Civil War Medicine

Lesson Plan created by:
Abraham Lincoln Presidential Library & Museum

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LESSON PLAN

Grade: 4th-8th grade

Title: Civil War Medicine

Timeframe: 60 minutes

Brief Synopsis: In the mid-19th century, most medical treatment was sought in the home. The onset of the Civil War prompted an evolution in medical care, including the creation of the Ambulance Corps, development of the triage system, and an improvement in hospital organization. Participants will identify popular home remedies from the time and apply their new understanding of triage as they take on the roles of patients and Ambulance Corps members in a simulated battlefront scenario.

Essential Questions: What home remedies were used during the Civil War era? How did battlefield medicine evolve during the war?

Objectives: Students will be able to:

1. Discuss and identify popular home remedies in use during the Civil War era.
2. Explain how battlefield medicine evolved during the Civil War.
3. Define “triage” and identify the three triaging levels used by the Ambulance Corps during the Civil War.
4. Demonstrate understanding of triage basics through role play.

Learning Standards: This lesson addresses the following Illinois State Learning Standards.

ELA

CCR Speaking and Listening: Comprehension and Collaboration:
1. Prepare for and participate effectively in a range of conversations and collaborations with diverse partners, building on others’ ideas and expressing their own clearly and persuasively.
2. Integrate and evaluate information presented in diverse media and formats, including visually, quantitatively, and orally.

CCR Language: Vocabulary Acquisition and Use:
1. Determine or clarify the meaning of unknown and multiple-meaning words and phrases by using context clues, analyzing meaningful word parts, and consulting general and specialized reference materials, as appropriate.

Social Science

Inquiry Skills

4th-5th grade:

Developing Questions and Planning Inquiries
SS.IS.1.3-5. Develop essential questions and explain the importance of the questions to self and others.
SS.IS.2.3-5. Create supporting questions to help answer essential questions in an inquiry.

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Communicating Conclusions and Taking Informed Action
SS.IS.6.3-5. Construct and critique arguments and explanations using reasoning, examples, and details from multiple sources.
SS.IS.8.3.3-5. Use listening, consensus-building, and voting procedures to decide on and take action in their classroom and school.

6th-8th grade:

Developing Questions and Planning Inquiries
SS.IS.1.6-8. Create essential questions to help guide inquiry about a topic.
SS.IS.2.6-8. Ask essential and focusing questions that will lead to independent research.

Communicating Conclusions and Taking Informed Action
SS.IS.6.6-8.MdC. Construct explanations using reasoning, correct sequence, examples and details, while acknowledging their strengths and weaknesses.
SS.IS.8.6-8.LC. Analyze how a problem can manifest itself and the challenges and opportunities faced by those trying to address it.
SS.IS.8.6-8.MdC. Assess individual and collective capacities to take action to address problems and identify potential outcomes.

Geography
5th grade:
SS.G.2.5. Describe how humans have utilized natural resources in the United States.

History
4th grade:
SS.H.1.4. Explain connections among historical contexts and why individuals and groups differed in their perspectives during the same historical period.

5th grade:
SS.H.3.5. Explain probable causes and effects of events and developments in U.S. history.

6th-8th grade:
SS.H.1.6-8.LC. Classify series of historical events and developments as examples of change and/or continuity.
SS.H.1.6-8.MC. Use questions generated about individuals and groups to analyze why they, and the developments they shaped, are seen as historically significant
SS.H.4.6-8.LC. Explain multiple causes and effects of historical events.
**Vocabulary Words:**

