

## **Instructions for medical officers of the United States Navy.**

### **Contributors**

United States. Navy Department. Bureau of Medicine and Surgery.  
United States. Navy Department.  
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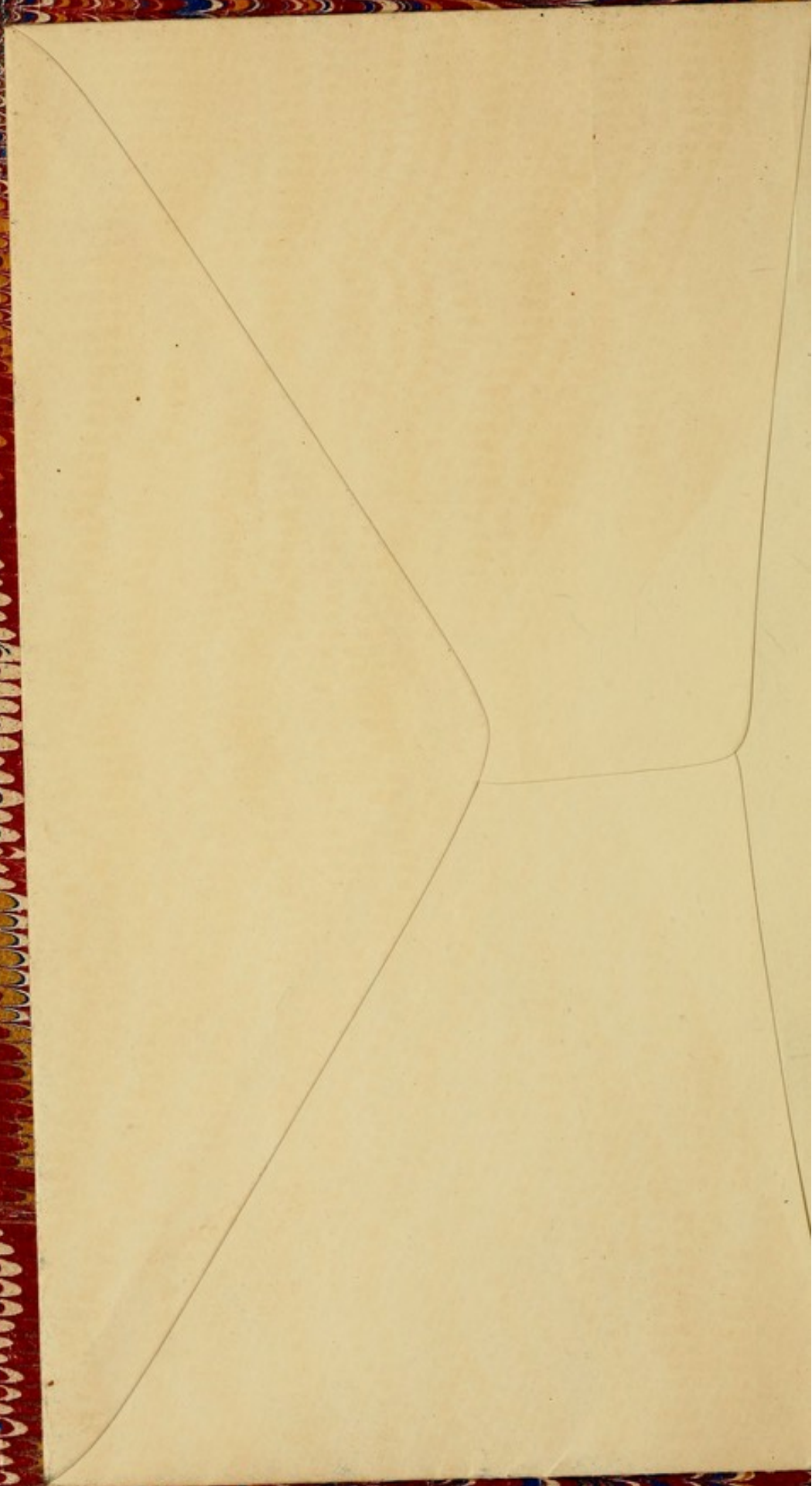




Navy Department,  
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Official Business.

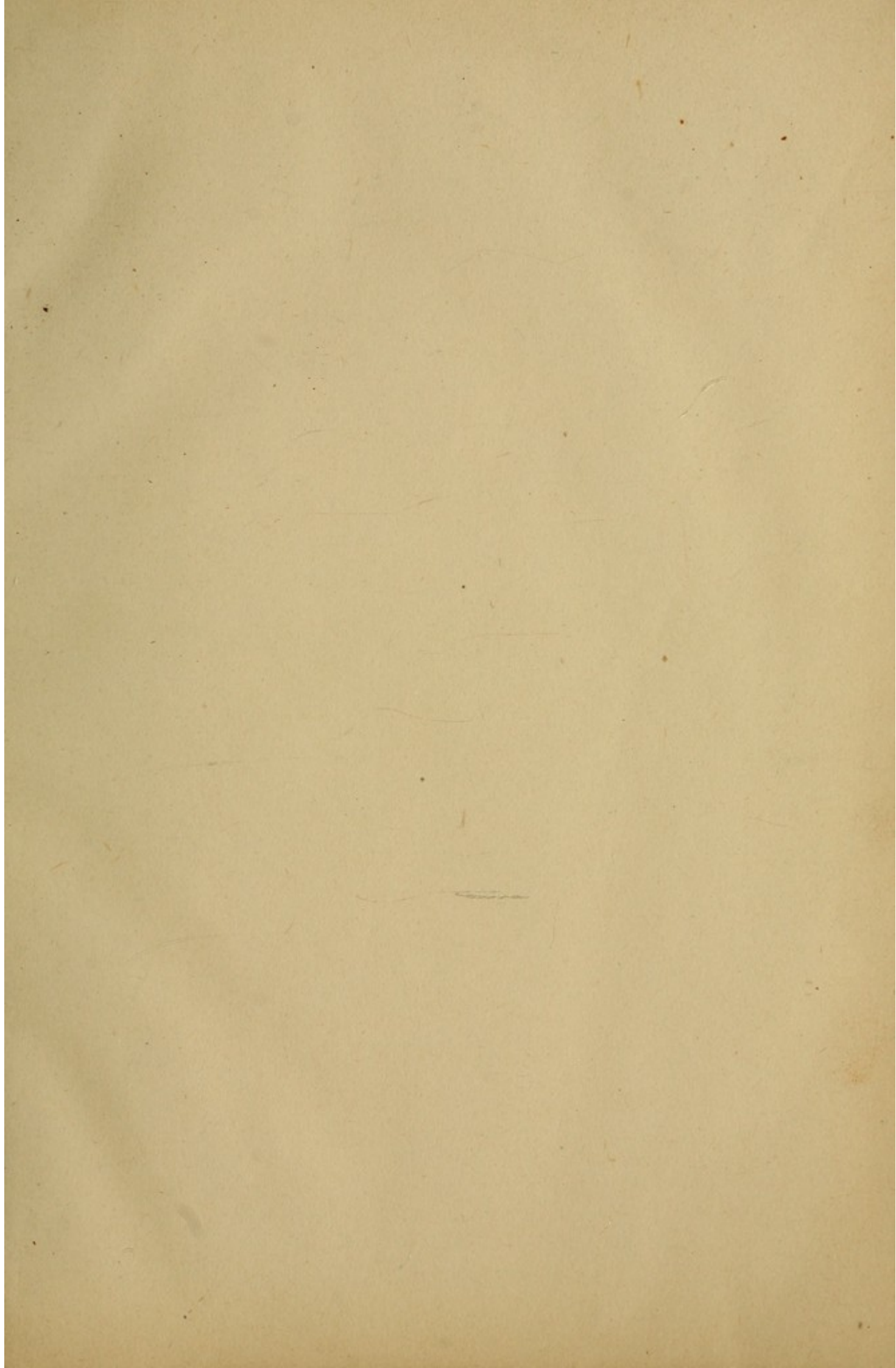
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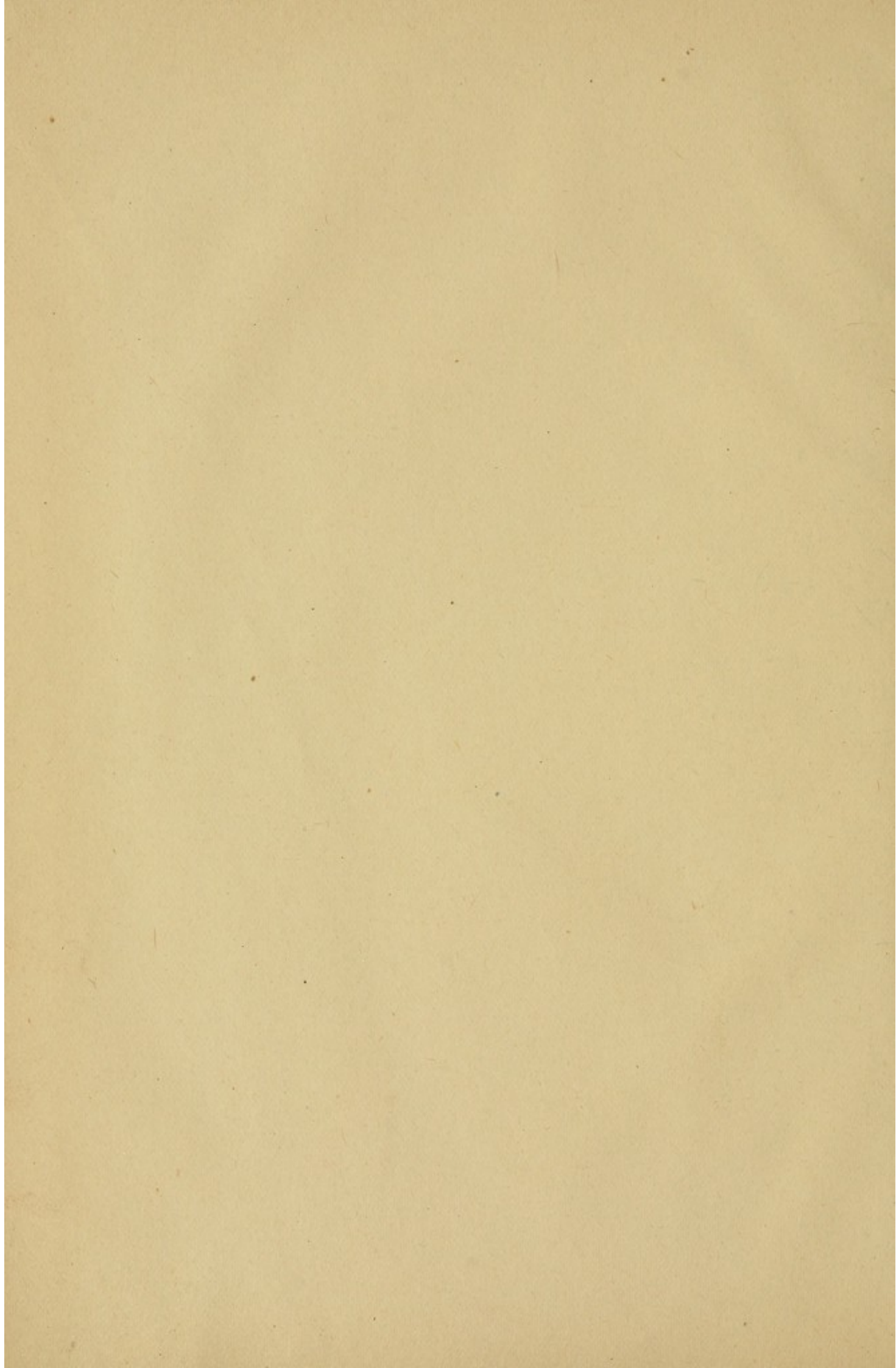


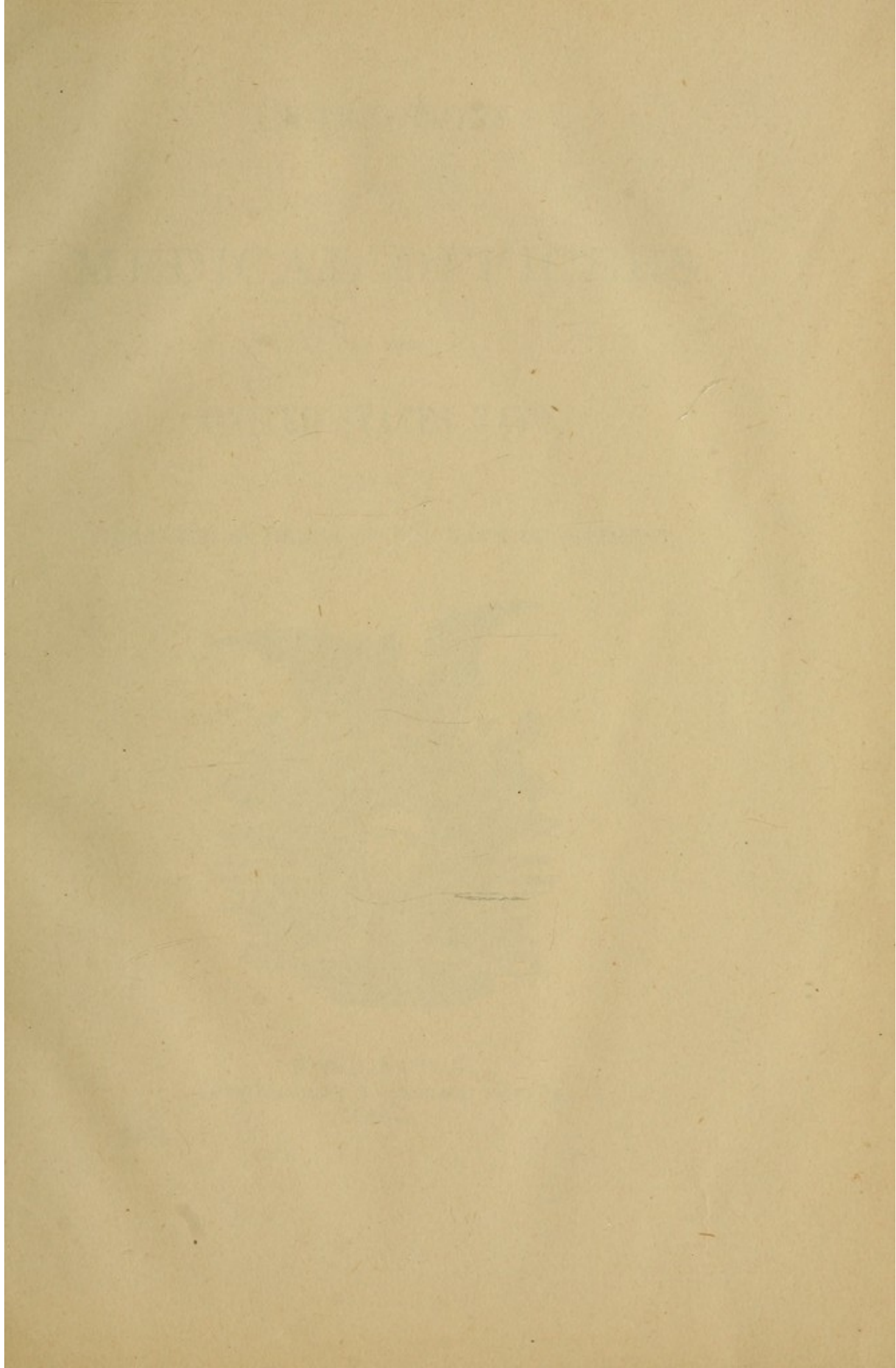


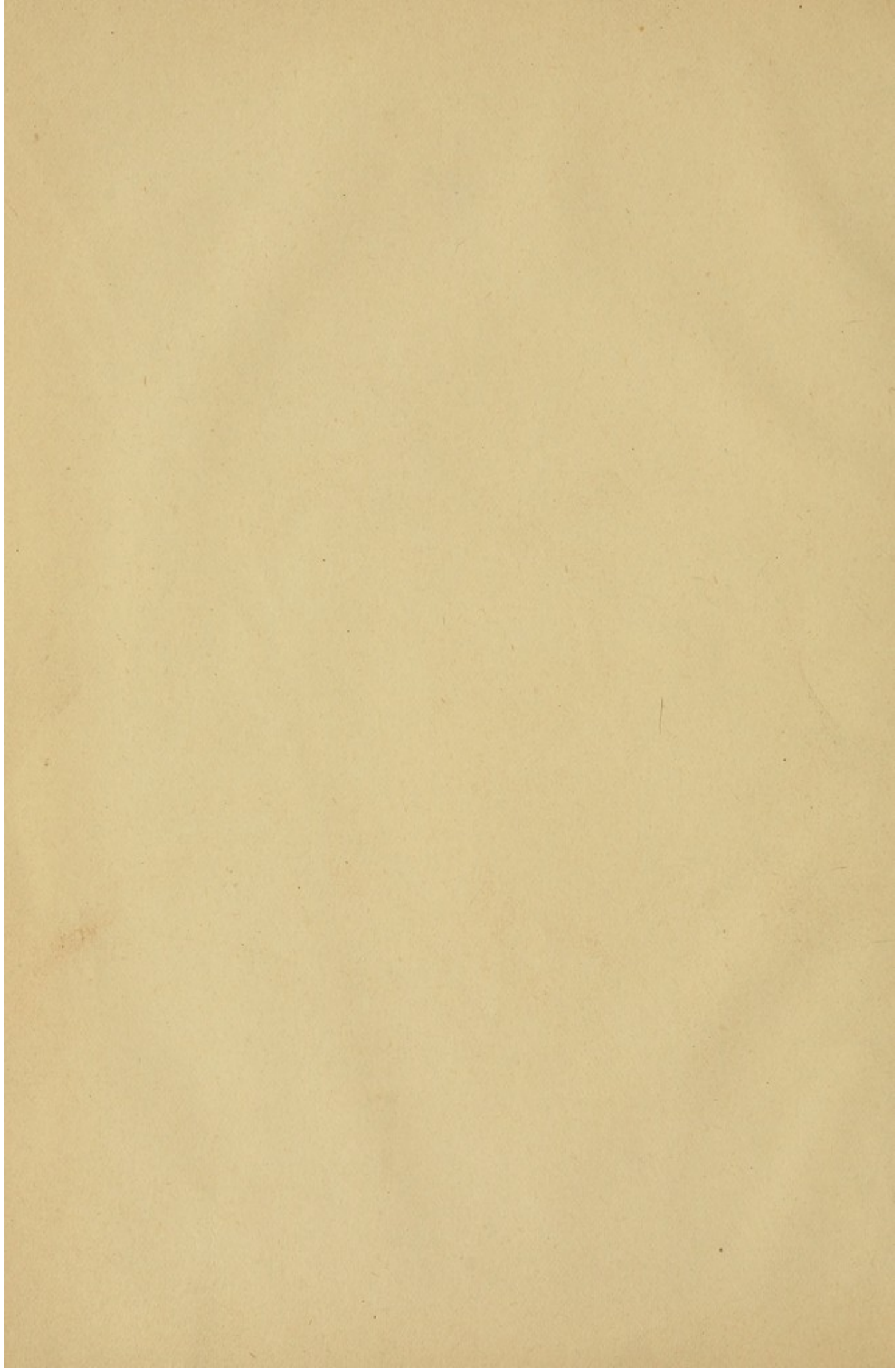
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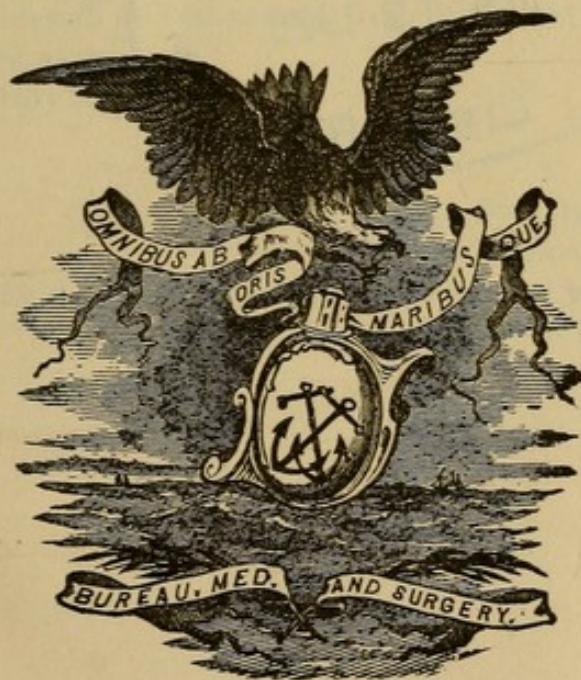






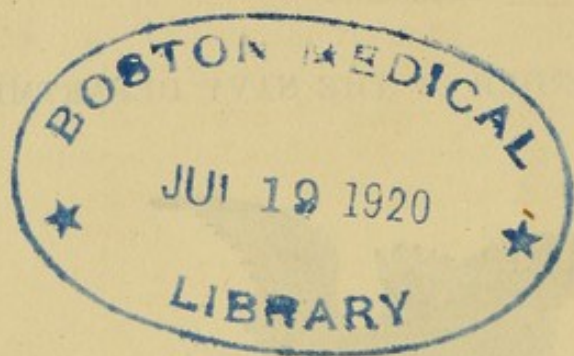
INSTRUCTIONS  
FOR  
MEDICAL OFFICERS  
OF THE  
UNITED STATES NAVY.

PUBLISHED BY ORDER OF THE NAVY DEPARTMENT.



WASHINGTON:  
GOVERNMENT PRINTING OFFICE.  
1886.

