North Carolina's Confederate Military Hospitals

by Charles F. Hall, Jr.

resident Lincoln's call to the states on April 15, 1861, for 75,000 volunteers to suppress the secession of the states that had left the Union, resulted in North Carolina and three other states seceding to join the Confederacy. In spite of long existing sectional tensions, both the Confederate and Federal governments were ill prepared for a war on the scale that followed. Both sides expected a short war, not one lasting four years and resulting in a huge flood of casualties.

This article presents an overview of the hospitals operated by the Confederate and North Carolina Medical Departments. A comprehensive study of this topic would be voluminous; therefore, an overall summary is presented. To illustrate the story, the author will show a number of hospital-related covers. Confederate North Carolina hospital postal material is scarce. Examples from many hospitals are unknown.

When the war began, the Federal military had a system of medical services, but the Confederates created their military hospitals and medical services literally "out of thin air." For-

tunately, there was an adequate pool of North Carolina physicians from which to select military surgeons. There were no uniform, medical-education standards in the pre-war United States, but there were many prominent medical colleges located in both the northern and southern states that produced trained physicians. Military physicians were termed surgeons.

The Confederate States urgently needed to establish medical services to serve the rapidly expanding armies. North Carolina rose to the challenge. Governor J.W. El-

lis started the North Carolina Medical Corps on May 16, 1861, by appointing Dr. Charles E. Johnson of Raleigh as Surgeon General.

Dr. Johnson's first task was to appoint a surgeon and two assistant surgeons for every regiment. He then went about establishing hospitals in Raleigh because of the large number of recruits coming into camps of instruction in the capital city.

They needed examinations, vaccinations and treatment. He also appointed surgeons in charge, who administered the hospitals. Confederate military authorities set up general hospitals in eastern North Carolina, namely in Washington, New Bern and Wilmington, but only the one in Wilmington remained as Washington and New Bern fell to Union forces by March 1862.

During the Civil War there were two primary types of hospitals, general and wayside hospitals. General hospitals were set up on a permanent basis, usually near railroad depots or lines. They were large facilities, often with hundreds of beds, supported by on-site kitchens, laundries, storehouses, and other facilities as needed. Seven wayside hospitals were also set up along transportation routes, particularly railroad depots. Their mission was to treat soldiers on a temporary basis who were too sick or wounded to travel. They also provided bandages, refreshments and assisted with transportation. There were a few specialized types of hospitals established by the Medical Department, such as quarantine hospitals, African-American hospitals for slave labor and prisoner of war hospitals.

Establishing the hospitals in North Carolina was a formidable task, but the Medical Department wasted no time. The first hospital in Raleigh was General Hospital No. 7, or the "Fairgrounds Hospital," set up by Dr. Johnson immediately after his appointment as North Carolina Surgeon General. Although it was the among the first in the state, it was named No. 7. It was located on the state fair grounds on New Bern Avenue and was close to the large camps of instruction where thousands of volunteers reported for organiza-

PRITIGRAW HOSPITAL,
RALBIGH, N.C.

▲ Figure 1. General Hospital No. 13, or the Pettigrew Hospital, was constructed in 1864 near the fairgrounds in Raleigh. Dr. E. Burke Haywood was the chief surgeon there for the remainder of the war. (Courtesy of State Archives of North Carolina)

tion and training. It was the first of three general hospitals established in Raleigh. The other two were General Hospital No. 8, at Peace Institute and No. 13, the Pettigrew Hospital. General Hospital No. 8 survives today on the William Peace University campus. A contemporary view of Pettigrew Hospital is shown in Figure 1. It was constructed in 1864 near the fairgrounds in Raleigh. Dr. E. Burke Haywood was the chief surgeon there.

The Confederate States Medical Department was established on February 26, 1861, commanded by the Surgeon General, Dr. Samuel Preston Moore. On September 27, 1862, the Confederate Congress brought all state-operated military hospitals under the Confederate Medical Department. In March 1863 the Department designated a medical director of hospitals for each state. The first medical director of hospitals in North Carolina was Dr. E.N. Covey. He was succeeded by Dr. Peter E. Hines in September of 1863. Dr. Hines reported to the Confederate States Medical Department, while the surgeons in charge of the hospitals in North Carolina reported to Dr. Hines.

