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COLIN HIRTH

In the United States National Archives in Washington, DC, there is a record, only the size of a modern flash card, written in haste with long flowing black cursive letters on the back of an 1865 military medical prescription form. The document reads; “Fuller Charles, no record of service or payment on file, remark on redeployment, 7th A.C. for aug-sept + Oct 1862 at Mill Creek Post House. No conduct on file.”¹ To the average person this cryptic document does not make much sense and its importance would be easy to discard. But to the careful historian this small scrap of paper represents the *only* record that the United States Federal Government has preserved of Charles Fuller’s service as a contract doctor during the American Civil War. History is dominated by larger than life characters who march armies to the ends of the earth, explore uncharted lands, compose song, poetry and philosophy, and through their actions dictate the reality of the world in which we live. Charles Fuller represents the overlooked fact in history that great men cannot become great without those who march under them.

In the Civil War the role of the contract doctor is an element of medical history that largely has been ignored. They were the expedient solution to a chronic problem in the Union medical corps. The Civil War produced battlefield casualties in apocalyptic numbers that the medical corps was unprepared to handle. This article seeks to explore the lives and identities of a handful of contract doctors who came in contact with one another during their service at Seminary Ridge Hospital

during the Battle of Gettysburg at Gettysburg, Pennsylvania.

Contract Doctors in the Civil War

Problems within the Army medical corps became readily apparent during the first major engagement of the Civil War at Bull Run. Hospitals, located too far from the front lines, forced the Union Army to rely on ambulances driven by civilians to transport casualties. The civilian drivers were not accustomed to being in harm’s way and fled during the first shots of the battle. The result of the Battle of Bull Run was that the wounded were forced to seek medical care on their own. Union soldiers who were too injured to walk to the hospitals were left on the battlefield for days, and the ones who were able to walk had to travel twenty-seven miles or more to Washington, DC, for treatment. The debacle at Bull Run was met with outrage from both the upper echelons in the Union Army and the American public. It was blatantly apparent that more medical personnel were needed to provide battlefield treatment and immediate care close to the field of action. Enter the contract doctors.

There were three types of contract doctors: military affiliated contract doctors, state contract doctors, and local contract doctors. Military affiliated contract doctors were individuals who at one time or another served in the military. We know a great deal about these doctors because their military records still exist. State contract doctors made up the majority of the staff behind the frontlines hired as physicians by state governments to attend their locally organized regiments. Because each state used different criteria for licensing their attendant

¹ Pay Accounts of Contract Surgeons, Charles Fuller, Record Group 94, File 563, NARA.

The ambulance corps of the 57th New York as it appeared at Second Bull Run in 1862. National Archives and Records Administration.

surgeons, these doctors varied greatly in their level of skill. Local contract doctors consisted of civilian doctors who lived in the vicinity of the battle and were pressed into medical service as wounded arrived at their door. They were paid as term physicians by the government after rendering medical assistance.

While military affiliated contract doctors were generally held in high regard, state contract doctors and their civilian counterparts were not seen in the same light. They were a motley collection of the good, the bad, and the grossly incompetent. They were generally distrusted by the Army because they were unaccustomed to working in teams and unfamiliar with the treatment of ballistic wounds and battlefield trauma. This belief is evident in letter written by Jonathan Letterman, the medical director for the Army of the Potomac about the performance of contract doctors at the Battle of Gettysburg. In letter dated August 31, 1863, he states,

In regard to having Surgeons from Civil Life or those who have been for a long time in Hospitals my experience . . . has convinced me of the unreliability of such officers at or after a battle. They are considered by Medical Officers of this Army generally to be in the way, for they cannot, or will not, endure the exposure and the privation which are necessary; they do not take the

lively interest which they should in administering to the necessities of the wounded. This fact is well known in this Army . . . Surgeon Janes who was left in charge of the Hospitals at Gettysburg reports that "In a short time [after the Army left Gettysburg] numerous Volunteer Surgeons arrived and offered their services; these were assigned to duty in those Hospitals where they were most needed, but I regret to say, they were of little use."²