2754



SECTION 4 OF ACT TO REORGANIZE THE NAVY DEPARTMENT OF  
THE UNITED STATES.

*And be it further enacted,* That the Secretary of the Navy shall assign and distribute among the said Bureaus such of the duties of the Navy Department as he shall judge to be expedient and proper; and all the duties of the said Bureaus shall be performed under the authority of the Secretary of the Navy, and their orders shall be considered as emanating from him, and shall have full force and effect as such.

Approved, July 5, 1862.

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NAVY DEPARTMENT,

*Washington, July 1, 1886.*

The following "Instructions" are approved and will be enforced.

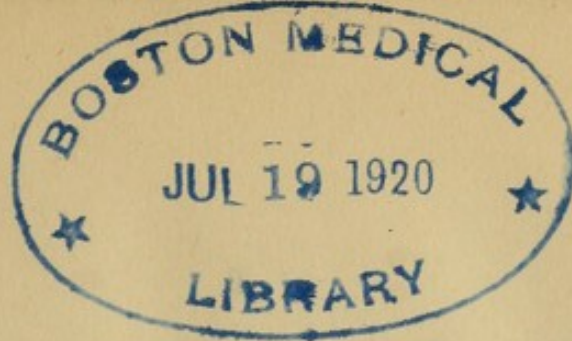
W. C. WHITNEY,

*Secretary of Navy.*

SECTION 1 OF ACT OF MARCH 3, 1862, RELATIVE TO THE NAVY DEPARTMENT

That the Secretary of the Navy shall have and exercise such powers and authority as may be necessary and proper to carry into effect the provisions of this act, and he shall be authorized to employ such assistants as may be necessary, and he shall be authorized to receive such compensation as may be provided by law.

W. C. MILLER,  
Secretary of the Navy.



INSTRUCTIONS  
FOR  
MEDICAL OFFICERS OF THE UNITED STATES NAVY.

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CORRESPONDENCE.

**1.**

After present supplies of regulation and foolscap papers are exhausted, *letter paper only will be used for official correspondence in this Department and in the naval service.* The letter paper is to be  $7\frac{3}{4}$  inches by 10 inches in size; the whole sheets to have 15 lines on first page and 19 lines on the second and third, and the fourth to be blank for indorsements; the single sheets to have 15 lines on one page and the other to be blank for indorsements. The ruling to be within  $\frac{3}{4}$  of an inch to the left and right.

**2.**

Letters to be folded twice. The first or upper fold of a letter (which is the back of its heading) is to be properly indorsed with the name of the vessel, navy-yard, or station, the name of the writer, and a brief in a clear hand of the subject of the letter, leaving not less than one inch blank space above the indorsement for the receiving stamp of the Department, Bureau, or Office to which it is addressed.

**3.**

In forwarding letters, the forwarding stamp and signature should be on the face and not on the folds.



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**4.**

The number of inclosures accompanying a paper will be noted just below the indorsement.

**5.**

A whole sheet is not to be used if the letter is completed on one page.

**6.**

In replying to numbered letters from the Navy Department, its Bureaus and Offices, its file-number, date, and a brief reference to the subject will be given.

**7.**

Returns, requisitions, vouchers, and reports on prescribed printed forms, which are complete in themselves and properly authenticated, and do not require special explanation, will not be accompanied by a letter of advice or transmittal.

**8.**

For *semi-official correspondence* note paper will be used.

**9.**

Paper, envelopes, and all other articles of stationery furnished to vessels, navy-yards, and stations are intended for official business; officers will therefore exercise care to prevent waste of such articles.

**10.**

Officers signing and forwarding letters will be held responsible for a strict compliance with these directions,

and must pay personal attention to the matter until a radical change has been consummated in the manner of preparing correspondence for transmission to the Navy Department and the Bureaus and offices thereof.

**11.**

Blank forms are supplied by the Bureau, on request by letter, and models of them are here incorporated with the text: to guard against omissions, every blank space should be filled, if only with a line in ink.

**12.**

Papers required in duplicate, triplicate, &c., will be marked "duplicate," "triplicate," &c.

**13.**

Copies of all official papers will be carefully preserved, for reproduction in case of loss.

**14.**

The dates of all circulars, orders, telegrams, or letters to which reference is made in corresponding with the Department, or any of its Bureaus, must be distinctly quoted.

**15.**

Should any communication be made to the Secretary of the Navy and, at the same time, to the Bureau, the person forwarding such duplicates will state the same in his communication.

**16.**

All telegrams of a personal nature, such as applications for detachment, for orders, extensions of leave,

&c., must be paid for by the parties sending them; telegrams sent by officers at Government expense must be as brief as possible.

### 17.

Officers of the Navy will hereafter, in corresponding with the Department, write separate letters on separate subjects unless the subjects are of like nature. The practice, for instance, of embodying in the same communication information relating to the movements and condition of a vessel, the assignment or detachment of officers, suggestions as to discipline, or the result of a court-martial, produces confusion and delay in acting on its subject-matter.

In acknowledging a communication from the Department, not only the date of such communication should be given, but there should also be a brief reference to its subject.—General Orders, Navy Department.

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## GENERAL DUTIES.

### 1.

Medical officers are required to be familiar with the laws and regulations relating to their duties.

### 2.

The senior medical officer of every ship or station (except at hospitals where Case-papers are used) shall keep, or cause to be kept by a medical officer subordinate to him, a **Medical Journal**, which must be a complete and succinct history of the medical affairs coming

within his province. In this and all other records especial regard is to be paid to neatness, accuracy, and uniformity.

While it is impossible to give directions so minute as to cover every detail, and much must be left to an intelligent discretion, the principal points to be observed in keeping this Journal are the following:

(a) Patient's name in full, also his grade or rate, both from the muster-roll.

(b) Age, — years.

(c) Native of ———.

(d) Color.

(e) Enlisted at ———, on the ——— day of ———, 18—.

(f) Disease, by name from accompanying nomenclature, with explanatory remarks, if necessary.

(g) Time and place of occurrence, or dates between which there was continuous exposure to morbid cause.

(h) Whether considered to be in line of duty or not in line of duty, state all *facts* that can be elicited, distinguishing between the testimony of the patient himself and that of any other witness, and in express terms accepting or rejecting that of the patient, and giving reasons for so doing.

(i) Medical officers will observe conciseness in clinical reporting. Common symptoms of ephemeral diseases and details of treatment need not be noted; the simple nosological title will suffice in such cases; as "*Diarrhœa Acuta*," "*Constipatio*," "*Catarrhus*," with statement of origin.

(j) The Medical Journal must be indexed daily.

(k) Any evidence that could have any bearing on a claim for pension must be fully noted.

## INSTRUCTIONS FOR USE OF INDEX.

*Henry Ashton* first appears at page 1, where the description of him is complete; he reappears at page 34, where reference is made to page 1; again at page 67, and new reference, "see page 1."

*Ashton (Henry)*, 1, 34, 67, 89, 121, 156 ..... **A.** in Index.  
*Brown (John)*, 2, 31, 42, 51 ..... **B.** in Index.  
*Bunce (Philip)*, 4, 75, 108 ..... **B.** in Index.  
*Cullen (Wm.)*, 4, 19, 63 ..... **C.** in Index.  
*Davis (Henry)*, 3 ..... **D.** in Index.

When the first line allotted to any name is filled, take up that name again on the next blank line below; *e. g.*:  
*Ashton (Henry)*, 190, 234.

The Journal may thus be traced for a full history of each case.

- A.** in margin means admitted.
- D.** in margin means discharged to duty.
- Dsd.** in margin means deserted.
- DD.** in margin means died.
- H.** in margin means sent to hospital.
- T.** in margin means transferred somewhere.
- I.** in margin means invalided to U. S.

On each successive day the names of the patients shall be recorded in the order of admission, with mention of the changes in the condition and treatment until the final disposition of the case.

Should a change of diagnosis become necessary, the case must be closed by the discharge of the patient, and reopened by his admission with the new diagnosis, except in cases of intercurrent affections depending upon the original cause of disease, when the record may be

continued. This rule applies alike to Case-papers and Journals.

A patient readmitted with a disease for which he has previously been treated and discharged shall be regarded as a new case.

Records of the temperature, pulse, respiration, and excreta of important cases shall be kept on Form Q, and appended to the Journal or Case-paper.

In case of death, post-mortem examinations should be made when practicable, and the results fully recorded in the Journal or on Case-paper.

After the completion of the daily record connected with the sick, mention shall be made of all matters relating to the duties of the medical officer, such as sanitary inspections, recommendations made to the commanding officer, and vaccinations.

The record of each day shall include all admissions, discharges, deaths, and other occurrences up to midnight of that day.

In all cases where a patient is admitted and discharged upon the same day, he shall be noted as having been upon the sick list one day.

The senior medical officer of the ship or station is responsible for the accuracy of the Journal and Case-paper, which must always be written by a medical officer.

Wherever a Medical Journal is kept, the medical officer who holds sick-call shall make the entries in the Journal over his own signature. The Journal shall be inspected daily by the senior medical officer, who shall attach his signature—indicating the correctness of the record—and make any additional entries he may deem proper.

When a patient is treated whose sickness is of so trivial a character that a relief from duty is not necessary, his name shall be entered upon the index of Journal. The prescription ordered shall be appended to the record of the day, and all expenditures of liquors shall be recorded in the same manner.

### 3.

Issues of medicines or medical stores to others than those in the Navy shall be noted in a prescription book kept for the purpose.

Upon the completion of the Journal it shall be sent to the Bureau with the next quarterly report.

### 4.

A **Morning Report of Sick, Form J**, containing the names of all those recommended to be excused from duty, shall be made daily to the commanding officer, and on shipboard a duplicate list placed in the Binnacle. Any sanitary recommendation the medical officer may have to make must be included in this report, as well as entered upon the Journal. Cases excused from duty during the day, after the morning lists have been made, shall be placed on the Binnacle List until the following morning, when, if continued, the patient is to be regularly admitted to the sick list on the Journal and Abstract of Patients (Form F).

### 5.

On the 1st day of January, April, July, and October, a **Quarterly Abstract of Patients, Form F**, shall be made for the preceding quarter or period, which shall accord with and accompany the Report of Sick, and shall con-

tain the name, rate, disease, origin, and disposition of every case admitted on the Journal. The names shall be arranged in order of admission, as many sheets only being used as will contain all the entries. Under the head "Origin" shall be written "duty" or "not duty," as expressive of the opinion of the medical officer with regard to the connection of the disease or injury with the line of duty; and under the head of "Remarks" a statement of the facts upon which this opinion is grounded.

In transmitting this abstract to the Bureau it should be sent in a pasteboard tube or rolled over a firm center to avoid folding and breaking.

Each sheet of the quarterly and annual abstract is to be begun on the upper left-hand corner nearest margin left for binder, and the signature of the medical officer in charge shall be affixed to the lower right-hand corner of the last sheet. On the 1st day of January a **Yearly Abstract of Patients, Form F<sup>2</sup>**, shall be made for the preceding year, which shall include all the names of patients entered on the quarterly abstracts of the year, *arranged alphabetically*.

## 6.

The **Report of Sick, Form K**, shall be made on the first day of January, April, July, and October, and sent with the Quarterly Abstract, with which it must agree, direct to the Bureau. On board of cruising vessels a duplicate is to be forwarded to the Surgeon of the Fleet.

The annual statistical report of the Surgeon-General is based upon the Report of Sick, and inaccuracies or deficiencies in this will consequently prejudice the correctness and value of the former. Medical officers will



therefore see the necessity for care and exactness in its preparation. To this end it is directed that a **List of Patients** be kept, in which shall be inscribed the name of every man as soon as he is entered upon the Journal. From this list Forms K and F are to be prepared, and if it be accurate, the result will be an exact accordance of these two returns with the Journal.

### 7.

The following returns shall accompany Form K to the Bureau:

1. Abstract of Patients, Form F.
2. Unpaid quarterly bills, in triplicate, for approval; incidental bills will be forwarded on receipt of articles.
3. Requisition, in quadruplicate, for stores (semi-annually).
4. Special reports of interesting cases or operations which have occurred under the notice of the medical officer, accounts of epidemics, reports of sanitary observations, or of other matters of importance.
5. Any completed Medical Journals.
6. Abstract of Enlistments and Rejections (Form X) from Receiving Ships, Rendezvous, and other recruiting stations. From vessels in commission for sea service to be forwarded annually on January 1.

Medical officers will not be required to forward triplicates of bills paid, with their Quarterly Reports. On vessels in commission a copy is forwarded to the Bureau by the Paymaster.

### 8.

During the prevalence of epidemic or contagious diseases on foreign stations, especially in ports of the Gulf of Mexico, the West Indies, and the South Atlantic Sta-

tion, medical officers shall forward to the Bureau all reliable information relating thereto which they may be able to procure.

At the close of each year, and at the end of the cruise, a **Sanitary Report** shall be made to the Bureau, which shall include a report of the sanitary condition of the ship or station, accounts of epidemics, recommendations or cautions that may be of service to other vessels visiting the ports, information or suggestions that may tend to the preservation of the health of the personnel of the ship or station, and any facts of professional interest not generally known concerning ports visited.

### 9.

The senior medical officer of each hospital, station, or vessel will be held responsible and accountable for all public property belonging to the Medical Department of the Navy under his control. He will make an annual property return to the Bureau, on Form D, on the 1st day of July of each year. The return from vessels in squadron will be forwarded through the Fleet Surgeon, who will ascertain whether or not the expenditures were made with due regard to efficiency and economy, and will report to the Bureau any instances of wastefulness or unauthorized expenditure.

Medical officers will forward to the Bureau, with this return, a concise account of the authority and reasons for expenditure and disposition of all property expended other than medicines, hospital stores, surgical appliances, and stationery. They will not be released from responsibility for the value of any surgical instruments or furniture, unless the expenditure is authorized by the Bureau or a Board of Survey.

Articles classed under Dispensary Furniture and supplied in quantities for expenditure need not be surveyed.

In case of loss or destruction of any surgical instruments or furniture, the medical officer responsible for the property will at once report the facts to the Bureau if the loss or destruction occurred in the United States, and to the fleet surgeon if in squadron.

Whenever a medical officer is relieved from duty he shall transfer to his successor all public property in his control, taking duplicate receipts for the same, one of which he shall retain and forward the other to the Bureau.

### 10.

**Surveys of Property** will be ordered by the Bureau within the United States, and the Commander-in-chief abroad, upon such articles as may be considered unfit for further use, and it shall be the duty of the Board to decide upon this point, and also, in case the article is condemned, as to its disposition. In the case of surgical instruments and appliances which have become unfit for further use a survey shall be held before the issue of others.

All reports of survey on property belonging to the Medical Department shall be forwarded in duplicate to the Bureau, from vessels in squadron through the Fleet Surgeon for his indorsement.

### 11.

The senior medical officer of each hospital or shore station will keep, or cause to be kept, a Bill-book, in which shall be entered a copy of the items of every

voucher forwarded to the Bureau for approval, noting the number of the form on which voucher was made, date of voucher, and in whose favor. This Bill-book shall be retained as one of the permanent records.

## 12.

A patient transferred from the charge of one medical officer to that of another must be accompanied by a **Hospital Ticket, Form G**, containing the statement of his case as recorded in the Journal, which shall also be recorded in the Journal of the officer to whose care he is transferred, or affixed to the Case-paper.

When practicable a patient transferred to a hospital will be accompanied by a medical officer.

**Certificates of Death**, in duplicate, are to be sent to the Bureau, and, in squadron, to the Surgeon of the Fleet.

The statement as to origin of disease or disability causing death shall always be noted, with reasons for the conclusion, whether or not in line of duty.

## 13.

When patients are transferred on foreign stations to a vessel returning to the United States, for transportation to hospital, the medical officer of the returning vessel will enter such patients on his Journal and account for them as the sick of the vessel. He will note on his Journal the record of their cases on the Hospital Tickets, and will retain the Hospital Tickets to accompany them when transferred to hospital. At the date of transfer he will indorse on the original Hospital Tickets anything of interest in their cases that may have occurred while under his charge.

**14.**

In the **Meteorological Observations** for Journal entry, care is necessary—

1. That correct readings are taken of wet and dry bulb thermometers.

2. That water is always supplied to the wet-bulb thermometer, and that the cotton siphon is frequently renewed.

3. When steam is used for warming the ship a note to that effect should be made.

4. Any peculiar conditions, local or general, tending to modify the state of the atmosphere should be stated, the object of these reports being to establish the relation, if any, between the atmospheric and sanitary condition of ships.

Medical officers of vessels in commission shall make Journal entries of thermometric and hygrometric observations, to be taken at 9 a. m. daily, and of observations for determining carbonic acid impurities in the air of the berth deck, to be made once each week, at 9 p. m.

**15.**

A yearly **Return of Books** shall be made on the 1st of January from every hospital or station supplied with a library, giving the author's name (alphabetically), title of book, and number of volumes. On the first day of each subsequent quarter of the year, this return shall be compared with the books on hand, and a supplementary report made of the additions and losses (if any) which have occurred during the quarter.

**16.**

When a vessel is put out of commission, books and blank forms will be transferred with the medical stores.

**17.**

Medical officers are forbidden to give unofficial certificates of the health, or of inability to perform duty.

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**SUPPLIES.****1.**

When a ship is fitted for sea her medical officer will receive from the Director of the Laboratory her outfit, together with **Receipts** in duplicate. These shall be signed by him, the original sent to the Laboratory, and the duplicate retained for his files.

**2.**

**Requisitions, Form B**, in quadruplicate, shall be made semi-annually on the 1st of April and October for such stores as may be needed for the ensuing six months. In preparing them the quantities of medicines asked for shall correspond to the packages mentioned in the Supply Table, and the column "On hand" shall always be filled opposite articles required for.

**3.**

The allowances in the **Supply Table** are intended, in the outfit of a ship, as the basis of supplies for the cruise.

Needful additions may be made from time to time by requisitions, but it is not necessary nor expected that subsequent demands shall bring the amount of stores on hand fully up to that given in the Supply Table.

**Special Requisitions** may be made for articles not on the Supply Table which are considered indispensable, or for supplies needed before the end of the quarter, the necessity being explained by letter to Bureau when in the United States.

**4.**

Purchases of stores are not authorized except in cases of urgent necessity. Timely requisitions can be made to cover the ordinary demands.

**5.**

On foreign stations, requisitions for supplies shall be made on the Fleet Paymaster, to be approved by the Surgeon of the Fleet and Commander-in-chief. When, however, a ship is separated from the flag-ship, her medical officer may, in case of need, obtain supplies upon requisitions on the Paymaster of the ship, approved by the commanding officer. Upon rejoining the flag-ship, the necessity for this action must be explained for the approval of the Surgeon of the Fleet and the Commander-in-chief.

**6.**

Medical officers of vessels may obtain from pay officers or officers in charge of stores, such articles as are needed by the Medical Department, giving receipts in proper form.

On receiving-ships and other vessels in commission, quarterly bills for subsistence of the sick may be made

with the Paymaster, who will supply articles required—either by purchase on shore, or from mess caterers.

Quarterly bills for washing will be paid by the Paymaster.

Copies of above-mentioned vouchers are sent to Bureau by Paymaster. Additional copies need not be forwarded by medical officers.

### 7.

No issue of instruments or surgical appliances shall be made to replace old ones, without the previous Survey and condemnation of those already on hand, and all articles of this character shall be returned to the Laboratory when condemned.

### 8.

When a vessel is put out of commission on the Atlantic Coast, her surgical instruments and Medical Stores of every kind, carefully packed and accompanied by an accurate inventory in triplicate, made out in the order of the Supply Table, stating the quantity and condition of the articles and signed by the senior medical officer of the vessel, shall be transferred to the medical officer of the yard, who shall forward them to the Laboratory. All stores and instruments returned to the Laboratory shall be surveyed, and such as are fit for issue turned into the stock of the Laboratory. On the Pacific Coast the stores, etc., shall be transferred to the medical officer of the Mare Island navy-yard, who shall receive them and cause a survey to be held, as at the Laboratory. Report of survey in duplicate will be forwarded to Bureau.

### 9.

Whenever any property belonging to the Medical Department is surveyed and recommended to be sold at



public auction, the medical officer in charge will make an inventory of and carefully preserve the property until he shall be directed to deliver it to the auctioneer for sale. He will forward a copy of this inventory to the Bureau as soon as the report of the Board of Survey is approved.

### 10.

Any medical officer desirous of making investigations, may apply to the Bureau for a microscope and attachments, which when furnished will be under the personal charge of the officer, who will be responsible for its care and preservation. While it is in his charge he will be required to forward to the Bureau, at the end of each quarter, mounted specimens, illustrative of the work upon which he is engaged, and when his investigations have ended he shall return the microscope and attachments to the Bureau. He will be required to supply any deficiencies in the microscope or attachments—other than those supplied for expenditure—which may be noted on its return.

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## HOSPITALS.

### 1.

The medical officer in charge of a naval hospital is responsible for the care and treatment of the sick, and for the discipline, cleanliness, and economy of the institution, which it is his duty to keep always in an efficient condition, and to this end he shall exact from his subordinates, employés, and patients a proper obedience to his orders and the laws and regulations of the

Navy. Medical officers and all persons employed in the hospital shall perform such duties as may be assigned to them by the officer in charge.

**2.**

No changes, except in cases of emergency, which shall be immediately reported to the Bureau, shall be made in the hospital buildings, furniture, and grounds, such as destroying or removing trees, or disturbing the soil around them; and no bills for purchases or repairs shall be contracted without the permission of the Bureau.

