



Letters from Sarajevo

Insight on IFOR Medical Operations in
Bosnia-Herzegovina

By

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Forward

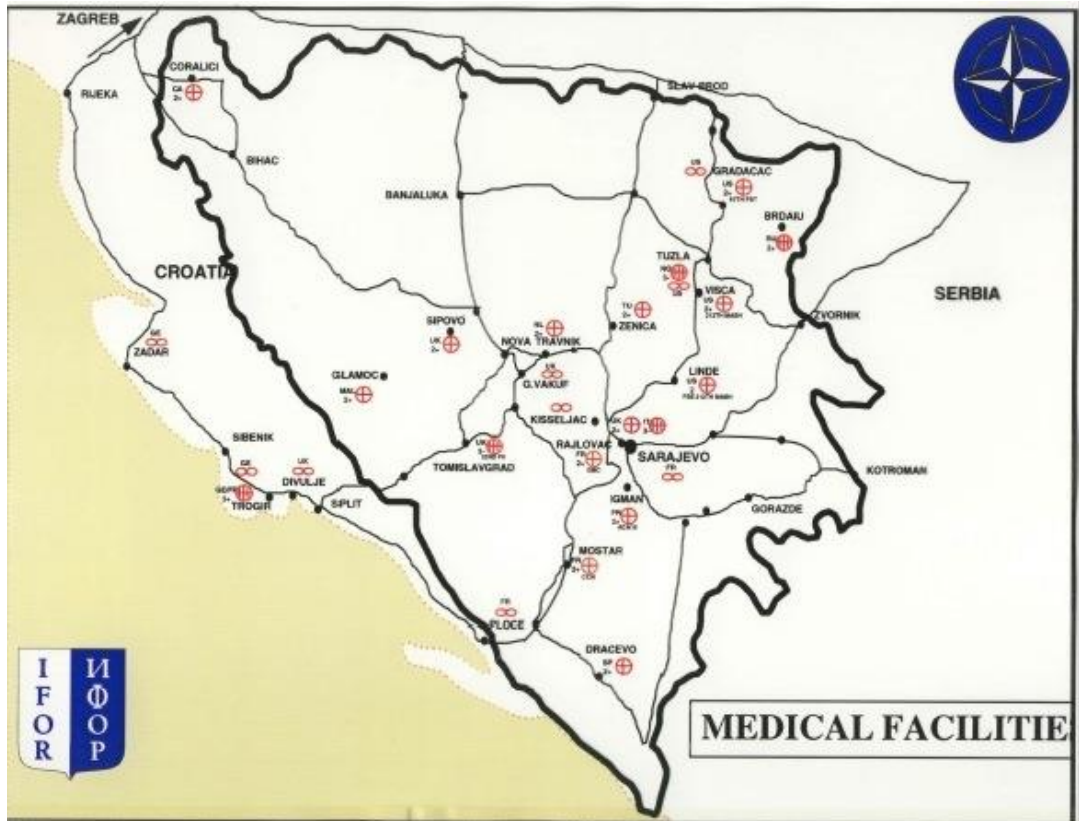
Letters¹ from Sarajevo provide an overview of the multi-national military medical organization in support of NATO operations in Bosnia-Herzegovina from a Canadian perspective. The observations are based on personal visits to all force medical installations during the period January - June 1996 by Colonel Peter Green while serving as the IFOR² Theatre Surgeon. In that role, his primary responsibility was coordinating between the Corps, Corps Support and strategic assets at sea and in Italy. In addition, he regularly communicated with and visited the multi-national divisions and had to be prepared to brief at morning and evening prayers on casualties and their status.

The letters provide an excellent insight on both strategic medical planning and theatre/corps level medical operations.

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President
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¹ Letters were intended to keep Col Green's FMC Command Surgeon staff apprised on what was happening in Bosnia-Herzegovina

² Intervention Force created and authorised by the Dayton Accords that ended the war



LETTERS FROM SARAJEVO #1 (21 Feb 1996)

Sorry to be so long putting pen to paper, but the frustrations of a new headquarters are incredible. The main problem, as always, is communications. I have two phones on my desk, but sometimes can spend two days trying to get through to people. I am now on the AFSOUTH LAN which is much more reliable, and at least the messages wait when I'm out of the office.

