

WAR: THE CONCEPT
OF AERIAL RESCUE

MAC/CSEH (ARRS)

however. After only four months of activity in India, the unit was transferred to Okinawa where it was programmed to provide rescue support for the all out blow against the Japanese mainland. The 7th never became operational in its new location--the war ended.

The China theater possessed the first operational unit specifically designed for rescue work. Here during the spring of 1943, personnel assigned to the India-China Wing, Air Transport Command, organized a small jungle rescue unit. Operating from an airfield

at Chabua, this unit--composed of medical and survival specialists--would proceed overland into the jungle and recover downed airmen.

Although not constituted as an aerial rescue organization, planes were utilized to search for downed aircraft and once a crash site was spotted, were used to transport the rescue team to the landing strip nearest the crash site. Likewise, aircraft were used to

remove the team and survivors after completion of the mission.

A regularly constituted aerial rescue unit did not materialize until late in the war, but its operation had a significant effect on the future development of the present Air Rescue Service. The

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China Wing Air Transport Command located at Chabua, China. The
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mission of the organization was to proceed overland into the
the location of the group, perched on top of a small plateau,

jungle and recover downed aircrews. Several missions of this type
indicated a ten or 12 day trip through unexplored headwaters.

were successfully completed--aircraft being used to transport the
territory.

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in trouble over an uncharted mountain area near the China-Burma
Doc Flickinger, Wing Surgeon, who had made one parachute jump in

border. An SOS was sent and the entire party parachuted from the
1941 testing rescue gear, and two medical corporals, Sgt. Arnold

plane. This was not an ordinary emergency. Among the passengers
Parkey and Cpl William Mackenzie, who had never jumped, volunteered

were officials possessing intimate knowledge of the war plan for the
to go to the aid of the survivors. These men bailed out at the

North Burma campaign, several high ranking Chinese army officers, and
pilot's signal and drifted down within easy reach of the camp site.

the well known news commentator, Eric Sevareid. The Commanding
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General of the India-China Wing ordered that contact with the sur-
cleared the plane and had crashed with it. The radio operator had

vivors be made immediately and all necessary rescue procedures be
broken leg, one passenger a broken ankle, and there were six

instituted. By rare good fortune, the survivors were spotted
others with less serious injuries. For the next month, these three

within an hour, supplies were dropped, and survival instructions
edics cared for the sick and wounded, aided by friendly natives,

given. One of the victims, using air-ground liaison code, signalled
until the party was led to safety.

that medical assistance was needed. This posed a major problem for the location of the group, perched on top of a small plateau, indicated a ten or 12 day trip through unexplored head-hunter territory.

The only possible solution appeared to be a parachute jump by qualified personnel. This was a new idea and a procedure that was militarily unprecedented and unacceptable. Nevertheless, Lt Colonel Don Flickinger, Wing Surgeon, who had made one parachute jump in 1941 testing rescue gear, and two medical corpsmen, Sgt Harold Passey and Cpl William MacKenzie, who had never jumped, volunteered to go to the aid of the survivors. These men bailed out at the pilot's signal and drifted down within easy reach of the camp site. They found the group alive except for the copilot who had not cleared the plane and had crashed with it. The radio operator had a broken leg, one passenger a broken ankle, and there were six others with less serious injuries. For the next month, these three medics cared for the sick and wounded, aided by friendly natives, until the party was led to safety.

Thus was concluded the first recorded pararescue mission, of which there have been many in the present Air Rescue Service.

Today, a dedicated highly-trained group of pararescuemen comprise an important segment of the rescue facilities now present, in ARS.

But approval of the idea at that time was not immediate. In fact, for several months Colonel Flickinger was in danger of disciplinary action for his unauthorized jump.

