

Reenacting How-Tos: Methods

“HOWLING DERVISHES DANCING AND KICKING AROUND IN OUR RANKS”

The Behavior of Soldiers Wounded in Battle

by Kevin O’Beirne

Despite its morbid nature, people are fascinated by the topic of Civil War battle casualties: statistics, photographs of the slain, and soldier accounts of casualties and—indeed—of what it was like to be shot. The latter is the focus of this article, which attempts to answer the question, How did soldiers behave when they were wounded in battle?

For better or worse, reenactments of battles are important to the reenacting hobby—both for participants and spectators. While there is strong debate in some quarters about whether “battles” should be presented at all (apparently due to their inherently inaccurate nature and tendency to promote mock heroics), they will undoubtedly remain a big part of reenacting for the foreseeable future. Therefore, the depiction of casualties is an important and delicate subject.

This essay presents the results of historical research on wounded soldiers, together with recommendations on how reenactors should portray casualties in “battle” scenarios.

Near Misses

Bullets flew all over the place during combat and damaged more than just flesh and bone. Accounts of bullets striking various parts of a soldier’s gear, and perforating his uniform without injuring the man, are frequent, which should be borne in mind by reenactors portraying soldiers in a battle.

Private William McCarter of the Irish Brigade—who’s detailed, hair raising memoir of the battle of Fredericksburg is cited several times in this chapter—described some near misses:

“Since arriving on the battlefield, [bullets had been] piercing my uniform from head to foot and cutting open the cartridge box by my side. Yet, strange to say, none of them had inflicted any wound worth mentioning... A bullet struck the heel of my shoe, tearing the half of it away, but doing no injury to the foot.”¹

Sometimes near misses disturbed a soldier’s equilibrium and even sapped his will to fight. A member of the 12th United States Regulars wrote of the battle of Gaines’s Mill:

“A ball struck my haversack and took me off my feet. On putting my hand around I found that my haversack and belt had stopped its force (thanks to the hard quality of my crackers) so I jumped up and ran.”²

These incidents could also have a fair amount of unintended humor, as recalled by a Wisconsinite fighting at Second Bull Run:

“Hod Trumbull had his rubber blanket folded up very narrow (about 3 or 4 inches wide) and it was around his waist under his waist belt. He was running forward when a bullet hit him on the waist belt and rubber blanket and he turned the completest somersault I ever saw, and some of us laughed heartier at it than the antics of a circus clown.”³

Probably even more amusing to its witnesses was the soldier at Spotsylvania on May 18, 1864 who’s toupee’ was “carried away by a passing shell, and the boys thought his head was gone, but he turned up all right, though very bald.”⁴

Sometimes these innocent-sounding brushes with death had less humor and were more serious. During the fighting at Globe Tavern, Virginia on August 18, 1864, bullets drew some blood from Colonel Frederic Winthrop of the 5th New York:

“I had a small piece of my little finger taken off & was slightly wounded in my left leg in two places. I had my India rubber blanket folded across my shoulder & tied to my left side—a ball struck it, turning me completely around & piercing the blanket in 8 places. I have four holes in my coat—one from a fragment of shell & two holes in my pantaloons. My sword was badly bent spraining my wrist but not knocking it out of my hand. Two horses were shot under me.”⁵

Thus, “near misses” of various kinds should be simulated by reenactors in “battle” scenarios.

The Wallop of “Spent” Bullets

There are numerous accounts of soldiers being hit and momentary stunned by “spent” bullets—probably projectiles fired with poor powder charges, ricochets, or that had somehow lost their power to penetrate and seriously injure. Like near misses, the effect of spent balls should likewise see some simulation in the ranks of a “battle” reenactment.

One soldier, hit but not overly bothered by spent bullets, wrote,

“Up to this moment, I had received no very painful wound myself, having only been struck on the left shoulder by a spent ball. It was not then painful. I was also hit on the left ankle by another, which cause me some uneasiness but did not prevent the full discharge of duty.”⁶

A New York captain wrote of being struck by a spent ball during the Third Corps’s midnight bayonet charge at Chancellorsville on May 2, 1863:

“Struck by a ricocheted [*sic*] ball on the left of my forehead, I staggered and fell against a tree-stump. I felt to find if there was a hole made by the shot; and, passing my hastily over the spot, I ... discover[ed] I had not received a wound. I sprang up and forward among the men.”⁷

Sometimes a “spent” ball packed a real punch, as recalled by an officer of the 20th Massachusetts who was hit during street fighting in Fredericksburg:

