

**Lloyd Gibson Bartholomew
Veteran**

**Wayne Clarke
Interviewer**

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Isaac C. Griswold Public Library
12 Williams St, Whitehall, NY 12887**

Q: Dr. Bartholomew, for the record, would you please state your full name, date and place of birth please?

LB: Lloyd Gibson Bartholomew, Sr. I was born in east Whitehall in a brick building or the brick church on the 15th of September 1921.

Q: Okay, you attended school?

LB: I attended the one room school house about two blocks from where I was born. One teacher, 30 students, seven grades.

Q: And you attended high school?

LB: I attended White Hall high school. After high school, I went to Green Mountain Junior College and following that I graduated with my BA degree from Union College in Schenectady.

Q: What year was that?

LB: 1941. I started medical school at the University of Vermont in the fall of '41. I was in the library studying from December 7th, 1941 when I first heard about Pearl Harbor. At that time, Pearl Harbor wasn't a very familiar name, but it became very familiar after that. Shortly after that, the military came in and took over the medical school. We were all put into the army and started school and went the year round. We graduated within three years. I graduated in 1944.

Q: Okay and at that point you were commissioned upon graduation?

LB: I was commissioned and put on inactive duty. At that time, we needed more training and they needed more trained doctors. So, we were inactive duty. I went to Dartmouth Hitchcock memorial hospital and completed my internship and the first part of my residency. Then I was put on active duty at that time.

Q: Okay. When you were put on active duty, where did you go from there?

LB: At that time, the medical training or orientation for doctors was in Carleton, PA. At exactly the time that I finished my residency; they moved it to Fort Sam Houston in San Antonio, TX. So, we were in the first medical orientation class at San Antonio.

Q: How long were you in San Antonio?

LB: You can't orient doctors. They're un-orientable. We were there about six weeks. Probably the worst marchers in the world. It would drive the regular army to keep them in line, but other than that we were pretty good soldiers.

Q: Where did you go next?

LB: From there I went to Camp Kilmer in New Jersey. From there, we went to La Havre, France.

Q: Do you know approximately when that was?

LB: 1946.

Q: So, you went to La Havre right after the war?

LB: It was right at the end of the war and many of the doctors there at that point had been there for quite a while. They were coming home and there was a shortage of medical officers at that time. It was funny because we got to La Havre and they lost us. There were about four of us in our group. We got pretty bored. We pestered the regular army officers there and they said they would move us to Paris. They put us on a freight train to Paris. We got to Paris and they lost us again. We didn't complain too much at that time, but after a couple weeks we were getting pretty bored. Finally, the orders came through and we all scattered throughout Europe. Again, we were put on a freight train and sent. I was on a freight train sent to Bremerhaven Germany which is just south of the Denmark border. It was the 121-general hospital. It was an evacuation hospital, but not truly an evacuation hospital. We collected all of the sick and wounded. They were in various places in Germany. By railroad car, we had an ambulance train actually. We would pick them up all over Germany, bring them back to Bremerhaven, stabilize their condition and get them ready to come home. Today, they would be home overnight in a big plane. We had a hospital ship that has 1,000 beds and we would fill that up about once a month. They would go back to the states.

Q: Now, this was 1946 and it was several months after the war had ended. Why weren't they evacuated sooner? Any idea?

LB: Well, I guess it's because transportation back then was not what it's like today. It was slow. Everything was by car and at that time the road conditions in Germany were not very good. Bridges were bombed out, you would go so far and then have to take a detour around the bridge. The same was true for railroad bridges. We took all sorts of detours when our train was heading back to Bremerhaven.

Q: Now, did you find that your medical equipment and supplies were adequate?