The Theater of Medical Care: The Seminary Ridge Hospital

The role of contract doctors at the Battle of Gettysburg can be seen in the medical care that they provided at the Seminary Ridge hospital. That the Lutheran seminary on Seminary Ridge became a hospital was one of those unforeseen accidents of war. On the first day of the battle Union forces fought in skirmishing fashion north of Gettysburg to delay the Confederates from seizing the battlefield's strategic high ground along Cemetery Ridge south of the town. At the onset of the battle the main building of the Lutheran Seminary, due west of the town, acted as an observation post for the Union forces and as a collection point for wounded. Initially the Union lines were far

² Johnathan Letterman to Hammond, Trans Nicholas C. Welsh, 8–31–63, Gettysburg Library File, Record Group 13, File 14, NARA.

Jonathan Letterman, seated at left, Medical Director of the Army of the Potomac, with his staff. Library of Congress.

enough north and west of the Seminary to allow for the evacuation of wounded. As the battle progressed Seminary Ridge became the last line of defense for the Union forces. At roughly 2:00 p.m. Confederate troops routed the Union forces on the ridge forcing them to flee south through the town towards Cemetery Ridge where they regrouped. The wounded who had yet to be evacuated became trapped behind enemy lines at the Seminary.

The doctors who initially tended to wounded at the Seminary were military doctors. Records state that when Confederate troops overran the seminary they allowed Union doctors to continue treating the wounded but confiscated all the Union medical equipment. This severely impaired the doctor's ability to treat the wounded until a civilian smuggled a

medical kit through the Confederate lines, presumably obtained from one of the local doctors within the town of Gettysburg.³ The Confederates held Seminary Ridge until the morning of July 5. During this time the doctors at the Seminary were allowed to gather their wounded from the surrounding battlefield and turn the main seminary building into a field hospital. One of the biggest ironies of the Confederate seizure of the doctor's equipment was that the Southerners soon moved their wounded under guard into the Seminary for medical care and for use as a Confederate casualty collection point. It was at this point that the Seminary became a hospital for both the North and the South. After suffering

³ Michael A. Dreese, *The Hospital on Seminary Ridge at the Battle of Gettysburg* (Jefferson, NC: McFarland, 2005), 102.

This map shows the main hospital locations. There were over 150 Union and Confederate field hospitals scattered all over the landscape in homes, farms, churches, and other buildings that functioned as aid stations. Only the Union Second, Third, Eleventh & Twelfth Corps hospitals were actually concentrated at one location. See Greg Coco's *Vast Sea of Misery* for additional information.

⊕ Union Hospitals

⊗ Confederate Hospitals

The location of the primary hospitals of each army at Gettysburg. Phil Laino.

Surgeon Whiteside Godfrey Hunter. Library of Congress.

defeats on the second and third days of the battle Gen. Robert E. Lee withdrew from Gettysburg on the evening of July 4 and the hospital, as well as the wounded, came back under the control of the Army of the Potomac.

The Seminary's structure, location, and available floor space made the building desirable as a corps hospital (a corps hospital was a cluster of division hospitals) and collection point for the wounded.⁴ As such the building witnessed a steady stream of wounded men who were treated and tended to until they were stable enough to be transported to larger medical facilities in the cities.

Under the Union medical system the wounded from each division were followed by their medical staff. The constant movement of medical staff combined with the chaos of a fresh battlefield brought a number of Union medical doctors through the Seminary for varying lengths of time. There are sixteen known military doctors who operated at Seminary Ridge during the length of the hospital's term. Their names were Abraham

D. Andrews, Richard Meade Bache, Amos C. Blakeslee, Dwight W. Day, James Fulton, Whiteside Godfrey Hunter, James Henry, Robert Loughran, Murdock M. McGregor, Henry K. Neff, Charles J. Nordquist, William F. Osborn, Abram William Preston, William R. Ramsey, Warren Underwood, and W. W. Welch. It should also be noted that along with these military doctors there also were local civilian doctors who had been operating in the surrounding area.