Rescue Training During World War II

The need for highly trained Rescue crews for duty in all the theaters of operations was recognized early in the war. Supplying these crews became the task of the Emergency Rescue School at Keesler Field, Mississippi. The Marine Training Branch--which trained 95 boat crews before it was discontinued--was activated at New Orleans Army Air Base as a Quartermaster function in February 1943. In November the job became an Air Corps responsibility and early in 1944 the unit was transferred to Gulfport, Mississippi. The Aircrew Training Branch began its operations at Hamilton Field, California, later moved to Boca Raton, Florida, and was finally located at

Over the years, intercept missions have made up a large portion of
Rescue's Military Role

In the minds of many people, the humanitarian aspect of the ops
Rescue mission has perhaps, because of the American value of human-
life, tended to overshadow the primarily military aspect of the de-
Air Rescue Service. This is a fallacy. Air Rescue Service was first
activated in 1946 in answer to a need, generated during World War II,
for a specialized organization devoted to providing rescue coverage
for downed or distressed military airmen. There has been no change in
in this primary mission. The aid given civilians--both American and
foreign--has been a by-product of this purpose. take credit--and this
Orbits, Intercepts, and Escorts, no "real trouble" missions flown

Air Rescue guards the air lanes of the world and when a plane
becomes lost or develops trouble, a call to the nearest ARS unit brings
help. When large flights of military aircraft make long hauls over
water or remote land masses, Rescue aircraft fly what is termed an "orbit"
mission and take up stations at strategic points along the pro-
posed route to render navigational and communications assistance and to be
in the vicinity should any difficulty develop. While flying

was almost impenetrable -- helicopters were needed. The Commander, Capt Major Robert Rizon -- a man with years of rescue work behind him -- soon put in a call to Air Rescue Service Headquarters for an assist. The Swiss mission and a similar call for a helicopter in the State of Washington had proven Rescue's need for its own C-82, to being transport this efficient piece of rescue equipment. When Rizon's call came through, ARS had the first of three C-82's assigned and jump ready to go. An R-5 was dismantled, loaded on the cargo plane, and sent out to the Nicaraguan operational site. Here the machine again proved its worth, keeping in close contact with the survivors and, rescuing 14 survivors, walk out.

Another ARS first, occurring as a result of the Nicaraguan mission was the first jump by an Air Rescue Service Pararescue doctor. The value of Pararescue teams had been realized by ARS key personnel and action had been taken during the opening months of 1947 to authorize bona fide Pararescue teams. Assigned to the 5th Emergency Rescue Squadron was a young medical officer by the name of Pope B. Holliday. A captain, he was also a jumper and, recognizing the time

value of successful Rescue operations, was a prime mover in the attempt to get AAF recognition of this technique. The same technique had been so adequately and dramatically proved by Colonel Flickinger during the war, and two survival specialists. In November, five enlisted men, The proposal to use the Pararescue technique regularly was being considered at higher headquarters when the Nicaraguan crisis broke. Holliday was dispatched to the area on TDY and made a spectacular jump into the jungle to aid a disabled survivor of the B-17 crash. Finding his man half dead from shock and lack of food or water, Holliday went to work. Six days later when the ground party broke through to them, the victim was able to walk out. These and many other missions brought the work of the Air Rescue Service to the attention of Air Force planners. The results were beneficial. There was still a long way to go but things were easing up -- newer planes, more and better trained men, and special Rescue equipment were to be a little easier to obtain.

Gathering Support. The Nicaraguan mission definitely established the need for

Para-doctors and Para-rescuemen in ARS. In July 1947, a conference under the leadership of Colonel Right, plans and policies were formulated.

was held with Hq USAF in Washington which resulted in an authorization to increase the efficiency and effectiveness of the organization. Plans

to organize and train six teams -- each composed of one doctor, two medics, and two survival specialists. In November, five enlisted

men, two medical officers, and a representative from the A-3 (Operations) Section of Hq ARS participated in a two-week course of training

at the Forest Service "Fire Jumpers" School in Montana. This was the first active step in implementing plans previously formulated to have

adhering to the contemplated plans for expansion, Hq ARS, as well as the Hq 5th Rescue Squadron, was moved from Morrison Field, Florida,

conditions. These parachutists formed the nucleus of instructor personnel in the Pararescue and Survival School conducted by the

centralize Air Transport Command activities, Hq ARS was again re-

5th Rescue Squadron shortly thereafter at MacDill AFB, Florida.

