

HEALTH DIV. SURVEY--UNTERFRANKEN  
D. P. OPERATIONS--AREA TEAM 10/9

*Germany*

24035

24035

# HEALTH DIVISION SURVEY UNTERFRANKEN

D.P. OPERATIONS  
AREA TEAM 1049

Dr. M. KOZAKIEWICZ

Lt. HELEN BUZAN

Miss NORA BOTTOMLEY



HEALTH DIVISION SURVEY

UNTERFRANKEN

D.P. OPERATIONS

AREA TEAM 1049.

S E C T I O N

I

M E D I C A L



UNITED NATIONS RELIEF AND REHABILITATION ADMINISTRATION  
AREA TEAM 1049  
Bad-Brückenau.

FOREWORD.

Prior to the cessation of UNRRA's Displaced Persons Operations in Germany it has been felt that a complete picture of the Health Service provided by UNRRA and its Medical Staff in an Area Team might be of value to the successor agency, whether it be the International Refugee Organization or the Army. With this view in mind the Health Staff of the UNRRA Area Team of Unterfranken has compiled this journal in an attempt to provide such a picture.

Although certain features of the Displaced Persons Operation in the Unterfranken Area are perhaps peculiar to that Area alone, - the large population, the distances involved, the nationalities represented, the number and type of hospitals, - nevertheless it is believed that this compilation will reflect in many ways the entire picture of medical care for Displaced Persons throughout the U.S. Zone.

Herein you will find a retrospective glance at the medical organization as it was found a few months ago; some details of organization and re-organization as necessitated by the ever-changing rehabilitative and administrative program; facts and charts; narrative and documentation; all representing the medical, nursing and nutritional activity and progress in this Area.

The work has been difficult; often we encountered the stumbling blocks of inadequate supplies, inadequate personnel and ignorance. With the co-operation with the UNRRA Officers, the U.S. Army, the professional DP Medical Staff, and the generous assistance of the Displaced Persons, significant strides have been made, and we have shared in the satisfaction of achievement.

The story is here, the facts speak for themselves.

## TABLE OF CONTENTS.

In a retrospective glance at the medical organization of Area Team 1049, the reader will find the following medical files and documents: -

1. Medical Survey on Sub-Areas Würzburg, Aschaffenburg and Wildflecken, prepared on March 21, 1947.
2. Survey of Medical Activities in Area Team 1049 for April and May.
3. Medical Meetings No.1 and No.2.
4. Agenda of Medical Organizational Course with names of attending doctors.
5. Area Budget estimate for one year.
6. Chart No.1.
7. Nominal Roll of employed DP Doctors and minutes of DP Medical Association meeting.
8. Area Circular No.8.



May 14, 1947.

Survey of Medical Activities  
in Area Team 1049  
for April and May.

The present UNRRA medical personnel of Area Team 1049 was set up on 1st April, 1947 by fusion of previous Area Team 1049 (Würzburg) and Area Team 1050 (Wildflecken). The following UNRRA medical personnel was selected:-

Dr. Kozakiewicz	Area Medical Officer	Polish
Dr. McPhillips	Medical Officer	Irish
Dr. Vallejo	" "	Cuban
Dr. Le Goff	" "	French
Lt. Buzan, USPHS	Area Nurse- <i>author</i>	U.S.A.
Lt. Hoover, USPHS	Nurse	U.S.A.
Miss Cannon	"	Irish
Miss Bilderbeck	"	Dutch
Miss Habets	"	Belgian
Miss Lammertin	"	"
Miss Defenin	"	"

The Area Team 1049 is in charge of 27,000 DPs in the German Area Unterfranken. There are 4 main DP Assembly Centers in the Area: Würzburg, Aschaffenburg, Schweinfurt and Wildflecken. Medical installations created in the last two years were three hospitals (Class I) with total bed capacity of 955 and a TB Sanatorium with bed capacity of 214. There were several dispensaries, infirmaries and ambulatories (dental, baby clinics, etc.) which were small units of the medical services. All installations were run by UNRRA Officers untill the 1st April. Some of them were well organized and running smoothly; the others due to lack of equipment and of qualified personnel, were not adequately organized or equipped. With sharp cut of UNRRA medical personnel in the field the only solution was to re-organize DP medical personnel, to select the responsible DP doctors and to place them in important posts in the field. Upon the execution of the above program there were many difficulties which have had to be overcome. They were as follows:-

1. DP medical personnel was not trained to work independently and did not possess the knowledge of UNRRA medical administration.
2. There were very few DPs who possessed the knowledge of English language.
3. Some of the DP Assembly Centers were greatly overstaffed with DP medical personnel while the others were understaffed. In some the medical program was built on German medical personnel. At the same time transfers on voluntary basis of DP medical personnel from one Assembly Center to another was one of the greatest problems especially at this stage of UNRRA activity.



4. All UNRRA medical staff had recently taken over the medical duty and did not possess sufficient knowledge of the DP medical staff to select and place DP doctors on responsible appointments.

5. To fire, in a short time, approximately 100 experienced German medical personnel, to replace them by DPs whose professional qualifications and knowledge in many instances were much lower than that of the Germans and did not harm the medical program throughout the Area. At the same time it was a task which we succeeded only by very hard and tiresome effort of all UNRRA Officers of Area Team 1049.

The first phase of re-organizing medical personnel in the field is over. It is completed and the structure of the medical organization of the Area 1049 is established.

The Area is divided in three Sub-Areas:-

1. Sub-Area "A" Würzburg
2. Sub-Area "B" Aschaffenburg
3. Sub-Area "D" Wildflecken

Each Sub-Area contains several DP camps and different types of medical installations. Main medical installations are located as follows:-

1. Sub-Area "A" Würzburg.  
Würzburg Hospital, Class II, bed capacity 120,  
1 TB Sanatorium (Lohr), bed capacity 214, 2 infirmaries  
(Schweinfurt, Seligenstadt) total bed capacity 30 and 5 dispensaries.
2. Sub-Area "B" Aschaffenburg.  
Aschaffenburg Hospital, Class I, bed capacity 300,  
2 infirmaries (Kleinheubach, Elsenfeld) with bed capacity 12  
and 11 dispensaries.
3. Sub-Area "D" Wildflecken.  
Wildflecken Hospital, Class I with bed capacity 478  
and 2 dispensaries.

For the organization of UNRRA and DP medical personnel see chart No.1; the duties and functions see Area Circular No.8.

The present program of UNRRA medical service is:-

- 1) To supervise and teach selected DP medical personnel to carry out the medical duties throughout the Area according to UNRRA orders and regulations.
- 2) To get medical supplies in sufficient quantities to care for 27.000 DPs. To organize DP medical supply service for requisitions and distributions of medical items according to Army regulations.
- 3) To estimate the cost of medical service in the Area in Reichsmarks for the next year from German economy.
- 4) To improve medical service in the present medical installations in the Area.



1. To meet this program a course was organized on April 9th, 1947, on organization of medical service at Area Team 1049. (See attached program of the agenda). 40 doctors and 7 nurses attended. DP medical and nursing assignments were made. On April 19th and May 5th there were 2 medical meetings. The resumer of the meetings attached.

2. At the beginning and end of April requisitions of expendable and non-expendable items were submitted to Medical Depot Hanau and UNRRA US Zone Headquarters, Heidelberg.

3. The estimation of medical service is carried out. (Please see the attached files).

4. Action is taken to improve the service of medical installations of the Area, but it will take time to report the medical service running satisfactorily.

5. Mass Radiology for Wildflecken is underway. 12,000 DPs were screened and 3,000 photographs read. Of these 240 suspected cases of TB were found. Full reports on medical findings of survey will be reported at a later date.

6. In addition in organizing the medical program in the Area, April 11, 1947 the DP Medical Officers, on suggestion by the Area Medical Officer, set up a DP Medical Association. The purpose of this Association is to professional screening the DP Medical Officers working in different medical installations in the Area 1049. Details of medical organization set-up attached protocol No.1 and No.2 and status.



MEDICAL MEETING No.1

19th April, 1947.

1. Dr. Kozakiewicz, Area Medical Officer, opened the meeting by informing the Medical Officers and Nurses of the proposed program and the duty of UNRRA medical personnel.

He pointed out that the duty of UNRRA medical personnel at present is very much different of that a year ago. At that time UNRRA medical personnel was actually engaged in the professional work practicing medicine and nursing with the assistance of DP medical staff. At present, due to great shortage of UNRRA medical personnel, all medical installations will be handed over to DPs who will work under the supervision of UNRRA Officers. An evaluation should be made on each DP doctor and nurse by UNRRA Medical Officers and Nurses in order to be able to select the most suitable DP medical personnel. A 4-days course has been arranged by the Area Medical Officer for 40 DP doctors and 7 DP nurses, in which UNRRA Medical Officers will have the opportunity to learn about the personalities of the DP doctors and about the work performed by them.

Dr. Kozakiewicz advised the meeting of the second task of the Medical Officers:- to reduce the German medical personnel to 5%. This problem is serious due to lack of properly qualified and trained DP medical personnel in some Sub-Areas. Wildflecken, especially would be affected by this reduction for most of the medical program was carried by German medical personnel there. The German personnel should be replaced by DPs by May 1st, 1947. 15th May, 1947 was set as the latest date for the completion of this turn-over.

UNRRA medical personnel will act as supervisors and advisors to their DP staff.

It is the responsibility of UNRRA medical personnel to report any inadequacy in their installations.

Area Medical Officer informed the meeting that the bed capacity of Würzburg hospital would be reduced from 180 beds to 120 beds as the set-up of this installation was not adequate for a Class I hospital, therefore, therefore, it would be re-classified as Class II.

The question of requisitions and inventories was discussed and the Area Medical Officer advised the meeting that requisitions for month of March had been submitted to Straubing Warehouse. The medical supplies were expected to be received in the very near future. Medical Officers were asked to prepare requisitions for the month of May using new requisition forms (No.33 forms (No.445)).



2. Nursing.

Lt. Buzan urged the UNRRA Nurses to give the fullest assistance and co-operation to the Medical Officers in fulfilling their duties.

She pointed out that there had been some misunderstandings among the UNRRA Medical Officers and Nurses. To promote this new program the Medical Services must work together in unity.

Lt. Buzan informed the UNRRA medical personnel of Wildflecken that many DP doctors and nurses would be transferred to their Sub-Area. It was requested that Wildflecken secure comfortable accommodations and other facilities for their new employees. The welfare of the DP medical personnel would be the direct responsibility of the UNRRA medical staff.

Lt. Buzan gave strict instructions to the Chief Nurse of Wildflecken to prepare the nurses' home and to be ready to receive 16 nurses from other Sub-Areas.

3. General Discussion.

Some of the UNRRA Nurses complained that they were having difficulties in selecting DP nurses with diploma for replacement of German nurses. It was agreed that only 25 German diploma nurses can be retained at Wildflecken Sub-Area.

Considering the possibility that TB Sanatorium at Lohr might be taken over by German economy, it was decided that the number of German medical personnel (68) was not to be reduced. The replacement of German personnel by DPs in this Sanatorium would cause difficulties. The German nurses employed at this unit are nuns and are accommodated in a cloister near the Sanatorium. It would not be possible to billet DP employees in the nearby village due to MG orders.

Several other questions were discussed and clearance on same obtained during the meeting.

The meeting was terminated at 3.30 p.m.



MEDICAL MEETING No.2.

5th May, 1947.

Dr. Kozakiewicz, Area Medical Officer, opened the meeting and regretted the absence of Lt.Col. Anderson, Post Surgeon, whose arrival was expected.

1. Dr. Kozakiewicz informed the meeting of the recent changes in Area Team 1049:-

- a. Sub-Area "C" Schweinfurt has been fused into Sub-Area "A" Würzburg, therefore all medical reports, inventories, requisitions, etc. will be sent through Würzburg.
- b. DP Hospital Würzburg has been reclassified as Class II Hospital and its bed capacity reduced from 180 beds to 120 beds. Personnel assigned to this Hospital will consist of 10 doctors, nurses and other personnel. In the entire Würzburg Sub-Area there will be 20 doctors. In Schweinfurt and Seligenstadt 7 doctors will serve the population.
- c. The bed capacity of Aschaffenburg Hospital will be increased to 350 beds, with medical personnel consisting of 15 doctors, nurses and other personnel. The medical service of Aschaffenburg camps will be arranged on the basis that every 500 of the population will be served by one doctor.
- d. Wildflecken Sub-Area has been unfortunate in having too many German medical personnel. Lately this has been replaced by DPs thus reducing the number of German personnel to 25.

A new office has been established at Wildflecken Hospital where all administrative work will be concentrated.

A list of medical personnel of Sub-Areas and 2 charts (functional and organizational) were asked for by Dr. Kozakiewicz. These items should be submitted to the Area Medical Office not later than 9th May, 1947. A medical inventory was also required from Sub-Areas for expendable and non-expendable items to be submitted to Area Medical Office on the above-mentioned date. Sub-Area Chief DP doctors will be responsible for preparing same.

By 12th May an estimate for cost of medical service for one year should be submitted to Area Medical Office.



Dr. Kozakiewicz pointed out that a book is being prepared of medical-nursing service and invited all Sub-Area doctors and nurses to give all possible assistance in the completion of this book, i.e. - to collect all material concerning the development of their installations, such as: history of camps, hospitals, infirmaries, photographs, plans, figures of average attendance of out-patients during one year, number of patients hospitalized during one year, etc. This information should be submitted to the Area Medical Office by 20th May, 1947 in order to complete the book before UNRRA ends. After completion of the book it will be distributed to the medical personnel as a souvenir of their work with UNRRA.

## 2. Nursing Service.

Lt. Buzan, Area Nurse, advised the meeting that a program of teaching and re-checking (temperature routine, injections, etc.) should be stressed this month by UNRRA nursing personnel. This would help the incoming DP nurses to carry out the routine nursing program in the hospitals and camps.

Lt. Buzan informed the meeting that any proposed changes of bed capacity of hospitals should be cleared through the Area Medical Office to Zone Headquarters in order to get permission for such changes.

A sample of medical charts and nursing history prepared by Sub-Area Aschaffenburg was shown by Lt. Buzan.

## 3. Pediatrics.

Dr. Le Goff, Area Children's Specialist, gave the information of the work being done for the health of children.

Instructions for child-health responsibilities are given in Area Circular No.8 and are to be carried out as written.

The child must be protected from diseases, therefore baby-clinics have been established at Wildflecken where children are examined, weighed and measured.

At the beginning of pregnancy the expectant mothers are to be examined once monthly (Wassermann, X-rays, etc.) and every two weeks, or weekly if considered necessary, within the last two months of pregnancy. A supplement of food is given to the expectant mothers. After delivery the mother remains a few days at the "Maternity Home" with her child. After leaving this "Maternity Home" the infant is under the supervision of a nurse up to the age of one month. From this age to 6 months the infant is examined at the baby clinic regularly and a regular distribution of vitamins is given to the child. Baby clinics for children 1-3 years and 3-6 years of age are operating and each child has its individual record.

Children's Hospital at Wildflecken is well organized and equipped with well trained medical staff. 6 doctors are in charge of the pediatric unit: 2 doctors are working in baby-clinics, 2 in Children's Hospital, 1 in Maternity Hospital and 1 doctor is in charge of school health program.



Dr. Le Goff proposes to establish the same program in the other Sub-Areas.

4. Messing.

Miss Harris, Messing Officer, gave some information of the breakdown for food rations.

U.S. Army has divided the food rations for DPs in the following categories:

Children's ration (0-5, 5-17 yrs.)

Workers ration

Persecutees ration

Normal consumers ration

Special Care ration

P & L Women's ration.

At Wildflecken camp some changes have been made in this breakdown. The age groups for children's ration in this camp have been divided as follows: 0-1, 1-6, 6-14, 14-19. Some food is being taken from 0-1 age group and added to 14-19 group (cheese, meat, etc.)

It is proposed to establish a baby's feeding station at Wildflecken and also a sample kitchen for 0-1 age group where mothers will learn how to prepare food for their infants correctly.

The question of Special Care ration was raised. Miss Harris explained to the meeting that each individual can draw only one kind of rations, - e.g. if the individual draws workers' ration he cannot draw Special Care ration in addition. Also the difference between Special Care ration and diet should be observed. Diets should be divided into 4-5 groups and prescribed by doctor for each individual. Special forms (Form No.3) will be used for requesting Special Care rations. These forms will be submitted to Area Medical Office bi-weekly (next submittal should be on 8th May, 1947). Area Medical Officer then will submit same to Bavarian Food Warehouse.

Dr. Kozakiewicz informed the meeting that only 1% of the population can draw Special Care rations. In case of epidemic this percentage may be increased to 2%. Special Care ration rations can be given only to DPs in camps. Hospital patients are not authorized to receive this ration because they draw Hospital ration consisting of 3000 calories.

Dr. Leemanis, (Lohr Hospital) asked to increase fat and sugar ration for Lohr Hospital. Dr. Kozakiewicz informed him that an action has been taken with Bavarian Food Warehouse on this matter.



5. Medical Reports.

Medical Officers were advised by Miss Vulfs, Medical Secretary, of the reports required from Sub-Areas and details were given to them as to the preparation and submittal of same. Dr. Kozakiewicz emphasized the importance of medical reports and asked the doctors to carry out the given instructions accurately.

66. Requisitions and Inventories.

Dr. Kozakiewicz spoke about requisitions and inventories and said that many mistakes have been found in same. Especially basis had not been prepared correctly. Medical Supply Bulletin No.1 (Subject: Distribution of Medical Supplies for the Care of Displaced Persons and Civilian Internees) was distributed in order to assure uniformity in preparing requisitions.

Dr. Kozakiewicz advised the meeting that new requisition forms (No.445) will be used in making requisitions in the future and gave details as to the preparation of same.

There are 3 different requisitions:

- a. Expendable
- b. Non-expendable
- c. Biological and Controlled Items.

Requisitions must be prepared in 7 copies and consolidated for the Sub-Area. 1 copy must be retained at Sub-Area Office and 6 copies forwarded to Area Medical Office.

Requisitions for expendable items should be addressed to Medical Depot Hanau, requisitions for non-expendable, biological and controlled items must be approved by Zone Headquarters. Dr. Kozakiewicz stressed the necessity of preparing requisitions accurately and according to instructions.

Medical inventories should be prepared for expendable and non-expendable items and should be consolidated for the Sub-Area. Units of items should be used according to catalogues. Each item should be marked whether it belongs to UNRRA, Army or is German property.

7. General Discussion.

The question of 24-hours medical duty was discussed. A camp doctor must be on duty from 8 a.m. - 8 p.m. and another doctor from 8 p.m. - 8 a.m. Another doctor must be on duty at the hospital.