Not much travelling done yet, although I have travelled down to Dracevo, past Mostar and only just inside the border with Croatia. Palm trees growing in the gardens down there! Also, entire villages destroyed - by terrorism I think, not by fighting. Mostar is interesting, although the downtown is partly destroyed by shelling. I went over the replacement bridge, and walked around looking at the ruins. Must have been a tourist trap once, built around a fast-flowing river in a gorge with hills all around.

The French hospital, by the airfield in Mostar, is new and very well equipped. Part modular tent, part expendables. They have 50 beds, staffed by about 85 personnel. Totally

self-transportable in one lift and designed to move in four hours, but the CO said he would need more people to meet those times. The Spanish FST in Dracevo is in Corimecs. Small but functional. The French FST in Sarajevo is in the basement of the PTT building, while the British have a very basic FST at ARRC Main (after all the sniping incidents and one mine explosion there is an interest in medical services at the Corps HQ). Also around here, but just north of Sarajevo is an Italian hospital. In tents like Trelleborg, but made in Italy. They have several items we should look at, screening curtains for their X-Ray facility, a very neat hand-washing device for use on wards and in pre-op, an interesting foil-backed liner for inside the tent (developed in Somalia) and a good matting which seemed to trap dirt well. As their concept is similar to our Fd Hosp, I would suggest we get some specifications from them.

As I expected this job is largely political and diplomatic, talking with the various ministries, international organizations, and advising the CIMIC and lawyers here at the headquarters. I get to keep a fairly good view of operations, but certainly the day to day issues are dealt with at Corps and by C-Spt in Zagreb. When they need help they call me. The biggest problem so far has been strategic aeromedevac, particularly for units that were here with the UN, who just

re-bereted and became IFOR. Not that the procedures are any different, it is just that now instead of battalions responding to UNPROFOR, there are now Brigades, Divisions, Corps and a Communication Zone who have to be involved. The force is, of course, three times bigger than that of UNPROFOR so some of the consultation has become [line missing on photocopy].

The medical services have not been stretched so far, although individual incidents keep most of the FSTs occupied. Fortunately, casualties from mine strikes are down, but road accidents, particularly on days like today with heavy snow and no clearing of roads, are common enough.

My best wishes to all. If you can get this on the LAN to all as an interim report please do so. I hope all is going well and will see you in the Spring

LETTERS FROM SARAJEVO #2 (30 March 1996)

Time to write another letter home to let everyone know what is going on in beautiful B-H. It is Sunday, the last day of March, and it is snowing. We have had some nice Spring weather, but only for a short time and winter seems to be making a last fling. For the last few weeks I have been mainly here, although I did get to visit MND SW (the UK led Div in which the Cdn MNB is located).

Here the work has been steady, I am trying to complete an MOU of sorts with the two entities, unfortunately it starts as an annex to the technical agreement with the Republic of BH, then requires two protocols, one for the Republika Srpska and one for the Federation of BH. We are getting there, in that we have medical agreement, but now it is bogged down in the bureaucracy, which is thicker than Gagetown mud. I am promised "next week", but I have heard that for the last two weeks. I am leaving it with the lawyers now I am comfortable with the content, and I just check every few days.