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
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<tbody>
<tr>
<td>Abscess</td>
<td>A localized collection of pus, formed by tissue disintegration and surrounded by inflammation</td>
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<tr>
<td>Ambulance</td>
<td>A 2- or 4-wheeled cart used to transport the ill and wounded</td>
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<tr>
<td>Casualty</td>
<td>A person injured or killed during war or other catastrophic event</td>
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<td>Diarrhea</td>
<td>Excessive evacuation of watery feces</td>
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<tr>
<td>Dysentery</td>
<td>An infection of the lower intestinal tract producing stomach pain, nausea, fever, vomiting, and severe diarrhea, often with the passage of blood.</td>
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<tr>
<td>Indigestion</td>
<td>Stomach pain or discomfort caused by difficulty in digesting food</td>
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<tr>
<td>Insomnia</td>
<td>Inability to sleep</td>
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<tr>
<td>Jaundice</td>
<td>Yellowish staining of the eyes, skin, and body fluids by bile pigment.</td>
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<tr>
<td>Laxative</td>
<td>Facilitating the evacuation of the bowels</td>
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<tr>
<td>Pneumonia</td>
<td>Lung inflammation caused by infection, producing cough, mucus, chest pain, chills (hot and cold), and rapid breathing</td>
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<tr>
<td>Poultice</td>
<td>Usually a heated moist soft mass of an adhesive substance, as meal or clay, spread on cloth and applied to warm, moisten, or stimulate a sore or inflamed part of the body.</td>
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<td>Remedy</td>
<td>A treatment or medicine for illness or injury</td>
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<td>Sedative</td>
<td>Having a calming, soothing or tranquilizing effect.</td>
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<tr>
<td>Triage</td>
<td>The screening and classification of wounded, sick, or injured patients during war or a disaster to determine priority needs and ensure the most efficient use of medical and surgical personnel, equipment, and facilities.</td>
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Materials:

Overall:
Content Information Sheet (in packet)
Introductory and Concluding Discussion Questions (see below)
Activity #1 Card – Home Remedies Worksheet (in packet)
Activity #2 Card – Triage on the Civil War Front (in packet)
Medium for displaying Home Remedies PowerPoint
Materials for Activities – see Activity Cards for listing (in packet)

Procedures:

1. Introduce the topic of medicine in the Civil War era by asking students the Introductory Discussion Questions.
2. Begin discussion of home remedies and herbal remedies at that time. Use the Home Remedies information provided in the Content Information Sheet as a guide.
3. Complete Activity #1 – Home Remedies Worksheet.
   1. After concluding the activity, use the questions included in the Activity Card to reflect on the activity and facilitate discussion.
4. Introduce the idea that with the onset of the Civil War, medical treatment had to adapt for the large numbers of ill or injured soldiers.
5. Begin discussion on Battlefield Medicine, using the Battlefield Medicine information provided on the Content Information Sheet as a guide.
6. Complete Activity #2 – Triage on the Civil War Front
   1. After concluding the activity, use the questions included in the Activity Card to reflect on the activity and facilitate discussion.
7. Use Concluding Discussion Questions to reflect on the lesson and summarize key points.

Introductory Discussion Questions:

1. Before the Civil War, what do you think medical care was like for most Americans?
   a. Where did it take place?
   b. Who administered it?
   c. What kinds of treatment was available?
   d. How do you imagine this was different than what you would expect today?

Concluding Discussion Questions:

1. How did medical treatment evolve during the Civil War?
2. Ask students to name one thing they learned about Civil War medicine today.
Resources:

Websites

American Battlefield Trust – Civil War Medicine
https://www.battlefields.org/learn/articles/civil-war-medicine

National Museum of Civil War Medicine – Major Jonathan Letterman
http://www.civilwarmed.org/quick-facts/letterman/

National Park Service – Civil War Medicine

Vicksburg National Military Park – Civil War Medicine

Other resources


https://archive.org/stream/medicalrecollect00lettuoft#page/n0/mode/2up


McKay, Mrs. C.E.  Stories of Hospital and Camp.  Philadelphia: Claxon, Remsen & Haffelfinger, 1876.


Content Information Sheet

Home Remedies

1. Treatment at Home
   a. Before the Civil War, most ill and injured people did not seek treatment at a hospital.
   b. So where would you go if you were sick?
      i. You stayed home.
      ii. Family members, generally female, would nurse the ill at home.
   c. The use of home remedies was the common way of dealing with diseases.
      i. Home remedies were commonly passed down through generations.
      ii. Cures often depended on where the person lived.
      iii. A few unusual remedies:
         1. Tennessee
            a. To cure warts: Take pebbles and rub one on each wart. Then take the pebbles to a crossroads and thrown them over the left shoulder. The warts should go away with the pebbles.
            b. To cure a stiff neck: Wrap underwear that has been worn for at least two days around the neck.
            c. To test for death: Rub the sick person’s hand with yeast. If a dog licks the hand, the person will live. If not, the sick person will not recover.
         2. Nebraska
            a. Due to a mistrust of doctors and a fear of being buried alive, many bodies were left out for a week after death before burial – just to make sure the person truly was dead and there hadn’t been a mistake.
            iv. Remedies were often created using the nature of the area.
               1. Plants, herbs, tree barks, etc.
               2. At the time, there was a belief that everything needed to treat illnesses was already naturally provided.
         d. Some remedies used to treat soldiers during the war:
            i. [See Home Remedies PowerPoint provided with lesson plan]