Dr. McPhillips informed the Area Medical Officer that 2 dentists have been sent from Würzburg to Wildflocken and it was decided that 2 dentists will be sent to Aschaffenburg (1 from Würzburg, 1 from Schweinfurt).

Dr. Kaire (Würzburg) said that he had overstocks of drugs. Dr. Kozakiewicz asked him to make a list of these drugs and send copies to other Sub-Areas and to the Area Medical Office. Thus other Sub-Areas will be able to select the drugs they needed.



Dr. Kozakiewicz advised the meeting that Field Representative (Medical) is due to visit Sub-Areas in the near future. Therefore all medical installations should be prepared by 7th May to receive this visit.

Several other questions were cleared during the general discussion.

Mr. McKenzie, Area Field Operations Officer, was present at the last part of the meeting. He expressed his thanks for the work being done in rising the medical service up to the present standard.

The meeting was terminated at 5.30.p.m.



MEDICAL ORGANIZATION OF AREA TEAM 1049

COURSE No.1.

Agenda.

April 9, 1947

Wednesday

- |           |                                                                                                    |                 |
|-----------|----------------------------------------------------------------------------------------------------|-----------------|
| 2:00 p.m. | Opening and General Remarks Concerning Future Plans of the Medical Service of Area Team 1049.      | Dr. Kozakiewicz |
| 3:00 p.m. | The Functions of Public Health and Hospitalization in DP Installations as in the Past and Present. | Dr. Vallejo     |
| 4:00 p.m. | Messing and Nutrition<br>Hospital Diets of DPs.                                                    | Miss Bottomley  |

April 10, 1947

Thursday

- |            |                            |                                   |             |
|------------|----------------------------|-----------------------------------|-------------|
| 9:00 a.m.  | Babies 0-1                 | Medical Care and Welfare of Child | Dr. Le Goff |
| 10:00 a.m. | Infant 1-5                 |                                   | Dr. Le Goff |
| 11:00 a.m. | Children 5-17              |                                   | Dr. Le Goff |
| 2:00 p.m.  | Camp Doctor and his Duties |                                   | Dr. Vallejo |
| 3:00 p.m.  | Sanitation and Reports     |                                   | Lt. Buzan   |
| 4:00 p.m.  | Immunizations and Reports  |                                   | Lt. Buzan   |

April 11, 1947

Friday

- |            |                                |                 |
|------------|--------------------------------|-----------------|
| 9:00 a.m.  | Medical Reporting              | Dr. Kozakiewicz |
| 10:00 a.m. | Medical Supply                 | Dr. Kozakiewicz |
| 11:00 a.m. | Organization of Area Team 1049 | Mr. Fuller      |
| 2:00 p.m.  | Penicillin                     | Dr. Kozakiewicz |
| 3:00 p.m.  | Resuscitation                  | Dr. Kozakiewicz |
| 4:00 p.m.  | Anaesthetics                   | Dr. McPhillips  |

April 12, 1947

Saturday

- |            |                                                       |                 |
|------------|-------------------------------------------------------|-----------------|
| 9:00 a.m.  | Organization of the Hospital                          | Dr. McPhillips  |
| 10:00 a.m. | Duty of Area and Sub-Area Medical Officers            | Dr. Kozakiewicz |
| 11:00 a.m. | Coordination of Nursing-Medical Service in the Field. | Lt. Buzan       |

Dr. M. KOZAKIEWICZ  
Area Medical Officer.  
Area Team 1049



Nominal Roll of DP Doctors attended Course of Area Team 1049.

<u>NAME</u>	<u>ADDRESS</u>
1. LIEPINS Janis	Würzburg, Central DP Camp
2. VAVERE Alma	" " " "
3. GRINBERGA Elvira	" " " "
4. MIKSEVICIENE Elena	Aschaffenburg DP Hospital
5. ZUMENTS Margerita	Würzburg Central DP Camp
6. BORMANIS Milda	" " " "
7. SMITS Anastasija	" " " "
8. KLEINBERGS Irmgarde	" " " "
9. SEJA Marija	" " " "
10. VARKURAUIONIS	Würzburg-Zell DP Hospital
11. SINATS Mercedes	" " " "
12. BRUVELS Margerita	Wildflecken DP Hospital II
13. ULJANOV Alexandr	" " " VI
14. URBONOVITCH Eugenie	" " " II
15. MUSILIEWICZ Michael	" " " II
16. PONE Janis	Würzburg Northern Camp
17. SKRASTINS Arturs	Würzburg Central DP Camp
18. ZAKITIS Vilis	Würzburg Western DP Camp
19. SURITIS Leonhards	Würzburg Central DP Camp
20. KÜTT Michael	Aschaffenburg DP Camp Artillerie Caserne
21. SHPIKALO Stepan	Aschaffenburg DP Camp Jäger Caserne
22. CHADOLEY Petrov	Aschaffenburg DP Hospital
23. ZAGOLOW Murat	" " "
24. SCHMIDT Reszoe	" " "
25. DACZYSZYN	" " Camp
26. TKACS Lidia	" " Hospital
27. PARUPS Indrikis	Wildflecken
28. BRIUKS Velta	"
29. SZUUCZUK Tamara	Aschaffenburg DP Hospital
30. NABOLOTMYJ Czycholje	" " "
31. GIBULIS Karlis	Würzburg Central DP Camp
32. MITENIEKS Alfreds	" " " "
33. BYLOW Lubon	Aschaffenburg DP Hospital
34. LAPKO Peter	Aschaffenburg Camp 258
35.	



35. KOCHORYSCY Mykola	Aschaffenburg Camp 258
36. PETUKAUSKAS Juozas	Würzburg-Zell Northern Caserne
37. STASIUNAS Juozas	Würzburg DP Hospital
38. MASIULIONIENE Aldona	Würzburg-Zell DP Hospital
39. ZVIRBULIS Karlis	Würzburg Western DP Camp

DR. W. H. H. H. H. H.  
 10000 10000 10000  
 1000 1000 1000

13th May, 1947.

Area Budget Estimate for One Year.

The above estimation of costs for the medical service of 21,240 DPs in the Area Unterfranken was based on facts that the Area contains 3 hospitals: Würzburg, Aschaffenburg and Wildflecken with total bed capacity 770, one TB Sanatorium at Lohr with bed capacity 214 and several camp dispensaries and ambulatories.

At present estimations of costs expenses for the last year were taken as a guide and the approximate cost of medical service is as follows:-

- |                 |                                                                                         |              |
|-----------------|-----------------------------------------------------------------------------------------|--------------|
| 1.              | Würzburg DP Assembly Centers and Hospital<br>(120 beds) and Lohr TB San.(214)beds)..... | 1.029.120 RM |
| 2.              | Aschaffenburg DP Assembly Center and<br>Hospital (350 beds) .....                       | 1.252.530 "  |
| 3.              | Wildflecken DP Assembly Center and<br>Hospital (300)beds) .....                         | 828.750 "    |
| T o t a l ..... |                                                                                         | 3.110.400 RM |

Dr. M.KOZAKIEWICZ  
Area Medical Officer  
Area Team 1049



17

# ORGANIZATIONAL CHART

AREA TEAM 1049  
MEDICAL SERVICE

Dr. M. KOZAKIEWICZ  
AREA MEDICAL OFFICER

NURSING  
AREA NURSE  
LI. H. BUZAN

Dr. Le GOFF  
AREA PEDIATRICIAN

MESSING  
AREA NUTRITIONIST  
Miss N. BOTTOMLEY

Dr. Mc PHILLIPS  
SUB-AREA A,B,C MEDICAL OFFICER

Dr. VALLEJO  
SUB-AREA "D" MEDICAL OFFICER

SUB-AREA DP DOCTOR  
Dr. KAIRE

SUB-AREA B" ASCHAFFENBURG  
MEDICAL OFFICER Dr. A. SKRASTINS

Dr. STASIUNAS  
CHIEF DP MEDICAL OFFICER

CAMP CHIEF DOCTOR  
Dr. SMITS

SUB-AREA PHARMACIST  
Mr. GAILITIS

Dr. LIEPINŠ  
CHIEF HOSPITAL DOCTOR

DP REGIONAL HOSPITAL  
ASCHAFFENBURG  
CHIEF Dr. K. SYLECKY

SUB-AREA B" ASCHAFFENBURG  
CHIEF CAMPS DOCTOR  
Dr. M. KUTH

SELIGENSTADT  
Dr. MOGENIS

SCHWEINFURT

LOHR TB  
SANATORIUM  
214 BEDS

CHIEF DP DOCTOR  
LECMANIS

5 DP DOCTORS

DISPENSARIES

CENTRAL DP CAMP  
Dr. GRINBERG Dr. ZUMENTS  
Dr. VALLIS Dr. SVIKSA  
Dr. AUSTRIUS Dr. TIMBORN

NORTHERN DP CAMP  
Dr. SIMKIENE Dr. BUSE  
Dr. BURHANIS Dr. MASULONIENE

WESTERN DP CAMP  
Dr. SURITIS Dr. STERN

SCHOOL DOCTOR  
Dr. ASARS

OFFICE

SUB-AREA PHARMACY  
RESERVE STOCKS

PHARMACY  
(Miss KALNINS)

CENTRAL DP CAMP  
PHARMACY  
(Mr. ZVEJNIEKS)

CONTAG. DIS.

LABORATORY

X-RAY

CHILDREN

MEDICINE

OBSTETRICS  
& GYNECOLOGY

EYES AND ENT

SURGERY

REGISTRAR  
Miss RANKIS

OUT-PATIENTS CONSULTATION  
(FOR SPECIALITIES ONLY)  
SPECIALIST WORKING IN THE  
HOSPITAL AND THE CAMP

SURGERY &  
GYNECOLOGY  
HEAD Dr. MAKAREWICZ

OCULAR CLINIC  
Dr. R. SZMIDT

LARINGOLOGICAL  
CLINIC  
Dr. O. KINZEL

MATERNITY  
Dr. K. SYLECKY

DENTAL CLINIC  
Dr. L. JAKOB

Dr. J. PYSAWY  
ASSISTANT

Dr. NABOLOTNY  
ASSISTANT

Dr. P. CHUDOW  
ASSISTANT

Dr. T. SZEMCZUK  
ASSISTANT

Dr. K. ZAGOLOWA  
ASSISTANT

HOSPITAL ADMINISTRATION  
ECONOMY & MAINTENANCE  
HEAD A. BAUR

Dr. BYLOW  
ASSISTANT

INTERNAL MEDICINE  
HEAD Dr. R. KRUPKA

V.D. & SKIN CLINIC  
HEAD Dr. S. KOMLIK

PEDIATRIC CLINIC  
Dr. H. MIKSZEWICZ

T.B. CLINIC  
Dr. J. SEMBAY

MENTAL CLINIC  
Dr. N. HRUSZECKA

X-RAY  
CLINIC

SUB-AREA  
PHARMACY  
HEAD MG PIHV JAAN

SUB-AREA  
LABORATORY  
HEAD G. DEMENTIEW

ARTILLERIE 255  
CAMP PHYSICIAN  
Dr. M. KUTH

LAGARDE 258  
CAMP PHYSICIAN  
Dr. P. LAPKA

BOIS BRULE 258  
CAMP PHYSICIAN  
Dr. R. DZIADW

JAEGER 258  
CAMP PHYSICIAN  
Dr. M. KUCKARYSZYN

FRONTIER 264  
CAMP PHYSICIAN &  
PEDIATRICIAN  
Dr. R. DEMENTIEW

KLEIN-HEUBACH 258  
CAMP PHYSICIAN  
Dr. A. HIMMA

ELSENELD 213  
CAMP PHYSICIAN  
Dr. W. BUSCH

DESINFECTOR  
FOR ALL CAMPS

Dr. SZPIKALO  
ASSISTANT

Dr. L. VALLAS  
PEDIATRICIAN

Dr. M. NABORNA  
ASSISTANT

Dr. M. KANNEAUB  
PEDIATRICIAN

Dr. J. DASZYSZYN  
ASSISTANT

Dr. J. JUDANIECZ  
DENTIST

Dr. SINKA  
PEDIATRICIAN

PUBLIC HEALTH  
Dr. PAWLOWSKI

POLYCLINICS

SANITATION

GRAINMILL

HOME VISITS

PRE & POST NATAL

CHECK UPS

T.B. V.D.

HOSPITALS  
Dr. ZAKITIS

SURGERY  
55

MATERNITY  
58

MEDICAL  
103 BEDS

LABORATORY

SPECIAL DIETS  
CERTIFICATES

PHARMACY  
Miss GAILITIS

DENTAL  
Mrs. ŠTEGMANIS

MEDICAL  
ADMINISTRATION  
Mr. SOIKA

REPORTS

REQUISITIONS

INVENTORIES

PERSONNEL

PEDIATRICS

HOSPITAL V

BABY CLINIC

A-12



Sub-Area "A" Würzburg and Lohr TB Sanatorium.

Area Team 1049  
Medical Office.

Sub-Area Budget Estimate for One Year.

1. Salaries .....	618.500 RM
2. Medicine .....	131.000 "
3. Special treatments .....	134.000 "
4. Inventory, equipment, maintenance .....	27.000 "
5. Housekeeping costs .....	40.356 "
6. Office and communications .....	18.280 "
7. Sub-Area Medical Office .....	24.024 "
8. Transportation .....	17.400 "
9. Burials .....	9.000 "
10. Unforeseen .....	9.560 "
<hr/>	
T o t a l .....	1.029.120 RM



Sub-Area "B" Aschaffenburg.

Area Team 1049  
Medical Office.

Sub-Area Budget Estimate for One Year.

1. Salaries .....	611.040 RM
2. Medicine .....	158.300 "
3. Special treatments .....	98.000 "
4. Inventory, equipment, maintenance .....	56.800 "
5. Housekeeping costs .....	259.940 "
6. Office and communications .....	12.750 "
7. Sub-Area Medical Office .....	15.600 "
8. Transportation .....	24.000 "
9. Burials .....	2.400 "
10. Unforeseen .....	13.700 "
<hr/>	
T o t a l .....	1.252.530 RM



Sub-Area "D" Wildflecken.

Area Team 1049  
Medical Office.

Sub-Area Budget Estimate for One Year.

1. Salaries and wages .....	380.000 RM
2. Medicine .....	150.000 "
3. Special treatment .....	58.000 "
4. Inventory, equipment, maintenance .....	20.000 "
5. Housekeeping costs .....	153.000 "
6. Office and communications .....	12.750 "
7. Transportation .....	10.000 "
8. Burials .....	10.000 "
9. Extraordinary .....	15.000 "
10. Sub-Area Medical Office .....	20.000 "
<hr/>	
T o t a l .....	828.750 RM



Translation.

P R O T O C O L No.2.

MEETING HELD 26th April, 1947

AT CENTRAL DP CAMP, WÜRZBURG.

Present:

Dr. Kaire	Würzburg
Dr. Bylow	Aschaffenburg
Dr. Kucharyszin	Aschaffenburg
Dr. Uljanov	Wildflecken
Dr. Bruvels	Wildflecken
Dr. Schmidt (guest)	Würzburg

A G E N D A .

1. To work out status of the agreement.
2. Admission of new members.
3. To determine the time and place for General Meeting.

1. The following statutes were accepted to be proposed at the General Meeting (see attachment No.1).

2. It was decided that copies of protocols should be forwarded to the 4 Sub-Areas of Area Team 1049. The DP doctors of Area Team 1049 will be invited by representatives to join the Association. Special forms will be filled out for this purpose. (Attachment No.2).

A control of documents will take place after the first General Meeting.

The Sub-Area meetings should be arranged not later than 10th May, 1947.

The Area Meeting will take place on 18th May, 1947

Agenda for Sub-Area Meeting:-

1. Election of the Chairman
2. Election of Representative for the General Area Meeting.

Agenda for Area Meeting:

1. Election of the Chairman.
2. Report of the temporary Chairman.
3. Acceptance of statutes.
4. Election of the Committee.
5. Election of the Revision Commission.
6. Election of the Court of Honour.
7. Determination of the quota of members.

The General Meeting will take place at Aschaffenburg.



ATTACHMENT No.1.

The DP doctors working and living in the Area of Team 1049 have decided to become members of the DP Medical Association UNRRA Area Team 1049 in accordance with the under-mentioned paragraphs.

S T A T U T E S.

A. Miscellaneous.

1. The residence of the Association corresponds to the residence of the Chairman.
2. Field of action of the Association is Area Team 1049.
3. The Association owns a stamp with the following inscription:  
"DP MEDICAL ASSOCIATION AREA TEAM 1049".

B. Aims.

4. The following are the aims of the Association:
  - a. Representation and protection of the interests and rights of DPs in UNRRA Area Team 1049 before the corresponding offices.
  - b. Provision of work.
  - c. Keeping DP doctors on a high ethical level.
  - d. Taking care of special training of DP doctors and supply them with professional literature and advices.
  - e. Taking care and popularization of the Medical-Hygienical knowledge among DPs.
  - f. Taking care of training of DP medical assistant personnel.
  - g. Co-operation with other similar organizations in Germany and foreign countries.

C. Members.

6. The Association has
  - a) full members
  - b) honoury members.



7. All DP doctors living in the Area of Team 1049 may become full members of the Association. All DP doctors working in the above-mentioned Area must become members of the Association.
8. UNRRA doctors or doctors of Allied nationality may become honorary members of the Association.
9. Full members will be accepted by the Committee on the basis of a written request and after a test of their documents (DP Card, Diploma, Professional qualifications, etc).

The request should be submitted to the concerned Sub-Area representative, who will forward same to the Committee after a test of the documents.

  - a) For replacement of missing documents written explanations from at least two witnesses (physicians), free of objections, should be submitted to the representative.
  - b) In event of lack of proof or if the submitted documents are not approved by the Committee, a member may be accepted only after investigation of his previous appointments or of his professional knowledge assessed by a special commission. This commission will be appointed by the Committee. It will consist of:
    1. A representative of the concerned Sub-Area.
    2. A representative of the Committee.
    3. Area or Sub-Area Medical Officer or a doctor appointed by the office of occupation (?) as Chairman.
10. Honorary members will be accepted on a recommendation from at least two members of the Committee.

#### D. Rights and Responsibilities of the Members.

11. At the Sub-Area General Meeting each member is entitled to elect a representative for the General Meeting or may become elected himself.
12. Each member has only one vote at the Sub-Area General Meeting.
13. It is the responsibility of each member to observe the rules and instructions of the Committee and act accordingly.
14. A member may be excluded from the Association if he:
  - 1) has not carried out the above-mentioned responsibilities,
  - 2) has been punished by withdrawing the rights of practice,
  - 3) has not acted according to medical ethics.



Corresponding propositions should be turned over to the Chairman of the Committee.

15. In cases of dispute between the members or between a member and his employer the Committee will act as a mediator. Propositions should be made to the Chairman of the Committee.