The visit to MND SW was most interesting. With a staff member from Naples (USN officer, seeing how the Army works for the first time), we flew by Lynx to Tomislavgrad. Pilots were a WO and a S/Sgt, and I really cannot see why we do not make the same change, it would certainly benefit the officer/NCM ratio. Lots of snow still on the hills west of Sarajevo, but none in Tomislavgrad where we set down having blown away the sheets of M2 matting put out as the LZ. Reason it happened is that after coming in on the square, the pilot moved off to one side so he could shut down and come in for a pot of tea. The CO was most upset, as a Sea king had used it the day before with no problems. The site houses 22 Fd Hosp, under canvas in an unused part of a cable factory. The floor was earth, so again they have laid the sheets of M2 matting (heavy strips of aluminium). 22 has 36 beds, one OR, and all of the normal ancillary equipment. It has internal medicine and serves as the role three hospital for the British in theatre. It is very austere compared with the German, French or American units, probably more mobile but it is not likely to move. After lunch we drove in two Land Rovers to Glamoc, where the Malaysians are still moving in. They are short of engineers, so the medical company is doing most of the work themselves. Their biggest problem was lack of power, no mains electricity in that part of BH yet. They have small generators, but didn't know how to wire up and run their 160KW unit. The British sent help the next day. They also need a road to the front of the hospital, and there we may use theatre assets in the form of German engineers. The hospital itself is a mix of expandibles made in Germany, and Corimecs. They fit well together, and where they don't fit Malaysian ingenuity has solved the problem. It is a fine little unit, and we were made to feel most welcome, and of course we had to stop for tea and

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biscuits. Mid afternoon we headed for Gornjy Vakuf and 3 (UK) Div HQ. We moved in to our Corimecs and then headed to the bar to meet the medical personnel before dinner. Chris Best was there for those who remember him, used to be the RAMC exchange officer at the CFMSS, now commands 5 Fd Amb. We had a great dinner, the food in all of the British messes is excellent, and it was an interesting evening.

Next morning we moved down the road to see the British MST in Gornji Vakuf. Housed in 24 Corimecs, it was a well laid out and functional surgical facility. They have a dedicated aeromedevac Sea King based here, and the RAF provide a MO to go along on all emergency flights. He does routine role one work the rest of the time in support of the garrison. Leaving Gornji Vakuf we headed up route Diamond. This is a Div MSR but was built through the mountains by the Royal Engineers a couple of winters ago, as an alternate supply route to Vitez. I don't think it has seen a grader since and it has more potholes than Montreal in the Spring, and that is just the first hundred yards! Spectacular drive up the canyon though, must be close to 30 kms (feels like 60) right up to the snowline, then a tarmac road down to Novi Travnik and the Dutch FST. This unit is a little beauty. Under canvas, outside, but spotless, tidy, extremely well equipped. They are the only FST using non draw over anaesthesia, and the only unit with a new, purpose made field steriliser (everyone else uses the US model). They have a small compressor to provide the pressure for their anaesthetics gases, and developed this after their experiences in Cambodia, where they felt uncomfortable using the more simple technique at high temperatures and humidity. They use their own modular canvas and it gives a wide and spacious feeling to the whole structure. If we ever want to share medical facilities with anyone, let's do it with the Dutch. Food was good for lunch as well. They are moving to hard accommodation in about six weeks. We left after lunch and headed up Bluebird and into the "anvil". This is the area returned to the Serbs at Dayton. Half way across the "anvil" we turned down Vulture to Sipovo, and headed for 2 Armd Fd Amb, who also host a FST. This unit is located under canvas in an empty clothing factory, and the FST is under DRASH canvas (the American rapid erection tentage). This is real gloomy hollow, as there is no main power and the generator is barely able to cope. We got a warm reception though (made up for the cold shower) and I got a tent all to myself. Sipovo is trashed. As the Croats pulled back they took everything they could, which is why the factory is empty, and what they couldn't take they blew up, burnt or destroyed. The wash basins and the toilets in the town hospital were smashed the CO of the Fd Amb told me, and his unit had gone in to clean, tidy and rebuild. The town was vacated only about 45 days previously, and the Serbs had only just started to move back, so the devastation was much fresher than elsewhere in Bosnia. It was a total mess and as we left the next day in the pouring rain must be one of the bleakest sights on this planet.

