

Origin of the First Naval Flight Surgeons

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Participation of the medical profession in aviation, encompassing all its art and science, was inevitable. When the U.S. Army first involved itself in the modern age of aviation, Dr. Theodore Lyster, now known as the “Father of Aviation Medicine,” was in at the beginning; he is known as the first flight surgeon, and ultimately retired as a colonel from the Army. The outbreak of World War I paved the way for the direct contribution of aviation to support the military mission, and the immediate need from a medical standpoint was assurance that those who took to the air were actually fit to do so.

“During the [First World War] it was estimated that the average flying life of the pilot over the lines was 150 to 300 hours. By that time he either had been killed or had to be relieved permanently from flying duty”.¹ It became obvious that the physician would play a key role in ensuring fitness and survivability. Ultimately, the Army aviation medical examination became the model not only for the Navy and Marine Corps, but for the Department of Commerce as well.

Dr. Louis H. Bauer (1888-1964), who wrote the first textbook of aviation medicine in 1926, founded the first aviation medicine professional organization in 1929 – the Aero Medical Association, known today as the Aerospace Medical Association. Beginning in 1919 he had served as director of the Air Service Medical Research Laboratory in Mineola, NY. It was there that he established first school for flight surgeons.

During the immediate postwar period, the Navy also “recognized the importance of aviation medicine for the protection of its flyers and detailed several classes of officers from its medical corps to the [Army’s School of Aviation Medicine] for training”.²

It was in Mineola that the first five officially designated Naval Flight Surgeons graduated from their training on April 29, 1922 (Fig. 1). Although they were military physicians fully trained in aviation medicine, there were not yet designated flight surgeon wings. One of the graduates, LT Victor S. Armstrong, was given orders in 1923 to serve the Chief, Bureau of Medicine and Surgery as the first Chief of the Aviation Medicine Division.

Several of the instructors are also noteworthy in the history and development of aviation medicine. Already mentioned was the school Commandant, Dr. Louis H. Bauer. He served as the first medical director of the Aeronautics Branch of the Department of Commerce and was ultimately responsible for



Fig. 1. First class to include Naval flight surgeons, 29 April 1922. Back row, left to right: Lieut. Louis Iverson (3rd), Lieut. Carl J. Robertson (4th), Lieut. Victor S. Armstrong (7th), Lieut. Page O. Northington (8th), Lieut. Julius F. Newberger (10th). Instructors in the front row: Drs. Bauer (5th), Longacre (6th) and Schneider (3rd). This photograph was discovered in 2005 by Lieut. Justin Campbell while cleaning out dusty recesses at the Naval Aerospace Medical Research Laboratory in Pensacola, FL. Details of the photo were first elucidated by Capt. Nick Davenport.

establishment of the first civil aviation medical standards. Assistant Commandant Dr. Raymond T. Longacre (1867-1943) was a noted neuropsychiatrist who became multiply published on the subject of psychological factors in relation to success in aviation. His comprehensive personality studies and their use in selecting aviation candidates are the predecessor of today’s Naval Aviation Selection Test Battery (ASTB). Physiologist Dr. Edward Schneider (1874-1954) developed the Schneider Index in 1920, a multiple variable assessment used to rate an aviator’s cardiovascular fatigue. Eventually deemed unreliable, it was a mainstay of flight surgeon practice until 1943.

REFERENCES

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