#### E. Purposes of the Association.

16. Purposes of the Association are:

- 1) General meeting of the members at Sub-Area.
- 2) Area General meeting.
- 3) Committee.
- 4) Council of the Committee.
- 5) Revision Commission.
- 6) Court of Honour.
- 7) Various Committees.

#### F. Sub-Area General Meeting.

17. Sub-Area General meetings will be held at least once monthly. All decisions will be accepted with the simple majority of voices. If the number of voices is equal the decision of the Chairman is conclusive.

Date, place and agenda will be fixed one week in advance.

18. Tasks of the Sub-Area General meeting:

- a. Election of the representative for Area General meeting.
- b. To propose and work out various questions for the Area General meeting and the Committee.
- c. Discussion of medical questions.
- d. Area General meeting.

19. The Area General meeting is the highest authority in all questions concerning the Committee.

The special purpose of the General meeting is:

- 1) Confirmation and possible changes of the statutes. For this purpose it is necessary to have  $2/3$  majority of voices.
- 2) Election of Committee, Revision Commission, Court of Honour and other committees.
- 3) Confirmation of the report of last General meeting.
- 4) To establish the quota of members.



- 5) Approval of the reports of Committee, Revision Commission, Court of Honour and other committess.
  - 6) Conclusion on the liquidation of the Association.
20. The decisions will be accepted by the simple majority of voices.
  21. The Area General meeting will be attended by the representatives elected at Sub-Area General meeting. On every 3 members 1 representative should be elected.
  22. The General meeting should be held at least once a year until 30th June, by the Chairman of the Association of at least 14 days and held at the residence of the Association or at any other place within the Area.
  23. On a written request from 20% of the members, the Chairman has to call an extraordinary General meeting. General meeting may be called also on a proposition of the Committee or Revision Commission.
  24. The agenda should be attached to the invitation for General meeting. The General meeting is legal if it is attended by at least 50% of all representatives. If this number is not present, another meeting with the same agenda should be called within 14 days which would be legal by any number of representatives attending.
  25. The General meeting elects a Chairman and a secretary for the meeting. Minutes are to be written on the substance of each meeting.

#### G. Committee.

26. The Committee is elected for 1 year by the Area General meeting. The Committee consists of 2 representatives of each Sub-Area, with a total of 6 representatives. The Committee elects a council which consists of a Chairman, his assistant and a secretary. Each member of the Committee may have a special responsibility. The Committee meetings are held when considered necessary.
27. The Committee acts according to statutes and decisions of the General meeting. The Committee carries out the decisions of the General Meeting. The council is the legal representative of the Association.



28. The Committee makes decisions in cases of emergency when it is not possible to wait until the General meeting. The decisions are accepted by the simple majority of voices. If the number of voices is equal the voice of the Chairman is conclusive.
29. Minutes should be written on the Committee meeting.
30. The Committee is responsible to the General meeting and Revision Commission.

#### H. Revision Commission.

31. The Revision Commission is elected for 1 year by the General meeting. It consists of three members.
32. The Revision Commission controls the action of the Committee and that of the various committees. These committees are to present their minutes, bills and other documents on a request by the Revision Commission.
33. Revision Commission controls the action of the Committee and that of the various committees at least once a year before the General meeting and submits to the latter a written report for approval.

#### I. Various Committees.

34. Various Committees may be organized in order to carry out special orders.

#### J. Court of Honour.

35. The Court of Honour is elected by the General meeting and consists of 3 members.
36. The Court of Honour has to interpose in cases of controversy on a request of the Chairman. Written requests should be submitted by members to the Committee.
37. The decisions of the Court of Honour are conclusive.
38. Members may be excluded from the Association on a request by the Committee or Revision Commission. The decision must be approved by the next Area General meeting.



K. Liquidation.

39. Should a decision on liquidation of the Association be made at a meeting of the members, the committees will continue their action up to the completion. Meeting of the members decides about the remaining property.

/s/ Dr. KAIRE.



Name and Christian Name .....

Date and Place of Birth .....

Nationality .....

Citizenship .....

Identity Card No. ....

Residence .....

Place of work and position .....

.....

.....

Holding Diploma? Yes / No .....

Name of University where Diploma obtained from .....

.....

Speciality .....

Holding qualifications of Speciality? Yes/No .....

.....

The undersigned requests admission in the DP Medical Association.

.....  
Signature.



Nominal Roll of Doctors Employed in Area 1049.

Dr. Kaire - Sub-Area "A" DP Medical Officer.

Hospital: Dr. Liepins - Chief of Hospital

" Metra - Surgeon

" Pone - " asst.

" Viksna - ENT

" Lazdins - Eyes

" Petukauskas - Medicine

" Makutiene - Assistant

" Metra - Children

" Jurgilas - Obstetrics

" Gibulis - X-ray

Camps: Dr. Smits - Chief Camp Doctor

" Asars - School doctor

Central Camp:

Dr. Vallis

" Grinbergs

" Sviksa

" Zuments

Western Camp:

Dr. Suritis

Northern Camp:

Dr. Simkiene

" Buss

" Bormanis

Lohr TB Sanatorium:

Doctors:

Chief Doctor:

Dr.med. Harijs LECMANIS, born 15.2.1895, Latvian

I. Women ward:

Dr. Hans JALAKAS, born 1.1.1913, Estonian

II. Women ward:

Dr. Edgars MACULANS, born 11.11.1903, Latvian

I. Men ward:

Dr. Antanas JOSIUKAS, born 18.12.1913, Lithuanian

II. Men ward:

Dr. Elmars SPUNDE, born 2.9.1909, Latvian

III. Men ward:

Doc.Dr.med.Viktors MUEHLENBACHS, born 11.10.1898,  
Latvian

Pharmacist:

Erich VIKSNE, born 20.6.1903, Latvian

Schweinfurt:

Doctors:

Dr. Mogenis	Chief Camp Doctor (Seligenstadt)
Dr. Usas	Schweinfurt
Dr. Tekorins	Seligenstadt
Dr. Petkuniene	Schweinfurt



Sub-Area "D" Wildflecken.

Doctors:

<u>Name</u>	<u>Position</u>	<u>Work-place</u>
1. Dr. Stasiunas, Jozef	Chief DP Med. Off.	Hospital III.
2. Dr. Pawlowski, Grigori	" Public Health Doct.	" "
3. Dr. Zakitis, Vilis	Gynecology & Maternity	Hosp. I/IV
4. Dr. Zagolowa, Helena	" " "	Hosp. I
5. Dr. Mitenieks	" " "	Hosp. I
6. Dr. Tymoczko	Surgery	Hosp. IV
7. Dr. Parups, Indrikis	"	Hosp. IV
8. Dr. Basiliewicz	Gen. medicine	Hosp. VI
9. Dr. Zagolow, Murat	" "	Hosp. VI
10. Dr. Spalvins, Janis	" "	Hosp. VI
11. Dr. Wasiljev, Andrej	Laboratorium	Hosp. II
12. Dr. Briuks, Velta	Pediatrics	Hosp. V
13. Dr. Tkacz	"	Hosp. V
14. Dr. Vaskeviciute	"	Hosp. V
15. Dr. Berge, Zenta	" & Baby Clin.	Baby Clin.
16. Dr. Wisocka, Anna	" " " "	Baby Clin.
17. Dr. Massalska, Wanda	" " " "	School
18. Dr. Musielewicz, Michal	Eyes	Hosp. II
19. Dr. Kleinberg	"	Hosp. II
20. Dr. Urbanowicz, Eugenia	ENT	Hosp. II
21. Dr. Bruvels, Margareta	Surgeon Ambulance	Hosp. II
22. Dr. Schrambek, Karl	Medicine	Hosp. II
23. Dr. Uljanow, Alexander	Skin & V.D.	Hosp. II
24. Dr. Ravadsdy, Stefan	X-ray	Hosp. III
25. Dr. Zvirbulis, Karlis	Dispensary	Hosp. III
26. Dr. Strukow, Georg		Grain Mill Camp
27. Dr. Iacis		Grain Mill Camp
28. Dr. Gruber, Heinrich	Home visits	Hospital II
29. Dr. Stegnanis, Klaudija	Dental Clinic	Hospital II
30. Dr. Zita, Rudolf	Maternity	Hospital I.

Sub-Area "B" Aschaffenburg.

Doctors:

<u>Name</u>	<u>Position</u>	
1. Dr. Konlik, Sergej	Head Doctor	Hospital
2. Dr. Dementiew, Roman	" "	"
3. Dr. Makarowicz, Iwan	" "	"
4. Dr. Syluckyj, Ksenofont	" "	"
5. Dr. Mikszewicz, Helena	" "	"
6. Dr. Krupka, Roman	" "	"
7. Chudolij, Petro	Assistant Doctor	"
8. Dr. Szeneczuk, Tamara	" "	"
9. Dr. Pysariw, Jakiw	" "	"
10. Dr. Nabolotnyj, Mychajlo	" "	"
11. Dr. Bylow, Labomir	" "	"
12. Dr. Szmidt, Reszö	" "	"
13. Dr. Kinzel, Otto	" "	"
14. Dr. Hruszecka, Neonila	" "	"
15. Dr. Kütt, Michael	Dispensary Doctor	Camps
16. Dr. Kucharyczyn, Micola	" "	"
17. Dr. Lapka, Petro	" "	"
18. Dr. Dziadiw, Roman	" "	"
19. Dr. Szpikalo, Stefan	Public Health	"
20. Dr. Nahorna, Maria	" "	"
21. Dr. Daczyczyn, Iwan	" "	"
22. Dr. Kozincowa, Helena	" "	"
23. Dr. Senbaj, Isidor	TBC-Dispensary Doctor	"
24. Dr. Wallas, Lena	Mother&Child Disp.	"
25. Dr. Kannclaud, Minna	" " " "	"
26. Dr. Himma, Alfred	Camp Chief Doctor	"
27. Dr. Sinka, Robert	Camp Doctor Kleinheubach.	"
28. Dr. Kudriawcowa, Irena	Dentist	"
29. Dr. Busch, Wladimir	Camp Doctor Elsenfeld	"
30. Dr. Jakob, Leonhard.	Dentist (German)	"



W Ü R Z B U R G .

Pharmacists:

G a i l l i t i s, Gvido	- Sub-Area Pharmacist
Z v e j n i e k s, Roberts	- Central DP Camp
L e i v e r t s, Antonija	- Central DP Camp
K a l n i n s, Maija	- Northern DP Hospital
P l i e p i e n e, Olga	- Northern DP Hospital

Dentists:

M a s u l i o n i e n e, Aldona	- Northern Camp
S t e r n s, Rudolfs	- Western Camp
A u s t r i n s, Emilija	- Central Camp
T i n b o r s, Milda	- Central Camp.

L O H R .

Pharmacists:

V i k s n o, Ericks	
A l e n s, Marta	

Dentist:

R o z e n i e k s, Rita	
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A S C H A F F E N B U R G .

Pharmacists:

P i h u, Jaan	- Chief Pharm.
V a s y n e r u k, Aleksandr	- Asst.
B o g d z i e w i c z, Tatiana	

Dentists :

B u s c h, Vladimir	
K r u p s k i, Zygmunt	- Asst.

W I L D F L E C K E N .

Pharmacists:

G a i l i t i s, Elizabeth	- Chief Pharmacist
Z e n n e l s, Mirdza	- Pharmacist
W y s o c k i, Viktor	- Pharmacist
V i a s s o, Pablo	- Pharmacist
G a i l i t i s, Lilija	- Pharmacist
A l b r e c h t s, Emilija	- Pharmacist
Z v i r g z d i n s, Tatjana	- Pharmacist

Dentist:

S t e g m a n i s, Klaudija	
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Bad Brückenau, 10th April, 1947.

AREA CIRCULAR No.8

SUBJECT : Organization of Medical Service  
in Area Team 1049.

PURPOSE :

The purpose of this circular is to outline the duty of UNRRA medical personnel who will supervise and act in advisory capacity to the DP medical service in the Area created on basis that DP medical service could run effectively in case of further shortage of UNRRA medical personnel.

EFFECTIVE DATE:

The provisions of this circular become effective with the date of 20th April, 1947.

FUNCTIONS AND RESPONSIBILITIES OF UNRRA MEDICAL PERSONNEL

These few remarks on the functions and duty of UNRRA medical personnel and DP medical personnel are only an indication of the large responsibility which we are facing in assuring adequate medical care to nearly 30.000 DPs. However, this circular may serve as a guide in outlining briefly our responsibility, which we can discharge satisfactorily only if it will be based on full co-operation of UNRRA Medical Officers and UNRRA Nurses from one side and DP medical personnel from the other side.

This circular is subject to change depending on later developments and changes.

STANISLAUS B. MILUS  
Area Team Director.

Prepared by:

Area Medical Department.

DISTRIBUTION "A"



UNRRA MEDICAL SERVICE.

Area Medical Officer and Area Nurse.

Duties and functions see Area Circular No.4,  
page 3.

I. Sub-Area Medical Officers.

(Reports to Area Medical Officer and Sub-Area  
Executive Officers.)

A. Supervises the medical program throughout  
Sub-Area and directs the activity of UNRRA nursing service  
in the field.

B. Will establish a medical administrative staff  
in Sub-Area for the purpose of:

1. Medical Reporting.
2. Administration of the Hospitals.
3. Medical supervision of the Camps.
4. Administration of local Pharmacies.

C. In co-operation with Area Medical Officer  
and the concerned Executive Officer improves the medical care  
in the hospitals and takes the necessary steps to improve  
the public health program in the camps.

D. Acts in the capacity of consultant to the DP  
doctors in implementing new methods of treatment  
(sulfurimides, penicillin, resuscitation, anaesthetics).

E. Keeps an inventory of non-expendable and  
expendable items of medical supply in the Sub-Area and  
prepares necessary medical requisitions for the Sub-Area  
which have to be submitted to the Area Medical Officer  
for approval at a certain date of the month.

F. Maintains up-to-date narcotic and biological  
items' files (penicillin, insulin, etc.) and supervises  
strictly their distribution.

G. Trains DP medical service in discharging their  
functions and duties on different appointments in Sub-Area.



II. Area Children's Specialist.

(Reports to Area Medical Officer).

A. Is in charge of public Health and medical care of all children in the Area.

B. Will supervise work of all DP physicians in the Area and sees that all necessary records concerning children's health will be kept up-to-date.

C. Will set up and organize well babies' clinics in four Sub-Areas and co-ordinates work of all DP pediatricians assuring uniformity.

D. Recommends and carries out approved methods of improving care of children in the Area.

E. Is directly in charge of children's and maternity Hospital at Wildflecken Sub-Area.

III. UNRRA Sub-Area Chief Nurse.

A. She is to function as a deputy to Area Nurse in collecting Sub-Area Nurses' Monthly narrative reports; for transferring orders to her Sub-Area Nurses, UNRRA.

B. She acts as a co-worker with her Sub-Area Nurses in cases of emergency.

C. She functions as an advisor not as supervisor.

D. She is responsible for informing and notifying Area Nurse of any emergency nursing problem arising in her Sub-Area.

E. She is responsible to her Sub-Area Medical Officer, UNRRA, and Area Nurse, UNRRA.

F. She acts as a deputy to the UNRRA Sub-Area Medical Officer in his absence.

G. She is directly responsible for sanitation, immunization and Public Health Phases of the camp program.



H. Selects and recommends DP Nursing personnel for appointments within her Sub-Area.

IV. UNRRA Sub-Area Nurse.

A. She acts as a deputy to Area Nurse and Chief Sub-Area Nurse.

B. She is responsible to Area Nurse, Sub-Area Medical Officer and Chief Sub-Area Nurse.

C. She functions as the camp UNRRA Nurse-supervisor in hospital administration and as a consultant to DP medical staff in nursing problems.

D. She is responsible for establishing a DP nursing staff for adequate nursing care in the hospitals.

E. She is responsible for establishing a DP nursing staff for the Public Health Phases<sup>§</sup> in the camps:

§ Public Health Phases:

Well-baby clinic  
Camp sanitation and records  
Immunizations and records  
Home visiting program  
Communicable disease contact follow-up  
Pre-natal clinics  
Post-natal clinics  
School health  
Surveys

F. She is to act in an advisory capacity to the camp Public Health Program.

G. She is responsible for accurate figures and special reports due. Nurses' Monthly Narrative should be written 20 to 20 of each month.

H. She is responsible for informing and notifying Chief Sub-Area Nurse, Sub-Area Medical Officer of emergency problems.

DP MEDICAL SERVICE.

I. Sub-Area DP Doctor.

- A. Is appointed by Area Medical Officer on recommendation of UNRRA Sub-Area Medical Officer and approved by Area Team Director.
- B. Serves as a deputy to the Sub-Area Medical Officer in the overall medical program in Sub-Area according to UNRRA instructions.
- C. Is responsible for the DP administration of all medical establishments in Sub-Area.
- D. Selects and recommends DP medical personnel for appointments within his Sub-Area.
- E. Replaces the Sub-Area Medical Officer in his absence and supervises the activities of DP medical personnel in Sub-Area.
- F. Makes such reports as specified by UNRRA Sub-Area Medical Officer and submits them to Area Medical Officer.

II . Area DP Dentist.

Area DP dentist is appointed by Area Medical Officer and approved by Area Director.

- A. Supervises all dental clinics in the Sub-Area and will establish new dental clinics where it seems to be necessary after receiving the instructions from Area Medical Officer.
- B. Supervises the requirements of dental supplies and distributes dental supplies through the Area accordingly.
- C. Supervises a dental inventory through the Area.



III. Chief Hospital Doctor.

Appointed by UNRRA Sub-Area Medical Officer and recommended by DP Sub-Area Doctor.

A. Supervises the activities of all DP personnel in the hospital and is in charge of hospital administration.

B. Is responsible for the function of the hospital departments.

C. Supervises the implementation of UNRRA directives and instructions in administration of the hospital and treatment of the patients.

D. Will prepare and submit for approval to Sub-Area UNRRA Medical Officer the allocation list of DPs to be paid on the Burgermaster's payroll based on needs of the Hospital.

IV. Chief Camp Doctor.

Is appointed by UNRRA Sub-Area Medical Officer and is recommended by DP Sub-Area Doctor.

A. He is responsible for the implementation of all UNRRA instructions concerning Public Health and medical care in the camp.

B. Will select and train DP medical personnel to assure efficient medical care of the camp population and takes necessary steps to improve preventive medicine and sanitation in the camp.

C. Will prepare and submit for the approval to Sub-Area Medical Officer the list of allocations of DPs to be paid on Burgermaster's payroll, based on medical needs in the different camps.

D. Supervises the medical care of the child and co-operates in this matter with DP Sub-Area Pediatrician selected by UNRRA Sub-Area Children's Specialist.

V. Sub-Area DP Pediatrician.

Is appointed by UNRRA Area Children's Specialist and approved by Sub-Area Medical Officer.