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Next to see the Canadian FST in Coralici. Back up Vulture to Bluebird, then out of "anvil" and past Bihac. It was a long drive but the road (Bluebird at least) was good. Less damage up in the Bibac pocket, and much more order. This is all controlled by the Cnd MNB (MultiNational Bde), and they have the QRH (Queens Royal Hussars, an armd regt), the Czech Bn Gp (1200 strong), and the Cdn inf coy, recce sqn, engr sqn under command. A Saudi Bn will come soon I believe, about 1000 strong, and then the Bde will be complete. The camp at Coralici is a gem, well laid out, spotlessly clean, comfortable. We have learnt a lot in the last five years. The ASC (-) is in 14 Corimecs, with another four housing the pharmacy and FMED nearby but separate. They use some modular canvas as well for ward and waiting areas. It sparkles. Well equipped, keen staff, working hard to do what is right, flexible in thought, this is a showplace. As a pure surgical facility this has to be one of the best in Bosnia. We let our British host leave to return to Split, and I met with Homer Tien (MO working down in Kljuc) and Capt Huffam (pharmacist) to discuss some local issues. We had a pleasant medical supper with the Czech SMO and his colleague in attendance, and then chatted till late. Showers were clean, sweet and the water was hot!

Next day we left with Sue Hulsemann the MO with the NSE, and drove up to Velika Kladusa. Another very well organised camp, where we looked at the role one facilities. We then carried on to the Croatian border and drove north through the Kuplensko refugee camp. Another sad sight and a waste of human potential, makes war and ethnic cleansing seem so absolutely impure. Hit the freeway to Zagreb and went to visit the USAF hospital in Camp Pleso, they have just taken over from the Czechs. Then onto the C130, a very crowded Greek plane with about 60 pax, a Jeep Cherokee and a ton of loose cargo back to Sarajevo, arriving only 45 minutes late.

I have now seen every surgical facility in theatre except for those at sea. These are the good ideas, toys, equipment that are low cost and worth looking at. The Italians, whose hospital is similar to Trelleborg, make a good liner. It stops the sweating on the inner skin and transfer of dirt to the ceiling. They also have a very simple handwash system using gravity for outside the toilets, in the wards and so on. The carpet they use is a coarse plastic which traps the dirt off the boots and allows it to be vacuumed up. Contact for all these is Marin Assist, Grosseto, Italy. The French expandibles, made by GLAT, are the best in theatre. The Dutch and the British use hard aluminium trays for instrument storage prepacks, much more rugged in the field, and they have all the indicators built in to confirm sterility. These are mainly minor things (except the expandibles), but would add to our capacity to provide good surgical support in the field environment.

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Still do not know when I will return. I spoke with BGen Laliberte on Friday, and he said my replacement will be in either in April (end of) or May (end of). I hope to hear more next week, but it is all dependant on other NATO MSCs releasing their Surgeon. Not a real problem, I am quite happy here although it will of course be nice to get home. I go to Zagreb in a couple of weeks to meet a British officer who wants to introduce a medical reporting system to the theatre. I have spoken with him on the phone (via the switch in Zagreb and the switch in Whitehall and the switch in Aldershot), and I do not think he comprehends the difficulties of getting the easy things done, let alone a computer based system. Still he can come and try, maybe after four days of trying to get an answer he will see why multinational systems have their limitations. Also on the 10th we open an Embassy in Sarajevo. I think all the Canadian military serving here will be invited (probably we number about 15 on an average day).

Thanks to Claire P. for her letter, dated 14 March, arrived the 30th. Actually that is quite good, got one the same day from my wife that took 25 days to reach me. Must go, even though it is Sunday the e-mail is beeping steadily and I'm waiting for a report from the Corps. My regards to everyone, and again please disseminate to all who may be interested.

LETTERS FROM SARAJEVO #3 (30 April 1996)

A lovely sunny afternoon in Sarajevo, the first time the temperature has reached 20C. Despite this it is less than a week since we had 10 cm of snow, actually 10 cm three nights running, but it melted every day. I have just come in from a walk from Zetra Stadium, went to see a Rugby game but it was not on, and I noticed that there is still snow on the high peaks to the south of the city, but it is going fast.