**3.**

The medical officer in charge shall inspect all medicines, provisions, supplies, etc., that may be received, or shall cause them to be inspected by a subordinate medical officer, who shall report to him their condition, etc. A record of the inspection shall be entered on the daily journal.

**4.**

He shall direct the medical officers in charge of wards to present their Case-papers to him once each week for examination, and will assure himself that they are accurately and carefully kept.

**5.**

OFFICER OF THE DAY.

The officer in charge of the hospital shall detail a medical officer, who, in addition to such professional duties as may be assigned him, shall perform the duty

of "officer of the day" for twenty-four hours, commencing at 10 a. m. The officer of the day shall make a tour of inspection through the wards, kitchens, mess and other rooms occupied by patients and employés, upon going on duty at 10 a. m., during the afternoon at a different hour daily, and finally at night after the patients are in bed.

A list of patients and employés who have received passes shall be furnished him as early as practicable every morning, and all patients and others will be required to report their return to him.

## 6.

**A Journal** shall be kept by him, which he shall sign at the end of his term of duty at 10 a. m., in which he shall make a brief record of the following points which are to be noted at the time of occurrence: The condition of the wards, kitchens, mess, smoking, and other rooms at each inspection; the condition of the meals served as to quality and quantity; the names and diseases of patients admitted, and the places from which they are received; the names, number of days subsisted, and disposition of patients discharged, and whether the necessary papers in each case are correct and complete; the names and condition of patients and employés who have returned or who have overstaid their leaves; the confinement and discharge of offenders, and cause of punishment; the appointment and discharge of employés; the reporting and detachment of officers, or their going upon and returning from leave; the record of inspection of all articles received; the object and finding of all boards of survey; and finally such other matters occurring during his term of duty as it may be desirable to record.

**7.**

Medical officers in charge of wards shall be held responsible for their order and neatness, and for the good condition of all within them. They shall exercise a personal supervision over the comfort and welfare of the sick, visiting them at least twice daily, and oftener in severe cases; and they shall assure themselves that their directions as to medicines, dressings, regimen, etc., are accurately and promptly carried out. They will personally take the temperatures of patients, and will never allow this duty to be performed by the nurses.

**8.**

Patients should be accompanied, upon admission, with **Hospital Tickets, Form G**, but in cases of emergency they may be admitted without this paper, when the medical officer shall report the fact to the commandant of the station with a statement of the emergency, and cause the necessary hospital ticket to be supplied.

**9.**

Convalescent patients may be detailed for light service, but shall not be retained in the hospital for that purpose after they are fit for duty.

**10.**

No patient in hospital shall be entitled to any service except that of the regular hospital attendants, nor shall any one except medical officers on duty, patients, and employés of the hospital be subsisted or lodged without permission of the Bureau.

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## 11.

## FULL DIET.

In hospitals, the following Diet Tables will be followed for patients when practicable; but the allowances to attendants' messes may be varied at the discretion of the medical officer in charge, provided the value of the ration be not exceeded:

	Breakfast.		Dinner.		Supper.	
Sunday.	Coffee (oz., 1) . . . . .	1 pt.	Roast beef . . . . .	12 oz.	Tea (oz., $\frac{1}{2}$ ) . . . . .	1 pt.
	Bread . . . . .	6 oz.	Bread . . . . .	4 oz.	Bread . . . . .	6 oz.
	Butter . . . . .	1 oz.	Potatoes . . . . .	10 oz.	Butter . . . . .	1 oz.
	Stewed mutton . . . . .	4 oz.	Other vegetables . . . . .	4 oz.	Sugar . . . . .	1 oz.
	Sugar . . . . .	1 oz.	Pickles . . . . .	1 oz.	Milk . . . . .	2 oz.
	Milk . . . . .	2 oz.				
Monday.	Coffee (oz., 1) . . . . .	1 pt.	Mutton . . . . .	12 oz.	Tea (oz., $\frac{1}{2}$ ) . . . . .	1 pt.
	Bread . . . . .	6 oz.	Bread . . . . .	4 oz.	Bread . . . . .	6 oz.
	Butter . . . . .	1 oz.	Potatoes . . . . .	10 oz.	Butter . . . . .	1 oz.
	Beef hash . . . . .	4 oz.	Other vegetables . . . . .	4 oz.	Sugar . . . . .	1 oz.
	Sugar . . . . .	1 oz.	Pickles . . . . .	1 oz.	Milk . . . . .	2 oz.
	Milk . . . . .	2 oz.				
Tuesday.	Coffee (oz., 1) . . . . .	1 pt.	Boiled beef . . . . .	12 oz.	Tea (oz., $\frac{1}{2}$ ) . . . . .	1 pt.
	Bread . . . . .	6 oz.	Bread . . . . .	4 oz.	Bread . . . . .	6 oz.
	Butter . . . . .	1 oz.	Potatoes . . . . .	10 oz.	Butter . . . . .	1 oz.
	Mutton hash . . . . .	4 oz.	Other vegetables . . . . .	4 oz.	Sugar . . . . .	1 oz.
	Sugar . . . . .	1 oz.	Pickles . . . . .	1 oz.	Milk . . . . .	2 oz.
	Milk . . . . .	2 oz.				
Wednesday.	Coffee (oz., 1) . . . . .	1 pt.	Beef soup . . . . .	1 pt.	Tea (oz., $\frac{1}{2}$ ) . . . . .	1 pt.
	Bread . . . . .	6 oz.	Pork . . . . .	12 oz.	Bread . . . . .	6 oz.
	Butter . . . . .	1 oz.	Beans . . . . .	4 oz.	Butter . . . . .	1 oz.
	Beef hash . . . . .	4 oz.	Bread . . . . .	4 oz.	Sugar . . . . .	1 oz.
	Sugar . . . . .	1 oz.	Potatoes . . . . .	10 oz.	Milk . . . . .	2 oz.
	Milk . . . . .	2 oz.	Pickles . . . . .	1 oz.		
Thursday.	Coffee (oz., 1) . . . . .	1 pt.	Roast beef . . . . .	12 oz.	Tea (oz., $\frac{1}{2}$ ) . . . . .	1 pt.
	Bread . . . . .	6 oz.	Bread . . . . .	4 oz.	Bread . . . . .	6 oz.
	Butter . . . . .	1 oz.	Potatoes . . . . .	10 oz.	Butter . . . . .	1 oz.
	Pork and beans . . . . .	6 oz.	Other vegetables . . . . .	4 oz.	Sugar . . . . .	1 oz.
	(warmed).		Pickles . . . . .	1 oz.	Milk . . . . .	2 oz.
	Sugar . . . . .					
	Milk . . . . .					
Friday.	Coffee (oz., 1) . . . . .	1 pt.	Fish . . . . .	12 oz.	Tea (oz., $\frac{1}{2}$ ) . . . . .	1 pt.
	Bread . . . . .	6 oz.	Bread . . . . .	4 oz.	Bread . . . . .	6 oz.
	Butter . . . . .	1 oz.	Potatoes . . . . .	10 oz.	Butter . . . . .	1 oz.
	Fish, chowder . . . . .	4 oz.	Other vegetables . . . . .	4 oz.	Sugar . . . . .	1 oz.
	Sugar . . . . .	1 oz.	Pickles . . . . .	1 oz.	Milk . . . . .	2 oz.
	Milk . . . . .					
Saturday.	Coffee (oz., 1) . . . . .	1 pt.	Bean soup . . . . .	1 pt.	Tea (oz., $\frac{1}{2}$ ) . . . . .	1 pt.
	Bread . . . . .	6 oz.	Stewed mutton . . . . .	12 oz.	Bread . . . . .	6 oz.
	Butter . . . . .	1 oz.	Bread . . . . .	4 oz.	Butter . . . . .	1 oz.
	Beef hash . . . . .	4 oz.	Potatoes . . . . .	10 oz.	Sugar . . . . .	1 oz.
	Sugar . . . . .	1 oz.	Other vegetables . . . . .	4 oz.	Milk . . . . .	2 oz.
	Milk . . . . .		Pickles . . . . .	1 oz.		

**12.**

A **Special Diet List, Form P**, shall be kept for each ward, which shall be revised and corrected every morning by the medical officer in charge of the ward.

**13.**

## ADMISSION OF PATIENTS.

The following forms are to be observed :

(a) When the hospital ticket is found correct, indorse and file it, with accompanying papers relating to the case ; if defective, return it to the medical officer signing, when he is at hand, or, otherwise, through the Bureau.

(b) Enter name, etc., as follows : (1) In the **General Alphabetical Register of Patients, Form E**, which is the permanent hospital record, for future reference. (2) In the **Abstract of Patients, Form F**.

(c) Open **Case-paper, Form H**.

(d) If seaman from the receiving-ship or other vessel, send **Ration Notice** to commandant of receiving-ship as Paymaster's notification ; if a marine from neighboring barracks, send the ration notice to the commanding marine officer through commandant.

**14.**

## DISCHARGE OF PATIENTS.

No person shall be discharged from the service for physical disability without having been previously surveyed by a board of medical officers.

**15.**

A copy of the **Report of Survey** and of any other papers relating to the patient shall be appended to the Case-paper, which shall be signed at its conclusion, or on detachment of the officer, by the medical officer in charge of the patient's ward. Case-papers will be verified by the signature of the medical officer in charge of the hospital.

**16.**

When a patient is discharged from hospital the fact shall be entered upon the **Register of Patients**, and also upon the Case-paper, which is then to be filed with the hospital ticket attached. The ration notice shall be forwarded through the commandant of the station.

**17.**

On every Monday, a **Report of Sick, Form I**, for the preceding week, shall be made in triplicate, one copy of which shall be sent to the commandant of the station, one to the Bureau, and the other retained for the files of the hospital, as a basis for the report of the following week.

**SURGEON OF THE FLEET.****1.**

The Surgeon of the Fleet shall, under the orders of the Commander-in-Chief, exercise supervision over all medical officers serving in squadron with him, visiting from time to time their ships to inquire into the sanitary condition of the ship's company and the care of the sick. He shall, once each quarter when practicable, inspect carefully the Medical Journals and other records, instruments, dispensaries, and store-rooms, and report their condition, and whether or not the expenditures have been legitimate and proper, to the Bureau.

**2.**

He shall suggest to the Commander-in-Chief or senior officer measures which he may consider necessary for the preservation of health in the fleet, or to arrest the progress of disease, and for the promotion of the comfort of the sick or wounded in the fleet.

**3.**

The Statutory Law directs him to "examine and approve all requisitions for medical and hospital stores for the squadron or fleet, and inspect their quality. He shall, in difficult cases, consult with the surgeons of the ships, and he shall make and transmit to the Navy Department records of the character and treatment of diseases in the squadron or fleet."

**4.**

He shall, after an engagement, require a **Report of Killed and Wounded** from the surgeons of all the vessels,



which he shall embody in a general report, to be forwarded to the commander-in-chief and Bureau.

**5.**

He shall approve and forward to the Bureau all reports of survey and certificates of death, and make, from the duplicate quarterly reports of sick sent to him, an **Aggregate Report** for the Bureau, and a **General Sanitary Report** of the station.

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**SEA-GOING SHIPS.**

**1.**

The senior medical officer ordered to a vessel fitting out shall examine the dispensary, medical store-rooms, and sick bay, to see that every proper preparation is made for the reception of the stores and medicines, and for the care of the sick and wounded. Defective arrangements shall be immediately reported to the commanding officer.

**2.**

As soon as the crew has been received on board he shall inspect the men, comparing their descriptive lists, and request a medical survey upon all who appear to be disqualified for service. He shall also make a list of all who may seem to require **vaccination**, and the operation shall be done as soon as possible, and repeated in case of failure, until there is a reasonable assurance that the person is protected.

**3.**

He shall, at all times, have in readiness everything necessary for the relief of the wounded, and on the probability of an engagement he shall distribute a sufficient number of tourniquets, in the use of which the persons to have them in charge shall be instructed. After battle he shall make out in duplicate a careful report of killed and wounded, one copy of which he shall send to the commanding officer, and the other to the Surgeon of the Fleet.

**4.**

Whenever any person on board shall receive a wound or injury which may entitle him to a pension, he shall report the same to the commanding officer in writing before the person is removed or discharged.

**5.**

He shall, when directed by the commanding officer, cause to be examined the boats attending the ship for the sale of articles of food, to ascertain whether they contain anything which may be prejudicial to health. He shall also, when required, inspect the provisions of the crew, and test the water to be received on board, reporting to the commanding officer any unsoundness or impurities which may be found.

**6.**

He shall make known to the commanding officer everything conducive to or militating against the general health and comfort of the ship's company.

## 7.

He shall forward to the Bureau, at the expiration of the cruise, the returns which are due at the end of the quarter, the Medical Journals remaining on board, and the final return of property, Form D.

## 8.

Whenever, in cruising vessels, it shall be considered necessary to transfer invalids to a Civil Hospital, they shall be accompanied by Hospital Tickets, containing complete records of their cases. On the day of their transfer it will be noted on the Journal, where they will be continued until they return to duty, or the vessel leaves port, when the entry in their cases will close. The senior medical officer of the vessel, or his assistant, will visit such patients frequently, when practicable, in order to continue the Journal record. If in a foreign port, the senior medical officer will, on the departure of the vessel, leave with the Consul a record of the cases to date, to be given to the senior medical officer of the next vessel arriving, under whose supervision the patients will be taken, or to accompany the patients if sent to the United States. The hospital expenses of the transferred patients will be paid from the appropriation for the Bureau of Medicine and Surgery. The items of expense incurred will be included in the expenses noted on the Quarterly Report of Sick, if the patients return to any vessel. Report shall be made to the Fleet Surgeon when patients are transferred to or received from Civil Hospitals.

## RECRUITING AND PHYSICAL EXAMINATIONS.

## 1.

Medical officers will exercise great care in the performance of this duty; and hereafter, when reports of Medical Survey or Hospital Tickets represent a disability to have existed prior to enlistment, the fact shall be reported to the Bureau, which will hold the medical examiner who passed the recruit accountable for the improper enlistment.

## 2.

The applicant for enlistment having been found to be clean and sober, the medical examiner shall proceed to make a thorough inspection of his body. While permitted to exercise his own discretion as to the routine of procedure, he shall make inquiry on all the points indicated below:

**General Surface.**—The applicant, being entirely nude, is to stand erect before the examiner, in a bright light, and present successively front, rear, and sides. [*Retarded development, deformity or asymmetry of body or limbs; knock-knees, bow-legs, or splay feet, especially in minors; spinal curvatures; feebleness of constitution; strumous or other cachexia; emaciation; obesity; cutaneous or other external disease; glandular swellings or other tumors; nodes; varicosities; cicatrices; indications of medical treatment; leech-bites, blister stains, seton or scarification scars; and evidences of small-pox or successful vaccination.*]

**Extremities and Articulations.**—Applicant to present dorsal and palmar surfaces of both hands; to flex and

extend every finger; to grasp with thumb and forefinger, and with whole hand; to flex and extend, pronate and supinate wrists and forearms; to perform all the motions of shoulder-joints, especially circumduction; to extend arms at right angles to body, and then bend elbow and touch the shoulders with the fingers; to elevate extended arms above the head, palm to palm, then dorsum to dorsum; to evert and invert feet; to stand on tip-toe, coming down upon the heels quickly, and then lifting toes from floor; to flex each thigh alternately upon the abdomen, and, while standing on one leg, to hop; to perform all the motions of the hip-joint; and to walk backward and forward slowly and at double-quick.

**Thorax.**—Note effects of these violent exercises on heart and lungs; observe movements of chest during prolonged inspiration and expiration; examine by percussion and auscultation front and rear. (*Incipient pulmonary phthisis, valvular disease.*)

**Abdomen, Groins, and Genitals.**—With hands on the head and chin up, applicant to cough violently (*relaxation of umbilical and inguinal regions; hernia; concealed venereal disease, especially beneath prepuce and within urethra; varicocele; orchitis and other abnormal condition of testes.*)

**Spine and Perineum.**—Applicant to bend body forward, with knees stiffened, feet wide apart, hands touching the floor, and nates exposed to strong light (*hemorrhoids; prolapsus; fistulæ*). While the applicant is stooping make firm pressure on each spinous process of the vertebræ (*noting spinal tenderness*).

**Head, Face, and Neck.**

1. Motions of head, neck, and lower jaw.

2. Cranium (*malformations, depressions, cicatrices, tinea, etc.*).

3. Ears (*polypi, otorrhœa, perforation, dullness of hearing*).

4. Eyes (*absence of ciliæ; tarsal redness; obstructed puncta; corneal opacities; adhesions of iris: defective vision; color-blindness; abnormal conditions of conjunctivæ; etc.*).

5. Nose (*polypi; ozæna; chronic nasal catarrh*).

6. Mouth, teeth, tongue, fauces (*hypertrophied tonsils; syphilitic affections; impediments of speech*).

The Intelligence of the applicant will be evident from the character of his replies to inquiries respecting former residence and occupation, family history, etc.

The Age of the applicant must be constantly kept in view by medical examiners in determining the standard of physical fitness.

### 3.

The following instructions shall be strictly followed in preparing the **List of Persons Examined, Form X**.

**Names.**—The whole name (Christian, middle, and surnames) to be legibly written out, without abbreviation, and correctly spelled, preference being given to the original spelling of foreigners' names; the surname to precede and to be distinguished by being underlined.

**Date of Birth.**—Year, month, and day to be ascertained whenever possible.

**Place of Birth.**—Specify city, town, or other locality of whatever nationality.

**Complexion, Hair, and Eyes** are not to be described as simply "light" or "dark," but the character and degree of color are to be as accurately stated as possible; as,

**Complexion**—*pallid*; *sallow*; *fair* (only when decidedly clear); *ruddy*; *florid*; *dark* (tawny, sunburnt, or tanned); *very dark* (swarthy, dusky); *mulatto*; *negro*.

**Hair**.—*Flaxen*; *sandy* (yellowish-red); *auburn* (reddish-brown); *brown* (light, dark, or very dark); *black*; also whether *thin*, *bald*, *curly*, *straight*, *wool*.

**Eyes**.—*Blue*; *gray*; *blue-gray*; *yellow-gray*; *hazel* (light brown); *brown*; *dark brown*; *bicolored* (as when the pupillary border is of a different color from rest of iris); also state when the two eyes are of different colors.

**Other Personal Characteristics**.—Any prominent physical trait not inconsistent with bodily vigor, or not in such degree as to constitute cause for rejection—*lean-ness*, or *the reverse*; *hirsuteness*; slight *asymmetry* of body or limbs, *knock-knees*, *bow-legs*, or *splay feet*; *peculiarities of teeth* and *genitalia*; slight *varicocele* or *cirsocele*, &c. In this connection medical examiners are to remember that imperfections that might pass in *men* should reject *boys*. Note causes of rejection.

**Family History**.—Any fact suggesting predisposition or tendency to or exemption from morbid action (*longevity*, *disease*, *insanity*, or *sickness of parents* or *near relatives*).

**Age**.—To be expressed in years and months; and the month to be *always* the month concluded and not the month current.

**Weight**.—Accuracy of scales to be ascertained before using; body nude.

**Height**.—To be expressed in inches; the body to be erect, the chin neither elevated nor depressed, the feet and knees touching, legs stiff, and arms hanging perpendicularly.

**Thorax**.—Circumference to express the *mean* of the

greatest after forced inspiration and of the least after forced expiration, measured by a tape-line horizontally at the precise level of the nipples; the difference between the greatest and least circumferences being entered as **Expansion**.

**Vision.**—To be expressed as a fraction, of which the numerator will be the distance at which Snellen's twenty-foot test can be determined, and the denominator 20.

**Color-perception.**—To be always carefully determined. The usual mode of examination is by Holmgren's method, which may be briefly described as follows:

The worsteds are placed in a pile in the center of a piece of white muslin, which is spread out on a flat surface in a good daylight. The green test skein is placed aside upon the white cloth, and the person to be examined is directed to select the various shades of the same color from the pile, and place them by the side of the sample. The color-blind will make mistakes in the selection of the shades; or a hesitating manner with a disposition to take the wrong shades may show a feeble chromatic sense. The purple test skein is then used. If the test with the green skein has shown the person examined to be color-blind, and on the second or purple test he selects only the purple skeins, he is *incompletely* color-blind; but if he places with the purple, shades of blue or violet, or both, he is completely *red-blind*. If, however, he selects to be placed with the purple, shades of green or gray, he is completely *green-blind*.

The red test skein need not necessarily be used, but it may be employed to confirm the diagnosis already made, for the red-blind will select to match the red skein, shades of green or brown, which to the normal sense seem *darker* than the red, while the *green-blind*



will select the shades of green or brown, which seem lighter.

**Health, Sickness, etc.**—Enter in last column, *in every case of rejection*, the disability unfitting the applicant for service, and in other cases any abnormal condition, former grave illness, or serious injury not inconsistent with present bodily vigor. In re-examination of *minors* and *continuous-service men*, here enter statement of health since previous examination, and affix signature of the medical officer making the re-examination.

#### 4.

No apothecary, nurse, or other person than a medical officer shall be permitted to conduct any part of a physical examination, nor to make any measurement or original entry on any paper or record of enlistment.

#### 5.

Whenever any person is enlisted for the naval service the medical officer making the examination will enter his descriptive list on Form No. 12, Bureau of Equipment and Recruiting, for the use of the equipment officer of the vessel. Upon transfer the necessary entries will be made on this record.