A. Is in charge of well-baby clinics in the camp.

B. Supervises feeding stations in the camp.

C. Supervises pediatric and maternity departments in the Hospital.

D. Acts as a consultant for the school physician.

E. Keeps children's records up-to-date.

F. Co-operates with UNRRA nursing staff to assure 100% immunization among the children. Plans of immunization will be provided by Area Children's Specialist.

VI. Sub-Area Chief Pharmacist.

Is appointed by UNRRA Sub-Area Medical Officer.

A. Is in charge of Sub-Area local pharmacies and supervises the duties of all employees in the pharmacy.

B. Is responsible for preparing the requisitions for the medical supplies and submit these requisitions for the approval to the Sub-Area Medical Officer at the time required.



C. Is in charge of all medical inventory (non-expendable and expendable) in Sub-Area and keeps the filing according to UNRRA instructions.

D. Supervises the preparations of medicine and takes responsibility for all the medicine issued from the pharmacy.

E. Is authorized to sign all tally-in which is delivered from Medical Zone Warehouses.

F. Works under direct supervision of UNRRA Sub-Area Medical Officer in distributing narcotics to the medical installations or individuals and keeps a strict record.

G. Processes and requisitions medical supplies and estimates future requirements.

#### VII. Chief DP Hospital Nurse.

A. She is responsible to Sub-Area Nurse and Sub-Area DP Doctor.

B. She is responsible for DP Nursing care of patients.

C. She is responsible for nursing technique used in her hospital under supervision of UNRRA Sub-Area Nurse.

D. She is responsible for the sanitation of the hospital-wards and building.

E. She is responsible for nursing duty hours.

F. She is responsible for submitting requisitions or plans for Sub-Area Nurse's approval for nursing supplies and types of improvements.

G. She is responsible for nursing records and charts.

H. She is responsible for each hospital floor or unit to have a Doctor's Order Book whereby the ordering - physician will write his orders for his patients.

(Written orders alleviate mistakes and misunderstandings).

VIII. Sub-Area DP Public Health Nurse.

A. She is responsible to Sub-Area UNRRA Nurse and Sub-Area DP Doctor.

B. She is responsible for the functioning of a Public Health Program in her camp.

C. A Camp Public Health Program should consist of:

a. Camp sanitation

1. Monthly water samples to laboratory
2. Daily kitchen inspections of food stuff, kitchen equipment, cleanliness and storage.
3. Daily inspections of latrines.  
Proper use of chlorine or lysol solutions.
4. Proper waste disposal such as garbage, etc.
5. General camp grounds.

b. Well-baby clinics

1. Adequate personnel
2. Full program<sup>§</sup>
3. Adequate records
4. Accurate reports.

(<sup>§</sup>See Area Pediatrician Orders. Dr. Le Goff)

c. Prenatal - Postnatal Clinic

1. Adequate personnel
2. Full program
3. Adequate records
4. Accurate reports.

d. Immunization Program

1. Adequate personnel
2. Full program
3. Adequate records
4. Accurate reporting



- e. Home visiting Program
  - 1. Infant visits
  - 2. Communicable disease follow-up
    - 1) Adequate personnel
    - 2) Full program
    - 3) Adequate records
    - 4) Accurate reporting
- f. School Health Program
  - 1. Daily inspections
  - 2. Weight and measures
  - 3. Dental care
  - 4. Home visits on absentees
  - 5. Health teaching
  - 6. Adequate records
  - 7. Accurate reporting
- g. Medical DP Newspaper Notices
  - 1. Medical - Nursing Reporter
  - 2. Subject: Health items.

Area Team 1049  
Nursing Section

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(((((§))))))

	Wildflecken	Aschaffenburg	Würzburg	Schweinfurt
No. of pat. in Hospital Class 1	291	216	76	0
Class 3	0	0	0	0
Class 4	0	0	0	0
No. of out pat.	599	1083	1127	60
No. of Children				
0-1	835	389	71	30
1-5	939	687	369	66
5-14	742	475	591	80
No. of Lackt. Women	427	354	66	29
No. of Preg. Women	301	168	41	8
No. of Births	21	10	3	0
No. of Diseases				
Inf/TB	5/0	5/2	2/0	0/0
VD	0	0	0	0
No. of Deaths	1	0	0	0

SUBJECT : Organization and Delegation of Responsibilities  
of Area Team 1049.

6. Area Nurse (Reports to Area Medical Officer)

- a. Supervises the nursing program in the area in conformity with the program of the Area Medical Department;
- b. Supervises UNRRA, DP, and other nursing personnel, trains and places qualified DP personnel wherever possible lieu of non-DPs.
- c. Collects, consolidates and submits such reports as are required.
- d. Recommends to the Area Medical Officer methods and changes for the improvement of the nursing program;
- e. Carries out other assigned medical duties as designated by the Area Medical Officer.



INTER OFFICE MAIL.

Function of Area Nurse.

Function of Sub-Area Chief Nurse.

Miss Cannon:

Sub-Area A-B-C-  
Responsibilities to Area Nurse/Sub-Area  
Medical Officer.

1. Supervision of the Northern Caserne Hospital
  - a) Nursing care of patients
  - b) Sanitation of Hospital
2. Supervision of the Würzburg Caserne,  
Camp Schweinfurt
  - a) Sanitation of Camp
  - b) Immunization and Records
  - c) Public Health Phases such as:  
Well Baby Clinic, Prenatal, TBC Clinic,  
VD Clinic, Dental School Health etc.  
Home Visits Service, Special Classes.
3. Accurate figures and Reports
4. Establish and complete a DP Nursing Staff.

Miss Bilderbeek:

(UNRRA Nurse) Lohr  
Responsibilities to Area Nurse/Chief  
Sub-Area Nurse

1. Nursing Service in TBC Sanatorium
  - a) Special Classes in TBC Hospital. Technique.
  - b) Sanitation
  - c) Establish DP Nursing Staff as Key  
Personnel in Hospital.
  - e) Medical Records, Nursing Reporting

Miss Lammertine:

UNRRA Nurse  
Responsibilities to Area Nurse and Chief  
Sub-Area Nurse.

1. Supervision of Aschaffenburg Hospital
  - a) Nursing care of patients
  - b) Sanitation of Hospital
2. Supervision of Aschaffenburg 7 Camps,  
Dispensaries and Infirmaryes.
  - a) Sanitation of Camp
  - b) Immunization and Records
  - c) Public Health Phases such as:  
Well Baby Clinic, Prenatal, TBC Clinics,  
VD Clinic, Dental, School Health, Home  
Visit service etc. Special Classes



Lt. Hoover:

Sub-Area D

Responsibilities to Area Nurse/Sub-Area Medical Officer.

1. Supervision of Public Health Phases such as: Well Baby Clinic, School Health, Kitchen and Public Bath House Inspection Convalescent Home (A-12), Home Visit Program, Special Surveys and Program.
  - a) Sanitation of Camp.
  - b) Immunization and Records.
  - c) Special Classes and Instructions.
2. Submitting accurate figures and reports.
3. Establish and complete DP Nursing Staff.

Miss Habets:

Responsibilities to Area Nurse/Chief Sub-Area Nurse.

1. Supervision of Children's Hospital, TBC Clinic, Grain Mill Infirmary, Surgical Hospital.
  - a) Nursing care of patients.
  - b) Sanitation of Hospitals.
  - c) Establish DP Nursing Staff.
  - d) Act as a consultant on Hospital management and Nursing technique.
2. Submitting accurate figures and reports.

Miss Defenin:

Responsibilities to Area Nurse/Chief Sub-Area Nurse.

1. Supervision of Poly Clinic, Hospital Maternity and General Medical - Isolation Hospital.
  - a) Nursing care of patients.
  - b) Sanitation of Hospital.
  - c) Establish and complete DP Nursing Staff.
  - d) Act as a consultant on Hospital management and Nursing technique.
2. Submit accurate reports and figures.

For the Director.

Lt. H.N. BUZAN,  
Area Nurse, Team 1049.



Area Nursing Office :

Area Nurse Team 1049	Lt. Helen N. Buzan
Medical/Nursing Secretary	Ausma Vulfs
DP Area Nurse Assistant	Zigrida Belevskis
Interpreter/typist	Ursel, Wladislav
Typist	Arija Skalders

Sub-Area Nurses, UNRRA TEAM 1049.

Sub-Area "A" Wurzburg	Miss Margaret Cannon
	Miss Sonja Bilderbeek
Sub-Area "B" Aschaffenburg	Miss Maria Lammertin
Sub-Area "D" Wildflecken	Lt. Frances Hoover
	Miss Lou Habets
	Miss Jeanne Defenin

SUB-AREA "A" WÜRZBURG.

Chief DP Hospital Doctor ..... Dr. LIEPINS Janis  
Chief DP Hospital Nurse ..... SAULITIS Emma  
Polyclinic Doctor ..... Dr. SINATE Mercedes  
Polyclinic Nurse ..... BERGMANIS Valerija  
Head Doctor Surgical Unit ..... Dr. METRA Klavs  
Head Nurse Surgical Unit ..... MISINS Marta  
Total No of graduate nurses in surgical unit.. MISINS Marta  
Total No of nurse-aides in surgical unit ..... KABULIS Aina  
VAINICKA Ramona  
SILEIKYTE Valentina  
JIZICKIENE Jenny  
UZANE Gundega  
RINDINIENE Elzbete  
OZOLS Zenta  
Head Doctor Medical Unit ..... Dr. PETUKAUSKA Juosef  
Head Nurse Medical Unit ..... ZIRNIS Ruta  
MILVIDAITE Marija  
Total No of graduate nurses in medical unit.... ZIRNIS Ruta  
MILVIDAITE Marija  
Total No of nurse-aides in medical unit ..... SIKIA Anna  
LUKAS Hildegarde  
KIBELKSTIENE Gertrud  
PETERSONS Eigenija  
Head Doctor in Pediatric Unit ..... Dr. METRA Eizenija  
Head Nurse in Pediatric Unit ..... SARKAITE Izolde  
Total No of graduate nurses in Pediatric Unit SARKAITE Izolde  
Total No of nurse-aides in Pediatric Unit ... ZALITE Aina  
HOLCMANIS Lidija  
BITAINIS Arija  
VITOLS Irene  
Head Doctor in Maternity ..... Dr. JURGILAS Jonas  
Head Nurse in Maternity ..... -  
Total No of graduate nurses in maternity unit -  
Total No of mid-wife in maternity unit ..... RUDZITE Emma  
KLIMAITIENE Marija  
Total No of nurse-aides in maternity unit..... TERAUDS Anastasija  
POSKUTE Marija  
Chief DP Public Health Doctor ..... Dr. SMITS Anastasija



Chief DP Public Health Nurse ..... DABITIS Elizabete

Well-Baby Nurse }  
Pre-Pstnatal Nurse } SPALVINS Milda ..... Dr. METRA Eizenija

Immunization Clinic nurse ... nurse on duty doctor ....  
doctor on duty ....

School health nurse ..... doctor DR. ASSARS Anna

Home visit nurses ..... ZEILE Marija  
LEKELIENE Nadina  
KRIAUNAITIENE Zofija  
ABOLINS Ludmilla  
BUSEVICS Alma  
GIPSLIS Alma  
MUSTS Anna  
PETRANIS Marija  
ALKSNIS Austras  
LEINIETIS Amanda

Sanitary Inspectors ..... BAGULIS Petras

NUMBER of Dentist ..... AUSTRINS Emilija  
TIMBORS Milda  
MASIULIONIENE Aldona

Number of Pharmacist ..... GAILITIS Gvido  
ZVEJNIEKS Roberts  
KALNINA Maija  
PLEPIENE Olga



Chief DP Hospital Doctor .....	SILECKI Ksenofont
Chief DP Hospital Nurse .....	LUBKOVSKA Renata
Polyclinic Doctors .....	Camp 255 - .... KÜTT Michael
" .....	" 256 - .... KUCHARYSZYN Mycola
" .....	" 257 - .... DZIADIW Roman
" .....	" 258 - .... LAPKA Peter
" .....	" 264 - .... DEMENTJEW Roman
Polyclinic Nurses .....	" 255 - .... ZIBUL Nina
" .....	" 256 - .... BAUDOIN Irena
" .....	" 257 - .... CZERNIAK Kateryna
" .....	" 258 - .... BRONECKA Zinaida
" .....	" 264 - .... ZOBNIW Anna
Head Doctor Surgical Unit .....	MAKAREWICZ Iwan
Head Nurse Surgical Unit .....	LUSZPINSKA Jaroslawa
Total number of graduate nurses in surgical unit .....	1.
Total number of nurses-aides in surgical unit .....	9.
Head Doctor Medical Unit .....	KRUPKA Roman
Head Nurse Medical Unit .....	JUREWICZ Bozena
Total number of graduate nurses in medical unit .....	1.
Total number of nurse-aides in medical unit .....	9.
Head Doctor in Pediatric Unit .....	MIKSZEWICZ Helena
Head Nurse in Pediatric Unit .....	BINASIK Helena
Total number of graduate nurses in Pediatric Unit .....	1.
Total number of nurse-aides in Pediatric Unit .....	5.
Head Doctor in Maternity .....	BYLIW Lubomir
Head Nurse in Maternity Unit .....	PLOTNIKOWA Ludmila
Total number of graduate nurses in maternity unit.....	2.
Total number of mid-wives in maternity unit.....	4.
Total number of nurse-aides in maternity unit .....	5.
Chief DP Public Health Doctor .....	SKRASTINS
Chief DP Public Health Nurse .....	NARVET Erika
Well-Baby Doctors .....	Camp 264 - .... MIKSZEWICZ Helena
" .....	" 255 & 258 WALLAS Lena
" .....	" 256 & 257 KANNEIAUD Minna



Well-Baby Nurses ..... Camp 264 - ..... ZOBNIW Anna  
 " 255 & 258 TAHRYN Tatiana  
 " 256 & 257 MROWKA Dorota

Pre-Postnatal Clinic Doctors - same as Well-Baby Doctors

Pre-Postnatal Clinic Nurses - same as Well-Baby Nurses

Immunization Clinic Doctor - same as Well-Baby Doctors

Immunization Clinic Nurses - same as Well-Baby Nurses

School Health Doctor & Nurse - same as Well-Baby Doct. & Nurse

Home visit nurses ..... Camp 255 - ..... BOJCZUK Nadia  
 " 256 - ..... JAROWENKO Olga  
 " 257 - ..... ONUSZKIEWICZ Emilia  
 " 258 - ..... GIZEJOWSKA Helena  
 " 264 - ..... WORON Larissa

Sanitary Inspectors-Doctors: Camp 255 - ..... KOZINZEWA Helena  
 " 256 - ..... SPIKALO Stefan  
 " 257 - ..... NAHORNA Maria  
 " 264 - ..... DASZYSZYN Iwan  
 " 258 - ..... none at present

Number of Dentists ..... 1 (German)

Number Pharmacists ..... 2.

Nursing Secretary ..... JUGOWICZ Jenny.

SUB-AREA "C" SELIGENSTADT.

Nursing Personnel.

Head Nurse ..... KARKLIENE Jolanta

Graduate Nurses ..... 4 - Lithuanian.

Nurses-aides ..... 13 - Lithuanian.

Nurse at the dentist ... 1.

Dispensary Nurse ..... 1.

Nurse (Mid-wife) at the childrens' dispensary and  
Well-Baby Clinic ..... 1.

Nurses-aides at the camp sanitation .... 2.

Satisfactory wooden barrack.

March 28, 1947.

SUB-AREA "C" SCHWEINFURT.

Nursing Personnel.

Head Nurse ..... BALKUNAITE Marija

Graduate Nurses ..... 7 - Lithuanian

Nurse-aides ..... 1 - Lithuanian

Good Adequency

Bed-capacity - 10.

March 28, 1947.



SUB-AREA "D" WILDFLECKEN.

Chief DP Hospital Doctor ..... Dr. STASIUNAS Jozef  
 Chief DP Hospital Nurse ..... MAASIK Aino, Nurse  
 Polyclinic Doctor ..... Dr. PAWLOWSKI Grigori  
 Polyclinic Nurse ..... CZERMANSKA Sofia, Nurse  
 Head Doctor Surgical Unit ..... Dr. TYMOCZKO Jozef  
 Head Nurse Surgical Unit ..... URITE Tamara, Nurse-aid  
 Total number of graduate nurses in Surgical Unit ..... 1.  
 Total number of nurse-aides in Surgical Unit ..... 13.  
 Head Doctor Medical Unit ..... Dr. BASILEWICZ  
 Head Nurse Medical Unit ..... MILLER Jadviga, Nurse  
 Total number of graduate nurses in Medical Unit ..... 1.  
 Total number of nurses-aides in Medical Unit ..... 17.  
 Head Doctor in Pediatric Unit ..... Dr. BRIUKS Velta  
 Head Nurse in Pediatric Unit ..... BAIER Wally (German Nurse-aid)  
 Total number of graduate nurses in Pediatric Unit ..... 4 (Ger.)  
 Total number of nurse-aides in Pediatric Unit ..... 10.  
 Head Doctor in Maternity Unit ..... Dr. ZAKITIS Vilis  
 Head Nurse in Maternity Unit ..... JURANS Leonija (Nurse-Mid-Wife)  
 Total number of graduate nurses in Maternity Unit ..... 4.  
 Total number of mid-wives in Maternity Unit ..... 3.  
 Total number of mid-wife-helpers in Maternity Unit ..... 3.  
 Total number of nurse-aides in Maternity Unit ..... 16.  
 Chief DP Public Health Doctor ..... Dr. PAWLOWSKI Grigori  
 Chief DP Public Health Nurse ..... CZERMANSKA Zofia, Nurse  
 Well-Baby Nurse ..... KOZANOVSKI Charlotte  
 Well-Baby Doctor ..... Dr. BERGS Zenta  
 Pre-Postnatal Nurse-aid ..... ODDOJ Jadviga  
 Postnatal Nurse A-12 ..... BIERILO Dominka  
 Pre-Postnatal Doctor ..... Dr. ZAGOLOWA Helena  
 Immunization Clinic Nurse ..... 1.  
 School Health Nurse ..... KUBIAK Elizabeth, Nurse-aid

SUB-AREA "D" WILMINGTON

Home Visit Nurse-aides .....	5.
Sanitary Chief .....	JEDWABSKI Sylwester
Sanitary Inspectors .....	8.
Number of Dentists .....	2.
Number of Pharmacist .....	3.
Medical Record Clerk-Chief .....	MARTINI Frances
Medical Record Clerks .....	2.
Total number of nurse-aides in Surgical Unit .....	
Head Doctor Medical Unit .....	
Head Nurse Medical Unit .....	
Total number of graduate nurses in Medical Unit .....	
Total number of nurse-aides in Medical Unit .....	
Head Doctor in Pediatric Unit .....	
Head Nurse in Pediatric Unit .....	
Total number of graduate nurses in Pediatric Unit .....	
Total number of nurse-aides in Pediatric Unit .....	
Head Doctor in Maternity Unit .....	
Head Nurse in Maternity Unit .....	
Total number of graduate nurses in Maternity Unit .....	
Total number of mid-wives in Maternity Unit .....	
Total number of mid-wife-helpers in Maternity Unit .....	
Total number of nurse-aides in Maternity Unit .....	
Chief Dr Public Health Doctor .....	
Chief Dr Public Health Nurse .....	
Well-Baby Nurse .....	
Well-Baby Doctor .....	
Pre-Postnatal Nurse-aide .....	
Postnatal Nurse A-12 .....	
Pre-Postnatal Doctor .....	
Immunization Clinic Nurse .....	
School Health Nurse .....	