While military doctors were instrumental in the immediate treatment of the wounded during the course of the battle, much of the patient care after the retreat of Confederate forces was placed into the hands of contract doctors. General Meade believed that another major battle would be fought as Lee's army retreated south. Jonathan Letterman, the medical director of the Army of the Potomac, decided that due to this pressing need the majority of military doctors had to accompany the army. Letterman ordered that 106 military surgeons be left at Gettysburg to care for the wounded, resulting in a doctor to patient ratio of 1 to 150.⁵ The number of wounded exceeded the abilities of the 106 military doctors and the need for additional medical staff was pressing. This void was filled by contract doctors.

Contact Doctors in the Aftermath of the Battle

At the Seminary Ridge Hospital there were three well documented contract doctors with military backgrounds. Their stories illustrate the path a military doctor might take to become a contract surgeon. These three men are John N. Jacobs, James R. Reily, and James L. Farley.

John N. Jacobs was an interesting individual because his story shows how misfortune can change one's career. He was born in 1839 and by the time of his assignment as a contract doctor he was twenty-four years old.⁶ Although a graduate from medical school, Jacobs initially enlisted to serve his country on the battlefield. However, during his course of training he fell off his horse, was injured, and discharged from service. It was at this point that he chose to use his medical training to become a contract doctor in July 1863. Gettysburg was his first assignment. Jacobs arrived on the battlefield and was assigned to the

⁴ Dreese, *Hospital*, 72.

⁵ Dreese, *Hospital*, 123.

⁶ Seminary Ridge Museum Medical Personnel Records.

Seminary Ridge Hospital on July 28.⁷ At twenty-four years of age Jacobs lacked the experience that the older contract doctors had. Gettysburg would have been overwhelming experience, and Jacobs likely served as an auxiliary doctor tending the wounds of the men whom had already undergone surgery and acting as an aid for one of the more experienced surgeons to gain on-the-job experience.

Jacobs stayed with the Union Army Medical Corps until October 5, 1864. He seems to have lost the desire to continue in medical practice as a result of his experience as a contract doctor. In 1869 he settled in Lansdale, Pennsylvania, where he became involved in banking and real estate.⁸

James R. Reily was a fascinating character with an equally interesting story. Unlike many other contract doctors, Reily desired a career as a military medical practitioner. Prior to becoming a contract doctor Reily enlisted in the Union Army as an Assistant Surgeon to the 1st Pennsylvania Artillery. After a promotion to Surgeon he was transferred to the 127th Pennsylvania Infantry and then latter to the 179th Pennsylvania Infantry.⁹ His behavior appears to have fallen short of the expected medical standards. The units he was assigned to resented his lack of empathy and alcoholic tendencies. During his service with 127th Pennsylvania Infantry Reily was accused of neglect on December 31, 1862, when Pvt. Daniel Britz called repeatedly for a doctor and Reily did not appear until seconds before Britz died. Upon seeing the life drain out of Pvt. Britz, Reily reportedly poured himself a drink and toasted the dead man saying "Poor fellow, I hope he is in a better world."¹⁰ This incident appears to have been the last straw for the officers of the 127th. In a signed petition the officers of 127th wrote, "The officers of the 127th Regt. P.A. respectfully request the removal of James R. Reily as Surgeon of the regt. believing him to be incompetent and knowing him to be grossly negligent of duty towards the men under our command. His removal would be considered highly beneficial to the service."¹¹

7 Pay Accounts of Contract Surgeons, United States National Archives, John N. Jacobs, Record Group 94, File Number 563.

8 Dick Shearer, *A Town is Born*, <http://lansdalehistory.org/articles/Booklet%20Town%20Is%20Born.pdf>, 6.

9 Personal Papers, Medical Officers and Physicians, United States National Archives, James R. Reily, Record Group 561.

10 Seminary Ridge Museum Medical Personnel Database.

11 Reily Papers, Record Group 561.

Surgeon John N. Jacobs. Library of Congress.