LB: Yes, for those days they were very adequate. It really was kind of the golden age of medicine because we were the first to have antibiotics. Penicillin had just

come in and penicillin was so rare and valuable at the time that it was taken care of the same way we take care of narcotics today. It was under lock and key and there were times that penicillin was sold on the black market and sold for a fortune. It was very scarce and it was important because we had very serious illnesses and injuries. At that time, there were still injured G.I.'s who hadn't been able to be moved. Mostly, it was significant illnesses and diseases. We had a lot of infectious hepatitis which in those days we didn't have the treatment we have today. We had a lot of tuberculosis because our boys picked it up over there. I also saw the only case of diphtheria I've ever seen in my life in the army. This was one G.I. who for some reason missed his shots and didn't get his diphtheria shot. That was very rare. He survived, but he was awful sick. A typical picture - we learned in medical school, but we never saw a case. It was by accident that we saw this boy.

Q: Did you treat the civilian population also?

LB: We treated the American civilian workers and occasionally we did an emergency for a German that was injured or had a serious illness and for some reason or another he was picked up by one of our ambulances and brought into our unit. We had about 1,000 beds in the 21st general hospital. It was busy. One experience I had at Bremerhaven was when you're OD, you become OD at 6p.m. at night and you're it until 6a.m. in the morning unless something massive happens when you bring your colleagues in. Otherwise, you take care of the whole hospital.

Q: By OD you mean?

LB: Officer of the day. One night when I was OD, I got called to the emergency room and they said, "Martin Bormann has just walked in and gave himself up." That was the story and it turned out not to be Martin Bormann. He looked like him and we finally turned him over to the German's. I think he was probably a paranoid schizophrenic. He had everyone worrying for a few minutes. He's [Bormann] has never been caught. And he was probably, next to Hitler, the most important person in Hitler's cabinet because he was Hitler's private secretary. That was kind of an experience.

Q: Did you find that the medical training you had in the states prepared you for the job you were doing in Germany?

LB: Yes, but I wish we would have had more. When we were there, there were very few who had been through as much training as we did have. We were all kind of on our own learning together and it was a great learning experience. People were teaching people and it went very well. Interestingly enough, while I was there I met two of my future colleagues who I had never met before when I was on the train going to patients. I met two doctors and I ended up being in the same section with them at the Mayo Clinic when we came back from the service. After a while, I was transferred from the 21st general hospital in Bremerhaven to

the 97th general hospital in Frankfurt, Germany. Frankfurt was the headquarters of zone command Europe of the U.S. command Europe. So, here's where all of the high ranking regular army officers were and their families were beginning to come over. That was a very busy hospital. This was a hospital that when the Senators or somebody else would come over this is where they would want to go and see. So, it was an experience to see that you might get a telegram from Hubert Humphrey saying my friend so and so was in your hospital, let me know his condition.

Q: Now, what kind of living conditions? Did you live on the post?

LB: I lived on the post. In Frankfurt, you were able to bring over your family and Bets and our daughter Suzy came over. We lived on Frankfurt and we lived in a bombed-out hotel for about two months in one room and that was about it. It was alright and after a while they found a home for us. We lived right behind the IG Farben building which was the biggest building in Frankfurt. A brand new modern building and it was taken over as Army headquarters so it was very nice at that time. At that time, I was in charge of the officer's ward at the 97th. You got to take care of the high brass and a lot of officers. It was great. I'll go back to Bremerhaven for a minute. Our transportation Corps, in those days the army was not integrated. In those days, the Afro-Americans were in one unit and our transportation unit was the Afro-American unit. They were the greatest bunch of guys. They were the happiest guys in the world. They loved their vehicles and they took care of them just like you'd take care of a brand-new car. They were very grateful too. When they got sick, they were good patients. They followed orders pretty closely, medical orders, I'm not talking about Army orders. I remember one young man I was taking care of. He was so polite and he would always say, "Good morning, Dr. captain sir." But when we needed ambulances or transportation, they were there just like that. They kept spic and span. I had an interesting experience in the 97th general hospital. I was OD one night. When you're OD, you get these peculiar experiences. I was OD one night and I think they called in the CIC, the counterintelligence Corps brought a captain in under arrest. He had some minor medical problem that I took care of. We admitted him to the hospital but he was under guard while he was there. So, I was able to get the guard out of the way and went into the room to spend some time with him. After I had examined him and decided what was going on, we sat down and I asked him, "What are you in here for?" Nice looking young man and he said, "I stole a railroad train." And the story is this, he was returning POWs or no, displaced persons, PP's back to Russia. In those days, railroad cars were scarce. Many of them were all bombed out and of course they were all in old age. So, none of our railroad cars would be of value there. He had taken about 40 car loads on his train from Germany to Russia. They were Russian DP's who had left him and then he turned the train around to come back. They stop every so often and I don't know they would get food or fuel. And then after three or four stops, he realized there were about 10 cars missing from the back of his train. They