Area Train 1049  
TBC Sanatorium  
214 Beds

ENRRA Nurse  
S. Bilderback

Chief D.P. Hospital  
Nurse Sarg

17 German Nurses

7 German Nurse-  
Aides

1 Graduate P.P.  
Nurse

2 P.P. Nurse-  
Aides

WURZBURG  
Northern CASERN R.P.  
Hospital

ENRRA Nurse  
M. Cannon

Chief D.P. Hosp.  
Nurse Saulitis

Surgical  
Unit

7 Nurses

33 Beds

Dispensary  
Unit

6 Nurses

Medical  
Unit

5 Nurses

28 Beds

Maternity  
Unit

3 midwives  
1 nurse

11 Beds

Infection  
Unit

6 Nurses

92 Beds

Pediatric  
Unit

6 Nurses

16 Beds

Public Health  
& Unit

School Health

Well-Baby Clinic

Visiting Nurses

UNRRA Team 1049  
Sub Area B Aschaffenburg

DP Regional Hospital  
Aschaffenburg

UNRRA Chief Nurse  
Miss Marie Hammertin

Maternity	Surg. + Gyn.	Pediatric	Gen. Med.	VP + Derm.	Pharmacy	Laboratory	Dental	Mental Diseases
Beds 50	Beds 65	Beds 40	Beds 95	Beds 40	Chief Pitka Joan	Chief Dementjewa Galina	Chief Dr. Jakob Leonhard	Chief Dr. Hrusicka Neonila
Head Nurse Plotnikowa Ludmila	Head Nurse Luszpinska Jaroslawa	Head Nurse Pinasik Helena	Head Nurse Jurewicz Bozena	Head Nurse (pink) Tiskus Algidase	Personnel 4	Personnel 5	Personnel 2	Personnel
Personnel 19	Personnel 19	Personnel 16	Personnel 21	Personnel 6				



Area Team 1049  
Sub-Area D.  
Nursing Service

Lt. F. M. Hoover

Defenin  
UNRRA

Habets  
UNRRA

Chief D.P. Hospital  
Nurse Maazik

Chief D.P. Public  
Health Nurse Czermanika

Bott  
Head Nurse  
Hosp. I

Head Nurse  
Hosp. II

Upite  
Head Nurse  
Hosp. III

Well-Poly  
Clinic

A-12  
Maternity  
Home

Immunization  
Clinic

Baire  
Head Nurse  
Hosp. V

Müller  
Head Nurse  
Hosp. VI

SANITATION

Chief Sanitary  
Inspector  
J. B. W. B. S. K.

Sanit.  
Bytown  
R.

Sanit.  
Annapolis  
Maryland

Sanit.  
Dobro  
wolski

Sanit.  
Jare  
bic

Sanit.  
Goswami

Sanit.  
Kojan

Sanit.  
Pin  
hwa  
shi

Sanit.  
Czaran

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B R I E F   H I S T O R Y  
of  
NORTHERN CASERNE HOSPITAL and SUB-AREA.

SUB-AREA A-C.

April, 1947.



SUB-AREA "A" WÜRZBURG.

1st May, 1947.

On the 14th October 1945 I set sail in a jeep from PASSING to SELIGENSTADT. At Seligenstadt on the A.M. of 15th I found a camp consisting of barracks only, and approx. 1,000 Lithuanians. This camp was then in its infancy so with the help of Dr. MOGENIS (who is now a class II UNRRA employee) and Mrs. KARKLIENE Chief Nurse the midwife and GIEDRAITYTE Maria who are all there still, we set up the infirmary (20 beds), a Dentists clinic, a Well baby, and sick children's clinic.

The infirmary catered for minor ailments and shortcases and at this time we delivered our babies there. A DDT room was built, health visiting was started. The immunization program was completed and the DP 2 cards finally marked.

The latrines in this camp have always been a worry. Report after report has gone in about the latrines, and water supply, and new latrines have been commenced but never completed.

The grounds which in the beginning were just one mass of mud have been attended too and are now covered with gravel.

Two shower rooms are built and now function satisfactorily.

And several times this camp was about to be closed on account of water etc., but it is still, going strong and though it is still rather primitive the DPs are on the whole well and happy there.

On the 2nd January 1946 I was transferred to CENTRAL Camp. I then spent 2 days each week in Seligenstadt.

CENTRAL is a Latvian camp of then about 3,000 DPs and WESTERN had approx. 600 persons also Latvians. At Central Camp when I arrived on the scene there was quite a lot of whooping cough, and the parents did not wish to send the children to hospital, but at last we convinced them that this was essential on account of the crowded conditions in camp and all went well later.

The immunizations were in progress but not completed and the records needed attention. A Diet kitchen was set up in the administrative building for Diabetic's (3) gastric cases etc. approx. 45 in all.

Later a children's kitchen was opened for the children who were underweight, and required extra nourishment. Cod liver oil was provided (when we had it).



These children were weighed once weekly and changed when they had gained weight. Lunch and supper was provided, the other meals they eat at home.

When the weather permitted we put the children lying down in the open for 2 hours after lunch.

We were fortunate in having plenty of Medical personnel in Central Camp. The clinics held at Central were as follows:

Prenatal	twice weekly
Post natal	" "
Dental	daily
T.B.	twice weekly
Eye	" "
Women's diseases	Three times weekly
Neurology	twice weekly
Ear, Nose and Throat	" "
Skin	three times weekly
V.D.	" " "
Psycheatry	once weekly

In May I was given SCHWEINFURT Camp to supervise this I combined with my visits to Seligenstadt. This is a Lithuanian Camp and runs smoothly. The patients come to Northern Hospital or in case of emergency to the German hospital.

In October 1946 I became Area Nurse and then inherited ASCHAFFENBURG, KLEINHEUBACH and EISENFELD. Also LOHR Hospital.

NORTHERN CAMP HOSPITAL. As Dr. Lucciano TORO, Ecuadorian (who was here since November 1945) and Miss Ede MEULEMEESTER, Dutch have now passed on, I will try to do justice to the hospital. This Hospital (180 beds) supplies Surgical, Medical, Maternity, E.N.T. and Contagious disease treatment to the following persons:

Central Camp	2924
Northern Camp	1597
Western Camp	568
Schweinfurt	761
Seligenstadt	1131

This hospital supplies medical care for 450 Polish guards from Würzburg and Kitzingen, and this number is to be increased by 100 in the near future.

In other words a total of about 9.000 DPs must be medically cared for in this Sub-Area.

The following is a brief list of Surgical cases etc. treated since January 1946 to April 1947:

Apendicitis	59
Incisio	113
Herniotomia	31
Bone operations	34
Tumor	32
Variceectomy	16
Removal of foreign bodies	12
Laporatomia	3
Gyn. operations	8



- 60 -

Plastic operations	10
Various	75

Gyn Section from 9.1.47 to date 121 deliveries and 85 gyn. patients.

E.N.T. Section from 29.X.45 118 operations

On 20th March 1947 our Area 1049, was amalgamated with Area Team 1050, and from that a reorganization has been taken place.

A lot of medical personnel have been taken from this Sub-Area to replace German Staff in Wildflecken.

I think the DP Medical personnel should function satisfactorily in their various posts after a short time.

I want to thank the Team Members of the Team 198, and 304, and not forgetting a few of the Members of 169 who have helped to make my stay here in Würzburg very pleasant.

The mixture of Nationalities was one of the interesting features. I am very grateful to the Displaced Persons I have worked with and who have been very cooperative at all times. I hope they will soon all get settled where they can begin life a new.

My experiences with U.N.R.R.A. is something I would not have missed for anything.

M.M.K.CANNON,  
Sub-Area Nurse.



## BRIEF HISTORY

of

### LOHR UNRRA SANATORIUM.

Lohr Hospital was taken over from the Germans by the American Army in July 1945, who established a General Hospital there. In Febr. 1946 The American Army turned it over to UNRRA, who established a T.B.C. Sanatorium in it.

Since that time, patients of various nationalities have been here for treatment f.i.: Balts, Poles, Ukranians, Russians, Greeks, Turks, Jews, and even one Chinese DP, who is still here. The major groups of patients at the moment are Balts and Poles.

The chief-doctor of Lohr Sanatorium is a Latvian lung-specialist, assisted by five DP Doctors. The chief nurse is Estonian, we have one assistant-nurse who is Latvian, but the rest of the nursing-staff are Germans, most of them religious nuns.

Our Sanatorium has a large operation room; pneumo-thorax, caustic, and phrenicus are done here. If the patients need thoracoplastic or other big operations, we send them to the German Sanatorium in Rohrbach near Heidelberg.

We have our own laundry and bakery; nuns are in charge of laundry and kitchen.

For the recreation of the patients, we have often concerts, performed by DP artists from different camps. In each large room is a loudspeaker connected with the central radio, and except during rest-hours, music is broadcasted to the wards.

One of our patients, a Russian DP took the initiative to take care of the deaths. When a patient dies, he arranges the funeral and he founded a fund, where he collects money from various DP Camps, to have a monument for each grave. All the contributions are voluntary. The arrangements are almost finished, and on the 11th of May the cemetery will be opened officially.

We made arrangements to build a big laying-hall in the back-yard of the hospital and next week they start working on it.

Sonja BILDERBEEK,  
UNRRA Nurse.



SHORT STORY OF DP REGIONAL HOSPITAL

U N R R A TEAM 1049.

SUB-AREA "B" ASCHAFFENBURG.

April, 1947.



#### SUB-AREA "B" ASCHAFFENBURG.

The story of our Hospital starts in Schweinfurt, Bavaria. In May 1945 it was only a small infirmary for Italian PW with quite a small number of beds. In June a DP Camp was organized around it was Dr. P. Bétuel as Sanitation Supervisor of the Camp. About that time all Italians were sent away and the arriving physicians with Dr. Bétuel (Chief UNRRA Medical Officer) in head line took all the initiative in their hands. That time can be called the birthday of what all of you know now as DP Regional Hospital.

It is difficult and even quite impossible to relate in such a short story as this about all the enormous work, love, selfabandonment and attention that have been given to this job of creating a DP Hospital literally out of nothing.

The first physicians to share bravely their part of this big work were Doctors Komlik, Dementjew and Basilewicz, who came to Schweinfurt with their families in June 1945. In July came nurse Plotnikowa with her family and took immediately care of pregnant women, doing her best to organize some sort of Maternity Division (this Division was completed in December 1945). Dr. Dementjew, assisted by nurse Protasowa-Joost has done a big work in creating a Pediatric Division, Dr. Komlik - a General Ambulance (especially Dermatology). About the same time Dr. Makarewicz, assisted by Dr. Tymoczko and nurse Luszpinska had quite a lot of trouble in organizing his Surgical & Gynecological Division and in November 1945 the first operations took place.

Both UNRRA Chief Nurses, Miss René and Miss Heydec, have brought all their help and experience to the new Hospital.

About February 1946 some enlargements took place in the Hospital and new divisions were organized (Dental, Ophthalmology, Oto-Rhino-Laryngology).

May 22d 1946 the Hospital was moved from Schweinfurt to Aschaffenburg, Pionier-Casern, to become DP Regional Hospital for 300 beds. The job of enlargement was to be continued.

The changes began when Lt. V. Sobers came over to the Hospital as UNRRA Chief Nurse and undertook a complete reorganization of it: a big moving of Hospital wards and offices took place. All the offices were moved from the first floor to the second and came now to be on the same floor. The whole V.D. Department (that means VD ward, VD Ambulance and VD Laboratory) came also together on one floor. That was the best way for the patients and personnel. All rooms and window-frames were freshly painted with gay bright colour. A very big job was to move the Pediatric Division. This ward previously occupied two small rooms on the second floor. The Department came now into six big rooms on the first floor with plenty of sun for the children. These rooms were also newly repaired and painted.



Miss V.L. Sobers was the first to organize a full Nursing Program, to regulate the work of all the Nursing Personnel; at her request the Head Nurses have written a Manual of Duties for each nursing unit (Head Nurse, nurse, nurse-aid, ward maid, cleaning woman). She taught the Nursing personnel to bring more human interest in their work, never allowing them to forget the big work they are fulfilling for the patients. She brought new forms for daily reports for patients, weekly schedules for the personnel. Under the supervision of Miss Sobers were organized lectures for pregnant women and young mothers held by Nurse-Assistant R. Lubkowska in all DP Camps of Aschaffenburg, and a Nurse-aides Course for 12 students, who are all working now at the Hospital. It was also one of Miss Sobers' thoughts to organize a special TBC Clinic in one of our Camps. Later we have received for our Hospital an American X-ray apparatus; it is now to be put together and the electric conducting is to be brought in order so as to make it able for us to examine all DPs in our Hospital.

Miss Sobers was easy to speak to, always willing to help in any way and ready for advice, was it business or resonal matter; she was always quiet and selfcontrolled and the only cross words her Nurse - Assistant and secretary ever heard from her ( and that only when their combined efforts succeeded in driving her out of temper) were: "A couple of dumb belles".

A X-mas party has been organized by Miss Sobers with the help of UNRRA for all the Hospital personnel in 1946 with small presents for everyone and a lot of fun and her departure back to America was regretted by all the personnel.

In the person of Miss M. Lammertin who came to substitute Miss Sobers, our Hospital was lucky once more: during the short time Miss Lammertin is UNRRA Chief Nurse she has shown all her big will to make really a model of a hospital. Always on the alert, making a big job herself and requesting the same from her staff, she is to be seen all day long on all the wards, taking special care of the Pediatric Division. Miss Lammertin gives all her heart and love to babies' and children's care, creating a new big program for the children's doctors and nurses and giving a lot of her time and special attention to this big work.

It is to be hoped that Miss Lammertin will remain for quite a long time in the Hospital to give it as much of her care and personal experience as possible.

Pediatric Division. General number of patients from 15 to 25 children, mostly with Angina, Bronchitis, Bronchopneumonia, Measles. Cases of contagious illnesses are sent to the German Hospital in Aschaffenburg.

During a long period of time we had 4 orphans living in this Division. With combined aid of our UNRRA Nurses and Welfare Office 3 of them were at last transferred to a village not far from Heidelberg.



### Maternity Division.

About 7-10 births every week ( more girls than boys) .

A very simple, but excessively clean and well fit up delivery room and babies' room. A very strong discipline, no loud talking allowed (except for the babies who are allowed to yell to their heart's content - there are no regulations for them !)

### Surgery & Gynecology Division.

Chief Doctor and Head Nurse are lords and masters here. Very little talking but big work done.

A short time ago a cesarian section has been done, a very serious and complicated case with plasma infusion to save the dying woman (the child was safe). All during the hard operation the Chief Surgeon Dr. Makarswicz, assisted by other doctors and nurses, kept repeating: "Woman, you must live !" At present the young mother is happy and merry again.

### General Medicine Division.

It was a difficult job to find a good Head Nurse for this Division, because the ward is very big (80 beds and 15 reserve) and nearly always full. The Head Nurse has a hard time to get along and spares neither force nor labour to bring order into her ward.

### V.D. & Dermatology.

Most of the patients belong to the Dermatology, the lesser part to V.D. The Division is clean and maintains a strong discipline.

### Dental Care.

Daily number of patients 30-35 (children included). The Dental Care has also a technician group making bridges, false teeth etc.

Our Hospital has big possibilities being in possession of a strong and well trained medical and nursing personnel. As an example you must know about a DP father bringing his sick child from some place not far from Kassel over to us, telling us that the fame of our Hospital has reached them and they are sure that the child can be healed only here.

Finishing this very short story of our Hospital we say a hearty "Thank you" to all the UNRRA Medical and Administrative personnel for their big and generous help.

For: M. Lammertin, UNRRA Nurse  
Sub-Area "B" Aschaffenburg

By: Renate Lubkowska,  
Chief DP Hospital Nurse  
Aschaffenburg.

Aschaffenburg,  
April 29th, 1947.



BRIEF HISTORY  
of  
WILDFLECKEN HOSPITALS and SUB-AREA D.

April, 1947.



SUB-AREA "D" WILDFLECKEN.

Wildflecken camp was built in 1937-38 as an S.S. Pantzer Division Training Center. It is buried in the Rhon Mountains, very isolated and set-apart. It is built in a Fan-shape plan which covers 15 sq. miles. It is beautifully hidden in a pinewooded peak. Our nearest city is Bad-Kissingen and our supply points are Würzburg, Hanau, and Furth. Our roads are glorified cow-paths which, of course, make for beauty but poor travel.

During the winter months we had many heavy snows and now that it is July, I find I am comfortable with three US Army blankets on my bed. I can understand the name, Wildflecken - "the poor mans Switzerland," for in winter the snow is sufficient for wonderful skiing and the summer is certainly resort weather.

Wildflecken DP Camp is the largest in the American Zone. We have 81 buildings of which 70 are used for DP living-quarters and housing over 12,000 people at present. We have 11 kitchens, ten of which are used as kitchens and one as the camp canteen.

Wildflecken DP Hospitals and Division of Work among the UNRRA Nurses Nov. 1945 to April 1947.

Because of our isolation we were responsible for our own DP hospitals. Our buildings were not large enough to have one hospital building so we have six individual hospital units:

A. Hospital I Maternity 60 beds 60 cribs

Prior to July 3, 1946 this unit was both maternity and pediatrics. December 13, 1947 this unit was moved the second time to increase the bed-capacity. The moving was completed by 7:00 p.m. and we had our first delivery 7:30 p.m.

Hospital IV Surgery 43 beds 5 childrens beds

These two hospitals were under the supervision of Miss Petrie, UNRRA Nurse, Canadian, July 1945 to April 1947.

B. Hospital III Tuberculosis 64 beds

This hospital functioned from July 1945 to April 9, 1947 when it was closed and all TBC patients were moved to Amberg or Lohr.

Hospital V Childrens Hospital 67 beds

These two hospitals were under the supervision of Miss Habets, UNRRA Nurse, Belgian, July 1945 to April 1946. Miss Habets assumed the responsibility of Hospital IV April 1947.