#### 6.

In order that the Naval Academy records of the physical condition of naval cadets may be complete, and that the board of medical officers making the physical examination of cadets before final graduation, at the completion of the six years' course, may have all necessary information, when naval cadets are detached from sea-going vessels, either by transfer to other vessels, to

return to the United States, or upon the completion of a cruise, the senior medical officer shall forward duplicate reports to the Navy Department of the physical condition of the naval cadets during their service on board said vessels, and at its termination; also, a full account of all cases of serious illness or injuries that may have occurred to them.

## 7.

Whenever any person is examined for enlistment or appointment in the Navy or Marine Corps, whether for general or special service, and whether subsequently enlisted or rejected, his name and other particulars constituting the Descriptive List shall at once be entered upon the **List of Persons Examined, Form X**, by the medical officer or senior member of the Board making the examination, who shall then sign his initials on a line with the entry. This record (Form X) shall be kept at all regular rendezvous, stations, or vessels where physical examinations are made, and retained there as the original official record of such examinations.

On the first day of each quarter, the senior medical officer of all rendezvous and receiving ships shall forward to this Bureau Form X, to be compiled from the original record referred to above. In the return the names shall be arranged in alphabetical order, the surnames first, and in the case of rejections the cause of rejection shall be fully stated. From all other places and vessels this abstract shall be forwarded annually, on the 1st day of January, or on the closing of the station, or when the vessel goes out of commission. This abstract should be sent to the Bureau in pasteboard case or in a rolled form around a firm center, to avoid breaking by folding.

**8.**

A similar List of Persons Examined, embracing the particulars on Form X, shall be kept by all boards of medical examiners and by all medical officers charged with the physical examination of candidates for appointment as officers in the Navy, and of officers for promotion, returns of which shall be made to the Bureau as directed in the preceding paragraph.

**9.**

In making physical examinations of candidates for enlistment in the naval service, the examinations must in all cases be completed according to the official forms, and not suspended on the recognition of a disqualifying defect.

**10.**

The examination having been concluded, and the candidate found qualified for the service, the medical examiner shall, upon a blank furnished by the Bureau of Equipment and Recruiting, or Commandant of the Marine Corps, make entry on and transmit to the commanding officer of the rendezvous, post, station, or vessel, the enlistment record, Form XII, Bureau of Equipment and Recruiting, or Enlistment Record of Marine Corps.

**11.**

In cases where infirmities not amounting to disqualification for special ratings are waived by the Navy Department, the medical examiner shall fully describe the same on Form X and other records of enlistment, and

at once report the fact to the Bureau of Medicine and Surgery, that no claim for pension may be based upon them.

### 12.

Recruits enlisted at rendezvous on shore shall be re-examined as soon as they arrive on board the receiving-ship, and any defects which may be discovered reported at once to the commanding officer.

### 13.

Recruits shall be immediately vaccinated, and in cases of failure the operation should be repeated until the medical officer is convinced that the individual is protected. Results of Vaccination shall always be reported on Form K.

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## SURVEYS.

### 1.

Whenever any person in the Navy becomes, in the opinion of the senior medical officer, unfit for further duty upon the vessel or station to which he is attached, or for the service, the latter shall report the fact to the commanding officer with a Request for a medical survey, Form L.

### 2.

Reports of Medical Survey shall be made in duplicate, and duly forwarded to the Bureau of Medicine and Surgery through the usual channel; except in cases of officers or marines, when they shall be in triplicate, the

third copy to be forwarded to the Office of Detail in the case of survey of an officer, or in the survey of a marine forwarded to the commanding marine officer, for the Commandant of Marines. In all cases of Medical Survey, the medical officer making the request shall make a full entry of report on the Journal or Case-paper. Reports of Survey shall be made according to the prescribed form, an opinion as to the origin being definitely given, and a statement of the facts connected therewith. When no unfitness is found, it is sufficient to state this fact; when it exists, and is regarded as being temporary, the phrase "unfit for duty" should be used, and when permanent, that of "unfit for service" employed.

The common name of the disease is to be given.

Under the head of "Recommendation" is to be given the contemplated disposition of the patient. In the case of officers, this may be detachment, either with sick leave or for hospital treatment; or if the unfitness is judged to be temporary, he may be *detailed* for hospital treatment with the view of being returned to his station. Enlisted men should be sent to hospital for treatment, or recommended for discharge.

In surveys at hospitals the name of the vessel from which the man was received shall always be noted.

### 3.

When men in the United States are condemned by medical survey on account of disease which may have resulted from their own indiscretions, or from causes not incident to the service, the Board will not make any recommendation relating to their transfer to another station for discharge.

### APOTHECARIES.

Apothecaries may be appointed by the senior medical officer of any vessel or station, but all such appointments must bear the approval of the commanding officer. They will be entered on the ship's books, after having been found physically qualified, taken the oath of allegiance, and signed an agreement in accordance with prescribed form to serve faithfully for the cruise, or until discharged, to be amenable to the laws, regulations, and discipline of the service, and to be subject to discharge, in case of misbehavior, in any port, foreign or domestic, without claim for passage money; the fact of misbehavior to be established by a summary court-martial. This agreement must be executed in duplicate, one copy of which, approved by the commanding officer, together with the oath of allegiance, is to be forwarded to the Chief of the Bureau of Medicine and Surgery, and the other retained by the commanding officer. A copy of the appointment shall be forwarded to the Bureau with the agreement.

The physical examination of apothecaries will be made by the officer appointing them.

Apothecaries may also be shipped as landsmen, and rated as apothecaries by the commanding officer, on recommendation of the senior medical officer.

Apothecaries appointed for service on shore, in hospitals or at stations, can be discharged for incompetency or misbehavior, by the senior medical officer, with the approval of the commanding officer.

Apothecaries and all other persons employed in the Medical Department of the Navy are prohibited from

accepting donations or bequests from patients or contractors, or from the friends of either, and from acting as administrator or executor, or receiving on deposit any article of value from any patient.

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**BAYMEN.**

Baymen will be enlisted as landsmen for general service, and rated baymen by the commanding officer on the recommendation of the senior medical officer. The number will be regulated by the complement of the vessel.

F. M. GUNNELL,  
*Surgeon-General.*

## BLANK FORMS AND THEIR USES.

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### Form A—Medical Outfit.

Prepared at Laboratory in duplicate; forwarded with stores; senior medical officer of vessel going in commission signs both copies; returns original to Laboratory; retains duplicate for his files.

### Form B—Requisition.

To be made and forwarded to Bureau in quadruplicate, semi-annually on the 1st of April and October from hospitals, stations, and vessels in the United States. On foreign stations semi-annually, when in company with flagship, or when in port where articles can be purchased at best rates; quantities required to correspond to packages, column "on hand," opposite articles required for, always to be filled; quadruplicate returned to medical officer as notification of receipt and approval. Original and duplicate will be forwarded to medical officer from Laboratory. He will sign both copies, return original to Laboratory, and retain duplicate for his files, as substitute for quadruplicate, which can then be destroyed.

### Form D—Inventory of Property.

Single copy to be forwarded to Bureau July 1 of each year from all vessels and stations. To be prepared in accordance with article "Property accountability."

### Form E—Register of Patients.

Kept at hospitals as permanent record.

### Form F—Quarterly Abstract of Patients.

Single copy in pasteboard tube, or rolled over firm center, forwarded to Bureau at end of each quarter, or for part of quarter if ship goes out of commission. Arrange names in order of admission.



### Form F 2—Annual Abstract of Patients.

Single copy in pasteboard tube, or rolled over firm center, forwarded to Bureau 1st of January of each year, with quarterly abstract of fourth quarter. If ship goes out of commission, form to be made up for part of year in commission. Names on annual abstract to be arranged *alphabetically* to facilitate reference in pension cases. In making this abstract great care should be taken to avoid double entry of names of men continued on the quarterly abstracts from one quarter to the succeeding. Names remaining at end of year shall be entered anew on next quarterly and annual abstract, noting dates of original admission.

### Form G—Hospital Ticket.

Single copy always to accompany patient whenever transferred for treatment. Descriptive list to be obtained from equipment officer, and to correspond accurately with entry on face of ticket, except as to age record on face of ticket, which is to be age at date of transfer; at hospitals to be attached to case-paper and filed.

### Form H—Case-paper.

To be kept at hospitals. To be made out by medical officer of ward to which patient is assigned, as soon as examination is made of patient's condition on admission, which condition shall be fully noted. To be presented to medical officer in charge of hospital once each week for examination. On discharge of patient to be signed by medical officer in charge of ward and approved by signature of medical officer in charge of hospital.

Hereafter case-papers and attached hospital tickets will not be pasted in invoice files at hospitals, but will be arranged in yearly packages, representing patients discharged from January 1 to December 31 of each year, in order of discharge. Each case will be numbered on the upper right-hand corner of the attached hospital ticket, commencing January 1, with number 1. At the end of the year an index will be made on cap paper of all the cases discharged during the year, and the package of case-papers, with index, forwarded by express to Bureau. In writing case-papers a margin of three-fourths of an inch for binding will be allowed at the fold of the case-paper.

### Form I—Weekly Report of Sick.

To be made at hospitals at the end of each week. One copy sent to Bureau, one to commandant of station, one retained at hospital for reference.

### Form J—Morning Report of Sick.

To be made each morning after sick call on all vessels, and at navy-yards and stations where sick calls are held. Single copy to commanding officer. To include all names on journal. Binna-  
cle List to include all names on Form J and names of men ascer-  
tained to be sick or disabled after morning report of sick has been  
forwarded to commanding officer.

### Form K—Quarterly Report of Sick.

To be made at end of each quarter on board of all vessels, and  
at all hospitals, navy-yards, and stations where sick are cared for.  
Single copy forwarded to Bureau. Duplicate retained and filed.

Medical officers will exercise great care in the preparation of  
this Report, and will, before forwarding it to the Bureau, person-  
ally compare the entries with those on the abstract of patients  
and ascertain that there is absolute conformity in the entries as to  
cases of disease, admissions, discharges, total sick days, etc.

As medical officers are no longer required to forward triplicates  
of all bills paid with their quarterly report of sick, they will, in  
all cases where expenditure has been incurred during the quarter,  
make entry of the amount opposite its proper heading, or in a sup-  
plemental entry if necessary. The entries under summary of ex-  
penditures will include all money charges of whatever nature made  
against the Medical Department, whether for articles received, per-  
sonal service, repairs, or anything for which money is paid, except  
the regular monthly pay of attendants and employés.

The cost of outfit will be included in the first quarterly report  
made after the vessel goes in commission, and will be considered  
as part of the expenditure for that quarter. The apparent dispro-  
portionate ratio of cost will be adjusted at the Bureau.

### Form L—Request for Medical Survey.

Single copy to be forwarded to commanding officer who orders survey. To be retained and filed with miscellaneous records at place where survey is held.

*This form will replace Form No. 37, Navy Regulations, 1876. Form No. 36, Navy Regulations, is discontinued.*

### Form M—Report of Medical Survey.

Duplicate copies always to be forwarded to Bureau of Medicine and Surgery. In cases of survey of officers a triplicate copy made for Office of Detail. In cases of marines, a triplicate copy made for commandant of Marine Corps. All of the copies to be forwarded to officer ordering survey, who will make the distribution. When surveys of men are held at hospitals, the vessels from which received will be noted.

*This form will replace Form No. 32, Navy Regulations, 1876.*

### Form N—Certificate of Death.

† To be forwarded to Bureau of Medicine and Surgery in duplicate. Origin of disease or disability causing death always to be noted, with reasons for conclusion as to duty, or not duty. This certificate, with indorsement as to origin, will replace Forms 30 and 31, Navy Regulations, 1876.

### Form O—Declaration for Navy Invalid Pension.

This form is printed for the information of medical officers, but it relates to the Pension Office.

### Form P—Special Diet List.

To be used at hospitals. This list shall be prepared each morning by the medical officer in charge of the ward. When there are two or more medical officers in charge of patients they can use the same blank, in each case filling in the blank opposite the names of the patients under their charge. They will endeavor, as far as possible, to secure uniformity in the orders for the day, so as to avoid unnecessary cooking. This special diet list shall always be filled by the medical officers, and never by the nurses. It will include the dinner and supper of the day when made out, and the breakfast of the following day.

† In the case of an officer, triplicate copy to be sent to Bureau of Navigation.

**Form Q—Record of Temperature, etc.**

To be kept in connection with records of illness when in the judgment of the medical officer the case is of a character to require it. In hospitals to be filed with case-paper. From vessels and stations to be forwarded to Bureau, with quarterly report of sick, embracing completed case. It will be retained at Bureau to be filed in Journal when completed and forwarded to Bureau.

**Form R—Pay-Roll.**

Single copy to be forwarded to the Bureau each month from all hospitals and stations where there are employés paid by Medical Department.

**Form S—Ration Notice, Admission.**

Single copy to be forwarded from hospitals to commanding officer of receiving ship, or commanding marine officer of barracks, on admission of patient.

**Form T—Ration Notice, Discharge.**

Single copy to be forwarded, as above, on discharge of patient.

**Form X—Abstract of Enlistments.**

To be kept wherever men are examined for enlistment. Medical officers whose initials appear opposite names of persons examined will sign the abstract. One copy sent to Bureau at end of each quarter from rendezvous and receiving ships; From all other places and vessels on January 1st of each year. Forwarded to Bureau in pasteboard tube or rolled over firm center.

**Requisition Form 1.**

*Personal service Requisition.*—For use at hospitals and stations where personal service is required. This, as well as all other requisitions, must be forwarded to the Bureau in quadruplicate. The regulations of the Treasury Department require that a copy of the requisition shall be attached to each copy of the corresponding voucher. Three copies are retained at the Bureau to be attached to the voucher when forwarded. The quadruplicate is returned to

the medical officer who makes the requisition, in order that he may know whether it has been approved in whole or in part and by whom the articles will be furnished. The quadruplicate must be retained on the files of the office for future reference.

Requisitions are to be numbered in annual series, commencing with No. 1 in January of each year.

Personal service requisition must not be used when new material is to be supplied.

If it should not be necessary to forward an explanatory letter with the requisition, the name of the person recommended to perform the service should be attached to the requisition on a memorandum slip.

### Requisition Form 2.

*Requisition for Repairs.*—For use at naval hospitals and Naval Laboratory, in repairs of buildings, roads, wharves, sidewalks, fences, gardens, farms, and cemeteries, to be forwarded with proposals, in duplicate, from at least two responsible parties to do the work mentioned. The proposals shall be uniform and worded as the requisition. The column "estimated cost" will be filled at the Bureau after acceptance of proposal.

The regulations of the Treasury Department require that one copy of each proposal shall be attached to the "first" of the corresponding voucher. The duplicate is for the files of the Bureau. The proposals will be carefully prepared on paper suitable to be attached to a voucher.

### Requisition Form 3.

*Open-Purchase Requisition.*—For use at hospitals and stations. This requisition is to be used for all articles not on the allowance table, or such as cannot properly be classed under the head of "additional articles" under the head of medicines. The column "estimated cost" need not be filled. If proposals accompany the requisition the column will be filled at the Bureau. In case the articles asked for are such as require selection, the medical officer may forward with the requisition, proposals in duplicate, from at least two responsible dealers, and the Bureau will determine whether to accept one of the proposals, to direct the purchase by the Purchasing Paymaster at the station, or to contract for their delivery.

This requisition may also be used by receiving ships or vessels in the United States for special articles other than medicines.

### Requisition Form 4.

*Special requisition for supplies exempt by law from advertisement.*—The only articles exempt by law from advertisement are medicines. All other articles must be obtained by contract after advertisement for four weeks for proposals, unless the public exigency should require the immediate delivery of the articles asked for. The existence of the exigency is determined by the Chief of the Bureau.

Requisition Form 4 can be used for all articles on the allowance table, and additional articles under the head of medicines.

Vaccine will be asked for by letter only. It will be forwarded by dealer with bill in duplicate. The receipt of the medical officer will be written on the face of original of dealer's bill, which will be forwarded to Bureau to be paid quarterly. The duplicate of dealer's bill to be retained for the files of the hospital, vessel, or station.

### Bill Form 1.

*Contract voucher.*—All bills to be forwarded to Bureau in triplicate, marked—triplicate first, second, third.

Bill Form 1 to be used in payment of all bills incurred on account of contracts. Where this voucher is used at hospitals the certificate of examination will be signed by the medical officer or officers who inspect the articles delivered. The certificate of receipt will be signed by the medical officer in charge.

All of the articles included in the "Proposal for supplies to hospitals," with the exception of articles in class seven, can be embraced in one voucher, as all such articles are paid for from naval hospital fund. A separate voucher, in triplicate, must be prepared for articles in class seven, these articles being paid for from contingent.

It is not allowable, under any circumstances, to include on a contract voucher any articles except those specified in the contract.

Before these vouchers are forwarded to the Bureau, medical officers will personally compare the vouchers with the copy of the contract on file to assure themselves that the articles, prices, and footings are correctly entered.

**Bill Form 2.**

*Special exigency voucher.*—This voucher, in connection with Bill Form 3, was especially prepared by the Second Comptroller of the Treasury Department for use in the Bureau of Medicine and Surgery, in recognition of the fact that in the preservation of hospitals and care of the sick special exigencies might arise.

This voucher is only to be used at hospitals and shore stations in cases of sudden emergency (such as broken water, steam, or gas pipes, falling walls or ceilings, broken heating or cooking apparatus, &c.), in which case the work is to be done immediately. The medical officer in charge will ascertain the cost of the work from the person employed, and will enter the amount and name of workman on the exigency certificate, which he will then sign. After the work is completed he will sign the certificate of correctness and performance of work and forward voucher to Bureau.

The circumstances requiring the performance of the work will be briefly noted in red ink across the face of the voucher and signed by the senior medical officer.

**Bill Form 3.**

*Special exigency voucher.*—This voucher is to be used at hospitals or shore stations where articles for the care or welfare of the sick are immediately necessary. It is never to be used if time will allow the procurement of approved requisition. Entries on the voucher are to be made as directed on Bill Form 2.

**Bill Form 4.**

*Voucher for repairs.*—To be used at Naval Laboratory and naval hospitals for repairs to buildings and appendages, including roads, wharves, outhouses, sidewalks, fences, gardens, farms, and cemeteries, and for no other purposes. The phraseology used on the requisition for repairs is to be copied on the voucher when it is prepared. The senior medical officer will sign the certificate of inspection and approval.

**Bill Form 5.**

*Open-purchase voucher.*—This voucher is to be used at hospitals and stations and on board vessels in the United States when the

articles embraced in it have been obtained by order of the Bureau on open-purchase requisition. It is to be used for articles obtained other than by contract or special exigency, or medicines, which are exempt by law from advertisement.

When the articles embraced in it have been purchased by Bureau's order direct to the person in whose favor the voucher is drawn, the certificate of purchase will be filled and signed at the Bureau. When it is indicated by the requisition that the articles are to be purchased by the Purchasing Paymaster, the senior medical officer will make out the voucher and forward it to the Purchasing Paymaster for certificate of purchase before transmitting it to Bureau for approval.

### Bill Form 6.

*Personal service voucher.*—To be used at hospitals and shore stations where personal service is required. Whenever it is impracticable to obtain an approved requisition before the performance of the service, a concise statement of the exigency is to be indorsed in red ink on the face of the voucher, and signed by the senior medical officer, and the reasonableness of the charges certified to by the Purchasing Paymaster.

### Bill Form 7.

*Open-purchase voucher for supplies exempt by law from advertisement.*—This voucher is only to be used for articles used as medicines, which are exempt by law from advertisement. The certificate of purchase will be filled at the Bureau. The certificates of examination and receipt will be filled and signed by the medical officer who examined and received the articles.



**Form A.—Medical outfit.**

[Duplicate.]

Medical outfit of U. S. S. ——— ———,  
 at ——— ———, 18—.

[Signature of Medical Officer.]

Articles.	Quantity.	Price.	Articles.	Quantity.	Price.
[Names in order of Supply table.]					

Received from ——— ——— all the articles to which quantities are affixed; the whole being of good quality and properly packed, unless otherwise noted with red ink.

[Signature of Medical Officer.]

U. S. S. ———,  
 at ———, 18—.

**Form B.—Requisition.**

[Quadruplicate.]

U. S. ——— ———, 18—.

SIR: The following articles are required in the Medical Department of this ———.

Respectfully,

[Signature of Medical Officer.]

To ——— ———,  
———.

Articles.	On hand.	Quantity re-quired.	Allowance.	Articles.	On hand.	Quantity re-quired.	Allowance.
<p>Approved:</p>							

U. S. ——— ———, 18—.

Received from ——— the above articles, excepting those marked P, of good quality.

[Signature of Medical Officer.]

**Form D.—Inventory of Property.**

In the Medical Department of U. S. ——— ———, for the ———, commencing ———, 18—, and ending ———, 18—.

[Signature of Medical Officer.]

Articles.	On hand at last re- turn or outfit.	Received since.	Expended.	On hand.	Articles.	On hand at last re- turn or outfit.	Received since.	Expended.	On hand.

[When transfers of property are made, the column "on hand" to be filled up, and the receipt appended here.]



Form F<sup>2</sup>.—Model for Annual Abstract of Patients. U. S. —.