“I was struck by a spent ball in the upper part of my groin, a very severe blow which cut completely through my trowsers. I fell backwards, and was assisted by a soldier. My leg was completely paralyzed, and I almost lost my consciousness, and felt sure I was shot through. I left the Company to Sergeant Clark, and limped to the rear, suffering considerable pain. Just around the corner I leaned against a fence, and now felt better and found I could move my leg. Just then the 59th [New York] gave way, and came running back, and I made an effort to stop them, and after a few minutes they were rallied, and I then found I could stand, and got back immediately to my

Company which was still as I left it. My leg was pretty stiff for 3 days but is now perfectly well.”⁸

A member of the 20th New York wrote of the battle of Antietam:

“Just as I threw myself down, a bullet struck the thick overcoat which I carried rolled over my chest.... The bullet, which had enough force to knock me over, penetrated the overcoat and struck me on the arm. It felt as though I had received a hefty blow from a club, and the arm was very sore for several days.”⁹

Good judgement should be used in deciding to portray a hit by a spent ball. However, such portrayals will probably look ridiculous in situations where opposing reenactor battle lines are very close.



Confederate dead along the Hagerstown Pike at Antietam

Any Cover Available

When prone, soldiers—particularly the wounded—would go to almost any length to avoid being shot. The use of temporary fieldworks is extremely well documented and is the topic of a separate chapter in this book. Sometimes wounded men were too weak to dig and resorted to using any available cover, including dead bodies and other “shelter”. Fairly common was using a knapsack or blanket roll for cover, as recalled by a Pennsylvanian at Marye’s Heights in 1862:

“My regiment and brigade went into battle... carry[ing] blankets... these wool and gum blankets were rolled up lengthwise in rope form, probably six or eight ply thick, tied with a cord at the ends and slung over the shoulder like a sash... [As I lay prone on the field,] The thought struck me to pull or work my blankets off my shoulder and to place them in front of my head. They would serve as at least a slight protection from the deadly missiles.”¹⁰

This same soldier, while lying in a field hospital in Fredericksburg, later discovered the effectiveness of this bulwark:

“I asked [an officer] to remove the strings from my blanket which still remained rolled up.... The strings off, the officer... raised it from the floor... [and] a shower of Rebel bullets, 47 in number, dropped out of it around his feet, with a rattling noise on the boards.”¹¹

Seeking temporary cover should be represented by reenactors, particularly those portraying non-ambulatory casualties.

The Experience of Being Shot

Exactly how did Civil War soldiers react when they were hit by a projectile? The answers are almost as varied as the wounded men themselves, and a small sampling is presented below.

A Maine officer writing of the battle of Cedar Mountain in August 1862 provided a general description of soldiers’ reactions to being shot:

“The behavior of those who were hit appeared most singular, and as there were so many of them, it looked as if we had a crowd of howling dervishes dancing and kicking around in our ranks. The bullet often knocks over the man it hits, and rarely fails by its force alone to disturb his equilibrium. Then the shock, whether painful or not, causes a sudden jump or shudder. Now as every man, with hardly an exception, was either killed wounded or hit in his clothes, hit by spent balls and stones, or jostled his wounded comrades, it follows we had a wonderful exhibition. Some wheeled round and round, others threw up their arms and fell over backward, others went plunging backward trying to regain their balance; a few fell to the front, but the force of the bullet generally prevented this, except where it struck low down and apparently knocked the soldier’s feet from under him. Many dropped their musket and seized the wounded part with both hands, and a very few fell dead.”¹²

Like many wounded men, Colonel Nelson Miles’s trauma startled him, and caused him to helplessly drop his weapon and reel in the saddle:

“The flight of the bullet is quicker than thought, and has passed through a flesh-wound before one realizes he has been struck. While riding down the line at Chancellorsville one of the enemy’s bullets struck my metallic belt plate with great force. This caused a slight deviation as it entered the body. The result was an instant deathly sickening sensation; my sword dropped from my right hand, my scabbard and belt dropped to the left; I was completely paralyzed below the waist. My horse seemed to realize what had occurred; he stopped, turned, and walked slowly back - I holding to the pommel of the saddle with my hands. We soon reached a group of soldiers, who took me off and, placing me in a blanket, carried me to the Chancellorsville House.”¹³

Our redoubtable friend Private McCarter described having his arm paralyzed upon impact, and the subsequent rush of bleeding and dizziness:

“[While ramming home a round], a bullet struck me in the uplifted arm, close up to the shoulder. The limb dropped powerless at my side. I knew something serious had happened to me. But at the moment did not realize that a Rebel bullet had hit me, inflicting a very serious wound. At first, I thought that the man in the rear immediately behind me in the second line... had accidentally struck my elbow with the butt end of a musket... A stream of warm blood now came rushing down the inside and outside sleeve of my uniform, then down the side of my pants into my right foot shoe until it overflowed. Next, a dizziness in the head and partial loss of sight came over me, accompanied by violent pain in the wounded part. Then growing very faint and weak from loss of blood, I fell down flat on my face on the ground. My consciousness speedily returned, I suppose due to the fall.”¹⁴