C. Hospital VI General Medical and Contagion

109 beds with 100 Emergency-bed capacity.



This hospital was organized and set-up by Miss Jean Williams, UNRRA Nurse, Canadian, who was married Feb. 9, 1946. She resigned in March 1946 and was succeeded by Miss Braye, UNRRA Nurse, Dutch. Miss Braye had the supervision of this hospital until October 6, 1946.

#### Hospital II Polyclinic

(Approximately 2000 patients are seen per-week in the Polyclinic).

These two hospital units are under the supervision of Miss Defenin, UNRRA Nurse, Belgian. She assumed the responsibility of Hospital II, April 26, 1946; Hospital VI, October 6, 1946 and Hospital I April 1, 1947.

#### D. Nursing Office.

1. Overall supervision of all six hospital units.  
Hiring and firing of hospital personnel.
2. Public Health Phases of the Camp.  
School Health Program (Public School & Kindergarten).  
Well-Baby/Weight clinic.  
Maternity Home.  
Public Bath Houses and Kitchen Sanitation Supervision.
3. Special Programs such as: VD Survey, Mass Immunization Progr.
4. Planning and Organizing special hospital benefits such as: Central Hospital Laundry  
Central Hospital Mess  
Central Pharmacy

This part of the program was under the supervision of Lt. Helen Buzan from October 1945 to March 18, 1947 when the responsibility was assumed by Lt. Frances Hoover, USPHS.

#### Special Events in the Nursing Program - November 1945 to Present.

November 1945 we organized a mass immunization program and a system of record. We have immunized 8513 persons against typhoid and typhus, and inoculated 12,110 against smallpox. A routine immunization clinic was set up twice a week. We have given 5023 typhus and typhoid booster-doses.

We have individual records on each person, which are filed in alphabetical order in a file case made from an American Medical Supply packing-case.

December 1945 we organized and had our first well-baby clinic. We had 118 babies present. At first we had a monthly well-baby clinic but in December 1946 we began a weekly clinic.

Jan. 1946 monthly attendance	183
Feb.	300
March	205
April	208
May	708
June	753
July	900



Dec. 1946 monthly attendance	798
Jan.	1677
Feb.	2047
March	3175
April	2978

We have approximately 90 % of the total number of infants from 0-1 year attending this weekly clinic.

December 1945 we set-up a school health program; established a permanent room with a nurse-aid on duty during the school hours. A special 10:00 a.m. feeding program was established at the same time, however, in March 1946 this program was turned over to the Welfare Department.

Immunizations, monthly health screening, DDT, and dental care is given to each school child. We have over 2000 school health records.

January 1946 we re-organized the hospitals to have a better control over details. Jan. 14, 1946 we had a VD survey and examined 8781 adults over 15 years of age. The positive cases were hospitalized immediately and treated. We found 3 % positive.

February 1946 we had our first nurses-aids class. we began with 18 Polish girls over 18 yers of age. A nurse-aid of the first class is teaching the nurse-aid classes at present. There are classes taught twice a month. (Twelve students per class.) Each student spends one week in practical theory and six weeks in hospital observation and supervised practice before she is assigned to a definite hospital post.

March 1946 we established a central laundry for all hospital wash. Previously our laundry was done by each individual hospital laundresses. They scrubbed the bed-linen on rounded tables with scrub brushes. They were wading in water all day long with the problems of not enough hot water, inadequate space for drying, and the constant demands for clean linen. The central hospital laundry employs 25 persons. There are two drying rooms inside the building for rainy and damp days. Behind the building, the trees were cleared away for a drying-plot. The clothes-line posts were taken from the S.S. stables.

We have two irons to press the hospital linen, doctors and nurses gowns. We have two sewing women who do the hospital patching and repairing. For the comfort of the laundry workers, we have installed a shower bath for them to bath each day before going home.

Since the existance of the hospital units in Wildflecken, we have never submitted a laundry bill to be paid by UNRRA.

May 1946 Wildflecken received orders to move from the camp-site on May 31st. Preparatmons were made but on the 31st of May the orders were cancelled.

June/July/August/September was a period of leaves, vacations and transports.



The Grain Mill Annex was undergoing repairs and re-conditioning, for approximately 2000 persons. We were instructed our population would increase to 24,000. In July/August/September we had 4,741 persons arriving in Wildflecken. For the month of October we had 5,785. Since the weather was exceedingly cold, we hospitalized many infants, mothers, and others directly from the trains to the hospital units.

November 1946 the Area Team 1050 had the supervision of the Grain Mill Annex and the Massbach Camp. The Grain Mill had two German Nurse-aids on duty. The set-up was simple but adequate. Massbach was "Castle Camp" of 95 Jewish DPs. We had a Jewish nurse-in-charge. She had training as a midwife as well as general nursing services. She was in charge of a 5 bed infirmary and first aid room.

Because of the 16 cases of measles in Wildflecken, Nov. 20th, the well-baby clinics were discontinued. For the control of our measles cases the following procedure was carried out. The teachers and the school physician checked daily on the children in the school. Suspects were sent to the isolation unit in Hospital VI. The chief school nurse made home visits on all children absent from school. She checked each child for symptoms of measles. She averaged 40 home-visits a day. The UNRRA Nurses made 200 home-visits at the onset of the first 16 cases. In spite of the effort made for control, we had 45 cases of measles and 100 suspects hospitalized by Nov. 28th. The original cases were from a newly admitted transport.

December 13, 1946 we transferred the maternity hospital to a new building. The present bed-capacity is 60 mothers beds and 60 cribs. In the new building we have two nurseries, one large delivery room, one labor room, and an isolation two-bed unit for mothers and an isolation nursery.

January 1947 this month was a series of petty problems. Due to the Bavaria-electric shortage, we were often without current, therefore, no lights in the Hospitals. A jeep headlight and battery apparatus was constructed in the motor-pool to meet this emergency for the operating and the delivery rooms.

Because the electricity was off, there was no water supply and the laundry could not function. Therefore, certain days of the week every pail in the hospitals was filled with water for bathing, dishwashing, etc., for the "non-producing water period".

With the greatest number of patients being hospitalized during the months of January/February, these problems were extremely difficult to take with a calm and a placid attitude. The problems of transport greatly complicated the average working day when the ambulances and nurses/doctor taxi had frozen radiators, unable to climb the icy roads, or just not available.

January 1947 an extensive program of block visits were carried out by the UNRRA Nurses. They made



967 home-visits during the period Jan. 20/Feb. 20th on infants under one month of age.

January 31, 1947 a medical warehouse and supply unit was set aside to re-allocate hospital supplies as needed.

February 1947. Because the program of home visits by the UNRRA Nurses alone was an impossibility, the Welfare Department assumed the "screening-out process" of healthy babies from 1-3 years; referred only "doubtful babies" for the UNRRA Nurses for home visits. February 25, 1947 we set-up a Visiting Nurse Office. These visiting nurses assumed the UNRRA Nurse daily block visit program. The UNRRA Nurses visited only the "doubtful cases" that were referred by their visiting-nurse representative or the doctors. These four nurse-aids were instructed for one month by her UNRRA Nurse, Miss Petrie, Miss Habets, Miss Defenin and Lt. Buzan.

March 7, 1947 the Maternity Convalescent Home, A-12, was opened for new mothers. It is a nicely located building in the center of the camp. It is bright, sunny, and equiped to accommodate 30 mothers and infants.

A-12 was organized for the instruction of mothers with newborn infants. After dismissal from the maternity hospital the mother is admitted to A-12. She is requested to stay until the baby is gaining weight regularly and until the mother has gained a sense of security in infant-care.

The mother is taught general infant-care, bathing, formula making, proper care of bottles and nipples, and how to wash the diapers. All of the above instruction is given under supervision of a Polish Nurse. Mothers may have visitors from 2:00-8:00 p.m. daily, but not visitors are allowed in the mornings, for this is class and instruction period.

The first month of A-12 existance there were 32 mothers. The average stay was 6 days.

March 18, 1947 Lt. Frances Hoover was assigned to assume the responsibilities of Chief UNRRA Nurse, Wildflecken. Lt. Helen Buzan was assigned Area Nurse, Area Team 1049.

April 1947 Wildflecken nursing staff was re-organized placing DP Nurses from within the Area 1049 in the positions occupied by German Nurses. From a German Nurse staff of 54, a cut was made to 20. All key-positions were covered by a complete DP nursing staff.

General Comments. We had considerable trouble in keeping our Medical Officers. In the past two years we have had 11 UNRRA Doctors with us. Inspite of our changing medical supervision, I feel we have many accomplishments. My UNRRA Nurses deserve the greatest amount of praise, for they have worked diligently and with understanding and loyalty. They worked admirably with



967 home-visits during the period Jan 20/Feb 20 on  
infants under one month of age.

the entire UNRRA Team and secured full co-operation of both the Polish DPs and German medical/nursing staff. Their ability to improvise and their readiness to work was a great attribute to the medical/nursing department. Their ability to work in unison or independently of one another made them a unique nursing team. Since August 1945 they were able to function as both a Hospital Team as well as an Assembly Center Nursing Team for 12,000 to 17,000 DP's.

Extracts from: Nurses Monthly Narrative Reports.  
The nurses assumed the UNRRA Nurse daily visit program. 1947 we set-up a Visiting Nurse Office. These visiting nurses assumed the UNRRA Nurse daily visit program. Miss Detenla and Lt. Buzan.

For Chief Nurse, Sub-Area "D"  
Lt. Frances Hoover  
by Lt. Helen N. Buzan,  
Area Nurse,  
Area Team 1049.

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WÜRZBURG PHOTOS.



Northern Caserne Hospital



Childrens Unit



WILDFLECKEN PHOTOS.



Medical Nursing Department



Well-Baby Clinic





T A B L E O F C O N T E N T S

RESUME OF MESSING IN DP INSTALLATIONS - UNRRA AREA TEAM 1049  
UNTERFRANKEN - BAD BRÜCKENAU.

1. Survey of Area 1049 April 1st, 1947.
2. Survey of Messing Activity April-May 1947  
Area Circular No. 14.
3. (i) Area Headquarters Bad Brückenau  
(ii) Future Programme  
(iii) Feeding Budget for 1948.



Resume of Messing in DP Installations Sub-Area "A", "B", "C"  
and Sub-Area "D" - Area Team 1049.

I. Survey of Area 1049 April 1st 1947.

The opening up of the new UNRRA Area Team 1049 Bad Brückenau at the beginning of April, 1947, presented at first a formidable sight of 27.000 Displaced Persons to be fed and a cut of UNRRA Messing Officers from 5 to 2. However, on second appearance, after a tour of the Area it was found to be certainly not as bad as was suspected. We had heard tales of 50 infants dying per month in Sub-Area Wildflecken and naturally turned a suspicious eye toward the Messing Department but found in actual fact that in many ways they had advanced more than other camps in the Area. For instance under the supervision of the Medical Department they had arranged a Milk Kitchen to ensure that the boiling of milk for children was performed correctly. A school feeding programme to give school children a little extra at breaktime and canteens where they issued chocolate and fruit juice. The Medical Department had arranged hygienic dishwashing facilities in all hospitals and a special center where mothers could be taught to feed their infants correctly. We found that without the hospitals there were eleven caserne type and well equipped kitchens in Wildflecken and distribution points for supplementary rations for workers, children, Special Care etc. One UNRRA Class I Admin. Assist. acting as Messing Officer arranged all the food distribution to the different categories of DPs and one UNRRA Class I Messing Officer arranged the General Messing.

The other three Sub-Areas "A", "B" and "C" were not so vast. Sub-Area "A" Würzburg had originally 3 Class I Messing Officers all of whom had left leaving only the DP Messing Assistants in the camps. Here again the kitchens were three and a hospital in caserne buildings and one children's kitchen constructed in an old garage and one in wooden barracks. One of the main features here was a children's and diet kitchen in the Central Caserne where a specially trained DP nurse supervised the feeding of small children and preparing of diets which were ordered for Special cases by the Camp Doctor.

Attached to Sub-Area "A" was Lohr TB Sanatorium where German Nuns arranged the Messing. This was a source of trouble as it is difficult to teach them to use American foods and therefore the patients complained of monotony in their diet.

Sub-Area "B" Aschaffenburg formed another center of well equipped Caserne buildings, Kleinheubach Camp in a castle building and Elsenfeld Camp in hutments. Aschaffenburg had not had a resident UNRRA Class I Messing Officer for 6 months and there everything was efficiently run by DPs. Kleinheubach and Elsenfeld Camps had their own DP Messing Officers and were running completely independently. They requisitioned their own food and distributed it to the best of their advantage.



The Sub-Area Messing Officers distributed the food to the Caserbes where were 5 main kitchens, a children's kitchen and hospital kitchen. The chief cooks from all kitchens met once weekly to plan menus for the following week and therefore every kitchen except childrens and hospital produced exactly the same meal. This was satisfactory and practical as the equipment was almost identical in each, steam boilers, electric frying pans and electric ovens, ideal for cooking coffee for breakfast, a hot lunch and a light supper.

Sub-Area "C" Schweinfurt was a camp of flats in which each family had a gas stove and drew its own rations as from a grocery store. They had a butcher's shop where the ration of fresh meat was exchanged against ration coupons and a milk kitchen where the fresh milk ration for children was boiled under medical supervision. The last camp Seligenstadt was another completely independent camp which was running satisfactorily under the supervision of a DP Messing Officer.

Amalgamation of Sub-Area "A" and "C" came into effect on 15th May, 1947.

A short report on the arrangements found and recommendations in Lohr TB Hospital will give some idea of improvements to be made in one of the six hospitals in the Area.



Report on visit Lohr TB Hospital 29th April, 1947.

Requisitioning of Food from BMFA. TB patients are receiving the same food substitution as normal healthy DPs i.e. 1/3 jam, 1/3 chocolate, 1/3 sugar in place of full sugar ration, also 1/2 butter and 1/2 fat in place of butter ration.

Storerooms, Facilities, and Stock Records & Stock. Storerooms are clean, and food is stored neatly and correctly.

A card record system is in operation for food accounting. This is well kept and satisfactory providing the food which is issued on the daily tally-outs all reaches the patients.

Supplies of corn, rolled oats, fruit juice and tomato juice are left unconsumed.

Kitchen. The kitchen is well equipped, clean, but a little untidy. It is staffed by Nuns who are well able to cook plain food, but who have not the necessary experience for preparation of American foodstuff.

Refrigeration is excellent.

Rye bread in the kitchen was mouldy, and white bread stale.

Washing Facilities for Crockery and Cutlery.

- a) Wards. Crockery and cutlery is washed by nurses in the wards either in a sink or in a pot of water. No disinfection nor drainage system, but dried with a tea towel.
- b) Dininghall. Washed by the patients in a pot of water, and dried with a tea towel, - no disinfection.

Supplies of Crockery and Cutlery. Supplies of the above are very limited. Cups are very few - patients are drinking out of old tins when they possess no personal crockery.

Half the supply of plates is of the aluminium or enamel variety. Knives, forks and spoons are not enough for half the patients. Containers for carrying food to the wards are also too short.

Bakery. Well equipped and clean.

Shelves for bread storage are not enough and therefore it is being stacked too closely to allow it to dry properly.

Feeding of German Personnel. German personnel hand in their ration cards to the Administration. They receive the normal German ration plus the supplementary ration for working in contact with TB cases plus 1-meal POW Ration from the Army. The total calorie value of their ration is higher than that of the patients.

Their rations are drawn in bulk and are put in the central foodstore. They have their own dining room, and receive the same food as the patients.



Feeding of DP Personnel. All food for DP Personnel is issued in the hand, and they go home for all meals.

RECOMMENDATIONS.

Food Requisitioning. On the Area Medical Officer's authority TB Patients should receive their full entitlement of sugar and butter as such without substitution.

Preference with regard to variety of cereals should be given to TB Hospitals.

A letter to this effect should be passed by the Area Medical Officer to Lt. Harriman, Officer in charge BMFA Würzburg.

Food Storage and Accounting. Stock records should be kept in the food store and not in the clothing store.

Kitchen. Kitchen staff should be replaced eventually by DPs.

Nuns should not be allowed to keep their private foodstuffs such as bottled cucumbers in the kitchen, and should be carefully supervised in order that a distribution of mouldy bread to patients never arises.

Instruction is required in the preparation of American foodstuffs such as corn, hominy, tomato ketchup, rolled oats and juices.

Washing Facilities. All china and cutlery should be centralised in the room next to the kitchen where sinks are already installed.

A boiler which is surplus in the laundry should be installed in the same room for the purpose of a boiling disinfectant rinse.

Draining boards should be made of a pattern approved by the Area Medical Officer. (Design will be forwarded).

The fitting of boiler and draining boards can be arranged by fitters and carpenters at Lohr TB Sanatorium.

The use of pans in wards and dininghall and of tea towels should cease forthwith.

Supplies of Crockery and Cutlery. Metal plates should be replaced by china ones.

New crockery and cutlery (cups etc.) should be requisitioned.

More Marmite containers should be requisitioned.

Bakery. Shelves should be made in Lohr by carpenters. Rolls should be baked for breakfast, which on the Area Medical Officer's instructions can be given to the patients freshly baked.

Fancy breads for tea should be made regularly and can be given to patients freshly instead of stale.

Feeding of German Personnel. In view of the fact that the calorie value of the German diet exceeds that of the patients and there are no facilities for a separate kitchen it is recommended that feeding arrangements remain the same, but a strict control must be made to ensure that none of the German ration is taken out of the hospital building.

Feeding of the DP Personnel. To remain as previously arranged.

30th April, 1947.

N.M. Bottomley,  
Area Nutritionist.



II. Survey of Messing Activity April-May 1947.

Revised Messing Establishment as of April 1st, 1947.

Area Nutritionist - Miss N.M. Bottomley.  
Messing Officer, Sub-Area "D" Wildflecken -  
Miss W. Harris.

Ration Scale:

The feeding scale for Displaced Persons which was layed down by H.Q. Third United States Army on 23rd October is still in use, the only change being substitutions which vary from week to week according to availability of stocks. The scale provides for seven categories of DPs giving the Calorie Value for each:-

- 1) Children 0-5 years ..... 1650 Calor.
- 2) Children 6-17 years ..... 2650 "
- 3) Normal Consumers ..... 2000 "
- 4) Persecutees ..... 2200 "
- 5) †(Special Care) and Pregnant &  
Lactating Women ..... 2700 "
- 6) Workers ..... 3000 "
- 7) Hospitals ..... 3200: "

Extra sugar is allowed for children from 0-1 yrs, who are being fed on milk formulae.

† For persons who are unable to consume the normal diet for reason of some physical disability.