Battlefield Medicine

1. With the onset of the war, suddenly there were large numbers of people needing medical help.
   a. These soldiers were away from home, where most medical treatment was previously sought.
   b. There were large numbers of ill and injured soldiers in concentrated areas.
   c. How did these soldiers get medical help?
2. At the beginning of the war, surgeons were not equipped well enough to handle the large amount of casualties. The organization of battlefield hospitals was nearly non-existant.
3. Jonathan Letterman became the Medical Director of the Army of the Potomac in July 1862, a little more than a year after the war began. With the support of General George McClellan and U.S. Surgeon General William Hammond, Letterman quickly made changes which altered battlefield medicine forever.

4. These changes were known as the Letterman Plan:
   a. Creation of the Ambulance Corps
      i. At the beginning of the war, there was no organized Ambulance Corps.
      ii. There were carts that could be used as ambulances to carry the injured, but they were also used for other things, and were not always available.
         1. These carts were governed by the Quartermaster, who was in charge of supplies for the troops.
      iii. There were also no people specifically designated to help wounded soldiers.
         1. The wounded were often left to fend for themselves, or were aided by musicians or other wounded soldiers.
         2. Wounded soldiers could lie on battlefields for days, in pain, suffering from thirst and exposure to the elements.
      iv. Letterman switched ambulance control from the Quartermaster to the Medical Department
         1. Every troop had a set number of ambulances that could only be used for transporting wounded and ill soldiers.
         2. There were also dedicated and trained members of the Ambulance Corps to drive the ambulances, remove the wounded from the field, and transport the wounded as needed to the different hospital stations.
   v. These changes made an immediate and noticeable difference
      1. BEFORE: Battle of Bull Run, July, 1861
         a. Union Army had hired civilian drivers to transport the wounded from the battlefield, but the violence of the battle sent all drivers retreating 30 miles to Washington, D.C., with no patients.
         b. Many of the wounded had to make the 30 mile journey on foot.
      2. AFTER: Battle of Antietam, September, 1862
         a. The ambulance Corps removed all 10,000 Union wounded from the battlefield and transported them to field hospitals for treatment within twenty-four hours.
   b. The Three-tiered Hospital System
      i. Before, soldiers were sent directly to the field hospitals, or not cared for at all. Many couldn’t make it to the field hospitals. In the new system, there were multiple levels for care.
      ii. Three-tiered Hospital System:
         1. Forward-Aid Station
            a. Forward aid stations were tents set up just behind the front lines. They moved with the tide of battle.
            b. This is where soldiers received immediate medical care on the field.
i. Stopping bleeding
ii. Stabilizing soldiers

c. Soldiers with minor injuries could then return to battle.
d. Soldiers needing additional care would be stabilized and transported to the field hospital.

2. Field Hospital
   a. Field hospitals were further behind the lines and were more established areas to treat the wounded.
   b. They could be used for a few weeks or a few months.
   c. They were established in tents or nearby houses/churches/buildings.
   d. Field hospitals are where surgeries would be conducted.
      i. Bullets removed, wounds bandaged
      ii. Amputations
   e. Letterman saw that field hospitals were poorly run, so he organized them:
      i. 1 head surgeon
      ii. 1 assistant: administrative position, handled equipment
      iii. 3 medical officers: handled operations and patient treatments
      iv. 3 assistant medical officers: assisted in surgeries
      v. 1 person assigned to anesthesia
      vi. Operating surgeons chosen on skill, rather than army rank
      vii. Any soldier, North and South, was treated
   f. If a soldier needed more treatment or time to recover, he was sent on to the general hospital

3. General Hospital
   a. Once a soldier had been stabilized and could be transported, he was sent to a general hospital, usually located in larger cities far behind the lines.
   b. Washington, D.C. and Philadelphia held two of the larger general hospitals used by the Union Army.
   c. Richmond, VA and Atlanta, GA were two of the largest used by the Confederate Army.
   d. A patient would remain in the hospital until he was sent home, sent back to his regiment, or died.
      iii. By the end of the war, the Union had established 203 hospitals. The Confederacy had established 150.
   c. The Triaging System
      i. Triage is a system used to prioritize care in cases of mass casualties.
         1. Established how to decide who is most in need of care, and the order in which to evacuate a battlefield and remove soldiers from the Forward Aid Station.
ii. Letterman’s triaging system had three levels:

1. **Most important – Serious but survivable injuries and illnesses**
   a. These patients would be stabilized at the Forward Aid Station and then sent on to the Field Hospital for further treatment.