A member of the 16th Massachusetts recalled being severely wounded in the face, without being knocked over, during the fierce fighting at Glendale during the Seven Days. This account, like Private McCarter’s and many others, likens the sensation of being shot to being struck forcefully with a large, blunt object like a club or hammer—without initial pain:

“I turned my head to the right... and before it was turned square to the front something hit me. It felt as though an immense timber had struck me end first, with great force. It was not painful; but it seemed to partly daze me. I did not fall, but dropped my rifle and put my hand to my chin, and found that it felt as though torn to pieces. Lieutenant Meserve saw me and told me to go to the rear as soon as possible.”¹⁵

This Iron Brigade soldier's account from Gettysburg is notable for showing how a man with a serious wound could remain functional for while after being hit:

"A bullet hit me on the left shoulder and knocked me down as quick as if I'd been hit with a sledge hammer. The first thought I had was that some rebel had hit me with the butt of his gun, for I felt numb and stunned, but I was not long in finding out what was the matter... After a while I began to feel better... I picked up my gun and tried to shoulder it but I found that my left arm was powerless so I went...where our fellows had a heavy line of prisoners and a very thin skirmish line of themselves, and took my place outside the rebs... I felt sick and faint and the blood was running down the inside my clothes and dropping from my pants leg and my shoe was full and running over."¹⁶

General Wadsworth, who was passing by, saw this wounded man and ordered a cavalry sergeant to bring him to a field hospital in Gettysburg.

This officer of the 37th New York decided the best course of action after being shot at Chancellorsville was to keep still:

"I received a minie rifle ball through the right lung. Staggering back from the right of the colors, I sank on one knee to investigate how much of a wound I had received... Passing my left gloved hand to my breast, my right having become paralyzed from the shock of the ball passing entirely through my body, I found that I was bleeding profusely, and growing weak. I rested my hip on the ground and steadied myself, in a half-sitting position, with the good arm. I concluded that my best chance was to remain as quiet as possible."¹⁷

A fellow officer eventually helped this man to a field hospital a half-mile to the rear.

Some soldiers were defiant despite being seriously wounded, as related by a New Yorker at Spotsylvania Court House

"Anselm J. Smith of the 164th NY...start[ed] for the rear with his right arm shattered and bleeding as he loudly exclaimed, 'Boys, give it to them for this!' He was mad clean-through because he could not use that arm to load his gun just once more!"¹⁸

Similarly, at Gaines's Mill, "Water S. Colby... received a wound... He... pulled his cap off his head, waved it in the air, and gave three cheers for the Union and the American flag, and fell down."¹⁹

Reenactors portraying wounded men should consider the occasional act of "defiance" and functionality in the immediate aftermath of a "wound" (followed later by succumbing to the trauma in some fashion) as different and historically documented facets of their impression.

Accounts of fatal wounds are particularly gruesome, like this one from Fredericksburg:



Federal wounded at Fredericksburg in May 1864
(Library of Congress)

"Another of my comrades fell almost at my feet, mortally wounded in the stomach, exclaiming as he went down, 'Oh, my mother.' He tossed about in agony and blood for a few seconds longer, then all was over. His spirit had fled."²⁰

Even quick deaths demanded attention, like this man killed by a shell at Glendale: "[The shell] tore off one arm, one leg, and the foot from the remaining leg. The victim gave one shriek and died in a few moments."²¹

Soldiers suffered all manner of horrible wounds beyond limbs and the torso wounds typically portrayed in reenactments. A Pennsylvanian wrote of the fighting at Spotsylvania's Mule Shoe:

"Edward Savage, of Company K, had both eyes destroyed by the windage of a passing shell. He was led from the field but died in a few hours from the shock and concussion. A Union officer had both eyes shot out, the ball passing just back of his eyeballs. He stood, blind and helpless, never uttering a word of complaint, but opening and closing the sightless sockets, the blood leaping out in spurts."²²

Other awful wounds included men with multiple limbs smashed off, men gutted by artillery shells, and soldiers with portions of their face and head shot away. Needless to say, such

terrible images of war are, thankfully, impractical to portray at a reenactment.