didn't have the radio contact that we have today, you know it was a lander. So, apparently, he didn't put a G.I. in the back of the last car. When he got almost home, he was missing 10 trains. Well, of course you signed out for all of your property. You signed out for all of your medical equipment and everything you had to account for. When you left that unit, you had an inspection and they had the list. You were responsible for what was missing expect for things that were expendable. So, this is what happened. He stopped at one of these places and somebody there would take off one or two cars in the back of the train. Nobody was back there, and it was a 30 or 40 car train. They didn't notice and then finally they began to notice, "Gee, we're doing pretty good speed with all of our cars." And they found out that there were about 10 missing. Well, he was arrested because he was responsible. I'm sure he got out of it alright, but that's the way the Army did things. He was a great guy with a great job. But he said, I don't know if I get back on this route I'm going to have somebody in that back car all of the time. Frankfurt must have been a beautiful city, but it was pretty well bombed out. The other experience around Frankfurt was if you've heard of Kronberg Castle that's where the Army officer, a man and woman officer, found either jewels or something in the Kronberg Castle. They almost got away with them but there was a big trial over that. Kronberg beach was opened up at that time as a weekend resort where officers could go for the weekend. Or you could go on leave for a week in the country with that kind of history. Most of the time I spent in Frankfurt was in the hospital and it was very busy. We weren't bringing patients in and out. Patients were coming usually not by train.

Q: Did you have much contact with the civilian population.

LB: We had a lot of civilian workers that the army trained and most of them were hard working. I want to say one other thing. The Medical Corps which was doctors but we had some medical companies and the G.I. medics were fantastic. Sometimes in morning, we would have sick call and the day you would have to take call, you would go down to the emergency room and there might be 75 G.I.'s there to be seen. All sorts of illnesses. If you had a good sergeant, and I did, he'd go down and tell you that you need to see these guys. Some of them were goof offs, but G.I.'s were great. They could goof off and you couldn't get mad at them. When we had a problem, there was somebody in the G.I.'s that could fix it. That was my experience in Frankfurt. And Bets and Suzy were over there and I could transfer. All things that got transferred to Salzburg, Austria. The Sound of Music and I was stationed in a little hospital right outside of Salzburg at that time. I had to drive through Salzburg every morning and drive through the Alps. I would look out of the window every morning and think it's not real. Just as you read about in the fairy tales as a kid. We had a nice hospital and the strange thing is that in Salzburg I met my cousin Lyle who was a zone command Austria chaplain. He was a colonel and I was a captain. He was the last in his generation and I was the first in my generation. We all overlapped a little bit here. I hardly knew him and I got to know him in Salzburg, Austria. And Salzburg was a beautiful spot. Our

hospital looked right out into the Alps. We had a fair number of patients there because we were in zone command Austria and we were near zone command Russia. At that time, it was a touchy situation. The Russians didn't trust us, and we didn't trust the Russians. Part of our unit was in Vienna. To get into Vienna, we had to go through the Russian zone. You never knew whether they were going to stop you and hold you up. Nobody trusted each other. That was the beginning of the Cold War.

Q: Did you have contact with them individually at all?