North Carolina Surgeon General Johnson resigned after the turnover of the North Carolina hospitals to the Confederate government and Dr. Edward Warren became the state surgeon general for the war's duration. Dr. Warren's department continued to support the hospitals with food, medicines and supplies, while the Medical Purveyor Department worked to procure medicines for the hospitals and army.

The September 27, 1862, legislation also required that hospitals be numbered to prevent confusion with other hospi-

tals, but wayside hospitals were not numbered until May 1863. Some hospitals have both names and numbers, such as the Fair Grounds Hospital, which was officially General Hospital No. 7. One of the hospitals established in Richmond to treat North Carolina Troops was General Hospital No. 24, which was also known as Moore's or Haywood's Hospital.

A cover posted on November 3, 186x, from New Market, Virginia, and addressed to "Mr. Cammie M. Certain at General Hospital No. 1, Kittrells Springs, N.C." is shown in Figure 2. The return address is "Henry Huggins Jennie Ireland, Faison Depot, Duplin Co., N.C." Postage was paid with a 10¢ Jefferson Davis stamp, CSA No. 11.

Figures 3 and 4 provide well-known images of the difficult conditions of the Civil War hospitals. While these scenes are from Federal archives, similar conditions existed for the Confederate hospitals. Figure 3 illustrates a Field Hospital immediately after a battle, where the surgeons had to cope with the casualties following the battle in environments often unsanitary and ill-equipped. It was photographed in June 1862. Conditions appeared much better in Figure 4, a hospital ward in a conva-



■ Figure 2. November 3, 186x cover from New Market, Virginia, to General Hospital No. 1 in Kittrells Springs (Granville County). Postage was paid with a 10¢ Jefferson Davis stamp, CSA No. 11.



▲ Figure 3. Typical Field Hospital immediately after a battle, where surgeons had to cope with casualties in environments often unsanitary and ill-equipped.



▲ Figure 4. Hospital ward in a convalescent camp. In the crowded conditions, infectious diseases spread rampantly and took more lives than battlefield injuries.

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lescent camp; however, in the crowded conditions, infectious diseases spread rampantly and took more lives than battlefield injuries.

A cover sent late in the war to Reverend Mathais M. Marshall at General Hospital # 1 Kittrell is shown in Figure 5. It was from posted at Hicksford, Virginia, on March 11, 1865 and paid with a 10¢ Jefferson Davis stamp, CSA No. 12. Hicksford was on the Petersburg Railroad 37 miles below Petersburg. Both Hicksford and nearby Belfield, were combined in 1887 to form Emporia, Virginia. The war end soon after this when the last major Confederate army led by General Joseph E. Johnston surrendered to General Sherman at Durham's Station on April 26, 1865.

After a battle, the victorious army would occupy the battle-field, set up field hospitals to treat the wounded and if required, evacuate them to a hospital. The retreating army would take as many wounded soldiers as they could, but often, severely wounded soldiers had to be left on the battlefield. Sometimes their own surgeons would stay behind with their wounded at field hospitals. On May 31, 1862, an agreement was established by the medical directors of the Army of Northern Virginia and the Union Army of the Potomac, which was approved by the commanding generals, that stipulated surgeons would not be taken as prisoners of war, a practice that was generally, if imperfectly, followed by both sides.

Figure 6 is a Civil War ambrotype photograph of member of the author's wife's family. An example of a wounded soldier's fate is described from the June 9, 1862, edition of the Fayette-ville Observer. It reported that Pvt. Archibald Benjamin Rooks, of Company E, 18th North Carolina Troops, was killed at the Battle of Hanover Court House, Virginia, on May 2, 1862. Actually, he was wounded and captured. He was hospitalized at Portsmouth Grove, Rhode Island. Later he was paroled, exchanged and went back to his regiment. Pvt. Rooks survived the war, returning to farming in Bladen County.