Agony of the Wounded

Reenactors depicting casualties often fall silently to the ground and do not move again but, in fact, wounded soldiers rarely endured their agony in stillness and silence before shock set in or medication was administered. It was common for the newly wounded to scream in pain and writhe in agony, as recalled by a Yank fighting in the Wilderness on May 5, 1864:

"He fell... [and] those who...saw him fall and witnessed his agony[:] his yells could be heard above the din of battle. Frank Sweetser and Fred Loring were... mortally wounded... I saw [Frank] writhe in pain... Sweetser begged constantly for water, which he threw up as soon as it was down... Other wounded men all around us...were groaning, praying, begging, cursing, and yelling with pain and rage."²³

A member of the 121st New York wrote from South Mountain, "I saw one poor rebel die[.] at times he praid at times he swore he cursed the yankee who had given him his death wound[.]"²⁴

Perhaps chief among the tortures endured by wounded soldiers lying on the battlefield was thirst, as Private McCarter learned at Marye's Heights:

"A burning thirst was now coming fast upon me—that most terrible of all thirsts known to and experienced only by the wounded on a battlefield where water was not to be had. Oh, how I craved a cup of cold water. I would have given \$1000 for it had I had it.

"...My thirst grew to such an agonizing degree that my tongue literally stuck fast to the roof of my mouth, almost preventing articulation. My sufferings now from the pains of my wounds were indeed light compared with my suffering

from thirst. I really prayed to God with all my soul to end my life then and there or send me water. Oh, that terrible, consuming thirst. I shall never, never forget."²⁵

This burning thirst was not caused by heat; rather, this curse of all wounded soldiers since antiquity was due to the loss of bodily fluids—particularly blood. Portraying the important aspect of *thirst* by the wounded is easy for reenactors.

Other common agonies experienced by wounded soldiers included, of course, the eventual pain of the wound itself (often not apparent immediately after it was inflicted, but coming in due time), re-opening of wounds, the torture of knowing one was grievously wounded, and thoughts of loved ones at home and lost comrades, among others.

Succor

Wounded men usually implored their comrades for help, as recounted by a member of the 9th Massachusetts at Gaines's Mill:

"A shell struck and exploded near Lieutenant O'Dowd breaking his leg above the ankle. He fell and was unable to rise, and cried out to 1st Sergt. J.W. Macnamara, 'For God's sake, Jim, don't leave me.'... Macnamara quickly responded to O'Dowd's request, and, with two other men, Jerry Cronlin and William Winn, rushed to assist him... Lieutenant O'Dowd was taken up and placed on Winn's back, and, with a man supporting him on each side, they moved along toward their lines as fast as circumstances would admit."²⁶



Federal wounded wait under trees for evacuation from Fredericksburg in May 1864 (Library of Congress)

A member of the 137th New York recalled from Culp's Hill at Gettysburg:

"There was one of the boys wounded close to where I was and when the regt left he cried for help but there was such a confusion no one noticed him but I took pity on him and tried to help him. The bullets came thick and clost but I got his knapsack off and got him up. I couldent carry him and my gun. I got him to lean on me and got him out the worst firing. I tried to get him out of danguer but he couldnt go eney father so I left him by the side of a rock."²⁷

Succor was also provided to men who fell in the midst of their own battle line, and certainly the frequency of pre-battle orders reminding men to leave the wounded to the care of others reflects that soldiers often tended to help their wounded comrades.

Sometimes succor was provided by enemy soldiers:

"One of their skirmishers charged bayonets at Sergeant Macnamara as he sat on the ground examining his wound and yelled out, 'Get up, Yank!' The sergeant pointed at his leg and said he was wounded and couldn't move, at the same time asking for a drink of water... The kind-hearted Confederate, without a moment's hesitation, or a word, unslung his canteen of water and threw it to him, and passed on."²⁸

Not all encounters with the enemy went so well:

"James Patterson... was lying with four wounds... and perfectly helpless. A Confederate cavalryman came along, and was robbing the dead, and not even sparing the wounded. He said to Patterson, 'You won't live anyhow, and I guess I'll take what you have got.' He took his shoes off and two dollars in money. The wounded man begged him to fill his canteen with water, but he refused."²⁹

Getting Out of Harm's Way

After being wounded, men who were ambulatory almost always made efforts to get away from the fighting and seek medical help behind the battle lines—something that reenactors can easily (and should) portray during "battle" scenarios. This Massachusetts soldier wounded at Reams Station on August 25, 1864 was particularly descriptive:

"I received a ball in the side of the neck... I started to get out but whirled around to give them one more shot and I received another bullet through the left thigh. I put two guns up under my arms for crutches and started to the rear... [after going a ways] I sat down there, took off one of my suspenders and tied it around my thigh to stop the blood. At that moment there was a shell burst over my head. A piece of it took me across the left instep partially cutting the cords of my toes on my left foot ... [and] I made it to the rear as well as I could."³⁰

Even severely wounded men attempted to make it to safety; as an Iron Brigade man recounted from Gettysburg: "I saw Capt. Ticknor start for the rear in a spread out, staggering sort of way [and after] a few feet he fell."³¹

Despite being wounded five times, our friend Private McCarter made his way toward a field hospital in Fredericksburg:

"At about eight p.m. [after dark], I regained my feet with much difficulty and excruciating pain. I started for safer quarters on the low ground immediately in the rear of the battlefield. To move along... was no very easy matter... frequently stumbling over the dead body of some unfortunate comrade... My friendly blankets, although mysteriously and unaccountably heavy, I did not relinquish... As soon as I got up from the ground, my wounds recommenced bleeding."³²

Wounded who were not ambulatory made their way off the field helped by either stretcher bearers or their comrades.

