

Dental Corps

41-1

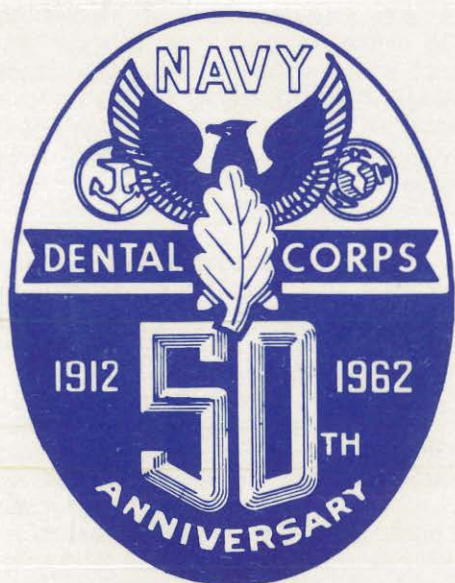
411

Dept Towls

DENTAL DEPARTMENT

UNITED STATES NAVAL ACADEMY

ANNAPOLIS :: MARYLAND



*A Brief History of the  
United States Naval Dental Corps*

## THE UNITED STATES NAVAL DENTAL CORPS

Fifty years have passed since President Taft, on 22 August 1912, signed a bill passed by Congress authorizing the appointment of " \* \* \* not more than 30 acting assistant dental surgeons to be a part of the Medical Department of the United States Navy \* \* \*."

Although the event marked the establishment of the U. S. Naval Dental Corps, its roots may be traced backward for well over 100 years. For it was in 1844 that Dr. Edward Maynard, a dentist in Washington, D. C., first advocated a dental corps for the U. S. Army and for the U. S. Navy. Numerous letters substantiate his efforts. During the years that intervened many additional attempts were made to provide regular dental care in the U. S. Navy.

There were, however, dentists and dental apprentices in the U. S. Navy before the establishment of a Dental Corps.

Thomas O. Walton, D.D.S., a graduate of the Baltimore College of Dental Surgery in 1856, was the first graduate dentist to serve as an officer in the Navy. Appointed as an Acting Assistant Surgeon, he served in the Medical Department of the U. S. Naval Academy from 22 April 1873 to 30 June 1879. The following year he was appointed as a civilian contract dentist and in that capacity provided dental care for the midshipmen until 1899.

Dr. Richard Grady succeeded Dr. Walton at the Academy as a contract dentist. Dr. Grady was later commissioned in the U. S. Naval Dental Corps following its establishment.

Elsewhere, when available, dental care was accomplished by limited numbers of hospital stewards, with varying amounts of training in dentistry, who were enlisted in the Navy. In 1903, Navy Surgeon General P. M. Rixey stated that, " \* \* \* this arrangement \* \* \* is not satisfactory to the Bureau and is neither just to the men nor pleasing to the dental profession \* \* \*."

In 1904, Edward E. Harris, D.D.S., became the first graduate dentist to enlist in the Navy as a hospital steward performing dental treatment exclusively. Remaining in the Service, he was commissioned in the Dental Corps following its establishment. Others followed Dr. Harris in a similar capacity.

Granted the authority by Congress to form a Dental Corps, the Secretary of the Navy appointed Emory A. Bryant, D.D.S., and William N. Cogan, D.D.S., to establish the Corps. Dr. Bryant was a practicing dentist in Washington, D. C.; Dr. Cogan resigned as the Dean of Georgetown University Dental School to accept his appointment.

The first examining board for the selection of dental officers to serve in the U. S. Navy met in November-December 1912 at Washington, D. C. It was comprised of the following members:

Lieutenant Commander Richmond C. Holcomb, MC,  
USN, President  
Acting Assistant Dental Surgeon Emory A. Bryant  
Acting Assistant Dental Surgeon William N. Cogan  
William F. Murdy, Hospital Steward, Clerk.

The latter was graduated later from dental school and entered the Dental Corps in 1918.

The first successful candidates who appeared before the first examining board were appointed in January 1913. Their names follow:

Dr. Eugene H. Tennent	Dr. Harry E. Harvey
Dr. Joseph A. Mahoney	Dr. James L. Brown

In April of 1913, the first officers were appointed to the Naval Dental Reserve Corps as follows:

Dr. Williams Donnally, Washington, D. C.  
Dr. Vines Edmunds Turner, Raleigh, N. C.  
Dr. George C. Kusel, Swarthmore, Pa.

The above appointees also constituted the first board for the selection of officers of the Navy Dental Reserve Corps.

On 5 March 1913, Acting Assistant Dental Surgeon H. E. Harvey reported to the USS SOLACE as the first dental officer ordered to a ship.