Being evacuated to a hospital could be hazardous. According to Brenda Chambers McKKean's book, George W. Cochran of the 37th North Carolina Regiment reported, "It was a ten mile trip in the darkness and every pebble a wheel hit caused pain to the sufferers; gullies, rocks, stumps brought forth groans, wails and entreaties from every wagon in the train, to all of which I contributed my fair share....a wagon turned over in front of mine filled with maimed soldiers.....But the worst was yet to come. The long street over which we must travel upon reaching Richmond was paved with round river rocks and when we entered it, it was a continuous series of bounces. I was in so much pain that I could not refrain from crying out."

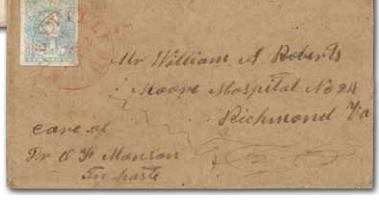
Figure 7 illustrates a December 3, 1863, cover from Yanceyville (Caswell County) addressed to Moore Hospital No. 24 in Richmond, Virginia, also known as Harwood's. Moore Hos-



■ Figure 5. March 11, 1865, cover from Hicksford, Virginia, to Rev. Mathais M. Marshall, Chaplain at General Hospital No. 1 in Kittrell's (Granville Country). Postage was paid with a 10¢ Jefferson Davis stamp, CSA No. 12.



▼ Figure 6. Private Archibald Rooks, a member of the author's family was reported in the Fayetteville Observer as killed on May 2, 1862, but actually was wounded and captured. Later he was paroled, exchanged and went back to his regiment. He survived the war and returned to farming in Bladen County.



▲ Figure 7. December 3, 1862, cover from Yanceyville (Caswell County) addressed to Moore Hospital No. 24 in Richmond, Virginia. Sent care of Dr. O.F. Manson, the surgeon in charge, it was paid with a 10¢ Thomas Jefferson stamp, CSA No. 2 (Stone Y).

Figure 8. ► May 7, 1864, cover addressed to Dr. P.A. Cox of Wil-

son Hospital No. 2. The 10¢ rate was paid with a CSA No. 11 Jefferson Davis stamp.



■ Figure 9. Charlotte circular datestamp used throughout the Civil War without a date in the postmark an Official Business cover to Surgeon H.S. Hilliard in charge of General Hospital at Asheville. Known as Sorrell Hospital, it was not a Confederate Medical numbered hospital. Postage was paid a CSA No. 11 Jefferson Davis stamp.

Dr J. A. Cox Wilson Haspital No. 2 3

Figure 10. ▶

March 2, 1864, cover from Gardner's Ford (Cleveland County) to General Hospital No. 7, paid with a CSA No. 12 Jefferson Davis stamp. Cover is different from most because the postmark is in the lower right corner since the letter writer used the upper left corner for the letter's address.



pital was established to treat North Carolina soldiers. The cover was sent in care of "Dr. O.F. Manson, who was the surgeon in charge. The 10¢ rate was paid by with CSA No. 2-Y (Stone Y), light-blue Thomas Jefferson stamp tied with the red Yanceyville circular datestamp used from May 20, 1862, to at least December 18, 1863.

General Hospital No. 2 was located in Wilson (Wilson County) in the converted Wilson Female Seminary. It was managed by Dr. S.S. Satchwell. A cover to this hospital is shown in Figure 8 addressed to Dr. P.A. Cox on May 7, 1864. The 10-cent rate is paid with a CSA No. 11 Jefferson Davis stamp. The hospital location is commemorated today by a North Carolina Highway Historical Marker. Wilson was a railroad and plank road hub at that time.

Correspondence sent to "Surg. H.S. Hilliard in charge Gen. Hosp. 5, Asheville, N.C." is illustrated in Figure 9. The date is not visible, because this Charlotte postmark was used without a date throughout the war. Tying a CSA No. 11 Jefferson Davis stamp, this circular postmark is known used in black ink from May 10, 1862, to March 19, 1865. The hospital was known as the "Sorrell Hospital" and was not a Confederate Medical Department numbered general hospital. It was set up by the Western Military District of the Department of North Carolina.