LB: Not very much. I almost did. I was not only officer of the day, but my commanding officer was on leave. So, I was kind of in charge of the hospital and when you're OD, you're in charge of the hospital. I was on duty that night the Russians took over Prague. All of the sudden I got orders that I was in charge of all of the medical transportation in zone command Austria. Fortunately, my commanding officer came back in two or three days and took over. We didn't have any major problems, but we did have to give all of our transportation available at a minute's notice in case something did happen. Fortunately, it didn't. It worked out well. We had another interesting experience in Salzburg when my cousin Lyle came in with the Rainbow division up from Italy into Austria and when the war ended they were there and in charge of zone command Austria except for the Vienna area which was different. He needed an interpreter when he was there. They were inquiring around and there was a man in an Austrian jail who had been jailed by the mayor of Salzburg as a spy. He spoke beautiful English and so Lyle went out and talked to him. Come to find out, and this was very well proven afterwards. The mayor was the one who was the spy. He arrested this fella and put him in jail. If the Americans hadn't come by, they would have shot him. They investigated him thoroughly. When he was released he became Lyle's interpreter and became a great friend. We learned an awful lot about Austria because he had been born and brought up in Salzburg. When we had time off, he would take us on trips. Where the song silent night had been written in his church. Today, if you go there it's a great tourist attraction. In those days, it was perfectly plain, beautiful church out in the country. So, that was pretty much my experience in Austria. And then I came back from Austria, went back to Dartmouth for a short time and then went to the Mayo Clinic. At the Mayo Clinic, I met two doctors who I had met in Austria and the three of us all ended up in the department of Gastroenterology in the same division.

Q: How much time did you spend in Germany and Austria?

LB: Two years. Out at the Mayo Clinic, we have the 5071-general hospital I think which is a male unit. So, a couple years after I got out there I joined the male general hospital unit and worked my way up through and became colonel and commanding officer for a number of years. And in those days, they'd let doctors stay longer. I stayed a total of 35 years. You could you could stay in six or five

years because doctors were short. And so, we had a unit that was called up once to Kuwait. Half of our unit went and half stayed.

Q: And this was your reserve unit?

LB: Yes. That's my military career. I was always in support in the support unit. I was never threatened or in serious danger like some of the battalion soldiers were who had a pretty rough time. I was protected all of the time. I take my hat off to those people and medics who were right there out on the line. We saw them after they had done their work and we still saw some casualties even though I was there at the very end of the war. And we were still getting sniper injuries at that time.

Q: Even in 1946?

LB: Yes. You were very careful. There were some snipers around. You had to be careful driving at night. You would do most of your work at daytime. You only went out at night when it was an emergency. There were practically no lights in the city. It was dark. You had to be careful.

Q: What year did you retire?

LB: In the mid-80s.

Q: Alright, have you stayed in contact with people you were in service with?

LB: Yes, quite a few of them. A number of them I didn't meet in Europe. A number of them came to the clinic for further training and many of them joined our unit out there. It brought the circle close up.

Q: Did you attend any reunions?

LB: Well, most of ours are medical reunions. You have to realize that doctors aren't good soldiers. They get bored quickly and they get bored with routine. If you put them in a challenging position where they're going to see patients stay in their field, they're great. But if you want them to march or you want them to do these things then you've got another guess coming.

Q: How do you think your time in the military changed or effected your life?

LB: Well, you saw the whole spectrum of people in the Army. Also, another thing that made an impression on me was the people I had seen in Europe through the war. The displaced persons, the hungry. We had an interesting experience in Frankfurt. There was a monastery outside of Frankfurt which took care of orphans. They had a great deal of trouble finding food. What we did at the hospital is they would bring in big cans like garbage cans and we would sterilize those garbage cans and we'd put our extra food in it. Then, nuns would come down almost every night and take it back to those children. As you see the world today, what we saw was probably mild compared to what's going on today in Africa. But it was still pretty difficult when you would see these little kids. We

would see a few civilians and a few children that were sick. Sometimes major problems, you could get them into the hospital to take care of them. No one really gave us a hard time. There were some things you just couldn't turn your back on but I think that's what you learn. We're so lucky. Some of my colleagues who I got to know out at the clinic were there on D-Day. One of my close colleagues was a physician then and he was out there on the first day during D-Day. I'm grateful. I was at the right place at the right time and everyone protected me. I was in support always and I have great admiration for the average G.I. An average G.I. is pretty sharp. Then my medical colleagues who did great jobs. They're the reason medicine has had such great advances. They're the reason why today casualties in the field are much less than they were during WWII.