Stretcher bearers operated from the start of an engagement until long after dark. Accounts of stretcher bearers being up at the front lines during the heaviest fighting are rare, and it was more typical for this type of aid to follow some distance—perhaps still within rifle range—behind the troops. Stretcher bearers included members of the Army of the Potomac's Ambulance Corps, created in August 1862, which served under the army's medical director and brought ambulance wagons onto the field to collect the wounded. In addition to the Ambulance Corps and comrades of the wounded men, other

stretcher bearers included members of regimental and brigade bands and even company field musicians (fifers and drummers).

Many stricken soldiers were helped to safety by their friends in two general ways: men who left the line to escort the wounded soldier to the surgeons, and men who returned to the battlefield after the fighting ended (sometimes long after dark) to search for wounded comrades.

The Ambulance Corps was well supplied with special-made stretchers of wood and canvas. "Stretchers" used by the rank and file were usually improvised, including contraptions such as a blanket wrapped around two muskets or sturdy saplings, as well as cruder stretchers, such as doors and gates. Ambulance Corps wagons were usually single-axle vehicles, although in an emergency two-axle wagons were also used; each ambulance was staffed by a driver and two stretcher bearers.

The Field Hospital

Wounded men eventually made their way to dressing stations and temporary field hospitals; because field hospitals and the army medical department have been the subject of numerous book-length monographs, the topic is covered here with brevity.

Dressing stations—roughly analogous to a modern battalion aid station—were located on the battlefield, often just out of rifle range, and were staffed by assistant surgeons and orderlies. At these locations, wounded men were bandaged and perhaps given other extremely basic care, and sent to a field hospital. Not all wounded men visited a dressing station and many went from the battle line directly to a field hospital.

Field hospitals, as defined here, were temporary affairs—established while the battle was underway and lasting sometimes several weeks—at which the wounded received preliminary evaluation ("triage"), emergency medical treatment, crude operations, bandaging, and post-operative stabilization, before being evacuated to a larger, cleaner, better staffed and much better supplied general hospital far to the rear, usually in or near a large city like Washington D.C., Philadelphia, or New York. Evacuations to general hospitals started as soon as transportation was available, usually within a day or two of the battle but, occasionally, some patients remained in the field hospital for several days or even weeks after the fighting.



Federal ambulance train at Petersburg (USAMHI)

Field hospitals were usually less than two miles behind the front lines—close enough to receive the wounded—and were typically set up inside a farmhouse, barn, or similar structure. While a field hospital during battle certainly had supply wagons and ambulances parked nearby, it was probably rare that many large tents were set up and available until days after the battle.

When a wounded soldier arrived at a field hospital during battle, he underwent triage fairly quickly, if his wounds did not appear to be fairly serious, chances were

good that it would be some hours or even days before he received real medical attention; typically the lightly wounded had to wait for treatment, while the apparently mortally wounded—including most abdominal wounds—often received little treatment at all, and those "in the middle" received the lion's share of treatment while the fighting raged.

A field hospital during battle was a cluttered, miserable, chaotic place, full of bloody horrors; awful odors; hundreds of moaning wounded, here and there with some screaming, writhing, or shaking in pain; and soldiers searching for missing comrades. The indoor areas were often reserved for operations and some of the most critically

wounded that stood a chance of surviving, while the other casualties were laid on the ground around the building(s), typically without any shelter regardless of the weather. A pile of amputated limbs awaiting burial was often located just outside the operating area, and the dead were buried nearby, inevitably in very shallow (usually individual) graves without markers. Indeed, field hospitals were places so awful to behold that even hardened combat veterans were reluctant to linger there any longer than necessary. The suffering inside a field hospital was certainly very nearly as bad, sometimes worse, than the agony of the wounded on the battlefield.



Federal graves near a City Point, Va. field hospital (Library of Congress)

Wounded men received little nursing or common comfort during and immediately after the fighting:

it usually took a couple days for rations to be delivered to the field hospital, and many soldiers had to make do with few rations, and with minimal water and sanitary care. Within a day or two of the end of the fighting, however, conditions would start to improve dramatically as supplies and personnel arrived, and as the hospital was evacuated.