2. **Less serious wounds**
   a. These patients could be treated at the Forward Aid Station and then sent back into battle.

3. **Wounds most likely fatal – injuries that were beyond current abilities and resources to treat**
   a. Lethal injuries at the time – penetrating wounds to the abdomen, chest, or head
   b. These patients would be evacuated from the field last. Attempts were made to make them as comfortable as possible before they most likely passed.

iii. This system wasn’t referred to as ‘triage’ until later.

iv. Letterman’s system still forms the basis of triage today.
Activity #1 Card – Home Remedies Worksheet

Materials:
Home Remedies Presentation (in packet)
Home Remedies Worksheet (in packet)
Home Remedies Worksheet – Answer Key (in packet)

Purpose:
Learn about common home remedies used during the Civil War. Identify how to best use home remedies to treat patients with common ailments.

Activity:
1. Pass out a Home Remedies Worksheet to each student.
2. Use the Home Remedies PowerPoint to go over different types of home remedies used in the mid-19th century.
3. Have the students complete the Home Remedies Worksheet, determining which remedies would be best to treat each patient identified on the sheet.

Questions for Discussion:
1. Why do you think most people were treated at home during this time?
2. Why do you think there was a focus on remedies from nature?
3. How has medical treatment changed since then?
4. Are any of these home remedies still in use today?
5. Do your families or friends use any home remedies today?
Activity #2 Card – Triage on the Civil War Front

Materials:
Patient Profiles (in packet)
Patient Profiles – Teacher information (in packet)

Optional Materials:
Rolled bandages
Paper and markers to draw fake wounds

Purpose:
Demonstrate the triage system used by the Ambulance Corps in the latter part of the Civil War.

Activity:
1. Before the activity, review the three triage levels with the class.
2. Break the class into teams of six.
3. Let students know that for this activity, there will be two rounds. In the first round, three of the six will take on the role of patients, and the other three will be members of the Ambulance Corps. In the second round, roles will be reversed. (All students should have a chance to be a patient and a member of the Ambulance Corps.)
4. Pass out the first round of three patient profiles to each team. Let the patients read over their profile and have time to ask you any questions.
   a. Optional: Pass out all patient profiles beforehand, and provide paper and markers for students to create any necessary visual representations of their symptoms. Rolled bandages, damp cloths (fever), etc., may also be used.
5. Have the patients in each team take a spot either sitting or lying down (as appropriate) in an area that will become their own Forward Aid Station. From that point on they will be playing the role of an ill or injured soldier.
   a. The more the patients can act out their symptoms, the easier it will be for the Ambulance Corps to tend to them.
6. At each Forward Aid Station, have the three remaining team members work together to talk to their patients, find out what happened and what injuries or symptoms they are experiencing. The three Ambulance Corps members should then work together to decide the best next step for each patient.
7. Ambulance Corps members will be triaging the patients. They should look at the severity of their injuries and illnesses to place them in one of the three triage levels.
   a. Once they have placed them in a triage level, they should determine if they should be stabilized and sent on for further treatment at a nearby Field Hospital, treated at the Forward Aid Station and then sent back to battle, or no further treatment (beyond making them comfortable) as there are more treatable patients to tend to.
8. Once the Ambulance Corps Members have made their decisions, bring the class back together for discussion. (Questions below.)
   a. Additional information provided in the Patient Profiles – Teacher Information Sheet will provide
Activity #2 Card – Triage on the Civil War Front (Continued)

9. Split the class into teams again. Pass out the second round of patient profiles to those students who had been Ambulance Corps members earlier. Give them time to read and understand their patient role. Have them take their place in the Forward Aid Stations, and repeat the triaging process.
   a. If students previously created visual representations of their symptoms, have them apply them before the round begins.
10. After the Ambulance Corps Members have worked together to triage the patients and identify next steps, bring the class back together for discussion.

Questions for Discussion:

After each round of triage:
1. How did you triage Patient #1? (Repeat for #2 and #3)
   a. What level is the patient? Why?
   b. What did you decide would be the best next step?