Reily was brought up on charges of neglecting patients, not procuring medicines for the sick, neglecting to police sanitary conditions, and behavior unbecoming of an officer for toasting the death of Pvt. Britz. None of these charges stuck for two reasons. First, although Reily may have been abrasive, he was a skilled surgeon.¹² Second, the Union Army desperately needed medical staff. Because of these reasons, Reily was transferred to the 179th Pennsylvania Infantry where he worked as the surgeon until the unit was mustered out on July 27, 1863.¹³ Although the 179th was not at the Battle of Gettysburg it was nearby in Washington, DC. The Union high command ordered Reily to the Seminary with plans of employing him under a contract after mustering out of his regiment. Reily assumed command of the Seminary Hospital from August 17 to September 8.¹⁴

McFarland, a wounded officer at the Seminary, described Reily during his stay at the hospital as

12 Reily Papers, Record Group 561.

13 Reily Papers, Record Group 561.

14 Reily Papers, Record Group 561.

“jolly . . . to the point of rowdy and disruptive.”¹⁵ The Reverend Franklin Jacob Fogel Schantz had come to Gettysburg to minister to the dying men and as a graduate of the Lutheran Seminary chose the Seminary Hospital as his locale. Reverend Schantz describes the doctors at the hospital as disrupting the start of his service with drinking and “singing negro melodies.” As Reverend Shantz recounts, “As the noise in the Surgeon’s room had not ended, I sent a messenger to inform the Surgeon that I was ready to begin the Service. His reply, as repeated by the messenger, was, ‘I suppose that means we are to stop our noise.’ Very soon after the messenger had returned to me, the surgeon and his party came from the surgeon’s room and passed me on a rush down the stairway and out of the Building. I was glad the noise of the carousers had ceased.”¹⁶

Michael A. Dreese in his book *The Hospital on Seminary Ridge at the Battle of Gettysburg* notes that this “the rowdy, singing, surgeon” was most likely James Reily. McFarland in his writings also touches on the revelries of the doctors. “There are rowdies here with their chief Dr. R. who keeps everyone awake with their revelries.”¹⁷ Although Reily was seen by some of the Seminary’s occupants as too “jolly” he was well liked by his superiors and seems to have ran the hospital in good order. Near the end of August inspectors from the United States Christian Commission visited Seminary Ridge Hospital. In their report they described the hospital in these words, “The arrangements of the hospital were good, and exhibited a degree of comfort beyond expectation. . . . The surgeons of the hospital appeared to be humane and considerate in the treatment of their patients.”¹⁸

James L. Farley was another contract doctor at the Seminary Ridge Hospital. Prior to the Battle of Gettysburg Farley had been the surgeon for the 14th New York State Militia. He initially was commissioned on May 23, 1861, but was discharged due to a disability on June 10, 1863, less than a month before the battle. Although “discharged,” James L. Farley was still present at the battle. This is documented in the patient logbook from the Seminary Hospital where Farley signs his own name after assigning

¹⁵ Dreese, *Hospital*, 142.

¹⁶ Dreese, *Hospital*, 142.

¹⁷ Dreese, *Hospital*, 142.

¹⁸ Dreese, *Hospital*, 146.

Surgeon James L. Farley. Library of Congress.

men under his command as hospital staff.¹⁹ Along with his signature in the hospital record book, his personal papers at the United States National Archives indicate that he was promoted to lieutenant colonel by brevet on July 1, 1863.²⁰ Promotion by brevet was, and still is, a manner in which the military places an individual into a position of authority rapidly without having to adhere to standard operational procedure. Given the circumstances Farley’s advancement of rank was a field promotion.