relocated. This time -- in December 1947 -- at Gravelly Point, Washington, D. C. This was just one part of a general reorganization which

President Truman signed the Armed Forces Unification Act, creating a streamlined ARS and improved its capability. By February 1948, besides

Department of the Air Force, co-equal with the Army and Navy. The headquarters in Washington, the command had three squadrons and ten

reorganization and contemplated expansion of the Air Force and the flights spread out over the United States. The 5th, with its "A" and

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the future responsibility of the Air Rescue Service. Under the North Carolina; and Flight "D" was stationed at Westover AFB, Mass.

rescue units, thus providing trained personnel.

leadership of Colonel Right, plans and policies were formulated that increased the efficiency and effectiveness of the organization. Plans were made for the reorganization of ARS to facilitate better rescue coverage and secure more and better equipment for the future. Training programs were instituted to insure properly trained personnel for any given rescue assignment.

Expansion to Cover the United States.

Adhering to the contemplated plans for expansion, Hq ARS, as well as the Hq 5th Rescue Squadron, was moved from Morrison Field, Florida, to MacDill Field, Florida, during the summer of 1947. In order to centralize Air Transport Command activities, Hq ARS was again re-located. This time -- in December 1947 -- at Gravelly Point, Washington, D. C. This was just one part of a general reorganization which streamlined ARS and improved its capability. By February 1948, besides the headquarters in Washington, the command had three squadrons and ten flights spread out over the United States. The 5th, with its "A" and "B" flights, remained at MacDill; Flight "C" was located at Pope AFB, North Carolina; and Flight "D" was stationed at Westover AFB, Mass.

21 Rescue Units, thus providing trained personnel.

In support and for search and rescue missions, a team composed of the C-47, the L-5 and the L-13 was available. The C-47 Douglas Loadmaster ^{Sky train} was highly valuable in long range searches and for carrying equipment and Pararescuemen. The L-5's and L-13's were utilized for short range, low-level searches and for landing on small unprepared landing sites for recovery of survivors. Besides aircraft, ARS units had ground equipment composed of "Weasels", jeeps and trailers.

In personnel, Rescue was in remarkably better shape than it was two years previous. ARS was authorized 382 officers and 1,179 enlisted men. Furthermore, the command was operating at 97% of its authorization -- 346 officers and 1,173 men -- and besides having more personnel, they were now better trained. The flying officers had become acquainted with Rescue aircraft and techniques. Aggressive OJT programs had raised the skill level of the men and a rigorous survival school was being conducted by the 5th Rescue Squadron at MacDill. Specially trained Pararescue teams (composed of a Para-doctor, two survival specialists, and two medical technicians) were stationed at MacDill, brought with danger but successful despite terrific obstacles.

Westover, Selfridge, Lowry, Hamilton, Goose Bay and Ernest Harmon.

These teams stood ready to jump to the aid of crashed airmen in areas inaccessible by other means. Emergency gear and clothing was aboard

Also available were ground rescue teams comprised of six men

who were trained in survival and medical techniques. They were as

fully prepared as the Pararescuemen except for the jumping capability.

The equipment they carried and their ability to use it were identical.

These teams were used where jumps or helicopter recovery was imprac-

tical. Sometimes guided by observation aircraft, these men moved

into the crash site and transported survivors to suitable places for

air or land removal. Their basic means of transportation was the M-29

"Weasel", which with its caterpillar treads could go just about any-

where. A wheel landing on the hard snow crust and nosed over with

Ice Cap Rescue of 1948. There were nine men to recover. A glider was

obtained. That this organization with its equipment, trained personnel,

and Rescue techniques could handle the job was vividly portrayed in

the highly publicized Greenland Ice Cap Mission of 1948 -- a mission

fraught with danger but successful despite terrific obstacles. rope

performed their jobs with distinction while participating in over 1,000 actual life-saving missions during 1948.

Mission Expanded to Civilian Aid.