Infectious diseases produced as many hospitalizations as battle wounds. Of a total of 40,275 total deaths of North Carolina soldiers, 20,602 were from disease. A history of the 58th North Carolina Troops states, "During the winter of 1862-63, sickness, disease and death ran unabated through the fifty-eighth.

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■ Figure 11. June 30, 186x, cover from Stice's Shoal (Cleveland County) addressed to Dr. J.W. Tracy at General Hospital No. 7 in Raleigh. The 10¢ rate was paid with a CSA No. 12 Jefferson Davis stamp canceled by pen stroke. Manuscript postmarks were the only type used at Stice's Shoal post office.

Figure 12.

Another cover to General Hospital No. 7, the Fair Grounds Hospital of Raleigh marked in the lower left corner, was sent to Dr Hal. Harriss[sic] from Yanceyville (Caswell County). The red postmark of Yanceyville is difficult to read, but the enclosed letter provides a date of July 25, 1863. The 10¢ rate was paid with a CSA No. 12 Jefferson Davis stamp.



Men from rural backgrounds had never been exposed to many of the childhood diseases so common in camp. Measles was one of the worst, transmitted by the close contact of the men with each other."

Smallpox vaccinations were common long before the Civil War. The Medical Department established a program to collect scabs, the raw material for vaccination, from vaccinated soldiers and civilians, and used these to inoculate new soldiers against this disease. At one point, the Medical Department was authorized to pay donors \$5.00 for scabs. The main lethal diseases and illnesses were measles, pneumonia, chronic diarrhea, typhoid, yellow fever and mumps. The germ theory was not yet understood, but the importance of quarantine, disinfectants and sanitation in the hospitals was stressed.

Another persistent problem was a shortage of medicines, caused by the Federal naval blockade. Confederate blockade runners and smuggling helped relieve the shortages. The North Carolina Medical Purveyor Department was set up to procure medicines. There were drug manufacturers in the larger cities, such as Charlotte and Lincolnton, but medicines and medical supplies were sought from any source. Patriotic societies such as the Ladies' Aide Societies, the Young Men's Christian Society and the Raleigh Ambulance Company raised funds and provided supplies and nursing services for the army and the hospitals.

A cover from Gardner's Ford (Cleveland County) on March 2, 1864, was mailed to M.F. Hull at General Hospital No. 7, Ward H, in Raleigh. The 10-cent rate was paid with a CSA No. 12 Jefferson Davis stamp canceled with crossed pen strokes. The recipient was Pvt. Major Franklin Huff, Co. A, 18th North Carolina, a resident of Catawba County. He was wounded at Chancellorsville, Virginia, on May 2, 1863, and then was detailed for light duty at "a hospital in Raleigh." The cover is different than most with the manuscript postmark placed in the lower right corner since the letter writer had used the upper left corner for the sending address location.

Figure 11 shows a June 30, 186x, cover from Stice's Shoal (Cleveland County), posted to Dr. J.W. Tracy at General Hospital No. 7 in Raleigh. This post office operated from March 8, 1847, until August 30, 1902. During the Civil War, the postmaster was E.S.E. Chambers. The 10-cent rate was paid with a CSA No. 12 Jefferson Davis stamp canceled with a pen stroke. The only recorded postal markings for this post office are manuscript postmarks.

Another cover to General Hospital No. 7, the Fair Grounds Hospital of Raleigh, marked in the lower left corner, was sent to Dr Hal. Harriss[sic] from Yanceyville in Caswell County, and is illustrated in Figure 12. The 10-cent rate was paid with a CSA No. 12 Jefferson Davis stamp tied by a 30.5 mm red circular

Figure 13.

December 17, 186x, cover from Weldon (Halifax County) addressed to J.W. Tracy at General Hospital No. 7 in Raleigh. Postage was paid with a copy of CSA No. 11, a 10¢ Jefferson Davis stamp torn from a sheet of the stamps. Dr. Tracy was assigned there in may 1864 and served until the end of the war,



datestamp of Yanceyville known used from May 20, 1862, to December 18, 1863. The postmark date is difficult to read, but the enclosed letter is dated July 25, 1863.