Farley’s involvement in the battle of Gettysburg was a result of Jonas Letterman’s belief that a major battle was about to occur. The Union Army anticipated a battle of massive proportions once it learned that Lee’s Army had disengaged from its location and started to maneuver northward. As the Union army maneuvered to intercept the Confederate Army, Letterman furiously worked to try and get as many qualified medical personal to the frontlines as possible. James Farley was one of

¹⁹ Military Hospital Records, Seminary Ridge Hospital, United States National Archives, Record Group 94, File 562.

²⁰ Personal Papers, Medical Officers and Physicians, United States National Archives, James L. Farley, Record Group 561.

Surgeons operating at Gettysburg. National Archives and Records Administration.

these doctors. On May 28, 1863, Letterman writes: “General, I have the honor to request that Surgeon James Farley, 14 New York S.M. who is reported as being on duty in Washington may be ordered to join his Regiment, which is without a medical surgeon. Farley has been absent from his regiment since Feb 25 for S.O. W91.”²¹

The activities of state contract doctors are more difficult to reconstruct when their duties did not extend beyond the treatment of casualties. Each state in the Union supplied their own doctors to the Army. The decentralized nature of this approach resulted not only in admitting doctors to the state program that varied greatly in their quality of education, but also in losing track of them in the historic record. Charles Fuller, the doctor mentioned in the introduction, represents the norm when attempting to look into the lives of the doctors contracted by individual States. Although he served as a contract physician, Fuller, like many others, omitted any mention of service during the war in his obituary.²²

Nevertheless when one investigates the tracks of these doctors, interesting stories unrelated to the Civil War are uncovered. Henry Leaman was another contract doctor at the Seminary between August 1 and September 5 who shares Fuller’s knack for obscurity.²³ Unlike Fuller, however, Henry Leaman’s role at Seminary Ridge became popularized when his family became the modern

equivalent of a hot story that the media follows closely. In 1900 Henry’s brother, Charles, was a Christian missionary to China and was in the city of Kiang with his family when the Boxer Rebellion occurred. The Boxers, opposing all forms of Western influence, targeted Christians. Due to Charles’ profession, the lives of he and his family were in danger as they fled the country. Because of public interest in the trials of his brother Charles, Henry Leaman was interviewed several times and his role as a contract doctor was documented.²⁴ The Leaman article represents the random scraps of information that can be uncovered when researching the identities of state contract doctors.

At Gettysburg several local physicians at the time of the battle became contract doctors who worked alongside each other at the Seminary Ridge Hospital. One of these was Dr. Henry S. Huber who was born on September 17, 1814, in Philadelphia, Pennsylvania. He is described as having a “delicate and slender build yet was quick and elastic in his movements.”²⁵ Huber first studied medicine as an apprentice in the practice of Dr. John Wiltbank in Philadelphia. After acquiring hands-on experience with Dr. Wiltbank, Henry attended the Pennsylvania College in Gettysburg, Pennsylvania, where he graduated with a Doctor of Medicine degree in 1845. For the next four years Dr. Huber practiced medicine in Chicago and even served as the city physician from 1847 to 1849. At some point in 1849 he contracted malaria and after several bouts of fever the Huber family decided to move permanently to Gettysburg to escape the city air. The family purchased a house on the southeastern corner of the intersection of Chambersburg and Washington Streets.²⁶

After recovering from his illness Huber opened a medical practice in town. His experience and contacts at Pennsylvania College led to his appointment as a Professor of Anatomy and Physiology in 1854 where he taught classes at the campus north of his Gettysburg home. As a professor and medical practitioner he garnered respect from those he interacted with. One of his former students described his abilities in practice, “Dr. Huber displayed a

²¹ Farley Papers, Record Group 561.

²² Bowdoin College, Obituary Record, Class of 1865, 33.