Following both rounds:
1. How did it feel making the triaging decisions?
2. Can you imagine assessing and triaging hundreds of patients quickly?
3. Why was creating a three-tiered hospital system and a triaging system so important during the war?
4. Where does triaging take place today?
HOME REMEDIES WORKSHEET

Below you will find descriptions of ten patients and their symptoms. Using your knowledge of home remedies used during the Civil War, prescribe treatment to help each patient.

1. Patient is suffering from frequent bouts of diarrhea. Dysentery is suspected.
   a. Have the patient drink tea made with ________________________________.

2. Patient has been wounded in battle and is bleeding heavily.
   a. Apply a poultice made of ________________ or ________________ leaves to the wound to stop the bleeding and begin the healing process. Then wrap the wound with a bandage made of _____________________________.

3. Patient is nauseous during sea travel.
   a. Have the patient drink tea made with ________________________________.

4. Patient appears to be suffering from low blood sugar.
   a. Have the patient drink coffee made from ________________________________.

5. Patient is depressed and cannot sleep.
   a. Give the patient medicine made from ________________________________ root extracts.

6. Patient is suffering from several painful insect bites.
   a. Give the patient ___________________________ leaves to chew and apply to the bites.

7. Patient has abdominal swelling, dark urine, and yellowish skin and eyes indicating liver problems.
   a. Have the patient drink tea made with ________________________________.

8. Patient has an old wound that is infected and not healing properly.
   a. Apply a poultice made of ________________________________.

9. Patient is in intense pain.
   a. Have the patient chew a powder made from ________________________________ resin.

10. Patient's cough, shortness of breath, and chills indicate pneumonia.
    a. Have the patient chew the leaves of ________________________________.
HOME REMEDIES WORKSHEET – ANSWER KEY

Below you will find descriptions of ten patients and their symptoms. Using your knowledge of home remedies used during the Civil War, prescribe treatment to help each patient.

1. Patient is suffering from frequent bouts of diarrhea. Dysentery is suspected.
   a. Have the patient drink tea made with _______________ ALUM ROOT ________________.

2. Patient has been wounded in battle and is bleeding heavily.
   a. Apply a poultice made of _______ YARROW ______ or _______ CALENDULA ________
      leaves to the wound to stop the bleeding and begin the healing process. Then wrap the
      wound with a bandage made of _______________ COTTON ________________.

3. Patient is nauseous during sea travel.
   a. Have the patient drink tea made with _______________ GINGER ________________.

4. Patient appears to be suffering from low blood sugar.
   a. Have the patient drink coffee made from _______________ CHICORY ________________.

5. Patient is depressed and cannot sleep.
   a. Give the patient medicine made from _______________ VALERIAN ________________ root extracts.

6. Patient is suffering from several painful insect bites.
   a. Give the patient _______ TOBACCO _______ leaves to chew and apply to the bites.

7. Patient has abdominal swelling, dark urine, and yellowish skin and eyes indicating liver problems.
   a. Have the patient drink tea made with _______________ DANDELION ________________.

8. Patient has an old wound that is infected and not healing properly.
   a. Apply a poultice made of _______________ PAWPAW ________________.

9. Patient is in intense pain.
   a. Have the patient chew a powder made from _______________ POPPY ________________ resin.

10. Patient’s cough, shortness of breath, and chills indicate pneumonia.
    a. Have the patient chew the leaves of _______________ LIFE EVERLASTING ________________.
INFORMATION FOR STUDENTS

Round 1 - Patient #1
Laceration (deep cut) of the Index Finger and Thumb of the Right Hand

Symptoms:

- Some minor tissue damage
- Light bleeding
- Patient is able to walk and move around
- Patient is temporarily unfit for duty in infantry (cannot pull a trigger), but is fit for other selected duty/service in other branches of the military

Round 1 - Patient #2
Patient complains of onset of dysentery

Symptoms:

- Common diarrhea
- No blood in stool
- Dehydration/intense thirst
- Lethargy (extremely tired)
- Possible fever – low grade

Round 1 - Patient #3
Bayonet wound in the right thigh

Symptoms:

- Entry and exit wounds, indicating the bayonet went all the way through the leg
- Lacerations (deep cuts) of the flesh and muscle
- No injury to major blood vessels
- Typical amount of bleeding
- Pain
**Round 2 - Patient #4**