Number.	Name.	Rate.	Age.	Place of birth.	Disease or injury.
1	Adams, James Edward.	O. S . . . . .	21	Easton, Pa. . . . .	Asphyxia (immers.).
2	Ackley, William Henry.	Sea . . . . .	45	Bath, Me . . . . .	Syphilis, prim.
3	Adamson, Henry..	Lands . . . . .	25	Philadelphia, Pa	Epilepsia.
4	Bolton, Thomas Gray.	Qr. Mr. . . . .	39	New York, N. Y.	Contusio.
5	Ball, John Thomas	Pr. Mar . . . .	30	Baltimore, Md..	Cholera commun.
6	Cohen, Frederic...	Captain foretop.	28	Berlin, Prussia .	Fractura femoris.
8	Dalton, Edward Lay.	Boatswain mate.	45	Perth, Scotland .	Febris intermittens.
9	Dunn, Theodore...	Lieutenant	29	Chicago, Ill. . . . .	Bronchitis acuta.

Number.	Date of admission.	Date of discharge.	Final disposition.	Origin.	Remarks.
	1873.	1873.			
1	Mar. 1	Mar. 1	Died . . . . .	Duty . . . . .	Drowned coming alongside of ship.
2	Feb. 8	Feb. 23	Hospital, N. Y.	Not duty . . .	Surveyed and recommended to be sent to hospital.
3	Mar. 10	Mar. 12	To duty . . . . .	Not duty . . .	Existed prior to enlistment.
4	Mar. 16	Mar. 26	To duty . . . . .	Duty . . . . .	Received while exercising at great gun.
5	Jan. 6	Jan. 10	To duty . . . . .	Not duty . . .	From imprudences in diet while ashore.
6	Apr. 17	.....	Continued . . . .	Duty . . . . .	Fell from aloft while at work.
8	Jan. 20	Jan. 28	To duty . . . . .	Duty . . . . .	From climatic influences.
9	Mar. 27	.....	Continued . . . .	Duty . . . . .	From exposure.

Surgeon, U.S.N.

**Form G.—Hospital Ticket.**

U. S. ———, ———, 18—.

*To the Medical Officer in charge of the Naval Hospital at ———:*

SIR: The following patient, with his effects, is hereby transferred to your charge:

Name (in full) and grade: ——— ———.

Native of ———; age, ——— years.

Shipped at ———, ———, 18—.

Disease (from nomenclature): ———.

Time and place of occurrence, or dates between which there was continuous exposure to morbid cause: ———, ———, 18—.

Origin: There is ——— evidence that it was in line of duty, the facts being as follows, viz:

---



---



---

Respectfully,

---



---

*U. S. N.*

Approved:

---



---

*Commanding.*

Approved:

---



---

*Commandant.*

**Descriptive List.**

U. S. \_\_\_\_\_, \_\_\_\_\_, 18—.

Name: \_\_\_\_\_; rate: \_\_\_\_\_.

Born \_\_\_\_\_, 18—, at \_\_\_\_\_.

Complexion: \_\_\_\_\_; hair: \_\_\_\_\_; eyes: \_\_\_\_\_.

Other personal characteristics: (permanent marks, scars, &c.)

Name and address of nearest relative or friend: \_\_\_\_\_.

Former occupation: \_\_\_\_\_.

Family history: \_\_\_\_\_.

When and where last examined: \_\_\_\_\_.

Age.		Weight.	Height.		Thorax.		Vision (Suellin).	State of health since enlistment.
Years.	Mos.		Vertex to ground.	Mean circumference.	Expansion.			
		Pounds.	Inches.	Inches.	Inches.			

**List of Clothing, &c.**

No. ....	Hammock.
	Blankets.
	Sheets.
	Mattress.
	Bags.
	Chests.
	Coats.
	Jackets.
	Waistcoats.
	Trowsers.
	Drawers.
	Frocks.
	Shirts.
	Shirts, flannel.
	Stockings.
	Boots and shoes.
	Handkerchiefs.
	Hats.
	Caps.
	Stocks.
	Gaiters.
	Cash.
	Watch.
	Books.
	Knapsacks.
	Muskets.

The above articles have been returned to me. \_\_\_\_\_.

Witness: \_\_\_\_\_.

**Form H.—Case-paper.**

NAVAL HOSPITAL, \_\_\_\_\_, 18—.

Case-paper No. \_\_\_\_\_.

Name: \_\_\_\_\_.

Grade: \_\_\_\_\_.

Native of \_\_\_\_\_; age, \_\_\_\_\_.

Shipped at \_\_\_\_\_, 18—.

Admitted from U. S. \_\_\_\_\_ at — M., 18—.

Discharged \_\_\_\_\_, 18—.

Diagnosis by hospital ticket, signed—

[Name and rank of Medical Officer.]



**Form I.—Weekly Report of Sick.**

REPORT OF SICK in the U. S. Naval Hospital, ———, for the week ending ———, 188—.

[Signature of Medical Officer.]

Remaining at last report.....	Deserted.....
Admitted during the past week..	Died.....
Number of vacant beds.....	Remaining.....
Discharged.....	

Name.	Grade or rate.	When admitted.	Where from.	Disease.	Number of days in hospital.	Present condition or final disposition.

**Form J.—Morning Report of Sick.**

U. S. S. ———, (——Rate).

LAT. ———, LONG. ———,

January 20, 1873.

———, *Commanding:*

Name.	Grade.	Disease.	Remarks.
Henry Ashton...	Ordinary seaman...	Pleurisy .....	Better.
John Brown .....	First-class boy .....	[Given name in common use.]	Discharged.
Henry Davis.....	Landsman .....	.....	Admitted.
William Cullen..	Coal-heaver .....	.....	Admitted.
Philip Bunce ....	Fireman.....	.....	Admitted.

Admitted..... 3

Discharged..... 1

Remaining ... 4

Respectfully,

[Signature of Medical Officer.]

**Binnacle List.**

(In manuscript.)

Henry Ashton, ordinary seaman.

Henry Davis, landsman.

William Cullen, coal-heaver.

Philip Bunce, fireman.

(Other names may be added in the course of the day.)

[Signature of Medical Officer.]

**Form K.**

Report of Sick for the \_\_\_\_\_ quarter, 188-, for the U. S. S. \_\_\_\_\_  
at \_\_\_\_\_.

\_\_\_\_\_, U. S. N.

(Desertions to be returned under the head of Discharged to Duty.)

Diseases.	Remaining from last quarter.	Admitted.	Discharged to duty.	Inval- lided.		Continued to next quarter.	No. of sick days.	Diseases.	Remaining from last quarter.	Admitted.	Discharged to duty.	Inval- lided.		Continued to next quarter.	No. of sick days.
				To hospital.	From service.							To hospital.	From service.		
Carried up.								Total ....							

Average ship's company, \_\_\_\_\_. Total sick days, \_\_\_\_\_. Daily average of patients, \_\_\_\_\_.

**SUMMARY.**

Expenditures.	Dollars.	Cents.	Attendants, &c. (This column for hospitals only.)	Daily average number of	Total number of rations.
Freight and tolls .....			Apothecary .....		
Fuel .....			Carpenter .....		
Groceries .....			Cooks .....		
Instruments .....			Engineers .....		
Lights .....			Firemen .....		
Medicines .....			Gardener .....		
Provisions .....			Laborers .....		
Repairs .....			Laundresses .....		
Stationery .....			Matron .....		
Washing .....			Messenger .....		
Water-rent .....			Nurses .....		
Incidental .....			Patients .....		
			Porters .....		
			Stewards .....		
			Watchmen .....		
			Supernumeraries .....		
Total .....			Total .....		

**Form L.—Request for Medical Survey.**U. S. \_\_\_\_\_,  
\_\_\_\_\_, 18—.To \_\_\_\_\_,  
Commanding U. S. \_\_\_\_\_:

SIR: I have to recommend medical survey of—

Name.	Grade.	Disease, &c.

[This application and order are to be rendered in manuscript, and may include any number of names.]

Respectfully,

[Signature of Medical Officer.]

\_\_\_\_\_  
U. S. \_\_\_\_\_,  
\_\_\_\_\_, 18—.To \_\_\_\_\_,  
\_\_\_\_\_,  
\_\_\_\_\_.

GENTLEMEN: You will hold survey as recommended above, and make separate reports, in duplicate, of each case, in strict accordance with prescribed form; and you will particularly state all facts you may be able to elicit in regard to origin of disability, even when you do not find it to be in line of duty.

Respectfully,

\_\_\_\_\_  
Commanding U. S. \_\_\_\_\_.

**Form M.—Report of Medical Survey.**

[In duplicate.]

U. S. \_\_\_\_\_

To. \_\_\_\_\_,

SIR: In obedience to your order of \_\_\_\_\_, we have held a careful survey on [give name and grade in full], attached to the U. S. \_\_\_\_\_, admitted from U. S. S., \_\_\_\_\_ native of \_\_\_\_\_, aged \_\_\_\_\_, shipped at \_\_\_\_\_, on the \_\_\_\_\_, and beg leave to report as follows:

## 1. Present condition:

("Unfit for duty" means present unfitness; "Unfit for service," permanent unfitness. There may be Hypochondriasis or Malingering to be noted under this head.)

## 2. Disease:

(By name in common use, if any; also location and character.)

## 3. Probable future duration:

(Approximate, if possible.)

## 4. Recommendation:

(Officers may be "detached" or only "detailed" for sick-leave. See Circular June 25, 1862. This distinction is important to personal interests. Half-pensions, as being one-half disabled from obtaining subsistence by bodily labor.)

## 5. Origin:

(State all facts, negative or positive, whether found to be in line of duty or found not to be in line of duty. When the patient's own statement is all that can be got, accept or reject it in terms. When "present condition" indicates no disease, the report need not proceed further.)

Respectfully,

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- NOTES.—1. The report will not embrace more than one case.  
2. Insert first name in full.  
3. Location and character of injury to be stated.  
4. State all the facts.

**Form N.—Certificate of Death.**

[In duplicate.]

I hereby certify that \_\_\_\_\_, who was a \_\_\_\_\_ in the United States Navy, while attached to the (a) \_\_\_\_\_, and holding the rank above mentioned, departed this life (b) \_\_\_\_\_ on the \_\_\_\_\_ day of \_\_\_\_\_, in the year 18—, and that he died of (c) \_\_\_\_\_ as set forth in the record of his case, as follows:\*

There is \_\_\_\_\_ evidence that the disease (or disability) causing death was in line of duty, the facts being as follows:

\_\_\_\_\_, U. S. N.

The above-named \_\_\_\_\_, deceased, was born at \_\_\_\_\_, in the State of \_\_\_\_\_; about \_\_\_\_\_ years of age; \_\_\_\_\_ feet \_\_\_\_\_ inches high; \_\_\_\_\_ complexion; \_\_\_\_\_ eyes; \_\_\_\_\_ hair; and entered the United States naval service at \_\_\_\_\_ on the \_\_\_\_\_ day of \_\_\_\_\_, in the year 18—.

\_\_\_\_\_,  
Paymaster.

Approved:

\_\_\_\_\_,  
Commanding U. S.

(a) If at a navy-yard, ship, or hospital, insert name and place.

(b) The same.

(c) Wound, casualty, or disease, as the case may be.

\* Details of medical treatment not required.

**Form O.—Declaration for Navy Invalid-Pension.**

STATE OF ———, *County of* ———, *ss:*

On this ——— day of ———, A. D. one thousand eight hundred and ———, personally appeared before me, ——— ———, a ——— of the ———, a court of record in and for the county and State aforesaid, ——— ———, who, being duly sworn according to law, declares: That he is aged ——— years; that he is the identical ——— ——— who enlisted under the name of ———, in the naval service of the United States at ———, on the ——— day of ———, in the year ———, [Here state the vessel and rank in the Navy, and whether in any other service; and, if so, what, and under what name] in the war of ———, and was honorably discharged on the ——— day of ———, in the year ———; that his personal description is as follows: Age ———, height ———, complexion ———, hair ———, eyes ———; that while in the service aforesaid, and in the line of his duty, he received the following wounds (or disability, as the case may be), and that he was treated therefor in the following-named (or numbered) general hospital:

[Here give a particular and minute account of the wound or other injury, and state how, when, and where it occurred, and his present physical condition; where the applicant had resided since leaving the service, and what has been his occupation.]

That he hereby appoints ——— ——— his attorney to prosecute his claim; that he has never received or applied for pension; that his residence is at No. ———, in ——— street, in the ——— of ———, county of ——— and State of ———; and his post-office address is ——— ———.

[Claimant's signature.]

Also personally appeared ——— ———, residing at No. ———, in ——— street, in ———, ——— ———, residing at No. ———, in ——— street, in ———, persons whom I certify to be respectable and entitled to credit, and who, being by me duly sworn, say: They were present and saw ———, the claimant, sign his name (or make his mark) to the foregoing declaration; that they have every reason to believe, from the appearance of said claimant and their acquaintance with him, that he is the identical person he represents himself to be; and that they have no interest in the prosecution of this claim.

[Signatures of witnesses.]

Sworn to and subscribed before me, this ——— day of ———, A. D. ———, and I hereby certify that the contents of the above declaration, &c., were fully made known and explained to the applicant and witnesses before swearing, including the words ——— erased, and the words ——— added; and that I have no interest, direct or indirect, in the prosecution of this claim.

[Official signature.]

[The person administering the jurat should sign in his own name.]

Form P.—Special Diet List.

Articles.		Quantities.	Names.												Total.
BREAKFAST.	Bread .....	oz. 6													
	Butter .....	oz. 1													
	Coffee .....	pt. 1													
	Tea .....	pt. 1													
	Toast, dry .....	oz. 4													
	Toast, milk .....	oz. 6													
	Eggs, boiled .....	No. 1													
	Eggs, poached .....	No. 1													
	Milk .....	oz. 12													
	Beefsteak .....	oz. 6													
	Ham .....	oz. 4													
	Oatmeal .....	oz. 4													
Beef tea .....	oz. 8														
DINNER.	Bread .....	oz. 4													
	Chicken, stewed .....	oz. 6													
	Chicken broth .....	pt. 1													
	Mutton chops .....	oz. 6													
	Mutton broth .....	pt. 1													
	Milk .....	oz. 12													
	Oysters, stewed .....	gill. 1													
	Beef-tea .....	pt. 1													
	Rice, boiled .....	oz. 1													
	Farina pudding .....	oz. 4													
	Corn-starch .....	oz. 4													
	Beefsteak .....	oz. 6													
Mashed potatoes .....	oz. 6														
Vegetables .....	oz. 6														
SUPPER.	Tea .....	pt. 1													
	Butter .....	oz. 1													
	Bread .....	oz. 4													
	Toast, dry .....	oz. 4													
	Milk .....	oz. 12													
	Eggs .....	No. 1													
Beef-tea .....	oz. 8														
Milk toast .....	oz. 6														



**Form R.—Pay-Roll**

*Of persons employed at the U. S. Naval Station at \_\_\_\_\_, under the Bureau of Medicine and Surgery, during the month of \_\_\_\_\_, 188-.*

No.	Names.	Where employed.	Occupation.	Whole number of days' work.	Rate of pay per day.		Aggregate amount of pay.		Amount due and paid.		We acknowledge to have received of _____ the several sums opposite to each of our names, in full for work done at the Naval Station, _____ for the month of _____, 188-.	Witness to signature.	Remarks.
					Dolls.	Cts.	Dolls.	Cts.	Dolls.	Cts.			

Certified as correct.

[Signature of medical officer, navy-yard.]

[Signature of medical officer, naval hospital.]

Form Q.—RECORD OF TEMPERATURE.

Name..... Rate, &c.

Day of Month.									
Day of Disease.									
Temperature.	noon	midnight	noon	midnight	noon	midnight	noon	midnight	noon
	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.
105°	8 6 2								
104°	8 6 4 2								
103°	8 6 4 2								
102°	8 6 4 2								
101°	8 6 4 2								
100°	8 6 4 2								
99°	8 6 4 2								
98° <sup>normal</sup>	8 6 4 2								
97°	8 6 4 2								
96°	8 6 4 2								
95°	8 6 4 2								
Pulse per minute.									
Respirations per minute.									
Urine.	Oz. in 24 hrs.								
	Reaction.								
	Sp. Gr.								
	Color.								
	Clearness.								
	Urea amt.								
	Sugar.								
	Albumen.								
	Solids.								
Fæces	Microscopic Sediment.								
	Number.								
Character.									

When four daily observations of temperature are made, as should be done in serious cases, mark these at noon and midnight on the lines, the others in the spaces between.

Signature of Medical Officer.



**Form S.—Ration Notice.**

[Paymaster's notification.—Admission.]

U. S. N. HOSPITAL, ———, ———, 188—.

*To Com'd'g Officer U. S. R. S., ——— ———:*

SIR: The following-named men have been this day admitted into the hospital, and they will be rationed by the Medical Department from ——— ———, inclusive.

Very respectfully,

—————, ———,  
————— *in charge of Hospital.*

Name.	Rate.	Admitted from—

**Form T.—Ration Notice.**

[Paymaster's notification.—Discharge.]

U. S. N. HOSPITAL, ———, ———, 188—.

*To Com'd'g Officer U. S. R. S., ——— ———:*

SIR: The following-named men have been this day discharged from the hospital, and the issue of their rations by the Medical Department will cease from ———, inclusive.

Very respectfully,

—————, ———,  
————— *in charge of Hospital.*

Name.	Rate.	How discharged.	Days subsisted.

**Form X.—Abstract of Persons**  
*Examined for the naval service at \_\_\_\_\_ during the \_\_\_\_\_ ending \_\_\_\_\_, 188-.*

Date of examination.	Name in full. (Surname underlined.) Arranged alphabetically.		Rate.	Date of birth.	Place of birth.	Complexion.	Hair.	Eyes.	Color perception (good or bad).	Vision (in 20ths). "Snellen."	Age. Years. Months. Weight.	Height in inches. Vertex to ground.	Chest. Mean circumference. Expansion.	When and where last examined.	Personal peculiarities, for illness, &c., or causes of rejection.	Accepted (yes or no).	Initials of medical examiner.

We certify that we have carefully examined, agreeably to the Regulations of the Navy, the several recruits against whose names our respective initials appear, and find that, in our opinion, those accepted are free from all bodily defects and mental infirmity which would, in any way, disqualify them from performing the duties for which they are intended.

\_\_\_\_\_  
*Examining surgeons.*

**Req. Form 1.—Personal Service Requisition.**

No. —.] U. S. ——— ———, 188—.  
 To ——— ———:

The following-named personal service is required at ———.

Kind of service required.	Estimated cost.
	\$

Very respectfully,

—————, *U. S. N.*

NAVY DEPARTMENT,  
 BUREAU OF MEDICINE AND SURGERY,  
 ——— ———, 188—.

The requisition for above-mentioned personal service is approved, to be performed by ——— ———, at a cost not to exceed amount specified.

—————,  
*Chief of Bureau.*

**Req. Form 2.—Requisition for Repairs.**

No. —.] U. S. ——— ———, 188—.  
 To ——— ———,

The following-mentioned repairs are immediately necessary at ——— for the preservation of public property:

Kind of repairs necessary.	Estimated cost.
	\$

Respectfully submitted.

—————, *U. S. N.*

NAVY DEPARTMENT,  
 BUREAU OF MEDICINE AND SURGERY,  
 ——— ———, 188—.

The public exigency requires the immediate performance of the above-mentioned work, and it is ordered that the same be done without advertisement, and the proposition of ——— ——— to perform the same for the sum of \$——— is accepted. The work to be done and material furnished subject to inspection and approval of ——— ———.

—————,  
*Chief of Bureau.*

**Req. Form 3.—Open Purchase Requisition.**

No. —.] U. S. \_\_\_\_\_, \_\_\_\_\_, 188-.

To \_\_\_\_\_, \_\_\_\_\_:

The following articles, not in store or obtainable here under existing contracts, are required at \_\_\_\_\_ for immediate use.

Articles.	Estimated cost.
	\$

\_\_\_\_\_,  
\_\_\_\_\_, U. S. N.

NAVY DEPARTMENT,  
BUREAU OF MEDICINE AND SURGERY,  
\_\_\_\_\_, 188-.

The public exigency requires the immediate delivery of the above articles; they will be procured by open purchase, and the proposition of \_\_\_\_\_ to furnish the same for the sum of \_\_\_\_\_ is accepted.

\_\_\_\_\_,  
*Chief of Bureau.*

**Req. Form 4.—Special Requisition for Supplies Exempt by Law from Advertisement.**

[Quadruplicate.]

No. —. U. S. \_\_\_\_\_, \_\_\_\_\_, 188-.

SIR: The following medical supplies are required for use of the \_\_\_\_\_.

Respectfully,

\_\_\_\_\_,  
\_\_\_\_\_, U. S. N.

To SURGEON-GENERAL U. S. NAVY.

Quantity.		Quantity.

Approved, \_\_\_\_\_, 188-; to be furnished by \_\_\_\_\_.

\_\_\_\_\_,  
*Surgeon-General U. S. Navy.*

**Bill Form 1.—Contract Voucher.**

[Triplicate.]

U. S. \_\_\_\_\_, 188-

*Navy Department, Bureau of Medicine and Surgery, to \_\_\_\_\_,  
Dr.*For use at the U. S. \_\_\_\_\_.  
Appropriation : \_\_\_\_\_.

Articles.	Cost.	Articles.	Cost.
	\$	Bro't forward,	\$

Having fully examined the articles above charged, — certify that they were of good quality, and in all respects in conformity with written contract of \_\_\_\_\_, 188-

\_\_\_\_\_, *U. S. N.*  
\_\_\_\_\_, *U. S. N.*

Received the above articles in good order at \_\_\_\_\_.  
\_\_\_\_\_, *U. S. N.*

NAVY DEPARTMENT,  
BUREAU OF MEDICINE AND SURGERY,  
\_\_\_\_\_, 188-

Approved in triplicate for \_\_\_\_\_ dollars and \_\_\_\_\_ cents, payable by Pay- \_\_\_\_\_ U. S. Navy, Navy Pay Office at \_\_\_\_\_, from the above appropriation.