²³ Pay Accounts of Contract Surgeons, Henry Leaman, Record Group 94, File 563.

²⁴ *Philadelphia Inquirer*, July, 9, 1900, 9.

²⁵ Seminary Ridge Museum Medical Personnel Database.

²⁶ John M. Rudy, *Shattered by War: The Huber Family, The Cupola*, March 7, 2013, <http://cupola.gettysburg.edu/interpretcw/28/>.

Surgeon Robert Horner. scienceviews.com.

sound judgment in the diagnosis of disease, and in the application of remedies was bold and very successful. . . . As a surgeon he ranked above mediocrity, was dexterous with the use of the knife and operated with skill.”²⁷

Henry Huber understood the horrors of war before the Battle of Gettysburg. His son, Frederick A. Huber, attended classes at the medical school in Philadelphia to follow in his father’s footsteps as a doctor. When the state of South Carolina seceded from the Union in 1860, Frederick enlisted with the 23rd Pennsylvania Volunteers, “Birney’s Zouaves.”²⁸ Frederick quickly rose to the rank of First Sergeant. Unfortunately he died heroically in the battle of Fair Oaks on March 13, 1862, after being wounded three times. Upon reading the news of his son’s death in the local Gettysburg newspaper, Henry Huber left for Fair Oaks, recovered the body, and returned to Gettysburg where Frederick was buried in Evergreen Cemetery.²⁹

Charles and Robert Horner were brothers and Gettysburg natives. They were born a year apart; Charles on May 5, 1824, and Robert on October 17, 1825.³⁰ Their father was Dr. David Horner, one of the local medical practitioners. The two brothers had grown up in and around their father’s profession which fostered a desire to continue in medicine. Both Charles and Robert had similar

educations. They were introduced to medical practice by assisting their father and they both attended Pennsylvania College in Gettysburg; Charles in 1843, and Robert from 1842 through 1845. After attending Pennsylvania College both young men pursued their MD at the University of Pennsylvania; Charles in 1846, and Robert in 1849.³¹ After completing their studies the pair moved back to Gettysburg to practice medicine.

At the time of the battle the Horner brothers lived in adjoining houses, numbers 47–49 and 51–53 on the north side of Chambersburg Street.³² Although neither recorded an account of the first day of the battle they are mentioned by others as tending to the wounded as best that they could given their situation. Dr. Robert Bloom, a professor at the Gettysburg College, mentions Robert Horner in his pamphlet “We Never Expected a Battle” written after the war. He writes, “Gettysburg Physicians such as Dr. J.W.C. O’Neal, and Robert Horner also turned out to administer to the wounded . . . they appear to have made no distinction between friend and foe.”³³

The stories of these Gettysburg natives illustrate how local doctors were often dragged into the war. These three doctors were thrown into the thick of the action on the July 1 when Union forces retreated through the town. It was at this point that sporadic house-to-house fighting occurred within the town as Union soldiers were pursued by Confederate forces. Records show that both Henry Huber and Robert Horner began treating wounded men during the town assault. Dr. Huber was interviewed on July 8 by the *Philadelphia Inquirer* and he reported to have ventured out during the fighting in the town to aid the wounded. He treated the wounded from both armies, going from house to house collecting linen for use as bandages.³⁴ Dr. Horner, on the contrary, did not have to look for wounded men. As the fighting was dying down his neighbors carried wounded soldiers to his residence where he conducted the first surgeries of a non-military doctor in Gettysburg. Mary MacAllister, in her personal account, described bringing Dr. Robert Horner

²⁷ Rudy, *Shattered by War*.

²⁸ Find a Grave: Sgt. Frederick A Huber, <http://www.findagrave.com/cgi-bin/fg.cgi?page=gr&GRid=6629956>.

²⁹ Find a Grave: Sgt. Frederick A Huber.