The cover in Figure 13 is addressed to "Mr. J.W. Tracy, Genl Hospital No. 7, Raleigh, N.C." It was posted on December 17, 186x, at Weldon (Halifax County) and was paid with copy of CSA No. 11, a 10 cent Jefferson Davis stamp torn from a sheet of stamps. The Weldon 32.5 mm black circular datestamp was used from May 1, 1862, to June 4, 1864. Dr. Tracy was assigned to General Hospital No. 7 in Raleigh in May 1864 and served there until the end of the war.

By 1865, the Medical Department operated 14 general and seven wayside hospitals in North Carolina. The hospitals submitted weekly reports to the Medical Department. Hospital numbers and categories were sometimes changed, based on the need at the time. An example is in April 1863 when General Hospital No. 1 was at Weldon. By late 1864, Weldon had reverted to its former designation as a wayside hospital and the newly established hospital at Kittrell was named General Hospital No. 1. A weekly return dating from late 1864 lists the general and wayside hospitals for that reporting period and their surgeons in charge as follows:

General Hospitals:

General Hospital No. 1: Kittrell, Surgeon: Holt F. Butt General Hospital No. 2: Wilson, Surgeon: Solomon S. Satchwell

General Hospital No. 3: Goldsboro, Surgeon: William A. Holt General Hospital No. 4: Wilmington, T.R. Micks

General Hospital No. 5: Wilmington, Joshua C. Walker

General Hospital No. 6: Fayetteville, Surgeon Benjamin F. Fessenden

General Hospital No. 7: Raleigh (The Fair Grounds Hospital), Surgeon James Wright Tracy

General Hospital No. 8: Raleigh (Located at Peace Institute), Surgeon H.G. Leigh

General Hospital No. 9: Salisbury, Omitted from report, Surgeon probably J.M. Fauntleroy.

General Hospital No. 10: Salisbury, Surgeon Joseph W. Hall

General Hospital No. 11: Charlotte, Surgeon Robert Gibbon General Hospital No. 12: Greensboro, Surgeon William H. Moore

General Hospital No. 13: Raleigh, (The Pettigrew Hospital), Surgeon E. Burke Haywood

General Hospital No. 14: Wake Forest, Surgeon Moses Jones DeRosset

Fayetteville Arsenal and Armory: Surgeon William H. Hall (Note, not numbered but included in General Hospital Report)

Wayside Hospitals:

Wayside Hospital No. 1: Weldon, Surgeon Henry J. Macon Wayside Hospital No. 2: Greensboro, Surgeon Henry Holmes Hunter

Wayside Hospital No. 3: Salisbury, Surgeon M. Whitehead Wayside Hospital No. 4: Goldsboro, Surgeon L.A. Stith Wayside Hospital No. 5: Wilmington, Surgeon Robert Seymour Halsey

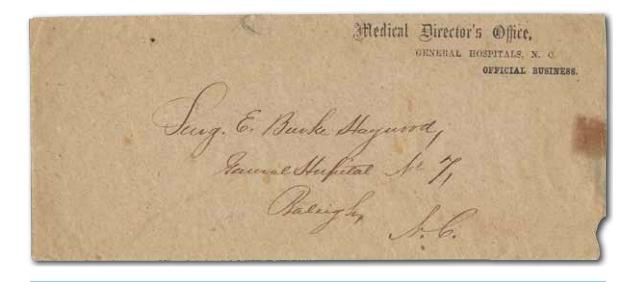
Wayside Hospital No. 6: Charlotte, Surgeon J.W. Ashby Wayside Hospital No. 7: Tarboro, Surgeon J.H. Baker

The Sorrell Hospital in Asheville was not included in this report because it was not a North Carolina departmental numbered hospital. There was also a privately operated wayside hospital at High Point at the Barbee Hotel.