Starting in mid-1862, Army of the Potomac field hospitals were usually run at the division level (by 1864, at the corps level) and were staffed by regimental surgeons, assistant surgeons, regimental hospital

stewards, and a number of enlisted men detailed to the medical department as orderlies. It was extremely rare for civilians such as nurses, Sanitary Commission personnel, and locals to be present inside a field hospital during and in the immediate aftermath of a battle. Such personnel, particularly locals, were more likely to arrive at field hospitals in the days following the battle, after the armies had moved on and only the medical personnel and the wounded remained.

Those Who Remained On the Field

Within a day or two the wounded had usually been removed from the battlefield or made their way to the rear on their own, leaving only the dead. Dead men fell in innumerable ways, and battlefield photographs of the era are not always the definitive source for how they appeared, because looters often rifled and even stripped dead bodies looking for valuables, photographers occasionally moved the



Dead of the 69th New York Vols at Antietam
(Huntington Library, San Marino, Ca.)

dead to create a more dramatic image, and—probably less common but still nevertheless a factor—sometimes scavenger animals rooted through the slain as well, such as the infamous nocturnal hogs in the aftermath of Malvern Hill and Fredericksburg in 1862.

A drummer in the 150th New York wrote from Gettysburg on July 4, 1863: “For the most part the dead were lying on their backs with wide open expressionless eyes.”³³

A short while after death, the slain turned an unnatural color: starkly pale for those who had bled to death, and even purplish for those who died with blood flowing toward their head. Within a day or two after the fighting—particularly in warmer weather—the battlefield was usually a scene of gas-bloated corpses with bulging eyes, swollen tongues, and blackened skin. Soldier accounts are rife with descriptions of corpses so blackened with corruption that it was difficult to tell Caucasians from African-Americans, and best friend from stranger.

Of course, the battlefield was also littered with human “debris”: blood was everywhere, and body parts—limbs, heads, internal organs, and others—were usually scattered around and even flung up into trees, creating a grisly scene indeed. Another revolting aspect of the battlefield after a few hours had passed was the noisome odors of decaying flesh and other matter.

To add to the gruesome scene of human destruction, often hundreds of dead animals—particularly military horses and mules, but also including local animals such as barnyard stock and even wildlife killed in the fighting—lay among the slain soldiers, amidst a landscape of blasted flora.³⁴

Implications for Reenactors

While the “battle” is undoubtedly the highlight of the typical reenactment weekend, the depiction of battle casualties usually doesn’t square with history. At many reenactments, the opposing battle lines fire away and a man drops from the ranks here and there, usually to never move again until the end of the “battle”, and few if any of his comrades attempt to help him. Sometimes there are a few fellows

limping the rear using their musket as a crutch and, when the “battle” is over, the field is littered with “dead” bodies.

In reality, the casualties of a Civil War battle moved, crawled, writhed, screamed, called out for help, and were given water and otherwise succored to by their friends. Every casualty was not necessarily knocked down by the bullet, and the number of men killed outright was fairly small compared to the number of ambulatory wounded. Battle reenactments should typically have more “wounded” stumbling or crawling to the rear, and reenactors should endeavor to portray battle casualties per the historical record, as presented in this essay and other first-person accounts.

Exactly *how* one portrays reacting to a serious injury requires both study and some imagination. Certainly reenactors can study films of modern warfare but should consider that a man’s initial reaction to being hit with a modern high-velocity bullet is different than the body’s reaction to being struck with a slow-moving, ponderous minie ball or canister projectile. A modern bullet, despite its comparatively small diameter, has enough force to “instantly” nail almost anyone to the ground; in contrast, how Civil War soldiers reacted to being shot is described above.

A Civil War soldier’s reaction to being wounded depended upon the location and severity of the wound, the man’s psychological condition, and other factors. Portraying such an unpredictable and traumatic moment when the reenactor is, of course, not actually wounded requires a bit of, well, *acting ability*. It also requires knowledge of how soldiers behaved when wounded, and the resolve to keep the portrayal going for longer than just a couple minutes. A reenactor “acting” wounded may feel somewhat foolish while he’s doing it, but it’s worth keeping going because a good portrayal immeasurably improves the experience for those who see it.

A reenactor impediment to presenting a more-realistic portrayal of wounded men—other than the obvious fact that reenactments have no real danger and no battle wounds—is the very understandable reluctance of a “wounded” impressionist to abandon parts of his gear on the field. Certainly a number of wounded soldiers, including some with serious injuries, made it off the field with large parts of their kit, including leathers, camp equipment (haversack, canteen, and knapsack or blanket roll), and even weapons.