³⁰ Find a Grave: Charles Horner, Robert Horner, <http://www.findagrave.com/cgi-bin/fg.cgi?page=gr&GRid=17079982>.

³¹ Seminary Ridge Museum Medical Personnel Database.

³² John B. Horner, *Essential to a Nation’s Life: The Story of Drs. Charles and Robert Horner of Gettysburg* (Gettysburg, PA: Horner Enterprises, 1997), 38.

³³ Horner, *Essential*, 28.

³⁴ *The Great Battle of Gettysburg, Interesting Details by our Special Correspondent—the killed and the wounded, Philadelphia Inquirer*, July 8, 1863.

Apparatus. scienceviews.com

to a wounded Union Soldier whom she had found hiding from Confederate capture on the second day of the battle.

All this time one poor man suffered awful. He was struck with a bullet and it came around. You could see it in his back. I went into Mrs. Belle Kings where there was a good many surgeons and I begged them to come over and look at this man. I said, "You can take the bullet out for you can see it." But they would not come and I threatened to report them and one of them sassed me a little. Then I got Dr. Robert Horner (civilian physician of Gettysburg). We had no light. The gas was out and we had no lamps. So Martha thought of twisting paper and dipping it in lard. I held the lighted paper while the doctor took the bullet out. It was all ragged and the doctor gave it to the man and said, "There, take that and put it

in your knapsack for a keepsake." The man said, "I feel better already!"³⁵

Henry Huber, Charles Horner, and Robert Horner depict the role that local medical practitioners played both during and in the aftermath of the Battle of Gettysburg. As doctors their services were in high demand. Historical accounts document that local doctors like Huber and the Horners actively took part in caring for the wounded during and in the immediate aftermath of the battle. The fact that most local doctors began their work independently and courageously with the commencement of the first gunshots sets them apart from the state and the military affiliated contract doctors. The battlefield engagements of the American Civil War produced a tremendous amount of carnage. Ballistic trauma shattered limbs

³⁵ McAllister, Mary. *An Account of the Battle of Gettysburg by a Citizen of Gettysburg*. Gettysburg College Special Collections: 1938.

and created horrendous wounds. The survival of wounded soldiers depended on receiving immediate medical care. While the regular Army Medical Corps was designed to provide immediate triage, the extent of battlefield trauma was too great for the military to handle. The imperfect solution to this problem was expansion of the medical staff that employed temporary contract doctors from many different walks of life.

Conclusion

The role of the contract doctor during the American Civil War has been largely overlooked. As this article has illustrated the men attracted to becoming contract physicians came from various backgrounds and each held different dreams. Some like James R. Reily, although rebellious at times, found their calling and choose to remain contract doctors the majority of their lives. After the war he was deployed at an arsenal in Washington DC before he was redeployed out West with US Military to patrol the plains.³⁶ Others like John N. Jacobs lost their stomach for the practice of medicine entirely. His story is about a young man who wished to fight for his country but after a twist of fate was injured and chose to use his medical training instead. The tales of the Gettysburg doctors Huber and the Horner brothers show how during the Civil War a civilian physician, misfortunate enough to be caught in the mist of battle, could use their vocation to alleviate suffering. This article has touched upon a brief moment in the lives of a number of men whose paths crossed at Seminary Ridge Hospital

³⁶ Reily Papers, Record Group 561.

during and after the Battle of Gettysburg. It should be remembered that while they might have become doctors for differing reasons they ultimately worked towards the same goal: providing medical care to the wounded. It is in this that they share an ultimate commonality.

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Colin Hirth received his baccalaureate in history at the Pennsylvania State University in 2015. During the summer of 2014 he conducted research on the Civil War doctors who operated at the Seminary Ridge hospital during and after the battle of Gettysburg. The information in this article was collected during that time. This research was made possible by Dr. Carol Reardon and the Seminary Ridge Museum. Recently Colin finished his master's degree at the University of Iceland in the department of Viking and Medieval Norse studies.

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