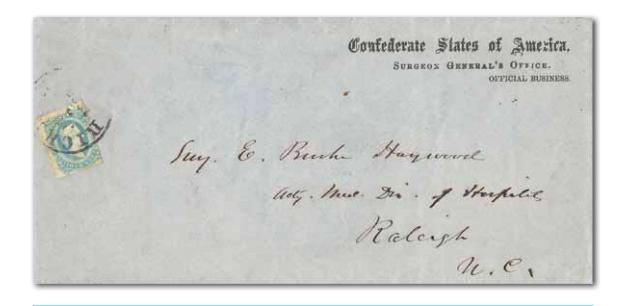
Figure 14 illustrates a semi-official envelope with the imprint "Medical Director's Office, GENERAL HOSPITALS, N.C., OFFICIAL BUSINESS." It has no postal markings and was probably hand carried. It was sent to Surgeon E. Burke Haywood, the Superintendent of General Hospitals in Raleigh at General Hospital No. 7.

Figure 15 is a blue, legal-size envelope from the Confederate States Surgeon General's Office in Raleigh sent on June or July 2, 1863, to Surgeon E. Burke Haywood in Raleigh, acting Director of Hospitals at the time. A CSA No. 11-ADa, 10-cent milky blue Jefferson Davis stamp paid the postage, tied with a Richmond, Va. postmark. Postage was required because only the Post Office Department and postmasters had free franking.

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▲ Figure 14. Undated semi-official envelope with imprint, "Medical Director's Office, GENERAL HOSPITALS, N.C., OFFICIAL BUSINESS," sent outside the mails to Surgeon E. Burke Haywood, the Superintendent of General Hospitals, located at General Hospital No. 7 in Raleigh.



▲ Figure 15. Blue legal-size envelope with an official imprint, "Confederate States of America, SURGEON GENERAL'S OFFICE, OFFICIAL BUSINESS," sent from Richmond, Virginia, on June or July 2, 1863, to Surgeon E. Burke Haywood, Acting Medical Director of Hospitals in Raleigh. Postage was paid with a CSA No. 11, 10¢ milky blue Jefferson Davis stamp because only the Post Office Department and postmasters had free franking privileges.

In early 1865 the war came to North Carolina in full force. Previously, only part of North Carolina's coastal area had been occupied. Fortunes changed when Fort Fisher, the principal guardian of Wilmington and the remaining blockade-running seaport in the Confederacy, fell on January 15. General William T. Sherman's juggernaut entered the state on March 8 from Georgia via South Carolina. The Confederates failed to stop the

overwhelming Federal armies at the battles of Wyse Fork near Kinston (March 7-10), Averasboro (March 16) and Bentonville (March 19-21). These battles caused a large number of casualties that were first treated at field hospitals on the battlefields. Three private homes used as field hospitals have survived at Averasboro. Other surviving field hospitals are the Cobb House near Kinston and the Harper House at Bentonville Battlefield.

The hospital system was strained by these battles of March 1865 because the general hospitals at Goldsboro and Wilmington had been lost to Union forces. General Hospital No. 3 at Goldsboro was moved to High Point and it incorporated the private Barbee Wayside Hospital. Temporary hospitals were set up in churches in Raleigh and other locations. The First Presbyterian Church in Greensboro was also used as a temporary hospital. Other casualties went to the remaining general and wayside hospitals. General Joseph E. Johnson surrendered the last major Confederate army on April 26, 1865, at Durham's Station. The war was effectively over. The hospitals performed their duty until the end and then began the process of treating the final casualties and closing down operations.

In summary, the North Carolina Medical Department created a system of general and wayside hospitals when the war started. In September 1862, the Confederate Medical Department assumed control of all hospitals in the Confederate States. Although there were persistent shortages of staff, medicines and supplies, the hospitals were professionally managed with trained and experienced physicians and hospital stewards. The surgeons in charge struggled with an uncertain supply chain and surges in patient loads; but, within the resources available, these hospitals achieved their mission and successfully treated the large numbers of sick, wounded and convalescent soldiers that the war produced.

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New Marking

A cover showing a new Laurinburg marking was submitted by Jimmy Jordan of Wilmington, one of our members who routinely submits new postmarks for our *North Carolina Postmark Catalog Update*, which can be found on our website. This 30.5 mm circular datestamp has non-serifed letters and was struck in black ink. It is much wider in diameter than the Type 2 shown in the catalog for 1882-84, features that he observed when submitting the scan of the cover. When Richmond County is updated it will be become Type 6.



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