\_\_\_\_\_,  
*Chief of Bureau.*

Received, \_\_\_\_\_, 188-, from Pay- \_\_\_\_\_, U. S. N., \_\_\_\_\_ dollars and \_\_\_\_\_ cents, in full of the above bill.  
\_\_\_\_\_.



**Bill Form 2.—Special Exigency Voucher.**

[Triplicate.]

U. S. \_\_\_\_\_, 188-.

Navy Department, Bureau of Medicine and Surgery, to \_\_\_\_\_,  
Dr.

Appropriation: \_\_\_\_\_.

Service performed.	Amount.	Service performed.	Amount.
	\$	Bro't forward,	\$

SIR: The public exigency requires the immediate performance of the above work, and your proposition to do the same for the sum of \$\_\_\_\_\_ is accepted.

\_\_\_\_\_, U. S. N.

To \_\_\_\_\_,  
\_\_\_\_\_.

I certify that the material herein charged for was received, and the work satisfactorily performed. The charges are reasonable and the bill is correct. There was not time for procurement of approved requisition.

\_\_\_\_\_, U. S. N.

NAVY DEPARTMENT,  
BUREAU OF MEDICINE AND SURGERY,  
\_\_\_\_\_, 188-.

Approved in triplicate for \_\_\_\_\_ dollars and \_\_\_\_\_ cents, payable by Pay- \_\_\_\_\_, U. S. N., Navy Pay Office at \_\_\_\_\_, from the above appropriation.

\_\_\_\_\_,  
Chief of Bureau.

Received, \_\_\_\_\_, 188-, from Pay- \_\_\_\_\_, U. S. N.,  
\_\_\_\_\_ dollars and \_\_\_\_\_ cents, in full for the above bill.  
\$\_\_\_\_\_.

\_\_\_\_\_.

**Bill Form 3.—Special Exigency Voucher.**

[Triplicate.]

U. S. \_\_\_\_\_, 188-.

Navy Department, Bureau of Medicine and Surgery, to \_\_\_\_\_,  
Dr.

Appropriation : \_\_\_\_\_.

Articles furnished.	Amount.	Articles furnished.	Amount.
	\$	Bro't forward,	\$

SIR: The public exigency requires the immediate delivery of the above-mentioned articles, and your proposition to furnish the same for the sum of \$\_\_\_\_\_ is accepted.

\_\_\_\_\_, U. S. N.

To \_\_\_\_\_,  
\_\_\_\_\_.

I certify that the articles herein charged for have been received, inspected, and accepted; that there was not time for procurement of approved requisition; and that the charges are reasonable and the bill is correct.

\_\_\_\_\_, U. S. N.

NAVY DEPARTMENT,  
BUREAU OF MEDICINE AND SURGERY,  
\_\_\_\_\_, 188-.

Approved in triplicate for \_\_\_\_\_ dollars and \_\_\_\_\_ cents, payable by Pay-\_\_\_\_\_, U. S. N., Navy Pay Office at \_\_\_\_\_, from the above appropriation.

\_\_\_\_\_,  
Chief of Bureau.

Received, \_\_\_\_\_, 188-, from Pay-\_\_\_\_\_, U. S. N.,  
\_\_\_\_\_ dollars and \_\_\_\_\_ cents, in full of the above bill.  
\$\_\_\_\_\_.

\_\_\_\_\_.

**Bill Form 4.—Voucher for Repairs.**

[Triplicate.]

U. S. ———, 188 .

*Navy Department, Bureau of Medicine and Surgery, to ———, Dr.*

For repairs at ———.

Appropriation: ———.

Repairs made.	Amount.	Repairs made.	Amount.
	\$	Bro't forward,	\$

U. S. ———, 188-.

I certify that I have inspected and approved the above-mentioned repairs, which have been satisfactorily performed in accordance with provisions of requisition No. ———.

—————,  
U. S. N.

NAVY DEPARTMENT,  
BUREAU OF MEDICINE AND SURGERY,  
—————, 188-.

Approved in triplicate for ——— dollars and ——— cents, payable by Pay- ———, U. S. Navy, Navy Pay Office at ———, from the above appropriation.

—————,  
*Chief of Bureau.*

Received, ———, 188-, from Pay- ———, U. S. N.,  
— dollars and — cents, in full of the above bill.

§——

**Bill Form 5.—Open Purchase Voucher.**

[Triplicate.]

U. S. \_\_\_\_\_, 188-.

Navy Department, Bureau of Medicine and Surgery, to \_\_\_\_\_, Dr.

For use at \_\_\_\_\_.

Appropriation: \_\_\_\_\_.

Articles.	Amount.	Articles.	Amount.
	\$	Bro't forward,	\$

U. S. \_\_\_\_\_, 188-.

I certify that I purchased the above articles at the prices above charged, amounting in all to \_\_\_\_\_ dollars and \_\_\_\_\_ cents; that these prices are reasonable, and are the lowest rates at which the articles could be obtained.

\_\_\_\_\_  
U. S. N.

U. S. \_\_\_\_\_, 188-.

I certify that I have received, inspected, and accepted the above-mentioned articles, which \_\_\_\_\_ of good quality.

\_\_\_\_\_  
U. S. N.

NAVY DEPARTMENT,  
BUREAU OF MEDICINE AND SURGERY,  
\_\_\_\_\_, 188-.

Approved in triplicate for \_\_\_\_\_ dollars and \_\_\_\_\_ cents, payable by Pay- \_\_\_\_\_, U. S. N., Navy Pay-Office at \_\_\_\_\_, from above appropriation.

\_\_\_\_\_  
Chief of Bureau.

Received, \_\_\_\_\_, 188-, from Pay \_\_\_\_\_, U. S. N.,  
\_\_\_\_\_ dollars and \_\_\_\_\_ cents, in full of the above bill.

\$ \_\_\_\_\_

**Bill Form 6.—Personal Service Voucher.**

[Triplicate.]

U. S. \_\_\_\_\_, 188-.

*Navy Department, Bureau of Medicine and Surgery, to \_\_\_\_\_ Dr.*

Service performed at \_\_\_\_\_.

Appropriation : \_\_\_\_\_.

Kind of service.	Amount.	Kind of service.	Amount.
	\$	Bro't forward,	\$

\_\_\_\_\_, 188-.

I certify that the above-mentioned service has been satisfactorily performed, and the charges are reasonable.

\_\_\_\_\_,  
U. S. N.

NAVY DEPARTMENT,  
BUREAU OF MEDICINE AND SURGERY,  
\_\_\_\_\_, 188-.

Approved in triplicate for \_\_\_\_\_ dollars and \_\_\_\_\_ cents, payable by Pay- \_\_\_\_\_, U. S. Navy, Navy Pay Office at \_\_\_\_\_, from the above appropriation.

\_\_\_\_\_,  
Chief of Bureau.

Received, \_\_\_\_\_, 188-, from Pay- \_\_\_\_\_, U. S. N.,  
\_\_\_\_\_ dollars and \_\_\_\_\_ cents, in full for the above bill.  
\$\_\_\_\_\_.

\_\_\_\_\_.

**Bill Form 7.—Open Purchase Voucher for Supplies Exempt by Law from Advertisement.**

[Triplicate.]

U. S. \_\_\_\_\_, 188-\_\_\_\_\_.  
*Navy Department, Bureau of Medicine and Surgery, to \_\_\_\_\_,*  
*Dr.*

Appropriation: \_\_\_\_\_.

Amount.		Amount.	
\$		Bro't forward,	\$

I certify that I purchased the above articles at the prices above charged, amounting in all to \_\_\_\_\_ dollars and \_\_\_\_\_ cents; that those prices are reasonable, and are the lowest rates at which the articles could be obtained.

\_\_\_\_\_,  
 \_\_\_\_\_, U. S. N.

NAVY YARD (OR U. S. S.), \_\_\_\_\_,  
 \_\_\_\_\_, 188-\_\_\_\_\_.

Having fully examined the articles above charged — certify that \_\_\_\_\_ of good quality, and conformable in all respects to the annexed order.

\_\_\_\_\_,  
 \_\_\_\_\_, U. S. N.

Received the above articles in good order at \_\_\_\_\_, this \_\_\_\_\_ day of \_\_\_\_\_, 188-\_\_\_\_\_.

\_\_\_\_\_,  
 \_\_\_\_\_, U. S. N.

NAVY DEPARTMENT, BUREAU OF \_\_\_\_\_,  
 \_\_\_\_\_, 188-\_\_\_\_\_.

Approved in triplicate for \_\_\_\_\_ dollars and \_\_\_\_\_ cents, payable by Pay- \_\_\_\_\_, U. S. N., at \_\_\_\_\_, from above appropriation.

\_\_\_\_\_,  
*Chief of Bureau.*

Received, \_\_\_\_\_, 188-\_\_\_\_\_, from Pay- \_\_\_\_\_, U. S. N., \_\_\_\_\_ dollars and \_\_\_\_\_ cents, in full of the above bill.

**Relative Humidity Table.**

*Table of the relative humidity given by the difference between the dry and wet bulb.*

		Difference between the dry and wet bulb.															
		0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Temperature of the dry bulb.	90.....	100	95	90	85	81	77	73	69	65	62	59	56	53	50	47	44
	89.....	100	95	90	85	81	77	73	69	65	61	58	55	52	49	46	43
	88.....	100	95	90	85	81	77	73	69	65	61	58	55	52	49	46	43
	87.....	100	95	90	85	81	77	73	68	64	61	58	55	52	49	46	43
	86.....	100	95	90	85	80	76	72	68	64	61	58	55	52	49	46	43
	85.....	100	95	90	85	80	76	72	68	64	60	57	54	51	48	45	43
	84.....	100	95	90	85	80	76	72	68	64	60	57	54	51	48	45	42
	83.....	100	95	90	85	80	76	72	68	64	60	57	54	51	48	45	42
	82.....	100	95	90	85	80	76	72	68	64	60	56	53	50	47	44	41
	81.....	100	95	90	85	80	75	71	67	63	59	56	53	50	47	44	41
	80.....	100	95	90	85	80	75	71	67	63	59	56	53	50	47	44	41
	79.....	100	95	90	85	80	75	71	67	63	59	56	53	50	47	44	41
	78.....	100	94	89	84	79	75	71	67	63	59	56	53	50	47	44	41
	77.....	100	94	89	84	79	75	71	67	63	59	56	53	50	47	44	41
	76.....	100	94	89	84	79	75	71	67	63	59	55	52	49	46	43	40
	75.....	100	94	89	84	79	74	70	66	62	58	55	52	49	46	43	40
	74.....	100	94	89	84	79	74	70	66	62	58	55	52	48	45	43	40
	73.....	100	94	89	84	79	74	70	66	62	58	54	51	48	45	42	40
	72.....	100	94	89	84	79	74	70	66	62	58	54	51	48	45	42	39
	71.....	100	94	88	83	78	73	69	65	61	57	53	50	47	44	41	38
70.....	100	94	88	83	78	73	69	65	61	57	53	50	47	44	41	38	
69.....	100	94	88	83	78	73	68	64	60	56	53	50	47	44	41	38	
68.....	100	94	88	83	78	73	68	64	60	56	52	49	46	43	40	37	
67.....	100	94	88	83	78	73	68	64	60	56	52	49	46	43	40	37	
66.....	100	94	88	83	78	73	68	64	60	56	52	49	46	43	40	37	

Relative humidity; saturation = 100.

65	100	94	88	83	78	73	68	63	59	55	51	48	45	42	39	36
64	100	94	88	82	77	72	67	63	59	55	51	48	44	42	39	36
63	100	94	88	82	77	72	67	63	59	55	51	47	44	41	38	35
62	100	94	88	82	77	72	67	62	58	55	50	47	44	41	38	35
61	100	94	88	82	77	72	67	62	58	54	50	47	44	41	38	35
60	100	94	88	82	76	71	66	62	58	54	50	46	43	40	37	34
59	100	94	88	82	76	71	66	61	57	53	49	46	43	40	37	34
58	100	93	87	81	76	71	66	61	57	53	49	45	42	39	36	33
57	100	93	87	81	75	70	65	61	57	53	49	45	42	39	36	33
56	100	93	87	81	75	70	65	60	56	52	48	44	41	38	35	32
55	100	93	87	81	75	70	65	60	56	52	48	44	41	38	35	32
54	100	93	86	80	74	69	64	59	55	51	47	43	40	37	34	31
53	100	93	86	80	74	69	64	59	55	51	47	43	39	36	33	30
52	100	93	86	80	74	69	64	59	54	50	46	42	39	36	33	30
51	100	93	86	80	74	68	63	58	54	50	46	42	36	35	32	29
50	100	93	86	80	74	68	63	58	54	49	45	41	37	34	31	28
49	100	93	86	79	73	67	62	57	53	49	45	41	37	34	31	28
48	100	93	86	79	73	67	62	57	52	48	44	40	36	33	30	27
47	100	93	86	79	73	67	61	56	51	47	43	39	26	33	30	27
46	100	93	86	79	73	67	61	56	51	47	43	39	26	33	30	27
45	100	92	85	78	72	66	60	55	50	46	42	38	34	31	28	25
44	100	92	84	78	71	65	59	54	49	45	41	37	34	31	28	25
43	100	92	84	78	71	65	59	54	49	45	41	37	34	31	28	25
42	100	92	84	78	71	65	60	54	49	44	40	36	43	30	27	24
41	100	92	84	77	70	64	58	53	48	43	39	35	41	28	25	22
40	100	92	84	77	69	63	57	51	46	42	38	33	31	28	25	22
39	100	92	84	77	69	63	57	51	46	42	38	33	31	28	25	22
38	100	91	83	75	68	62	56	50	45	41	37	34	31	28	25	22
37	100	91	83	75	68	61	55	49	44	39	35	31	28	25	22	19
36	100	91	82	74	66	59	53	47	42	38	34	31	28	25	22	19
35	100	90	80	72	66	59	53	47	42	38	34	31	28	25	22	19
34	100	89	79	72	66	59	53	47	42	38	34	31	28	25	22	19
33	100	80	78	70	66	59	53	47	42	38	34	31	28	25	22	19
32	100	87	75	70	66	59	53	47	42	38	34	31	28	25	22	19



### Instructions for Atmospheric Observations.

For ascertaining the amount of carbonic acid in the air the following apparatus is supplied:

- Two glass jars, cubic capacity marked in cubic centimeters.
- India-rubber stoppers, and sheet India rubber to tie over neck of jars.
- Glass measure graduated to 60 c. c.
- One Mohr's burette, 60 c. c. graduated into tenths.
- Glass rods.
- Glass bottle of one liter capacity.
- Bottle containing papers of crystallized oxalic acid of 2.25 grams each.
- Bottle containing litmus or tumeric paper.
- A small bellows, or, in its absence, a Davidson's syringe may be used.
- Lime-water and distilled water.

Directions: Pettenkofer's method is to be followed. For those not familiar with it the following process, extracted from Wilson's Hand-Book of Hygiene, is recommended:

The analysis depends on the relative alkalinity of lime-water before and after it has absorbed the carbonic acid in the sample of air examined. 2.25 grams of crystallized oxalic acid are dissolved in 1 liter of distilled water; 1 c. c. of this solution exactly neutralizes 1 milligram of lime, and hence the amount of lime in a given quantity of lime-water can be determined by adding the solution of oxalic acid until the point of neutralization is reached. The amount of oxalic acid required for neutralization expresses the alkalinity of the lime-water. If the alkalinity of the lime-water be known before and after it has absorbed the carbonic acid in the air contained in the glass jar, the difference will give the amount of lime in milligrams which has united with the carbonic acid, and the amount of the latter is obtained by calculating according to the atomic weights.

The jar should be perfectly clean and dry. The air to be examined is forced into the jar by a pair of bellows, or a bellows-pump may be used. In either case the nozzle should reach the bottom of the jar.

After the jar has been filled, 60 c. c. of lime-water are introduced, the mouth of the jar closed by the stopper, and the stopper secured by a tightly-fitting India-rubber cap. The jar is then well shaken so that the lime-water is made to thoroughly wash the contained air, and afterward is left to stand at least eight hours and not more than twenty-four; 60 c. c. are introduced in order that 30 may be taken out for analysis.

Thirty cubic centimeters of lime-water are poured into the graduated glass and its alkalinity determined by the test solution. Then 30 c. c. are taken from the jar and the alkalinity also determined. The difference is doubled to account for the 30 c. c. left in the jar, and the product gives the amount of lime which has combined with the carbonic acid. The amount of the latter is obtained by converting weight into volume according to the atomic weights, and in one sum by the factor .4205.

The following rule will simplify the calculation: Multiply the difference between the alkalinity of the lime-water before and after it has been placed in the jar by .841 and divide this sum by the number of cubic centimeters in the jar, minus 60. The result will be the ratio of carbonic acid per 1,000 volumes.

A correction must be made for temperature as it is above or below the standard of 62° Fahrenheit. As the coefficient of expansion of air is .0020361 for every degree of Fahrenheit, the rule for correction may be stated with sufficient accuracy thus: For every 5° Fahrenheit above 62° add 1 per cent. to the amount of carbonic acid calculated as above, and deduct the same percentage for every 5° below 62°.

The formula for the correction for pressure is as follows:

$$30 : \text{observed height of bar} :: \text{capacity} : z.$$

The result expressed by  $z$  is substituted for the actual capacity of the jar in the calculation for carbonic acid.

Supply Table.

Articles.	Less than 50 men.	50 to 100 men.	100 to 200 men.	200 to 400 men.	400 and upwards.
<b>MEDICINES.</b>					
Acaciæ pulvis, 200-gram bottles..... gm.	200	200	400	800	800
Acidum aceticum, 200-c. c. bottles..... c. c.	200	200	200	400	400
Acidum carbolic. cryst., 100-gram g. s. bot. .... gm.	100	100	100	200	300
Acidum carbolicum imp., 500-c. c. bottles .. c. c.	500	1,000	2,000	4,000	5,000
Acidum citricum, 200-gram bottles..... gm.	200	200	200	400	400
Acidum muriaticum, 100-c. c. g. s. bottles... c. c.	100	100	100	100	100
Acidum nitricum, 100-c. c. g. s. bottles..... c. c.	100	100	100	200	400
Acid salicylicum, pulv., 100-gram bottles... gm.	200	300	300	400	600
Acidum salicylicum, 0.3-gram pil. .... No.	100	200	400	600	800
Acidum sulphuricum, 100-c. c. g. s. bottles.. c. c.	100	100	100	100	200
Acidum sulphur. aromat., 100-c. c. g. s. bot. . c. c.	100	100	100	200	400
Acidum sulphur. imp., 500-c. c. g. s. bottles.. c. c.	2,000	4,000	4,000	6,000	8,000
Acidum tannicum, 25-gram bottles..... gm.	25	50	100	100	150
Acidum tartaricum, 200-gram bottles..... gm.	200	200	400	800	1,600
Aconiti radice ext. fluid, 50-c. c. bottles .. c. c.	50	50	50	100	150
Æther, 200-cc. tins..... c. c.	200	400	1,600	2,000	3,000
Ætheris spiritus comp., 100-c. c. g. s. bot. . c. c.	100	100	200	200	400
Ætheris spiritus nitros., 200-c. c. g. s. bot. . c. c.	200	200	400	1,000	1,600
Alcohol, 500-c. c. bottles..... c. c.	500	2,000	4,000	6,000	8,000
Alumen, 200-gram bottles..... gm.	200	200	200	400	800
Ammonæ aqua, 200-c. c. g. s. bottles..... c. c.	200	400	800	1,400	1,800
Ammonii carbonas, 100-gram bottles..... gm.	100	200	200	400	400
Ammonii chloridum, 200-gram bottles..... gm.	200	200	200	400	600
Ammonia spirit. arom., 100-c. c. g. s. bottles. c. c.	100	100	200	300	400
Antimonii et potass. tart., 25-gram bottles. gm.	25	25	25	25	25
Argenti nitras, 25-gram bottles..... gm.	25	25	25	25	25
Argenti nitras fusa, 25-gram bottles..... gm.	25	25	50	50	75
Atropiæ sulphas, 5-gram bottles..... gm.	5	5	5	5	5
Atropiæ sulphas, 0.001-gram pills..... No.	100	100	100	200	200
Belladon. ext. alc., 25-gram jars..... gm.	25	25	25	25	25
Belladon. ext. fl., 100-c. c. bottles..... c. c.	100	100	100	200	200
Bismuth. subcarb., 25-gram bottles..... gm.	50	50	50	100	150
Buchu ext. fluid., 200-c. c. bottles..... c. c.	200	400	400	400	600
Camphora, 100-gram bottles..... gm.	100	100	200	400	400
Cannabis indic. ext., 0.03-gram pills..... No.	100	100	100	200	300
Cantharidis tinct., 50-c. c. bottles..... c. c.	50	50	50	100	150
Capsici. ext. fluid., 100-c. c. bottles..... c. c.	100	100	200	400	400
Chloral hydras, 25-gram bottles..... gm.	50	100	100	150	150
Chloroformum imp., 500-c. c. bottles..... c. c.	500	1,000	1,000	1,500	1,500
Chloroformum purificat., 200-c. c. g. s. bot. . c. c.	400	400	600	1,000	1,000
Cinchonæ ext. fluid. comp., 200-c. c. bottles.. c. c.	200	400	400	800	1,000
Cinnamoni oleum, 25-c. c. bottles..... c. c.	25	25	25	25	25
Colchici sem. ext. fluid, 100-c. c. bottles..... c. c.	100	200	200	300	300