A couple of weeks ago I went up to Olavo, about halfway to Tuzla. There are two American armoured battalions in the valley there, and a small MASH tucked in with them. It is in fact a FST grafted on a Fd Amb equivalent, and was a very professional unit. They had obviously thought hard about the design of the structure (modular canvas on tarmac), and come up with a novel concept based on the assumption that the majority of triage would be done before arrival. They had two streams, running parallel, one for VSI and SI (pris 1 and 2), and the other for pri 3. They used the pri 3 stream for all their daily routine, keeping the other area clean and the equipment ready. Given their limited resources I thought it well done, but it really needs a diagram to explain.

For those who know Sarajevo, the French GMC (Groupe Medico-Chirurgicale) has moved from the PTT Bldg. They were there for 44 months and did 1500 surgical interventions. Their new location is in Rajlovac, a suburb of Sarajevo. They have a good building, and have cleaned it up well, with imagination again. Two ORs, both spotless and lined with an easy clean hard material. Unfortunately the barracks they are in is littered with mines, so one is careful not to leave the pavement. It was right on the confrontation lines north east of Sarajevo, towards Visoko.

Talking of Visoko, for those who know it, the bridge just south of the town on the main road to Sarajevo has been rebuilt by German engineers (one officer lost a foot to a mine in the rebuild), and is opening today.

I got an invite to the War Medicine meeting in Banja Luka next week, but cannot make it due to transport problems. On the weekend though I go to Zagreb to brief the US JCS Medical Advisor. It will make for a couple of days out of here, and actually I hope the briefing notes will be usable at home. Talking of which, I should be back before the end of May, if all goes smoothly. I will let you know firm times when I have them. Meantime please give my regards to all, and disseminate this how you wish.

LETTERS FROM SARAJEVO #4 (30 April 1996)

First thank you very much for the care package and letters you sent. It was great to get, explore, use or give away as appropriate. Fortunately I get to see the mil news courtesy of LCol Coleman, who lives at the Annex and eats here, altho he works down at the Holiday Inn in the CPIC. Sorry to admit the chocolate bunny did not last till Easter.

This is my first day here for about two weeks. I left first to go to Tuzla, to visit MND N. We met (I was accompanied by one of the med staff from Naples) the Comd 30 Med Bde at the airfield, and visited the MASF on the apron, then a role one unit in hard accom, went to the BUD (battle update brief), then flew in the dark to the 212 MASH for supper and a tour through the facil. Entire hosp is built on a raised wooden floor, but is under mod canvas. Mainly a 2+ facil, but has some little extras like a CAT scanner. Next morn we visited the med log unit (frozen blood, optometrist lab, supply depot), then took off in a Blackhawk for Zenica to see the Turkish hosp. Up one flt of stairs, but otherwise really clean, with a keen young staff. They do some work with the locals. Lunch, then over the mountains of central Bosnia to Gradacac. I'm always fascinated how helicopter pilots navigate "down this valley to the power line then turn right over the shoulder of the hill, turn left at the river and head for the smokestacks" Seems to work. Gradacac has an American FST gratified on a fd med coy. They were living in a burnt out tobacco factory, again upstairs, but in very austere surroundings this time. The LZ was tight too! Off again in the Blackhawk to Brdaiu, to visit the Russian FST. Very tight in a little office bldg, but everything there for 2+ work. Austere tho', no home comforts. From Brdaiu to the Normedcoy in Tuzla. A lovely little community hosp in an old factory. They have spent time, money and imagination here and it is a great facil. They loan the OR to the local surgeons several times a wk, and look after the locals as they recover. Back to 30 Med Bde for the ni, and an early start to get the flt back to Svo.

Flight was on time, but nothing else worked. First the driver of our shuttle bus told us they would only take two of the 15 passengers waiting (this was on a German C160). Then he returned with the good news, they could not take anyone, so no need to choose. First we thought we could get a Chinook to Svo, but it did not arr, then a Chinook arr, but was not going to Svo. Finally we gave up, booked on the late afternoon flt to Zabreb, and went to the MASF for MREs, warmth and comfort. Got to Zabreb late and got taken to a HOTEL!! My own room, no restriction on shower time, a lovely meal. Made it all worthwhile.