Reorganization and Progress:

The only method by which satisfactory control of messing for 27.000 Displaced Persons could be achieved taking into consideration different feeding scales for categories, the specialised feeding of infants, the checking of kitchen cleanliness, quality of food and regulating of headcounts and distances involved for inspection was to set up a uniform Messing Programme throughout the Area with a simple and accurate reporting system. This was arranged when on 23rd April, 1947, Area Circular No.14 was published as follows:-

AREA CIRCULAR No. 14.

SUBJECT : Organization of Messing - Area Team 1049.

- PURPOSE :
- a) The purpose of this circular is to outline the duties of UNRRA and DP Messing Personnel, their responsibilities to the Area Nutritionist and their Sub-Area Supply and Medical branches.
  - b) To maintain the highest Nutritional standard, even in event of further cuts in the food rations.
  - c) To plan and effect good food distribution to all categories.



- d) To furnish accurate and uniform reports to the Area Headquarters.

EFFECTIVE DATE:

The provisions of this circular become effective immediately.

MESSING STAFF:

1. AREA NUTRITIONIST

Duties and functions see Area Circular No. 4 section C para 3.

2. SUB-AREA MESSING OFFICERS:

Responsible to the Area Nutritionist, Sub-Area Executive, Supply and Medical Officers for duties outlined below: -  
(In the case of UNRRA Class I or Class II holding this position responsible for training DP Personnel in these duties.)

A. To establish good liaison with the Sub-Area Supply and Medical Department Heads:-

- a) In the first instance to secure the necessary kitchen and dining hall equipment and to ensure good repair and replacement. To give accurate categorical head-counts and information with regard to selection of foods for the purpose of requisitioning.
- b) In the second instance to work in co-operation with the Medical Department as liaison between the Supply and Medical Departments in connection with feeding of infants from 0-1 y. and Hospital diets and kitchen equipment. To give advice in food distribution for children from 2-17 y., boiling of milk and for the distribution and preparation of Special Care rations. To act on the advice of the Medical Department in order to ensure hygienic dishwashing facilities, kitchen cleanliness and sanitation. To ensure that all food handles are sent for regular medical inspection and up-to-date reports posted in all kitchen or store rooms.

B. To set up a Messing Department consisting of three branches.

- a) Food supply - responsible to Sub-Area Messing Officer for receipt of food from the Supply Department and keeping of stock records, for the distribution of food to the categories and kitchens. Preparation of menus and for the issuing and checking of meal cards.
- b) Kitchen Supervisor responsible for:-
- 1) Supervision of all kitchens and distribution points



- 2) seeing that menus and quantities are strictly adhered to and that the standard of cooking is of the highest and methods used are those which will produce the highest food value.
  - 3) For checking kitchen utensils for cleanliness.
  - 4) Seeing that menus or distribution charts and medical records are posted in all kitchens.
  - 5) Organising dishwashing, kitchen cleanliness and disposal of garbage.
  - 6) Procuring of cooks clothing, inspection of finger nails and general bodily cleanliness.
- c) Training of kitchen chief, cooks and storeman.

C. To appoint:-

- 1) Kitchen chiefs in each camp who will be directly responsible to the kitchen Supervisor and Food Supply Officer.
- 2) Headcooks who will be responsible to the kitchenchief (in some cases this will be the same person)
- 3) Kitchen storeman who will be directly responsible to the Food Supply Officer and Kitchen supervisor.

D. Responsible for submission of the following reports:

- Weekly:
- 1) Form No.1 - Food Reserve (1 copy req.)
  - 2) Form No.2 - Average Weekly Headcount (Rations issued last feeding period) 1 copy required.
  - 3) Form No.3 - Special Care (2 copies required)
  - 4) Form No.4 - Children 0-1 yrs being fed on milk formulae (2 copies required)
  - 5) Copy of all Food Requisitions (1 copy required)
  - 6) Form H-D-MI Weekly Nutrition Report (together with a copy of warehouse Tally - Out necessary for checking purposes (3 copies required) (Revised form HD-NIA)

- Monthly: 1) Form No. HD-N-2 - Weight Report (3 copies req.)

/s/ STANISLAUS B. MILUS  
Area Team Director.

NB/  
Distribution A.



### Reorganisation of Sub-Area "A"

The work involved in order to effect these instructions in Sub-Areas was as follows:-

- 1) A Messing Meeting was held in Sub-Area "A" Würzburg at which a complete Sub-Area Messing Staff was formed. Miss H. Heint - UNRRA Class II was appointed Sub-Area Messing Officer.
- 2) D.P. Messing Assistants from the Camps were selected for the following posts:-

DP Messing Assistant Northern Camp	- Food Supply Officer
" " " Central Camp	- Reports and Statistics
" " " Western Camp	- Kitchen Supervisor

The responsibilities of each member was outlined as given in the Area Circular and the preparation of new reports explained in detail. It was stressed that Messing Assistants should no longer work for individual Camps but as a body for the benefit of the community. A period of 10 days was given for reorganisation and centralisation in the Sub-Area H.Q.

#### Progress:

A uniform food distribution to all Camps was impossible to arrange as each Camp drew its own rations on different days and also food items were frequently not identical. Cooking equipment was much better in Northern and Western Camps than in Central Camp and therefore it was impossible to prepare the same menu. In spite of these difficulties the Messing Staff managed to arrange a uniform method for distribution and menu making for individual Camps and centralise it together with the reporting in the Sub-Area Headquarters.

The Sub-Area Messing Officer Miss Heint with her Assistant Miss Sileikyte visited Sub-Area "B" Aschaffenburg to pick up useful hints from a place which had been running on these lines for some time. Later they visited their outlying units Schweinfurt, Seligenstadt and Lohr TB Hospital and explained in detail the new policy and reporting system.

### Reorganisation of Sub-Area "B" Aschaffenburg.

Little change was required as this Sub-Area was already staffed and organised on the lines layed down in Circular No.14 apart from the fact that here the Messing Officer prepared all food requisitions whereas in other Sub-Areas these were prepared by the Supply Officer. Specimen of weekly food distribution chart and daily menus. Shows the method which has been adopted throughout the Area.

#### Progress:-

New reporting system carried out satisfactorily  
Standard of cooking - good.



# Reorganization of Sub-Area "D" Wildflecken.

Arrangements were made for a DP Messing Assistant to understudy Miss Harris and take over from her within the period of a week. A Reorganization of Messing Assistants and reporting system brought Wildflecken quickly into line with other Sub-Areas. A meal-card system was introduced in order to keep a check on the headcount of the Camps. This was most important as the counting of meal coupons is the method by which the number of rations for the new feeding period is determined.

A Hospital Messing Officer to be appointed.

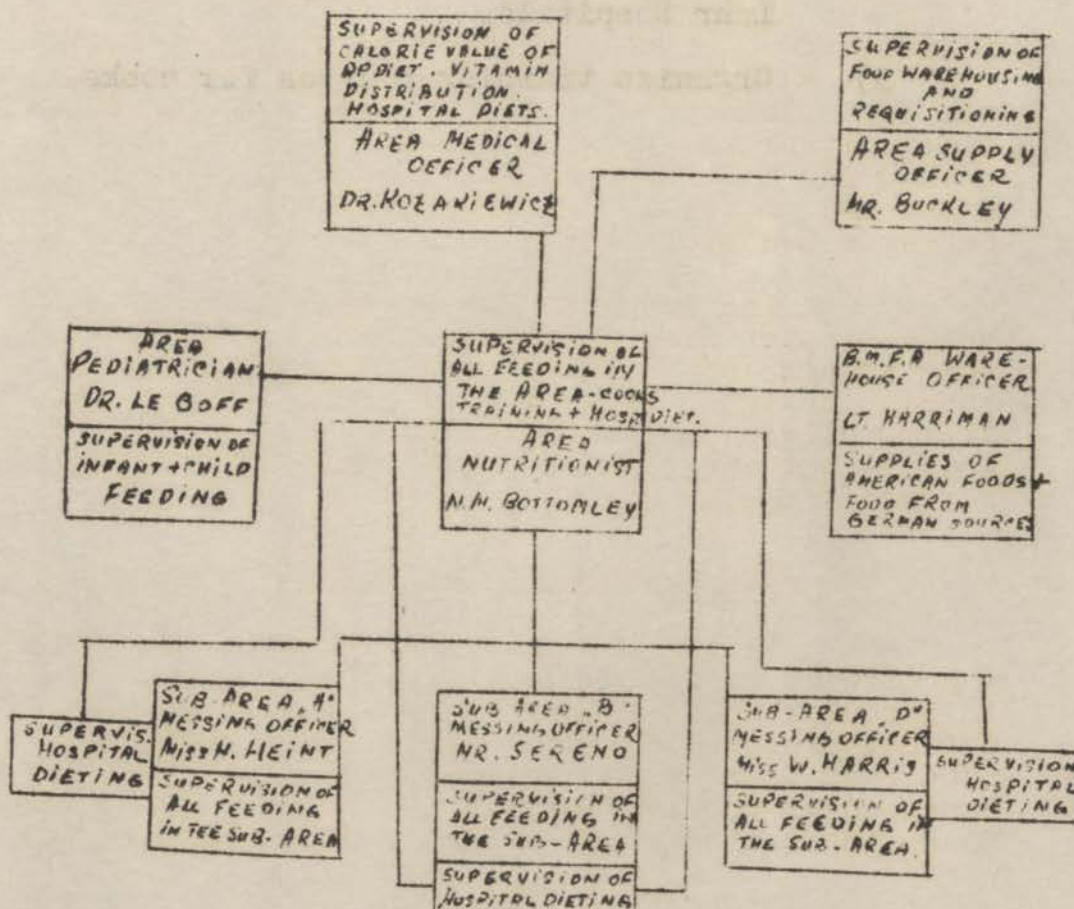
## Progress:-

New reporting system carried out satisfactorily. Mr. Hebler - DP Messing Officer established as Sub-Area Food Supply Officer without difficulties. Food card system was brought into effect and is running smoothly.

No suitable person found for Hospital Messing Officer.

## Area Headquarters Bad Brückenau.

The Area Nutritionist represents the source of information on all feeding and food supply problems and acts as liaison between the following departments:-



Some of the main features of interest held at Headquarters and representative of the Area are consolidations of reports in the following form: -



- 1) A statistical chart giving the average number of persons in the different feeding categories being fed in each Camp and the total for the Area. For the control of the Medical Branch it also gives the number of persons on Special Care Rations, the number of bottle fed or artificially fed babies.
- 2) A chart giving information on all food reserves held in the Camps - for how many persons and the food quantities for the benefit of the Supply department and checking purposes.
- 3) Organizational charts of Sub-Area Messing Departments.
- 4) Feeding Budget for 1948.

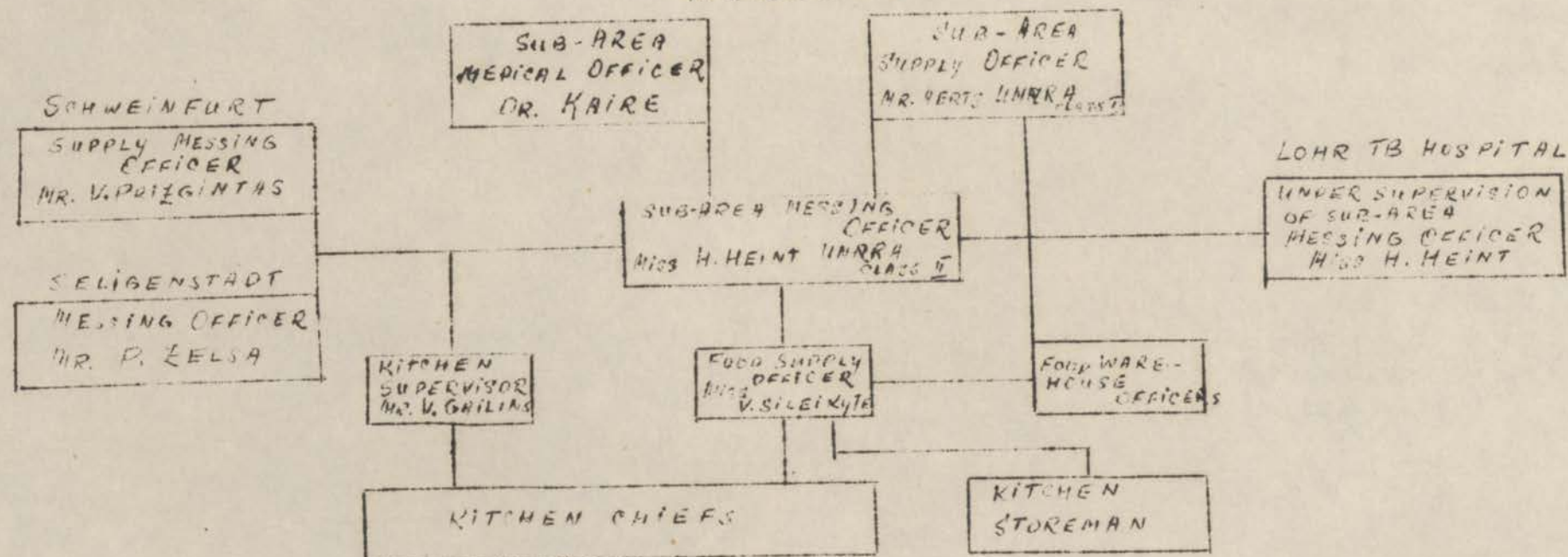
Future Programme:-

- 1) To develop the child feeding programme in all Camps and organize uniform age group categories and feeding of infants throughout the Area.
- 2) Regular weighing programme.
- 3) Provide adequate equipment for all kitchens even if it means improvisation.
- 4) Improve Hospital Dieting in Wildflecken and Lohr Hospitals.
- 5) Organize training courses for cooks.



# ORGANISATIONAL CHART SUB-AREA "A"

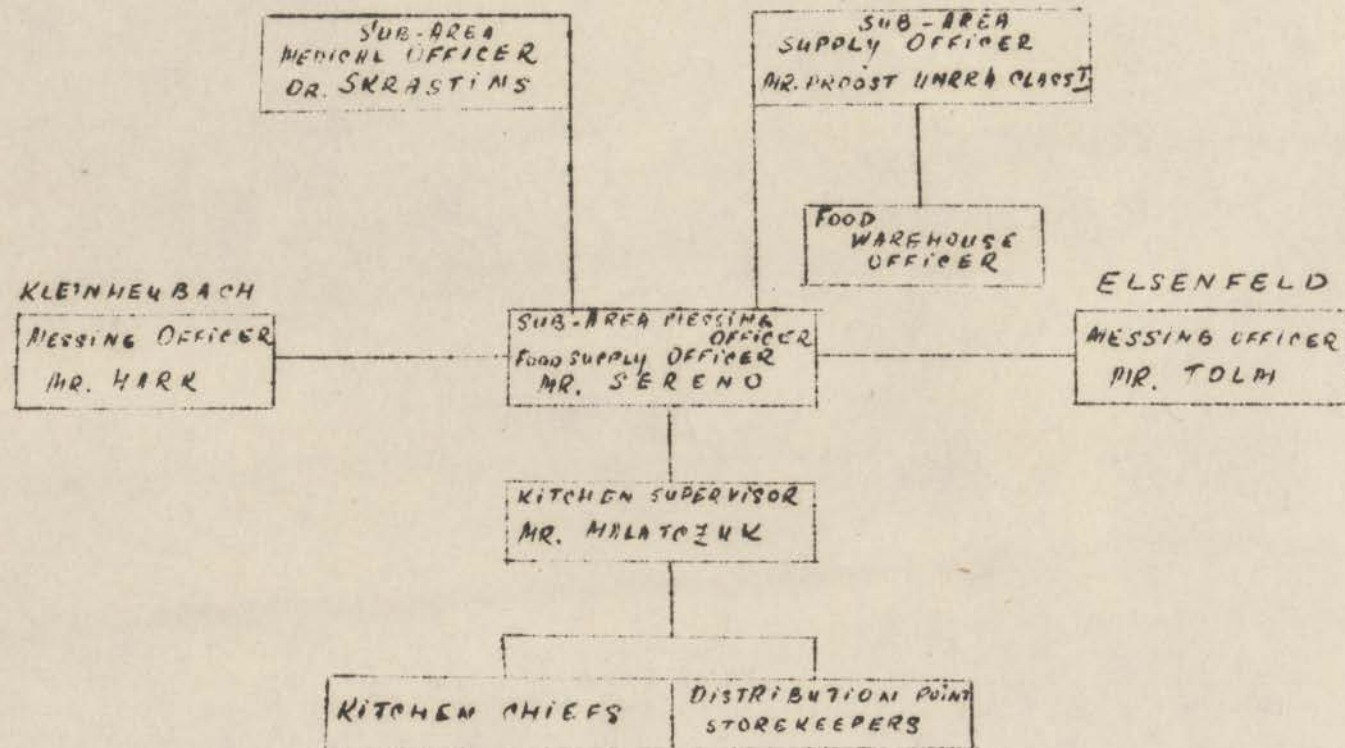
## WÜRZBURG





# ORGANISATIONAL CHART SUB-AREA "B"

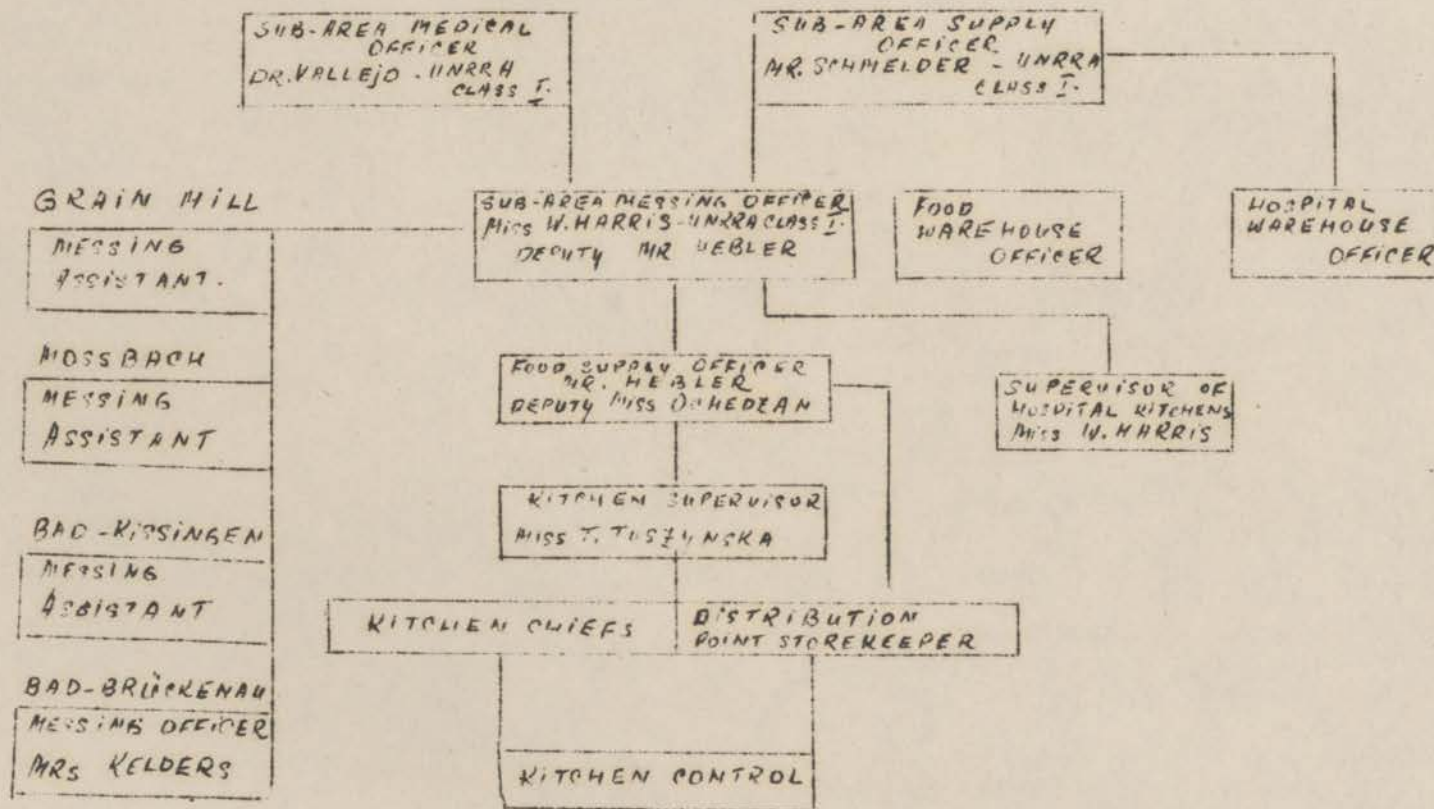
## ASCHAEFFENBURG





# ORGANISATIONAL CHART SUB-AREA . D "

## WILDFLECKEN





UNRRA TEAM 1049 SUB-AREA ASCHAFFENBURG.