## Supply Table—Continued.

Articles.	Less than 50 men.	50 to 100 men.	100 to 200 men.	200 to 400 men.	400 and upwards.	
<b>MEDICINES—Continued.</b>						
Collodium, 50-c. c. bottles . . . . .	c. c.	50	50	50	100	150
Collodium cum cantharide, 50-c. c. bottles . . . . .	c. c.	50	50	100	100	150
Colocynth, ext. comp., 25-gram jar . . . . .	gm.	25	50	75	100	125
Copaiba, 500-c. c. bottles . . . . .	c. c.	500	500	1,500	2,000	3,000
Cosmoline, 500-gram jars . . . . .	gm.	1,000	1,500	2,500	4,000	5,000
Creta præparata, 200-gram bottles . . . . .	gm.	200	200	400	600	800
Cubebæ oleo-resina, 100-c. c. bottles . . . . .	c. c.		100	100	100	200
Cupri sulphas, 50-gram bottles . . . . .	gm.		50	50	50	50
Digitalis tinctura, 50-c. c. bottles . . . . .	c. c.		50	50	100	150
Ergotæ, ext. fluid., 100-c. c. bottles . . . . .	c. c.		100	100	200	200
Ferri chloridi tinctura, 200-c. c. g. s. bot. . . . .	c. c.	200	400	600	800	1,000
Ferri subsulph. liq., 25-c. c. g. s. bottles . . . . .	c. c.	25	25	50	75	100
Ferri sulphas, box . . . . .	kg.		10	20	25	40
Filicis oleo-resina, 25-c. c. bottles . . . . .	c. c.		25	25	25	25
Gentianæ, ext. fluid. comp., 200-c. c. bot. . . . .	c. c.		200	400	800	1,000
Glycerina, 200-c. c. bottles . . . . .	c. c.		400	800	1,200	2,000
Glycyrrhizæ ext. pulv . . . . .	gm.	100	200	800	1,600	2,400
Glycyrrhizæ pulvis, 100-gram bottles . . . . .	gm.		100	100	200	200
Hydrarg. chlor. corros., 25-gram bottles . . . . .	gm.		25	50	75	100
Hydrarg. chlor. mite., 50-gram bottles . . . . .	gm.		50	50	100	150
Hydrarg. iodid. viride, 0.01-gram pil . . . . .	No.		200	300	400	500
Hydrarg. nitrat. unguent, 50-gram jars . . . . .	gm.		50	50	100	150
Hydrarg. pilul, 50-gram jars . . . . .	gm.	50	50	100	150	150
Hydrarg. pilul, 0.03-gram pil . . . . .	No.	100	200	300	400	500
Hydrarg. unguent, 100-gram jars . . . . .	gm.	100	200	400	800	1,000
Hyoscyami ext., 50-gram jars . . . . .	gm.		50	50	100	150
Iodinium, 50-gram bottles . . . . .	gm.		50	50	50	50
Iodoformum, 25-gram bottles . . . . .	gm.			25	50	50
Ipecacuanhæ, ext. fluid., 50-c. c. bottles . . . . .	c. c.		50	50	100	150
Ipecacuanhæ pulvis, 100-gram bottles . . . . .	gm.	100	100	100	200	200
Ipecacuanhæ pulvis comp., 100-gram bot . . . . .	gm.	100	100	100	200	300
Lini farina, 2 kilo. tins . . . . .	kg.	2	4	10	12	20
Linum, 2-kilo. tins . . . . .	kg.	2	2	2	4	6
Lithii carb., 25-gram bottles . . . . .	gm.		25	50	50	75
Magnesia, 100-gram bottles . . . . .	gm.		100	200	300	300
Magnesi. sulph., 2-kilo. tins . . . . .	kg.	2	4	4	8	12
Manganes. ox. nig., 2-kilo. box . . . . .	kg.		2	4	6	10
Menth. pip. ol., 25-c. c. bottles . . . . .	c. c.		25	25	50	75
Morphiæ sulphas, 5-gram bottles . . . . .	gm.	5	5	10	15	20
Morphiæ sulphas, 0.01-gram pil . . . . .	No.		400	600	800	1,000
Morrhue oleum, 500-c. c. bottles . . . . .	lt.	1	3	6	9	12
Nucis vomicæ ext. fl., 25-c. c. bottles . . . . .	c. c.		25	25	25	25
Nucis vomicæ ext. pills, 0.01-gram pil . . . . .	No.		200	200	300	400
Olivæ oleum, 500 c. c. bottles . . . . .	lt.	$\frac{1}{2}$	1	2	4	6
Opii pulvis, 50-gram bottles . . . . .	gm.	50	50	100	150	150
Opii tinctura, 500-c. c. bottles . . . . .	c. c.	500	1,000	1,000	2,000	3,000
Opii tinctura camph., 500-c. c. bottles . . . . .	c. c.	500	1,000	2,000	3,000	4,000

## Supply Table—Continued.

Articles.	Less than 50 men.	50 to 100 men.	100 to 200 men.	200 to 400 men.	400 and upwards.
<b>MEDICINES—Continued.</b>					
Pepsina, 25-gram bottles .....	gm.	25	25	50	75
Pil. aloin c., 0.02 gram pil. ....	No.	100	200	400	800
Pil. cath. c., 25-gram bottles .....	gm.	25	25	50	75
Pil. phosphor, 0.002-gram pil .....	No.	200	300	400	500
Plumbi acetat, 200-gram bottles .....	gm.	200	200	400	800
Podophylli resina, 25-gram bottles .....	gm.	25	25	25	50
Potass. arsenit. liq., 100-c. c. bottles .....	c. c.	100	100	200	200
Potass. acetat, 200-gram bottles .....	gm.	200	200	400	400
Potass. bicarb., 200-gram bottles .....	gm.	200	400	400	400
Potass. bichromat, 200-gram bottles .....	gm.	200	200	400	400
Potass. bitart., 200-gram bottles .....	gm.	200	200	400	400
Potass. bromidum, 200-gram bottles .....	gm.	200	400	600	800
Potass. chlorat, 200-gram bottles .....	gm.	200	200	400	400
Potass. cyanidum, 25-gram bottles .....	gm.	25	25	50	50
Potass. et sod. tart., 500-gram bottles .....	gm.	500	1,000	2,000	3,000
Potass. iodidum, 200-gram bottles .....	gm.	400	800	1,000	2,400
Potass. nitrat, 100-gram bottles .....	gm.	100	100	200	300
Potass. permanganat, 25-gram bottles .....	gm.	25	25	50	100
Quiniæ sulphat, 25-gram bottles .....	gm.	50	100	150	250
Quiniæ sulphat, 0.2-gram pil .....	No.	100	300	600	900
Quiniæ sulphat, 0.1 gram pil .....	No.	100	300	600	900
Ricini oleum, 500-c. c. bottles .....	lt.	1	3	6	12
Rhei ext. fluid, 100-c. c. bottles .....	c. c.	100	100	200	300
Rhei pulvis, 100-gram bottles .....	gm.	100	100	200	200
Santoninum, 0.03-gram pil .....	No.	100	100	200	200
Sapo, 500-gram papers .....	gm.	500	1,000	2,000	3,000
Saponis linimentum, 500-c. c. bottles .....	c. c.	500	1,000	2,000	3,000
Scillæ syrupus, 500 c. c. bottles .....	c. c.	500	1,000	2,000	3,000
Senegæ ext. fluid., 200 c. c. bottles .....	c. c.	200	200	400	400
Sennæ ext. fluid. comp., 200 c. c. bottles .....	c. c.	200	200	400	400
Sinapis pulvis, 1-kilo tins .....	kg.	1	1	1	2
Sinapis emplastrum, paper, boxes .....	No.	1	2	4	6
Sodii bicarbonat, 500-gram bottles .....	gm.	500	500	1,000	1,500
Sodii borat, 200-gram bottles .....	gm.	200	400	800	1,000
Sodæ chlor. liquor, 500 c. c. g. s. bottles .....	c. c.	1,000	2,000	3,000	3,000
Strychnia, 5-gram bottles .....	gm.	5	5	5	5
Sulphur .....	gm.	500	500	1,000	1,000
Sulphur, roll .....	gm.	2,000	5,000	8,000	10,000
Terebinth. oleum, 500-c. c. bottles .....	lt.	$\frac{1}{2}$	1	1	2
Theobromæ oleum, 50-gram bottles .....	gm.	50	50	100	150
Tiglii oleum, 25 c. c. bottles .....	c. c.	25	25	25	25
Valerianæ ext. fluid., 200 c. c. bottles .....	c. c.	200	200	400	400
Verat. virid. ext. fluid, 25 c. c. bottles .....	c. c.	25	25	25	25
Virus vaccinum (special letter) .....					
Zinci carb. præcip., 25-gram bottles .....	gm.	25	25	50	75
Zinci sulphat, 25-gram bottles .....	gm.	25	50	75	100
Zingiberis ext. fluid, 200 c. c. bottles .....	c. c.	200	200	400	800

Supply Table—Continued.

Articles.	Less than 50 men.	50 to 100 men.	100 to 200 men.	200 to 400 men.	400 and upwards.
<b>HOSPITAL STORES.</b>					
Arrow-root, 500-gram tins..... gm.	500	500	500	1,000	1,000
Barley, 500-gram tins..... gm.		500	1,000	1,500	2,000
Brandy, 500-c. c. bottles..... lt.		4	6	12	15
Corn-starch, 500-gram tins..... gm.		1,000	2,000	2,000	2,000
Extract of beef, 120 c. c. bottles..... bots.	3	6	12	24	36
Extract of malt, 500-c. c. bottles..... c. c.		3,000	5,000	6,000	8,000
Milk, 500-c. c. cans..... c. c.		2,000	3,000	4,000	6,000
Nutmegs..... gm.		25	25	25	25
Sugar, white, 2-kilo. cans..... kg.		2	2	4	6
Tapioca, 500-gram tins..... gm.		500	500	500	1,000
Tea, black, 500-gram tins..... gm.		500	500	1,000	1,000
Whisky, 500-c. c. bottles..... lt.	2	6	12	15	18
Wine, port, 500-c. c. bottles..... lt.		3	4	6	9
Wine, sherry, 500-c. c. bottles..... lt.		3	4	8	10
<b>SURGICAL INSTRUMENTS.</b>					
Aspirator..... No.			1	1	1
Atomizer, steam..... No.			1	1	1
Bougies, gum..... No.					
Bougies, o. p..... No.					
Catheters, gum..... No.					
Catheters, o. p..... No.					
Catheters, silver..... No.	1	2	2		
Case, autopsic..... No.				1	1
Case, dental, No. 1..... No.			1	1	1
Case, eye and ear..... No.				1	1
Case, expeditionary and boat..... No.	1	1	1	1	1
Case, general operating..... No.				1	1
Case, general operating, small..... No.		1	1		
Case, pocket..... No.	1	1	1	2	2
Case, urinary..... No.				1	1
Cupping-glasses..... No.	4	6	12	18	18
Galvanic battery..... No.			1	1	1
Lancets, thumb..... No.	1	2	2	2	2
Laryngoscope..... No.			1	1	1
Microscope (special requisition)..... No.					
Ophthalmoscope..... No.			1	1	1
Razor..... No.	1	1	1	1	1
Razor-strop..... No.	1	1	1	1	1
Scarificator..... No.		1	1	1	1
Speculum, anal..... No.			1	1	1
Speculum, aural..... set.	1	1	1		
Stethoscope, double..... No.		1	1	1	1
Stomach-pump..... No.	1	1	1	1	1
Syringes, enema..... No.	1	1	1	1	1
Syringes, hypodermic..... No.	1	1	2	2	2
Syringes, p., glass..... No.		2	2	3	4
Syringes, p., rubber..... No.	2	4	6	9	12

Supply Table—Continued.

Articles.	Less than 50 men.	50 to 100 men.	100 to 200 men.	200 to 400 men.	400 and upwards.
SURGICAL INSTRUMENTS—Continued.					
Syringes, self-injecting.....	No. 1	1	2	3	4
Thermometers, clinical.....	No. 1	1	1	2	2
Tourniquets, field.....	No. 4	10	20	30	30
Tourniquets, screw.....	No. ....	4	8	12	16
Urinometer.....	No. ....	1	1	.....	.....
SURGICAL APPLIANCES.					
Antiseptic outfit.....	No. 1	1	2	3	4
Bandages, Esmarch's.....	No. 1	1	1	1	1
Bandage roller.....	No. 1	1	1	1	1
Bandages, suspensory.....	No. ....	4	6	8	10
Binder's boards.....	No. ....	2	2	4	4
Buckskins.....	No. ....	1	1	2	2
Cotton batting, $\frac{1}{2}$ -kilo. packages.....	kg. $\frac{1}{2}$	1	1	2	2
Cotton, absorbent.....	kg. $\frac{1}{2}$	1	1	2	3
Flannel.....	meters. 2	5	5	8	10
Gypsum, calcined, 2-kilo. tins.....	kg. ....	2	2	4	4
Ligature, silk.....	gm. 4	8	8	16	16
Ligature, wire, 1-meter rolls.....	m. ....	1	1	2	2
Lint, patent, $\frac{1}{2}$ -kilo. rolls.....	kg. $\frac{1}{2}$	2	2	4	4
Muslin.....	meters. 4	40	80	120	120
Muslin, oiled, 1-meter rolls.....	m. 1	3	4	5	5
Needles, thimble, and thread.....	sets. 1	1	1	1	1
Pencils, hair.....	No. 2	6	6	12	12
Pins.....	gm. 50	100	150	200	250
Plaster, adhesive, 5-meter rolls.....	m. 2	5	5	10	10
Plaster, adhesive, rubber, 5-meter rolls, 3-in. m.	5	5	10	10	15
Plaster, isinglass, 1-meter rolls.....	m. 1	2	3	4	5
Silk, gray.....	m. ....	$\frac{1}{2}$	$\frac{1}{2}$	1	1
Splints.....	sets. 1	1	1	1	1
Sponge, bath.....	gm. 50	100	100	200	300
Sponge, surgical.....	gm. 50	100	100	200	300
Tape.....	pieces. ....	2	2	4	6
Tape-line.....	No. ....	1	1	1	1
Trusses, single.....	No. ....	2	2	4	6
Trusses, double.....	No. ....	1	1	2	2
Tubing, drainage.....	m. 1	1	2	3	4
Wax, yellow.....	gm. ....	100	100	100	100
DISPENSARY FURNITURE.					
Apparatus stand.....	No. ....	.....	1	1	1
Apparatus, atmospheric.....	No. ....	.....	1	1	1
Boat medicine-chest.....	No. ....	1	1	2	2
Bottle-clasps.....	No. ....	.....	.....	.....	.....
Corks, bottle.....	No. ....	50	50	75	100
Corks, vial.....	No. 50	100	150	300	300

Supply Table—Continued.

Articles.	Less than 50 men.	50 to 100 men.	100 to 200 men.	200 to 400 men.	400 and upwards.
DISPENSARY FURNITURE—Continued.					
Cork-extractors .....	No.	1	1	1	1
Cork-screw .....	No.	1	1	1	1
Funnels, glass .....	No.	1	1	2	2
Funnels, gutta-percha .....	No.	1	1	1	1
Gallicups .....	No.	4	4	6	8
Grater, nutmeg .....	No.	1	1	1	1
Lamp, nursery .....	No.	1	1	1	1
Litmus paper, red .....	bot.	1	1	1	1
Litmus paper, blue .....	bot.	1	1	1	1
Measures, tin, 500-c. c. ....	No.	1	1	1	1
Measures, tin, 250-c. c. ....	No.	1	1	1	1
Measures, glass, 250-c. c. ....	No.	1	1	1	1
Measures, glass, 125-c. c. ....	No.	1	1	1	1
Measures, glass, 50-c. c. ....	No.	1	1	1	1
Measures, glass, 25-c. c. ....	No.	1	1	1	1
Measures, glass, 5-c. c. ....	No.	1	1	1	1
Medicine chest .....	No.	1			
Medicine droppers .....	No.	1	2	4	5
Mortar and pestle, glass .....	No.	1	1	1	1
Mortar and pestle, wedgewood .....	No.	1	2	2	2
Percolator .....	No.			1	1
Pill boxes, paper .....	No.	25	50	150	250
Pill boxes, wood .....	No.		15	25	25
Pill tile .....	No.	1	1	1	1
Psychrometer .....	No.		1	1	1
Scales, apothecary's .....	No.		1	1	1
Scales, apothecary's, small .....	No.	1			
Scale-case .....	No.		1	1	1
Scissors, pairs .....	pairs	1	1	2	2
Sheepskins .....	No.		2	4	8
Spatulas, 15 c. m. ....	No.			1	1
Spatulas, 12½ c. m. ....	No.		1	1	1
Spatulas, 10 c. m. ....	No.	1			
Spatulas, 7½ c. m. ....	No.		1	1	1
Spirit-lamp .....	No.		1	1	1
Test case .....	No.			1	1
Test tubes .....	No.		5	10	10
Tubing, glass .....	gm.		125	250	375
Twine .....	gm.		125	250	375
Vials, assorted .....	No.	15	50	70	80
Weights, apothecary's .....	sets		1	1	1
HOSPITAL FURNITURE.					
Ambulance cot .....	No.	1	1	1	1
Basin and pitcher, delf .....	No.		1	1	1
Basins and pitchers, metal .....	No.	1	1	2	3
Basins, tin, dressing .....	No.		2	3	4

Supply Table—Continued.

Articles.	Less than 50 men.	50 to 100 men.	100 to 200 men.	men.	400 and upwards.
HOSPITAL FURNITURE—Continued.					
Bed pans .....	No. 1	1	1	2	2
Bowls, pint .....	No. 2	3	4	4	4
Brush, dust .....	No. 1	1	1	1	1
Buckets, tin .....	No. 1	1	2	2	2
Buckets, wood .....	No. 1	1	2	2	2
Candlesticks .....	No. 1	2	2	4	4
Chairs .....	No. 1	2	2	3	4
Close stool, large .....	No. 1	1	1	1	1
Close stool, small .....	No. 1	1	1	1	1
Cups and saucers .....	No. 2	3	6	6	6
Feeding cups .....	No. 1	1	2	4	4
Filter, water .....	No. 1	1	1	1	1
Knives and forks .....	No. 2	4	6	6	6
Ladle .....	No. 1	1	1	1	1
Lamps, hanging .....	No. 1	2	2	2	2
Lantern, hand .....	No. 1	1	1	1	1
Mugs .....	No. 1	1	2	4	4
Pans .....	No. 1	2	4	4	4
Sauce pans .....	No. 1	2	3	3	3
Shovel, dust .....	No. 1	1	1	1	1
Spit-cups .....	No. 2	4	4	6	6
Spoons, medicine .....	No. 1	2	2	4	6
Spoons, table .....	No. 1	4	4	6	8
Spoons, tea .....	No. 1	4	4	6	8
Table, writing and operating .....	No. 1	1	1	1	1
Table, writing .....	No. 1	1	1	1	1
Tea-pot .....	No. 1	1	1	1	1
Tub, foot .....	No. 1	2	2	4	4
Tumblers .....	No. 1	2	2	4	4
Urinals, glass .....	No. 2	2	2	2	2
Wine-glasses .....	No. 1	2	2	4	4
BEDDING.					
Bed spreads .....	No. 2	4	6	8	8
Blankets .....	No. 2	2	4	6	6
Mattresses, hair .....	No. 2	2	4	6	6
Mattress covers .....	No. 2	2	4	6	6
Pillows .....	No. 2	2	4	6	6
Pillow covers .....	No. 2	2	4	6	6
Pillow cases .....	No. 2	4	8	12	12
Pillow cases, gum .....	No. 1	1	2	2	2
Sheets, cotton .....	No. 4	6	12	24	24
Sheets, gum .....	No. 1	1	1	2	2
Towels .....	No. 4	6	6	12	18
BOOKS.					
Dispensatory .....	No. 1	1	1	1	1
Parke's Hygiene .....	No. 1	1	1	1	1
Quain's Dictionary .....	No. 1	1	1	1	1



Supply Table—Continued.

Articles.	Less than 50 men.	50 to 100 men.	100 to 200 men.	200 to 400 men.	400 and upwards.
STATIONERY.					
Blank books, foolscap, 4-quire .....	No. ....	1	2	2	2
Blank books, foolscap, 2-quire .....	No. ....	1	2	3	3
Blank books, small quarto .....	No. ....	1	2	3	3
Envelopes, official .....	No. ....	25	25	50	100
Envelopes, small .....	No. ....	25	25	50	100
Erasure knife .....	No. ....	1	1	1	1
India rubber .....	pieces .....	1	1	1	1
Ink, black .....	bot. ....	1	1	2	3
Ink, red .....	bot. ....	1	1	1	1
Inkstands .....	No. ....	1	1	2	2
Lead-pencils .....	No. ....	2	2	5	10
Medical Journals .....	No. ....	1	1	2	4
Mucilage .....	bot. ....	1	1	1	1
Paper, blotting .....	qrs. ....	4	4	1	1
Paper, envelope .....	qrs. ....	4	1	2	5
Paper, filtering .....	qrs. ....	1	2	5	5
Paper, foolscap .....	qrs. ....	5	10	10	10
Paper, official, whole sheets .....	qrs. ....	2	5	5	10
Paper, official, half sheets .....	qrs. ....	2	5	10	10
Paper, ruled, note .....	qrs. ....	1	2	5	10
Paper, wrapping, blue .....	qrs. ....	1	2	10	20
Paper, wrapping, white .....	qrs. ....	2	5	5	10
Penholders .....	No. ....	2	3	4	6
Pens, steel .....	box. ....	4	1	1	1
Portfolios .....	No. ....	1	1	1	1
Quills .....	No. ....	25	25	25	25
Rulers .....	No. ....	1	1	1	1

#### Additional Articles for Hospitals and Shore Stations.

Books, press copy, letter .....	No. ....	2
Desk shears .....	No. ....	1
Files, Shipman's .....	No. ....	2
Ink, copying .....	bot. ....	2
Letter clips .....	No. ....	4
Paper-knives, ivory .....	No. ....	2
Paper-fasteners .....	box .....	2
Paper, wrapping, manila .....	quires. ....	4
Paper-weights .....	No. ....	4
Pads, memorandum .....	No. ....	24
Pen-racks .....	No. ....	2
Pins, pyramid .....	No. ....	4
Rubber bands .....	gross .....	2
Tags, marking .....	No. ....	100
Twine, assorted .....	balls .....	3

**Metric System.**

The unit of the *Metric System of Weights and Measures*, is the *Meter*, or the ten-millionth part of the distance from the equator to the north pole measured on an arc of the meridian; and all other measures of length, surface, capacity, and weight are designated by decimal multiples and subdivisions of this unit, and of the *Gram*, which is the weight of one cubic centimeter of distilled water at its maximum density under the pressure of one atmosphere.