Although designed primarily as a support to the combat striking

force of the U.S. Air Force, a large percentage of Rescue efforts

was directed in aiding members of the civilian population. Early

in 1949, the people of the United States were treated to an exhibi-

tion of Air Rescue capability. In January a severe blizzard struck

the central and western areas of the United States. Roads were

blocked -- isolating cities, towns, and rural areas from their

sources of supply. Both people and livestock were in dire need

of food. Even the trains stopped running and five or six inter-

continental trains were stranded on the tracks without fuel or heat.

A hurry call was sent to the Air Rescue Service unit at Lowry

AFB, Colorado, and simultaneous operations "Snowbound" and "Haylift"

began. It was a two-fold job; the people had to be provided with

food, and in some cases medical supplies, and almost as important

for the economic welfare of the region -- thousands of snowbound

and later Detachment One, of the 3d Air Rescue Squadron, this outfit was composed of 11 officers and 56 airmen. In October the Detachment was also flying L-5 aircraft which proved adequate for some recovery missions but the "workhorse" remained the helicopter. At the end of the first half year of war, the number of helicopter medical transfers had reached 618. During the same period L-5 aircraft transported 56 wounded soldiers.

Most helicopter and L-5 missions were flown between the front line medical clearing stations and rear area hospitals. If the wounded soldier required immediate medical attention of a type available only at hospitals (in Japan, the aircraft landed at an airstrip from which a transport plane flew him to Japan. Emergency medical attention was provided by a skilled medic aboard the helicopter. An outstanding example of the ingenuity and skill of these medics is found in the actions of one of these dedicated men on the 12th of October 1950. A seriously wounded English pilot was brought aboard and examination showed that his chances for life were slim unless he was given an immediate transfusion. Hurriedly the medic prepared his patient and administered a bottle of plasma--the first, but not the last, transfusion

given during a Rescue helicopter flight, and the beginning of in-flight plasma transfusions among all services using the helicopter.

With two patients and a medical technician on each flight, the

helicopter could cover an hour's worth of land travel in five minutes.

This was important for when a soldier or airman received a head wound,

sucking chest wound, or stomach wound, speed was often the difference

between life and death. The effectiveness of Rescue's work was

testified to in 1951 by Dr. Elmer L. Henderson, Chairman of the American

Medical Association, when he stated that the mortality rate among wounded

soldiers in Korea was only 2 per 100 as compared with 4 per 100 in World

War II. One of the major reasons in the mind of this medical expert

was "speedy (front line) air evacuation."

The following mission demonstrates the risks these Rescuemen would

take to save their wounded buddies. The mission unfolded on the afternoon

of 15 February 1951. Detachment "F" of the 3d Air Rescue Squadron was

ordered to begin immediate rescue operations for American troops sur-

rounded and fighting for their lives in a small Korean town 20 miles

east of Seoul. Loaded with blood plasma, other medical supplies, and

blankets for the besieged troops, six Sikorsky H-5 'choppers took off.

Flying under intense mortar and small arms fire, the helicopters flew

77 Despite enemy small arms fire each helicopter managed to make three trips—carrying one or two patients on each flight—before darkness forced an end to operations. On the following day, with two helicopters out of operation and a snowstorm with winds in excess of 40 miles an hour, the outlook was rather bleak. Nevertheless, the four operational Rescue H-5's ventured forth and before the day was ended 22 more critically wounded men were removed from danger. All told, 52 men had been recovered. Under fighter cover, these vulnerable machines This mission meant more than saving the wounded. During the mission Fairchild C-119's dropped supplies to the surrounded troops while U.N. fighter aircraft strafed and bombed the enemy positions. With the wounded men safe and needing no further attention, the remaining soldiers were able to fight their way to safety. Fully as spectacular was the rescue of 148 wounded and injured paratroopers on the 24th and 25th of March 1951. The jump had occurred on March 23rd when the troopers had left their aircraft over Munsan-ni. Everything went wrong and the call for help was relayed to Rescue. Flying under intense mortar and small arms fire, the helicopters flew