TO : 255,256,257,258,264.

BILL OF FARE FOR CHILDREN THRU 6-17 yrs. & NORMAL CONSUMERS FROM 17 AND OVER

Monday 28 April, 1947

From Camp Kitchen:	BREAKFAST	Needed per persons:	
	Coffee		6 gr.
	Bread (on hand)		
	LUNCH		
	Beans soup	Beans dried	60 "
	Chopped Roast-beef and	Meat, fresh	60 "
	gravy	Fats, butter fr.	10 "
	Potatoes, Legumes	Flour, white	10 "
	Fruit (on hand)	Potatoes	500 "
		Eggs, dried	5 "
		Peas cd.	140 "
	DINNER		
	Porridge	Cereals, Rol. Oats	35 "
	Bread (on hand)	Milk, skim, dried	25 "
	Fruit (on hand)	Coffee	6 "
	Coffee		

Tuesday 29 April, 1947.

From Camp Kitchen:	BREAKFAST	Needed per persons:	
	Coffee		6 gr.
	Bread (on hand)		
	LUNCH		
	Soup	Cereals, Rolled Oats	35 "
	Meat balls and gravy	Meat, fresh	60 "
	Potatoes, Tomato	Fats, butter fr.	10 "
	Fruit (on hand)	Flour, white	10 "
		Potatoes	500 "
		Eggs, dried	5 "
		Tomato cd.	20 "
	DINNER		
	Porridge	Cereals, Rolled Oats	35 "
	Coffee	Milk, skim, dried	25 "
	Bread (on hand)	Coffee	6 "
	Fruit (on hand)		



Wednesday 30 April 1947.

From Camp Kitchen:	BREAKFAST	Needed per persons:	
	Coffee		6 gr.
	Bread (on hand)		
	LUNCH		
	Peas-soup	Peas soup, dehydr.	30 "
	Chopped-Beef and gravy	Meat, fresh	60 "
	Potatoes, Legumes	Fats, butter fr.	10 "
	Fruit (on hand)	Flour, white	10 "
		Potatoes	500 "
		Eggs, dried	5 "
		Tomato cd.	23 "
		Peas cd.	140 "
	DINNER		
	Porridge	Cereals, Rol. Oats	35 "
	Coffee	Milk, skim, dried	25 "
	Bread (on hand)	Coffee	6 "
	Fruit (on hand)		

Thursday 1st May 1947.

From Camp Kitchen	BREAKFAST	Needed per persons:	
	Coffee		6 gr.
	Bread (on hand)		
	LUNCH		
	Peas - soup	Peas, dried	60 "
	Stew	Meat, fresh	60 "
	(Goulash)	Fats, butter fr.	10 "
	Fruit (on hand)	Flour, white	15 "
		Potatoes	500 "
		Tomato cd.	20 "
	DINNER		
	Porridge	Cereals, Rol. Oats	35 "
	Coffee	Milk, skim, dried	25 "
	Bread (on hand)	Coffee	6 "
	Fruit (on hand)		

Friday 2nd May 1947.

From Camp Kitchen:	BREAKFAST	Needed per persons:	
	Coffee		6 gr.
	Bread (on hand)		
	LUNCH		
	Soup	Potatoes	150 "
	"Klöße" with Tomato	Flour, white	120 "
	Fruit (on hand)	Fats, butter fr.	10 "
		Tomato cd.	20 "
		Eggs, dried	10 "
	DINNER		
	Porridge	Cereals, Rol. Oats	35 "
	Coffee	Milk, skim, dried	20 "
	Bread (on hand)	Coffee	6 "
	Fruit (on hand)		



Saturday 3rd May 1947.

From Camp Kitchen:	BREAKFAST	Needed per persons:	
	Coffee		6 gr.
	Bread (on hand)		
	LUNCH		
	Soup	Cereals, Roal. Oats	35 "
	Chopped Roast-beef	Meat, fresh	60 "
	Potatoes, Tomato	Fats, butter fr.	10 "
	Fruit (on hand)	Flour, White	10 "
		Potatoes	500 "
		Eggs, dried	5 "
		Tomato cd.	20 "
	DINNER		
	Porridge	Cereals, Rol. Oats	35 "
	Coffee	Milk, skim, dried	20 "
	Bread (on hand)	Coffee	6 "
	Fruit (on hand)		

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Sunday 4th May 1947.

From Camp Kitchen:	BREAKFAST	Needed per persons:	
	Coffee		6 gr.
	Bread (on hand)		
	LUNCH		
	Soup	Corn cd.	280 "
	Chopped Roast-beef and	Meat, fresh	60 "
	gravy	Fats, butter fr.	10 "
	Potatoes, Tomato	Flour, white	15 "
	Fruit (on hand)	Potatoes	500 "
		Eggs, dried	5 "
		Tomato cd.	30 "
		Coffee	6 "
	DINNER		
	Coffee	Coffee	6 "
	Bread (on hand)		
	Fruit (on hand)		

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For children 0-5 Basic Rations and other Groups Supplementary Rations, issued dry direct on hand of DPs, please see List Nr.1 Period 28.IV - 4.V.47.



MENU UNRRA TEAM 1049 ASCHAFFENBURG SUB-AREA.

(x) = Direct on hand of DPs = Norm.Cons.												(j) = To Kitchen																		
To be issued on:																														
Period																														
28 April-4 May																														

(j) = from Kitchen (Lunch & Dinner) = 7353 = 1050 daily Calories

(x + j) = Norm. Consumers (Breakfast, Lunch, Dinner) = 15042 = 2148 daily Calories

GS/ LIST No. 1.

TO : Miss N.M. Bottomley  
UNRRA Area Nutritionist  
Area Team 1049 H.Q. Bad Brückenau

From : Messing Office UNRRA Team 1049  
Sub-Area Aschaffenburg/M.

PTO



UNRRA Team 1049 Sub-Area ASCHAFFENBURG

Period 28.IV.-4.V.47.

BASIC RATIONS FOR CHILDREN

(Weekly issue)

<u>INFANTS RATIONS: 0-6 months:</u>	Cal.	Cal.
Milk, evapor. 1 1/2 can daily 7 ltr.	5997	
Flour, white, wheat .....150.gr.	525	
Baby Food,Meal-whole-wheat 200 "	714	
Sugar ..... 300 "	1200	
Fruit juice, pineapple .... 266 "	106	
Total Calories:	8542	
Daily Calories:	1220	

<u>Infants Rations 6-12 months:</u>	Cal.	Cal.
Milk, evapor.1 can daily 5700 ltr.	3978	
Bread, White ..... 350 gr.	875	
Biscuits ..... 100 "	420	
Baby Food,Meal-whole-wheat 100 "	357	
Cereals, Rolled Oats ..... 175 "	653	
Cheese, hard ..... 70 "	179	
Fat, butter fresh ..... 100 "	765	
Sugar ..... 300 "	1200	
Chocolate ..... 112 "	576	
Potatoes ..... 1000 "	650	
Legumes, Peas cd.(20 ozs) 280 "	123	
" Tomato cd. (19 ozs) 133 "	58	
Fruits: Apple cd. .... 100 "	44	
" Raisins ..... 65 "	188	
Fruit juice, pineapple .... 532 "	212	
Eggs, dried ..... 70 "	409	
Total Calories:	10687	
Daily Calories:	1526	

<u>Children Rations: 1-5 years:</u>	Cal.	Cal.
Milk, fresh, whole (0,750 gr.- - 3/4 ltr. daily) 5250 ltr.	2782	
Bread ..... 1000 gr.	2500	
Biscuits ..... 100 "	420	
Baby Food, Meal-whole,wheat 100 "	357	
Cereals, Rolled Oats ..... 400 "	1428	
Meat, fresh ..... 175 "	350	
Cheese, hard ..... 70 "	179	
Fats, butter fr. .... 105 "	803	
Sugar ..... 78 "	312	
Jam ..... 100 "	400	
Peaches cd. (29 ozs) ..... 81 "	238	
Salt ..... 140 "	-	
Potatoes ..... 2100 "	1365	
Legumes: Beans white ..... 40 "	140	
" String Beans ..... 133 "	58	
" Tomato cd.(19 ozs) 133 "	58	
" Peas cd. (20 ozs) 280 "	123	
Fruits: Raisins ..... 80 "	232	
" Apple cd. .... 100 "	44	
Chocolate ..... 105 "	540	
Fruit juice, pineapple .... 532 "	212	
Eggs, dried ..... 70 "	409	
Total Calories:	12950	
Daily Calories:	1850	

SUPPLEMENTARY RATIONS FOR FOLLOWING GROUPS :

<u>Suppl. Rations for Children 6-17 yrs.</u>	Cal.	Cal.
Bread .....3350 gr.	8375	
Biscuits ..... 100 "	420	
Cereals, Rolled Oats ..... 300 "	1071	
Milk, skim, dried ..... 100 "	340	
Cheese, hard ..... 140 "	358	
Fats, butter, fresh ..... 110 "	841	
Sugar ..... 55 "	220	
Jam ..... 100 "	400	
Fruits: Raisins ..... 65 "	188	
" Prunes ..... 30 "	87	
" Apple cd. .... 100 "	44	
Chocolate ..... 105 "	540	
Fruit juice, pineapple ..... 532 "	212	
Total Calories:	13096	
Daily Calories: .....	1870	
From Kitchen 2 Hot Meal +	1054	
Total daily Calories	2920	

This group will receive daily from camp kitchen 2 Hot Meal, at Lunch and Dinner with 1050 Calories.

<u>SPECIAL CARE AND L.MOTHERS:</u>	Cal.	Cal.
Milk, fresh, whole (0,500=1/2 ltr.daily)3500 ltr.	1855	
Biscuits ..... 100 gr.	420	
Meat, fresh ..... 70 "	140	
Cheese, hard ..... 70 "	179	
Fats, butter fresh ..... 140 "	1071	
Jam ..... 70 "	280	
Chocolate ..... 105 "	540	
Fruit juice, pineapple ..... 532 "	212	
Eggs, dried ..... 35 "	204	
Total Calories :	4901	
Daily Calories :	700	

<u>WORKERS :</u>	Cal.	Cal.
Bread .....1400 gr.	3500	
Cereals, Rolled Oats .....200 "	714	
Meat, fresh ..... 70 "	140	
Fats, butter, fresh ..... 110 "	841	
Cheese, hard ..... 35 "	89	
Potatoes ..... 1000 "	650	
Fruit juice, pineapple ..... 200 "	80	
Total Calories :	6014	
Daily Calories :	859	



FOOD BUDGET FOR 21240 PERSONS AREA TEAM 1049 FOR THE YEAR 1948.

Feeding Categories:	0-5 yrs	6-17 yrs	P & L Women	Special Care	Hospital Patients	Normal Consumers	Workers	TOTAL								
Number of Persons:	2680	2220	1420	220	500	8200	6000	21240								
Food Items																
Flour	215231	29271,-	668553	90924,-	313593	52650,-	48584	6608,-	150575	20478,-	1975544	268675,-	2137080	290647,-	5509160	749253,-
Nährmittel	53814	12752,-	89133	21127,-	114040	27027,-	17668	4187,-	40155	9517,-	262974	62331,-	481860	114199,-	1059644	251140,-
Baby Food	53814	12752,-	-	-	-	-	-	-	-	-	-	-	-	-	53814	12752,-
Meat	53814	56928,-	105805	111950,-	79094	83677,-	12254	12954,-	27850	29464,-	390812	413507,-	334200	353566,-	1003909	1062056,-
Milk, fresh	1612636	83857,-	-	-	569647	29622,-	88255	4589,-	200580	10430,-	-	-	-	-	2471118	128498,-
Quark	21323	5227,-	-	-	22933	5619,-	3553	871,-	8075	1979,-	-	-	-	-	55884	13696,-
Fats	32294	42376,-	44578	58745,-	45866	60456,-	7106	9366,-	16150	21287,-	132430	174556,-	169200	223044,-	447624	589830,-
Sugar	53814	37193,-	35853	15741,-	28514	12516,-	4418	1939,-	12045	5288,-	98810	43391,-	72300	31749,-	305754	147817,-
Potatoes	645665	26473,-	790720	32420,-	342106	14027,-	53002	2173,-	28108	5762,-	2920676	119750,-	2859900	173416,-	7640177	374021,-
Vegetables	645665	340267,-	534842	281863,-	342106	180291,-	53002	27933,-	120460	63483,-	1975544	1041117,-	1445520	761793,-	5117139	2696747,-
Eggs, fresh	85331	134777,-	71306	111643,-	45610	71411,-	7066	11063,-	19815	30915,-	131528	206230,-	93840	150900,-	454496	716939,-
Salt	43282	6494,-	35853	5380,-	22933	3441,-	3553	533,-	8075	1211,-	132430	19870,-	96900	14539,-	343026	51468,-
Coffee-Ersatz	-	-	12476	5991,-	11403	5472,-	1767	848,-	4015	1427,-	65272	31340,-	72300	29515,-	167233	74593,-
Milk, skim dr.	-	-	87979	219967,-	22805	5702,-	3533	883,-	15800	3950,-	131692	32927,-	96360	24093,-	358169	287522,-
Cheese	-	-	35853	411264,-	22933	26306,-	3553	4076,-	8075	9263,-	65272	74878,-	71640	82166,-	207326	607953,-
TOTAL	788367,-	1367015,-	568217,-	88033,-	214454,-	2488572,-	2249627,-	7764285,-								

(Based on Wholesale Prices for indigenous items, see Food Prices in Marks Incl. 2 to 1tr. Hq EUCOM, file AG 120 GEC-AGO, 22 April 1947).



UNRRA Area Team 1049

Sub Area)

Camp )

Hospital) \_\_\_\_\_

FOOD RESERVE

(for 7 days)

Food Items	Normal Cons. for.....Persons	Patients for.....Pat. (for Hospitals only)	Remarks.
	<u>Lbs.</u>	<u>Lbs.</u>	
Flour			
Nährmittel			
Meat, canned			Instead of fresh
Milk, dr.			
Cheese			
Fats			
Sugar			
Salt			
Potatoes			
Coffee, Ersatz			
Chocolate			
Juice, citrus			
Eggs, dried			
Catsup			

Date.....

Signature.....  
Supply or Messing Officer.







Form No. 3

UNRRA AREA TEAM 1049  
H.Q. Bad Bruckenau.

Sub Area  
Camp

Special Care ( 1% of popul.)  
( Not in Hospital )

[illegible]

Population.....

Date: .....

Doctor,



Form No.4

UNRRA Area Team 1049  
H.Q. BAD BRUCKENAU

Sub - Area a  
Camp

Children 0 - 1 year being fed  
on milk formulae

(Rec. supplementary ration of sugar)

[illegible]

Date:.....

Doctor.



## REVISED WEEKLY NUTRITION REPORT.

Area Team No \_\_\_\_\_ Location \_\_\_\_\_  
 Sub-Area or Camp \_\_\_\_\_ Date \_\_\_\_\_ to \_\_\_\_\_ 1971  
 Messing Officer \_\_\_\_\_

## I. Messing Census and Daily Calorie Intake:

	Number in each category	Average per day
1. Children 0 - 1 year		
a. Number bottlefed		
2. Children 1 thru 5 years.		
a. Children 1 thru 3 years		
b. Children 4 thru 5 years		
3. Children 6 thru 17 years.		
a. Children 6 thru 9 years		
b. Children 10 thru 17 years		
4. Normal Consumer		
5. Persecutees		
6. P and L Women		
7. Special Care		
8. Workers		

## II. Messing Problems:

## III. Comments by Area Medical Officer (first week of each month only)

1. Indicate presence of any "nutritional" diseases (avitaminoses etc.) or any pathological manifestations which in your opinion are in connection with wrong diet (inadequate from either or quantitative stand-point.)
2. Vitamin Distribution (groups receiving and kind).

Area Medical Officer.







## Record of Body Weights - Displaced Persons Camps.

Camp Reporting \_\_\_\_\_ Location \_\_\_\_\_ Camp \_\_\_\_\_  
Med. Off. \_\_\_\_\_  
Area Team No. \_\_\_\_\_ Sub-Area \_\_\_\_\_  
Population \_\_\_\_\_ Total Weighed \_\_\_\_\_ Date \_\_\_\_\_

Select Age Groups 1 (1-9), 2 (10-19), 3 (20-39), 4 (40-59), 5 (over 60)

[illegible]

Do not write in spaces below this line

Total Wt. _____	Total Wt. _____	Total Wt. _____	Total Wt. _____
Aver. Wt. _____	Aver. Wt. _____	Aver. Wt. _____	Aver. Wt. _____



Select Age Groups 1 (1-9), 2 (10-19), 3 (20-39), 4 (40-59), 5 (over 60)

[illegible]