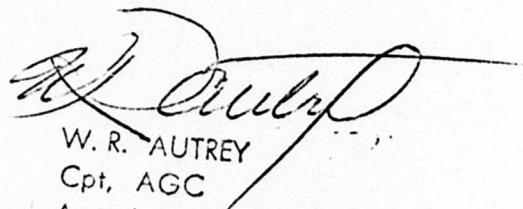
HEADQUARTERS, UNITED STATES ARMY VIETNAM, APO San Francisco 96307 19 DEC '66

TO: Commander in Chief, United States Army, Pacific, ATTN: C3FOR-OT  
APO 96558

1. This headquarters has reviewed the Operational Report-Lessons Learned for the period ending 31 October 1966 from Headquarters, 74th Medical Battalion as indorsed.

2. Concur with the basic report as modified by the previous indorsements.

FOR THE COMMANDER:

  
W. R. AUTREY  
Cpt, AGC  
Asst Adjutant General

GPOP-OT (14 Nov 66)

5th Ind

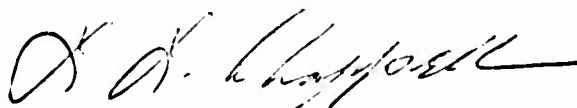
SUBJECT: Operational Report-Lessons Learned for the Period Ending  
31 October 1966 (RCS CSFOR-65)

HQ, US ARMY, PACIFIC, APO San Francisco 96558 14 JAN 1967

TO: Assistant Chief of Staff for Force Development, Department of the  
Army, Washington, D. C. 20310

This headquarters concurs in the basic report as indorsed.

FOR THE COMMANDER IN CHIEF:



L. L. CHAPPELL

M. J. AGC

Asst AG

UNCLASSIFIED

Security Classification

DOCUMENT CONTROL DATA - R & D		
<i>(Security classification of title, body of abstract and indexing annotation must be entered when the overall report is classified)</i>		
1. ORIGINATING ACTIVITY (Corporate author)		2a. REPORT SECURITY CLASSIFICATION
HQ, OACSFOR, DA, Washington, D.C. 20310		UNCLASSIFIED
		2b. GROUP
3. REPORT TITLE		
Operational Report - Lessons Learned, HQ, 74th Medical Battalion		
4. DESCRIPTIVE NOTES (Type of report and inclusive dates)		
Experiences of unit engaged in counterinsurgency operations, 1 Aug to 31 Oct 66.		
5. AUTHOR(S) (First name, middle initial, last name)		
CO, 74th Medical Battalion		
6. REPORT DATE	7a. TOTAL NO. OF PAGES	7b. NO. OF REFS
14 November 1966	11	
8a. CONTRACT OR GRANT NO.	9a. ORIGINATOR'S REPORT NUMBER(S)	
a. PROJECT NO N/A	660390	
c.	9b. OTHER REPORT NO(S) (Any other numbers that may be assigned this report)	
d.		
10. DISTRIBUTION STATEMENT		
11. SUPPLEMENTARY NOTES	12. SPONSORING MILITARY ACTIVITY	
N/A	OACSFOR, DA, Washington, D.C. 20310	
13. ABSTRACT		
11		

DD FORM 1473  
1 NOV 65

UNCLASSIFIED

Security Classification