On 27 April 1913, Acting Assistant Dental Surgeon James L. Brown was ordered to the U. S. Naval Station, Guam, as the first dental officer to an overseas base.

On 4 August 1913, Acting Assistant Dental Surgeon Lucian C. Williams, the first dental officer ordered to Marine duty reported to Parris Island, S. C.

Thus were the beginnings of recognized dental care in the U. S. Navy.

It should be noted that dental officers appointed under the Act of 1912 were not commissioned, although the Act made provision for commissioning "at the end of 3 years." The early appointees held the relative rank of Lieutenant (junior grade) and wore the insignia of such rank.

The Reorganization Act of 29 August 1916 granted dental surgeons "the rank, pay, and allowances of Lieutenants (junior grade). It provided further for advancement to the ranks of Lieutenant and Lieutenant Commander.

A young and inexperienced organization, the Dental Corps faced the spectre of war in less than 5 years after its establishment. Records indicate that 35 officers were on active duty 6 April 1917, the date marking the entrance of the United States into World War I; a peak of 500 officers was reached before the war ended.

In spite of its youth, the Dental Corps, nevertheless, had its heroes in World War I. Two of its members were decorated with the Nation's highest award, the Medal of Honor: Lieutenant (junior grade) Weeden E. Osborne, DC, USN, the first naval officer to meet death in the land fighting overseas,

"\* \* in helping to carry the wounded to a place of safety \* \*," and Lieutenant (junior grade) Alexander G. Lyle, DC, USN, "\* \* for extraordinary heroism and devotion to duty \* \*."

Following the war, the Dental Corps entered a period of consolidation. Although dental officers had served in the Bureau of Medicine and Surgery previously, it was in 1922 that a Dental Division was established to "care for the technical needs of the Corps." In 1923, a Dental School was created as a Division of the U. S. Naval Medical School. The latter event marked the embarkation upon a course that has greatly influenced the professional excellence of the Corps through the years.

Notwithstanding the fact that dental officers were granted the pay and allowances of the ranks of Commander and Captain in 1918, it was not until 1926 that the ranks were authorized. Though 14 officers were selected for the rank of Commander, the same year, it was not until 1937 that dental officers were promoted to the rank of Captain. In 1942, the rank of Rear Admiral was authorized, Captain Alexander G. Lyle, DC, USN, being the first dental officer to be so honored.

The economic crisis that faced the United States in the Thirties had its reflection in the U. S. Naval Dental Corps. In 1932, the Naval Dental School was closed as budgetary limitations caused retrenchments. Further, six officers, who held temporary appointments, were assigned temporary duty with the Army in 1933 for service with the Civilian Conservation Corps.

In 1936, the U. S. Naval Dental School was reopened, this time as a part of the Naval Medical Center, Washington, D. C. Significantly, Commander John V. McAlpin, DC, USN, was ordered as Dental Officer in Command, the first dental officer to be so titled.

In the early 1940's, for the second time since the establishment of the Dental Corps, war clouds loomed on the horizon. The Corps expanded to the extent that 759 officers were on active duty at 347 dental facilities on 7 December 1941, the morning of the attack on Pearl Harbor. The peak of World War II saw 7,026 dental officers on duty at 1,545 installations, the largest of which was Great Lakes with 459 officers.

Of significance during World War II, the U. S. Naval Dental School was commissioned as a part of the National Naval Medical Center in 1942; the first woman dentist in the Armed Forces, Lieutenant Sara G. Kraut, DC, W-V(S), USNR, reported to Great Lakes in 1944; and a movement gained momentum for an autonomous Dental Corps. The latter was climaxed in December 1945 with the approval of a bill, "To provide more efficient dental care of the personnel of the United States Navy."

But there was another side to the Dental Corps in World War II. Indications of the full participation of dental officers in the conflict are the following lists:

## KILLED IN ACTION

LCDR Hugh R. Alexander, DC, USN	7 December 1941	USS OKLAHOMA	Pearl Harbor
LT EDWARD A. Baumbach, DC, USNR	13 November 1942	USS JUNEAU	Guadalcanal
LT Thomas F. Capps, DC, USNR	24 November 1943	USS LISCOME BAY	Tarawa
LT James S. Cate, DC, USNR	25 July 1944	Fourth MARDIV	Tinian
LCDR Thomas E. Crowley, DC, USN	7 December 1941	USS ARIZONA	Pearl Harbor
LT Stanley E. Ekstrom, DC, USN	21 October 1944	USS BIRMINGHAM	Philippines
LT Gilbert F. Gorsuch, DC, USN	12 November 1942	USS ERIE	Atlantic
LCDR Earl O. Henry, DC, USNR	30 July 1945	USS INDIANAPOLIS	Philippines
LT Charles W. Holly, Jr., DC, USN	1 March 1942	USS LANGLEY	Indian Ocean
LCDR Farrell W. Keith, DC, USN	1 March 1942	USS HOUSTON	Java Sea
LT(JG) Stephen M. Lehman, DC, USN	4 July 1944	Fourth MARDIV	Salpan
LT(JG) Thomas R. McInyre, DC, USN	30 October 1944	USS FRANKLIN	Okinawa
LT Edward J. O'Reilly, DC, USN	24 August 1942	USS ASTORIA	Solomons
LT(JG) Carol W. Peterman, Jr., DC, USNR	8 July 1944	USS LST-384	France
LT Robert W. Seegar, DC, USNR	1 May 1945	USS TERROR	Okinawa
LCDR Laurice A. Tatum, DC, USNR	15 September 1942	USS WASP	Guadalcanal
CDR Wadsworth C. Trojakowski, DC, USN	8 May 1942	USS LEXINGTON	Coral Sea
LT Miller C. Wonn, DC, USNR	21 February 1945	USS BISMARCK SEA	Iwo Jima

## DIED AS PRISONERS OF WAR

LCDR James A. Connell, DC, USN	6 May 1942	Navy Yard, Cavite, Philippines
LT(JG) Robert G. Herthneck, DC, USN	6 May 1942	Navy Yard, Cavite, Philippines
LT Henry C. Knight, DC, USN	6 May 1942	4th Marine Regiment, Philippines
LT Alfred F. White, DC, USN	6 May 1942	USS CANOPUS, Philippines

Following demobilization, the Dental Corps faced its problems — the implementation of the autonomy bill (PL 284), officer retainment and career attractiveness, a broadening education program, opportunities for dental research, the assignment of dentists trained in the Navy V-12 program to the Army and Air Force, etc.

In 1946, the U. S. Naval Dental Clinic, Brooklyn, New York, was established as the first of eleven such dental installations under the management of the Bureau of Medicine and Surgery and under the command of a dental officer.

June of 1950 found the Dental Corps, with 1,003 officers on duty, faced with war in Korea and the need for another build-up. The latter was given impetus by passage of the "Doctors' Draft Law" which established priorities for service based upon previous military service and training. During the peak, over 1,900 dental officers, assisted by 4,700 dental technicians, carried on operations at 480 facilities. Front line dentistry with the Marines in Korea was performed either in trucks that had been converted to mobile dental units or in quonset huts.

Ever being alert for progressive change, a program was originated in April 1955, that eventually would convert most dental operating units in the Navy to higher speeds. The initial conversions were to belt-driven handpieces and later to turbines. The Dental Corps is proud of its part in the "high speed revolution" inasmuch as air turbine and ultrasonic vibration instruments developed at the U. S. Naval Dental School played important roles in the radical changes in dental instrumentation during this period. The pioneer models of both instruments are on display at the Smithsonian Institution, United States National Museum, Washington, D. C.

As the U. S. Navy entered the nuclear and space age, the Dental Corps was challenged with new problems. The complexities of the new Navy made it imperative that the health of its men be brought to higher levels of perfection to eliminate " \* \* every possible cause for impairment of the sense of coordination." Accordingly, new Navy dental research programs were directed toward closed environment and cold weather studies. The former to better prepare Navy men for trips into outer space and for trips of prolonged periods beneath the seas in nuclear powered submarines. The cold weather studies were in support of the various Navy programs in the Polar regions. A sequel to the latter was the founding of the Antarctic Dental Society by four members of the U. S. Naval Dental Corps in December 1956.

In December 1956, the Dependents' Medical Care (Medicare) Act became effective. It was of major import in that it made 130,000 dependents at overseas bases and remote areas eligible for routine dental care without authority for compensatory increases in dental personnel. The Dental Corps, however, accepted it in stride.

During this period significant developments in broadening the Dental Corps' educational program included: the production of a casualty care training manikin, "Mr. Disaster"; the publication of a Color Atlas of Oral Pathology; and the creation of an extension training program covering dental clinic administration, in addition to a series of professional subjects.

Another major highlight in the history of the U. S. Naval Dental Corps was marked with the commissioning of the nuclear powered USS LONG BEACH in September 1961 and the USS ENTERPRISE in November of the same year. In this manner, dental treatment in the U. S. Navy under nuclear power was initiated as a routine procedure.

It is thus after 50 years of steady progress that the U. S. Naval Dental Corps, as an integral component of the Medical Department of the U. S. Navy, reflects with due humility upon its previous accomplishments and passes its heritage as a challenge to the future to maintain its world-wide leadership in the profession of dentistry.

Prepared in the Dental Division Bureau  
of Medicine and Surgery during 50th  
Anniversary Year of the U. S. Naval  
Dental Corps.

June 1962