Concussion (mild-traumatic brain injury) caused by artillery blast

Symptoms:
- Disorientation
- Nausea
- Dizziness
- Possible hearing loss
- Dilation of pupil(s)
- (symptoms of brain trauma/swelling)

**Round 2 - Patient #5**

Shrapnel wound to the left abdomen

Symptoms:
- Large open wound
- Foreign material in the abdominal cavity
- Large quantity of blood lost
  - In and out of consciousness
- Patient is in significant pain
- Condition is critical

**Round 2 - Patient #6**

Sprained left wrist

Symptoms:
- Swelling of the joint
- Pain on touch
- No apparent internal bleeding/no surface discoloration
- No sign of broken bone/fracture
- Patient can walk and move around
Round 1 - Patient #1

Laceration (deep cut) of the Index Finger and Thumb of the Right Hand

Symptoms:

- Some minor tissue damage
- Light bleeding
- Patient is able to walk and move around
- Patient is temporarily unfit for duty in infantry (cannot pull a trigger), but is fit for other selected duty/service in other branches of the military

Recommended Treatment:

- Triage level 2: Less serious wounds
- Can be treated at Forward Aid Station
  - Does not require further treatment at a Field Hospital
- Clean and disinfect the wound
- Apply bandage(s) as needed

Prognosis for Recovery:

- Excellent
Round 1 - Patient #2

Patient complains of onset of dysentery

Symptoms:
- Common diarrhea
- No blood in stool
- Dehydration/intense thirst
- Lethargy (extremely tired)
- Possible fever – low grade

Recommended Treatment:
- Triage level 1: Serious but survivable injuries and illnesses
- Transfer to Field Hospital for further treatment
- Alter and improve diet
- Rehydrate patient
- Provide tea made with alum root
- Allow temporary bed rest

Prognosis for Recovery:
- Excellent
SUPPLEMENTARY TEACHER INFORMATION FOR TRIAGE SIMULATION

Round 1 - Patient #3

Bayonet wound in the right thigh

Symptoms:

- Entry and exit wounds, indicating the bayonet went all the way through the leg
- Lacerations (deep cuts) of the flesh and muscle
- No injury to major blood vessels
- Typical amount of bleeding
- Pain

Recommended Treatment:

- Triage level 1: Serious but survivable injuries and illnesses
- Stabilize at Forward Aid Station, then send to Field Hospital for further treatment
- Maintain pressure on wound
- Clean and sterilize wound
- Apply poultice of yarrow or calendula leaves to stop bleeding
- Bandage
- Suture
- Apply dressings
- Bed rest for several days
- Recuperate at Field Hospital
- Prescribe poppy resin for pain relief

Risk:

- Infection

Treatment to Minimize Risk:

- Change dressings
- Avoid disturbance of wound once it begins to heal

Prognosis for Recovery:

- Very Good to Excellent
SUPPLEMENTARY TEACHER INFORMATION FOR TRIAGE SIMULATION

Round 2 - Patient #4

Concussion (mild-traumatic brain injury) caused by artillery blast

Symptoms:

- Disorientation
- Nausea
- Dizziness
- Possible hearing loss
- Dilation of pupil(s)
- (symptoms of brain trauma/swelling)

Recommended Treatment:

- Triage level 1: Serious but survivable injuries and illnesses
- Transfer to Field Hospital for further observation and treatment
- Keep patient alert
- Clean and dress any surface wounds
- Monitor condition

Prognosis for Recovery:

- Good to Very good
Round 2 - Patient #5

Shrapnel wound to the left abdomen

Symptoms:

- Large open wound
- Foreign material in the abdominal cavity
- Large quantity of blood lost
- In and out of consciousness
- Patient is in significant pain
- Condition is critical

Recommended Treatment:

- Triage level 3: Wounds most likely fatal – Injuries beyond current abilities and resources to treat
- Transportation is risky
- Administer pain relief to ease patient’s final moments: poppy resin powder, laudanum, or whisky (the latter is less costly and more readily available)

Prognosis for Recovery:

- Poor
- Injury is likely mortal even with access to a Field or General Hospital
Round 2 - Patient #6
Sprained left wrist

Symptoms:
- Swelling of the joint
- Pain on touch
- No apparent internal bleeding/no surface discoloration
- No sign of broken bone/fracture
- Patient can walk and move around

Recommended Treatment:
- Triage level 2: Less serious wounds
-Bind the joint at Forward Aid Station
  Apply splint if necessary

Prognosis for Recovery:
- Excellent