To head to the rear, of all his gear, wounded soldiers seem to have been most likely to first abandon their long-arm because of its weight; conversely, the long-arm is the most expensive part of a reenactor’s kit and is the item a reenactor least wants to lose. Pre-“battle” planning can do a lot to address this conundrum: arrange with a comrade to sling your “abandoned” rifle and carry it back to camp, or add a sticker or tag to your long-arm with your name and the group you are serving with that weekend. If any of this makes you uncomfortable, then simply portray a soldier who left the field still bearing his weapon.

Here are some obvious “don’ts” relative to portraying a wounded soldier:

- For several obvious safety reasons, avoid “taking a hit” with a loaded weapon.
- Portray a *wounded* soldier, not one killed on the spot.
- When going to the rear, avoid the extremely hackneyed portrayal of a soldier limping along using his musket as a crutch. While it happened in the Civil War, it is also pretty likely some other fellow will also be doing it.
- If portraying a supine casualty, do not prop your torso up on your elbows to watch the “battle”. Instead, concentrate on properly portraying a wounded soldier.
- Taking photographs while “wounded” is *certainly* to be avoided.
- Avoid joking around with other “wounded” nearby—no matter how the “battle” looks, and regardless of what you see amongst the event spectators.

These things should be avoided because it's readily apparent to event spectators and other reenactors when "casualties" do not take their role seriously. Participants should bear in mind the innate drama of the historical event and sacrifices being portrayed.

Another facet to portraying the awful aspects of a Civil War battlefield is the art of "wound makeup", often called *mouflage* (pronounced, "MOO-lajj"). While a detailed description of mouflage techniques is beyond the scope of this essay, it bears mentioning that entire manuals have been written on the topic for use by reenactors of various time periods, amateur filmmakers, and emergency response services that stage "mock disasters" for training purposes.³⁵

Mouflage can be a fairly sophisticated art and requires some knowledge of battle wounds and anatomy—it is certainly much more complex than the reenactor who smears fake blood on his head or uniform. Properly applied mouflage can add a startlingly realistic (and sometimes quite disgusting) bent to the portrayal of wounded soldiers and post-battle field hospitals.

The majority of materials required for effective mouflage are fairly common and often inexpensive, including various types of homemade blood (flowing vs. clotting), theatrical wax used to create "wounds", skin-colored pantyhose (used to quickly apply pre-made "wounds" to limbs), and other materials. However, more sophisticated mouflage tools can be expensive, including perforated uniforms stained with "blood", blood pumps, prostheses that represent severed limbs, and other implements of simulated gore.

While not all "battle" portrayals require or are even appropriate for mouflage, it is one of the items in the reenactor's arsenal for crafting historically accurate depictions of battle casualties.

Portraying wounded men in a manner consistent with the historical record brings home the carnage of battle, and provides a better, more educational and more realistic living history experience for the "casualty", the men in the ranks, and event spectators.

Conclusions

The topic of Federal soldiers in battle is a broad indeed and has been the subject of more than one full-length study. For additional information, see Earl J. Hess's excellent book, *The Union Soldier in Battle: Enduring the Ordeal of Combat* (Lawrence KS: University Press of Kansas, 1997).

Endnotes

- ¹ McCarter, William (O'Brien, Kevin E.), *My Life in the Irish Brigade: The Civil War Memoirs of Private William McCarter, 116th Pennsylvania Infantry*, Campbell, CA: Savas Publishing, 1996, pp. 179, 189
- ² Cassidy, Edward K. ed., *The Civil War Letters and Diaries of Sergeant Charles T. Bowen 12th United States Infantry 1861-1864*, entry for July 6, 1862
- ³ Beaudot, William and Herdegen, Lance, *An Irishman in the Iron Brigade*, New York: Fordham University Press, 1993, pp. 52
- ⁴ Mulholland, St. Claire, *The Story of the 116th Regiment Pennsylvania Volunteers*, Philadelphia: F. McManus Jr. & Co., 1903 (reprinted: Lawrence Kohl, editor, New York: Fordham University Press, 1996), pp. 223
- ⁵ Letter from Frederic Winthrop to Frank Winthrop, August 23, 1864, Winthrop Papers, II, Massachusetts Historical Society, cited in Schroeder, Patrick, *We Came to Fight: The History of the 5th New York Veteran Volunteer Infantry, Duryee's Zouaves (1863-1865)*, Brookneal Va.: Schroeder Publications, 1998, p. 180.
- ⁶ McCarter, William, *My Life in the Irish Brigade*, p. 178
- ⁷ O'Beirne, James R., "When the Rappahannock Ran Red", *Hearst's Magazine*, Vol. 23, 1913, p. 769
- ⁸ Letter of Henry Ropes (20th Massachusetts Regiment) to John Codman Ropes, dated December 18, 1862 from Falmouth, Va., from the Bob Dames web site, www.harvardregiment.org, contained in the Manuscripts of the Boston Public Library.