Next day worked with C-Spt (where LCol Pierre Lefebvre is loc), and met with the UN, then got the late flt out to Svo.

The day immediately after took the C160 shuttle to Split. Met Pierre Lefebvre there, and spent the afternoon with CommZ Fwd med cell, discussing the problems of evac, and checking the facil for the coord conf soon to be held there. Stayed in a HOTEL!! Filthy floor but zero cost and I got my own room again. Saturday morning I visited the German Hosp, with a large French MASF att. This is a very nice unit, under canvas but inside bldgs. A role 3 unit with 55 Doctors, multiple mobile trauma units, a flying trauma unit (CH 53, 10 beds, all resus eqpt, flies with a FST), and most specialties. Their CAT scanner comes next month. It is

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all sit on the former Naval Base in Trogir. The MASF is really good, and is what our Air Force should be capable of doing. It can hold two C130 loads of cas and prep for flt. They have software which helps decide optimum loading posn for the cas, asked for a copy to give to Aircom. In Mostar the Fr Airforce have a half size equip (can hold one Herc load). Very neat, well thought out, professional units. The Fr have got their mil med act together.

Flew back Sat pm, via Zabreb. Even before we took off from Split the RAF Flt Sgt told us one of the engines was sick, but we flew anyway. We all got off in Zgb while they checked everything, but the plane was blessed so off to Svo. Unfortunately by the time we got there, everyone had got tired of waiting so no reception for anyone. I called the clinic at HQ IFOR, where I now have a USN 6B, and like all good Chiefs he turned out a dvr and mate to come pick me up. Svo airport is the most lonely, cold, miserable spot in the world to be marooned at, it even beats Baker Lake (pizza is better in Baker Lake).

Sunday was here, trying to catch up. Even Svo stops on Sunday, so a lot of work I had to lv for my Italian replacement who came Monday. I was to fly lunchtime to Split for the coord conf, but I wasn't on the manifest, so Normovcon wouldn't let me on the flt. I was so angry I could have crushed a rose!! I couldn't even go standby even tho' there were seats, new IFOR rules. When I asked how the ---- I was to get to Split, I got a cheery no problem, we'll put you on the UN flt mid-afternoon. No standby problems there! With the French Div Surg and the Corps Surg laughing I went back for lunch, and came back for the flt. I checked in and in the waiting room found the above named, cold and hungry, as the C160 had overflowed Svo and they were now on my flt. Ha! Split is really lovely for those who haven't visited. The mtg on the Tuesday went well, and Wed morning I visited Split with the NML WO and Gen Laliberte, as we waited for our planes. I took off on a Dutch stretched C130 for Naples, via Zgb and Svo. Four hours in the air, six hours travelling, for a one hour flt. Arrived in Naples in the dark, went to the HOTEL and out for a pizza with the med staff. Thursday was all day at AFSOUTH, sorting out some staff issues, leaving around 1700 for a very quick lool at Naples in the remaining daylight, then back to change, out for a pizza and a ni tour round Naples. I'm told it is better at ni anyway. Certainly looks good in places. Up at 0415 to get to the check in for the 0725 departure of the C130 to Svo. Only the Airforce needs two and a half hours to check off 15 names. This time it was a Norwegian plane, but it was warm and comfortable as I slept my way back.

Now home, and lots to do. It will be a busy wk as there is much fol up, and the staff here know they have a Surgeon on staff. I get questions on everything, and a lot of crosschecking from the Airforce, Land and Logistic guys. The day and days go fast, soon it will be April.

Next week I visit MND SW, ending up in Coralici to see the ASC. Will travel from there to Zgb and catch the shuttle home. It will be good to see the CFMS guys in the North, apart from BGen Laliberte, Pierre and WO Cole (the NML WO), they will be the first contact with the Corps since I left.