- ⁹ Henrikson, Anders (ed. & trans.), "The Narrative of Friedrich Meyer: A German Freiwilliger (Volunteer) in the Army of the Potomac", *Civil War Regiments: A Journal of the American Civil War. Vol. VI, No.2*; "The Maryland Campaign of 1862 and Its Aftermath", p. 13
- ¹⁰ McCarter, William, *My Life in the Irish Brigade*, pp. 182-183
- ¹¹ *Ibid*, pp. 199-200
- ¹² Gould, John M. *History of the First-Tenth-Twenty-Ninth Maine Regiments*, Portland, ME: S. Berry, 1871, pp. 170-183
- ¹³ Miles, Nelson A., *Serving the Republic: Memoirs of the Civil and Military Life of Nelson A. Miles, Lieutenant-General, United States Army*. (New York: Harper & Brothers Publishers, 1911), pp. 54-55
- ¹⁴ McCarter, William, *My Life in the Irish Brigade*, pp. 179-180, 181-182
- ¹⁵ Catton, Bruce (ed.), "Asa Smith Leaves the War", *American Heritage*, Vol. XXII, No. 2, February 1971, pp. 54-59, 103-105
- ¹⁶ Beaudot and Herdegen, *An Irishman in the Iron Brigade*, p. 96
- ¹⁷ O'Beirne, James R., "When the Rappahannock Ran Red", p. 772
- ¹⁸ Smith, Newell Mott, "A Personal History of the 155th New York Volunteer Infantry", Buffalo and Erie County Historical Society, speech given to the G.A.R. Chapin Post, Buffalo, New York, c. 1902
- ¹⁹ Davenport, Alfred, *Camp and Field Life of the Fifth New York Volunteer Infantry, Duryee Zouaves*, New York: Dick and Fitzgerald, 1879, p. 229.
- ²⁰ : McCarter, William, *My Life in the Irish Brigade*, pp. 180-181
- ²¹ Catton, Bruce (ed.), "Asa Smith Leaves the War", pp. 54-59, 103-105
- ²² Mulholland, St. Claire, *The Story of the 116th Regiment*, pp. 218-219
- ²³ Haley, John W. (Silliker, Ruth, ed.), *The Rebel Yell and the Yankee Hurrah: The Civil War Journal of a Maine Volunteer*, Camden ME: Down East Books, 1985, p. 145
- ²⁴ Transcript of unpublished letter, John M. Lovejoy to Cousin Cynthia, sold on Ebay.com in January 2004
- ²⁵ McCarter, William, *My Life in the Irish Brigade*, pp. 185, 190
- ²⁶ Macnamara, Daniel G., *The History of the Ninth Regiment, Massachusetts Volunteer Infantry, June 1861 – June 1864*, Boston: E.B. Stillings & Co., 1899 (Samito, Christian, ed., reprint: New York: Fordham University Press, 2000), p. 118
- ²⁷ The Civil War Letters of Charles Engle (Judy Coy, ed. & transcr.), online at <http://members.aol.com/jcoy13/>
- ²⁸ Macnamara, Daniel G., *The History of the Ninth Regiment*, p. 119
- ²⁹ Davenport, Alfred, *Camp and Field Life of the Fifth New York*, p. 299.
- ³⁰ Barnard, Sandy, ed., *Campaigning with the Irish Brigade: Pvt. John Ryan, 28th Massachusetts*, Terra Haute IN: AST Press, 2001, pp. 132
- ³¹ Beaudot and Herdegen, *An Irishman in the Iron Brigade*, p. 95
- ³² : McCarter, William, *My Life in the Irish Brigade*, p. 189
- ³³ Letter from Jerry Collins to S.G. Jack, February 21, 1903, Collins Papers, Dutchess County Historical Society, Poughkeepsie, N.Y., cited in Wert, Jeffrey, *Gettysburg: Day Three*, New York: Simon & Schuster, 2001, p. 289
- ³⁴ For a more detailed description of the post-battle sights, sounds, and odors of the battlefield, see Earl J. Hess's *The Union Soldier in Battle: Enduring the Ordeal of Combat* (Lawrence KS: University Press of Kansas), 1997, pp. 37-44.
- ³⁵ One online resource with mouflage recipes you can make at home is <http://www.inquiry.net/outdoor/skills/instruction/simulations.htm>. The website www.mouflage.net is that of a company who's business is staging mock disasters, selling mouflage items, and providing instructional materials and training in mouflage.

Kevin O'Beirne is a member of the Columbia Rifles from western New York State