The terms in most common use, besides the *Meter* for linear measure, will be the Kilogram, or simply *Kilo*, and its equivalent, the *Liter*, for heavy solids and liquids, and the *Gram* and its equivalent, the Cubic Centimeter, *C. C.*, for smaller quantities.

The <i>Meter</i> is about equal to.....	3 ft. 3 $\frac{3}{8}$ in., or 1. yard.
The <i>Liter</i> is about equal to.....	33 $\frac{4}{5}$ oz., or 1. quart.
The <i>Half-Kilo</i> is about equal to.....	17 $\frac{3}{5}$ oz., or 1. pound.
The <i>Cubic Centimeter</i> , <i>C. C.</i> , is about equal to..	16 $\frac{1}{5}$ ℥.
The <i>Gram</i> is about equal to.....	15 $\frac{1}{2}$ grains.
The Foot is about equal to.....	32 centimeters.
The Ounce and f. ℥ are about equal to.....	32 grams, or 32 c. c.
The Drachm and f. ℥ are about equal to.....	4 grams, or 4 c. c.
The Grain and ℥ are about equal to.....	$\frac{1}{15}$ gram, or $\frac{1}{15}$ c. c.

Hence, to convert English denominations into Grams and Centimeters—

Divide the number of grains by 15; or  
 Multiply the number of drachms by 4; or  
 Multiply the number of ounces by 32.

In writing perscriptions Arabic numerals should be used and precede the abbreviations Gm. C. C., care being also taken to place the decimal points of the several lines under each other, or to indicate their place by a perpendicular line, the fractional subdivisions of the gram or cubic centimeter being on the right and the whole numbers on the left of this line; thus:

℞—Potassii cyanid.....	0		05 gm.
Opil tinct. camph.....	16		00 c. c.
Prun. virg. ext. fl.....	32		00 c. c.
Tolutani syrup.....	32		00 c. c.
Acaciæ syrup.....	48		00 c. c.

**M.**

℞—Hydrarg. chl. mit.....	0		1 gm.
Pepsinæ sacchar.....	10		00 gm.
Magnesiæ.....	5		00 gm.

**M.**

In chart. X divid.

In ordering doses, in the absence of graduated measures—

An ordinary teaspoon may be considered as equivalent to.....	5 c. c.
An ordinary dessertspoon.....	10 c. c.
An ordinary tablespoon.....	20 c. c.
An ordinary wineglass.....	50 c. c.
An ordinary tumbler.....	250 c. c.

The following tables represent in detail the several denominations of the Metric System, with their equivalents in English weights and measures, as legalized by act of Congress:

*Measures of length.*

Denominations.	Abbreviations.	Values.	Equivalents.
Myria-meter	Mm ..	10,000. meters .....	6 21382 miles.
Kilo-meter	Km ...	1,000. meters .....	0. 6213 miles.
Hecto-meter	Hm ..	100. meters .....	328. 08964 feet.
Deka-meter	Dm ...	10. meters .....	32. 8089 feet.
Meter	m .....	1. meter .....	3. 2808 feet.
Deci-meter	dm ...	.1 meter .....	3. 9371 inches.
Centi-meter	cm ...	.01 meter .....	0. 3937 inch.
Milli-meter	mm ...	.001 meter .....	0. 03937 inch.

*Measures of surface.*

Denominations.	Abbreviations.	Values.	Equivalents.
Hect-are	Ha ...	1 sq. hectometer=10,000 sq. meters..	2. 471 acres.
Are	a .....	1 sq. dekameter = 100 sq. meters..	119. 603 sq. yards.
Cent-are	ca .....	1 sq. meter .....	10. 7643 sq. feet.

*Weights.*

Denominations.	Abbreviations.	Values.	Equivalent avoirdupois.	Equivalent apothecary's.
Metric ton	MT ...	1,000,000. grams.	0. 9844 ton....	
Quintal	Q .....	100,000. grams.	220. 46 pounds.	267. 92273 pounds.
Myria-gram	Mg ...	10,000. grams.	22. 0462 pounds.	26. 79227 pounds.
Kilo-gram	Kg ...	1,000. grams.	2. 2046 pounds.	2. 67923 pounds.
Hecto-gram	Hg ...	100. grams.	3. 5274 ounces.	3. 21507 ounces.
Deka-gram	Dg ...	10. grams.	5. 643 drachm.	2. 572 drachms.
Gram	g .....	1. gram..	0. 564 drachm.	15. 43235 grains.
Deci-gram	dg ...	.1 gram..	.....	1. 5432 grains.
Centi-gram	cg ...	.01 gram..	.....	0. 1543 grain.
Milli-gram	mg ...	.001 gram..	.....	0. 0154 grain.

*Measures of capacity.*

Denominations.	Abbreviations.	Values.	Equivalent dry measure.	Equivalent wine measure.
Kilo-liter.....	Kl or St.....	1 cu. meter = 1,000 cu. dm.....	35.3165 cu. feet.....	264.17 gallons.
Hecto-liter.....	Hl.....	100 cu. dm.....	2.8374 bushels.....	26.417 gallons.
Deka-liter.....	Dl.....	10 cu. dm.....	1.1349 pecks.....	2.647 gallons.
Liter.....	l.....	1 cu. dm.....	0.908 quart.....	1.054 quarts.
Deci-liter.....	dl.....	100 c. c.....	6.1022 cu. inches.....	0.845 gill.
Centi-liter.....	cl.....	10 c. c.....	0.6102 cu. inches.....	2.704 flu. dms.
Milli-liter.....	ml or c. c.....	1 cubic centimeter.....	0.061 cu. inches.....	16.231 minims.

*Metric equivalents of English weights and measures.*

Measures.	Gallon.		Quart.	Pint.	Ounce.	Drachm.	Minim.
	Liters.	Liters.					
United States wine.....	3.785	Liters. 0.9465	C. C. 473.25	C. C. 29.57812	C. C. 3.6927	C. C. .06162	
Dry.....	4.403	1.10135	550.67				
Imperial.....	4.543	1.13586	567.93	28.3965	3.5495	.059159	
Beer.....	4.617	1.15438	577.19				
Measures.							
			Pound.	Ounce.	Drachm.	Grain.	
Avoirdupois.....			Grams. 453.59	Grams. 28.34959	Grams. 1.77185	Gram. .....	
Apothecary and Troy.....			373.24	31.10349	3.88794	.0647989	

## CONTENTS OF INSTRUMENT CASES.

**General Operating Case.**

1 large saw.	6 pair serre-fines.
1 butcher's saw with extra blade.	1 straight trocar and canula.
1 metacarpal saw with movable back.	1 curved trocar and canula.
1 chain saw.	2 tracheotomy-tubes.
1 Hey's saw.	1 tongue-depressor.
2 trephines.	12 yards suture-wire.
1 elevator.	2 metal retractors.
3 bone-cutting forceps.	12 surgeon's needles.
3 bone-holding forceps.	6 wire-suture needles and 3 Emmett's.
3 gouges.	1 needle-carrier and cutting-pliers.
4 bone-drills (with one handle).	2 dozen suture-pins.
1 straight knife, 9½-inch cutting-edge.	¼ ounce ligature-silk.
1 straight knife, 7-inch cutting-edge.	1 Sim's torsion-forceps.
1 catling, 8-inch.	1 screw tourniquet.
1 catling, 6½-inch.	1 straight probe-pointed bistoury.
1 cartilage-knife.	1 straight sharp-pointed bistoury.
7 scalpels (3 dissecting, 4 large).	1 curved probe pointed bistoury.
2 tenacula.	1 curved sharp-pointed bistoury.
3 artery-forceps.	1 curved hernia-knife.
1 dressing-forceps.	1 lithotomy-scalpel (sharp-pointed.)
3 probes (1 Nelaton's bullet-probe and 2 silver).	1 lithotomy-bistoury (probe-pointed).
2 directors.	1 aneurism-needle (with set of movable points).
1 probang.	2 pair scissors (1 straight, 1 curved on edge).
1 bristle probang.	1 bullet-forceps.
1 œsophageal forceps.	

**Expeditionary and Boat Case.**

1 straight knife, 10 inches.	1 amputating-saw.
1 catling, 9 inches.	1 metacarpal saw.
1 straight knife, 8 inches.	1 bone-cutting forceps.
1 scalpel, 3 inches.	1 bullet-forceps.
1 bistoury, 3 inches.	1 tourniquet, screw.
1 tenaculum.	1 dozen needles.
1 artery-needle.	3 skeins silk.
2 artery-forceps.	

**Pocket Case.**

1 straight finger-knife.	1 artery-forceps (Liston's bull-dog, fenestrated).
1 double-edged scalpel.	1 lancet, abscess.
1 curved bistoury, sharp-pointed.	2 probes, silver.
1 catheter.	1 probe with porte-mèche and porcelain button.
1 tenaculum, with 3 movable points (artery-needle, etc.)	1 director, silver, curved spatula-handle.
1 lancet, thumb in one end, vaccinator in the other.	1 double canula.
1 curved bistoury, probe-pointed.	25 silvered entomological pins.
1 exploring trocar.	6 suture-needles, 3 straight, 3 grooved for wire.
1 tenotome.	6 acupuncture needles.
1 pair scissors, straight.	Silver and lead wire.
1 pair scissors, curved or flat.	
1 dressing-forceps.	
1 artery-forceps (Amussat's, arranged to carry needle).	

**Eye and Ear Case.**

1 Anel's (silver) syringe and probe.	1 Noyes' eye-speculum.
1 set Bowman's probes, Nos. 1 to 8.	1 hydrocele-syringe, with stop-cock and ear-piece.
1 cilia-forceps.	1 set specula.
1 iris-forceps.	1 curette.
2 Von Græfe's knives.	1 eustachian catheter.
1 Weber's canaliculus knife.	1 Politzer's bag.
1 pair scissors, Noyes' iris.	1 Toynbee's forceps.
1 Critchett's spoon.	
1 strabismus-hook.	

**Urinary Case.**

1 set (Van Buren's) bougies, nickel-plated, Nos. 6, 9, 12, 15, 18.	1 prostatic catheter.
1 straight sound.	1 lithotomy-forceps.
1 grooved staff, medium.	12 whalebone bougies.
3 catheters, silver, Nos. 3, 6, 9.	3 s. s. bougies, Nos. 1 to 6, inclusive, double.
1 prostatic catheter.	

**Dental Case No. 1.**

1 upper-bicusped forceps.	1 wisdom-tooth forceps (bayonet).
1 lower-incisor forceps.	1 front-root forceps.
1 right upper-molar forceps.	1 back-root forceps (bayonet).
1 left upper-molar forceps.	2 elevators.
1 lower-molar forceps for both sides.	1 gum lancet.

**Dental Case No. 2.**

1 upper-incisor forceps.	1 root-forceps.
1 lower-incisor forceps.	1 elevator.
1 universal forceps.	1 gum-lancet.
1 lower-molar forceps.	

**Autopsic Case.**

1 aneurism needle, large.	1 enterotome.
1 blow-pipe.	1 dissecting forceps.
1 brain-knife, double edged.	1 hammer.
1 cartilage-knife.	3 large needles.
1 set chain-hooks.	1 saw.
1 gouge and 1 chisel.	4 scalpels, assorted sizes.
1 costatome.	1 pair scissors.
1 director.	1 tenaculum.

**Laryngoscope Case.**

1 3½-inch mirror with head band.	1 pair Shimrock's laryngeal forceps.
2 laryngeal mirrors, Nos. 3 and 5.	

**Aspirator.**

1 pump and tubing.	1 32-ounce bottle, graduated.
3 trocars and needles, nickel-plated.	

**General Operating Case (Wood's) No. 2.**

- |   |   |
|---|---|
| <ul style="list-style-type: none"> <li>1 pair silver probes.</li> <li>2 steel sounds.</li> <li>1 long amputating knife.</li> <li>1 circular knife.</li> <li>1 catling.</li> <li>1 trepanning scalpel with raspatory.</li> <li>1 spiral tourniquet.</li> <li>12 needles, silk, wax, plastic pins.</li> <li>1 trepanning brush.</li> <li>1 metacarpal saw.</li> <li>1 bullet forceps.</li> <li>1 pair straight dressing scissors.</li> <li>1 pair curved eye scissors.</li> <li>1 Hey's saw.</li> <li>1 silver-plated catheter.</li> <li>1 gum-elastic catheter.</li> <li>2 gum-elastic bougies.</li> </ul> | <ul style="list-style-type: none"> <li>1 capital saw.</li> <li>1 pair Liston's bone-forceps.</li> <li>1 trephine and handle.</li> <li>1 pair spring-catch artery forceps, plain.</li> <li>1 trepanning elevator.</li> <li>1 director, steel.</li> <li>1 Beer's cataract knife.</li> <li>1 curved sharp-pointed bistoury.</li> <li>1 curved probe-pointed bistoury.</li> <li>2 scalpels.</li> <li>1 plain aneurism-needle.</li> <li>1 tenaculum.</li> <li>1 strabismus blunt hook.</li> <li>1 straight eye-needle.</li> <li>1 curved eye-needle.</li> <li>1 curved eye-forceps, strabismus.</li> </ul> |
|---|---|

**Set of Splints.**

- 1 double inclined plane.
- 1 long splint, for fractures of the lower extremities, with a belt and perineal pad and strap.
- 1 short curved splint, for the inside of the thigh.
- 2 carved splints for general use, (All these have pads fitted and tied to them.)
- 1 set of leathered wooden splints.
- 2 sheets of cotton wadding.
- 1 package of tow.

The double inclined plane has the lower part so arranged as to be easily detached and used separately as a fracture-box when required; it has also large buttons on the bottom, which, when turned crosswise, make the apparatus rest more firmly on the mattress.

The long splint, for the lower extremities, is adapted for the use of an adhesive-plaster extending-band. A strip of adhesive plaster, about two

inches wide, is to be applied to the limb in the direction of its axis from the seat of fracture, down one side and up the other, leaving a loop or stirrup under the sole of the foot. The whole is then enveloped with a roller bandage, applied with a moderate degree of firmness. A thin piece of board, about two inches square, is made to adhere to the inside of the loop or stirrup at the sole of the foot, and around this, and over the hook of the splint, a piece of tape is passed, by which to make extension.

A pocket is made in the belt to receive the upper end of the splint, and the buckles on the outside of the pocket receive the ends of the perineal straps for counter extension.

To adapt the splint to opposite sides it is only necessary to take out the hook and adjust it so that the opening may look upward.

**Contents of Box for Examination of Air.**

- |   |   |
|---|---|
| <ul style="list-style-type: none"> <li>2 glass bottles with india-rubber stoppers.</li> <li>1 Mohr's burette, 50 c. c., complete.</li> <li>1 glass graduate, 60 c. c.</li> <li>1 glass bottle, 1,000 c. c. capacity.</li> <li>1 glass bottle for lime-water.</li> </ul> | <ul style="list-style-type: none"> <li>Glass rods, q. s.</li> <li>Sheet rubber, q. s.</li> <li>Litmus or turmeric paper, q. s.</li> <li>Oxalic acid, crystallized, in small glass bottles, each containing 2.25 grams of acid.</li> </ul> |
|---|---|

**Test Case.**

- |   |   |
|---|---|
| <ul style="list-style-type: none"> <li>Red and blue litmus paper.</li> <li>Forceps.</li> <li>Urinometer.</li> <li>4 porcelain capsules and covers.</li> </ul> | <ul style="list-style-type: none"> <li>2 separating glasses.</li> <li>4 test tubes.</li> <li>3 glass tubes.</li> <li>3 glass rods.</li> </ul> |
|---|---|

**Test Case—Continued.**

- |  |  |
|--|--|
| <p>3 watch-glasses.<br/>         1 gas-tube, 25 c. c.<br/>         1 graduated tube, with foot, 25 c. c.<br/>         2 glass funnels.<br/>         2 small beakers.<br/>         1 pipette, 5 c. c., graduated in 1-10.<br/>         2 sheets Swedish filtering paper, "J. H. Munktell."<br/>         1 mahogany case.<br/>         1 set centesimal weights.<br/>         1 ounce acetic acid, c. p.<br/>         1 ounce hydrochloric acid, c. p.<br/>         1 ounce nitric acid, c. p.</p> | <p>1 ounce sulphuric acid, c. p.<br/>         Potassium hydrate.<br/>         Barium chloride.<br/>         Sodium acetate.<br/>         Ammonium oxalate.<br/>         Uranium nitrate.<br/>         Potassium chromate.<br/>         Sodium carbonate, free from chlorides.<br/>         Wire gauze, 5 by 5.<br/>         Calcium carbonate, pure.<br/>         "Memoranda to accompany the Naval Test Case.</p> |
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**Supply-Table for Medical Outfit for the Boat of the Medical Officer.**

[To be put up at the Laboratory and supplied as part of the outfit of the vessel.]

Articles.	Quantities.	Uses.
Whisky .....	2 bottles—200 c. c .	} Stimulants for exhausted and wounded men.
Extract of beef .....	1 jar .....	
Laudanum .....	1 bottle—100 gm .	} To relieve pain.
Chloroform .....	1 bottle—200 gm .	
Diarrhœa mixture .....	1 bottle—100 gm .	To check diarrhœa.
Lime-water and linseed oil, equal parts.	500 c. c.....	For burns and scalds.
Sulphate of zinc .....	4 powders—0.3 gm	} Emetics in cases of poisoning.
Ipecacuanha, fluid ext.....	1 bottle—50 gm .	
Liq. ferri subsulph .....	1 bottle—25 gm .	
Adhesive plaster .....	2 meters .....	
Isinglass plaster.....	1 meter .....	
Lint .....	500 gm .....	
Muslin .....	2 meters .....	
Bandages, assorted .....	10 .....	
Tourniquets, field .....	10 .....	
Ligatures, silk .....	10 .....	
Needles, threaded .....	5 .....	} For arresting hemorrhage and dressing wounds.
Pins .....	25 gm .....	
Scissors.....	1 pair .....	
Soap .....	50 gm .....	
Sponges .....	3 .....	
Towels .....	3 .....	
Tumbler .....	1 .....	
Wine-glass .....	1 .....	
Measure-glass, 50 c. c .....	1 .....	
Teaspoon .....	1 .....	
Tablespoon .....	1 .....	} For administering medicines.

Every article to be labeled with its use, and each medicine to be distinctly marked, with directions for administration and quantity of dose.

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STATISTICAL NOMENCLATURE  
OF  
DISEASES, ETC.

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STATISTICAL NOMENCLATURE OF DISEASES.

[Royal College of Physicians and Surgeons, England.]

MORBID STATES AND PROCESSES, IRRESPECTIVE OF PARTS AFFECTED.

Adynamia.	Hydrops.
Atrophia.	Hypertrophia.
Degeneratio.	Tuberculosis.
Hæmorrhagia.	

GENERAL DISEASES.

*Dependent upon morbid poisons.*

CLASS 1.

Catarrhus epidemicus.	Febris recidiva.
Cholera epidemica.	Febris typhus.
Denguis.	Febris typho-malarialis
Diphtheria.	Morbilli.
Diarrhœa epidemica.	Pertussis.
Dysenteria acuta.	Parotitis.
Dysenteria chronica.	Roseola.
Febris continua simplex.	Scarlatina.
Febris cerebro-spinalis.	Vaccina.
Febris enterica.	Variola.
Febris flava.	

CLASS 2.

Cachexia malarialis.	Febris remittens.
Febris intermittens.	

CLASS 3.

Erysipelas.	Pyæmia.
Phagedæna.	Septicæmia.

CLASS 4.

Gonorrhœa.	Syphilis consecutiva
Syphilis primitiva.	

*Dependent upon causes other than morbid poisons*

CLASS 1.

Aërum effectus.	Frigoris effectus.
Caloris effectus.	

CLASS 2.

Alcoholismus.	Scorbutus.
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## DEVELOPMENTAL DISEASES.

Senectus.

## UNCLASSIFIED DISEASES.

Anæmia.	Rheumatismus.
Diabetes.	Rheumatismus acutus.
Podagra.	Scrofula.

## LOCAL DISEASES.

*Diseases of the Nervous System.*

Apoplexia.	Mania.
Chorea.	Melancholia.
Convulsio.	Myelitis.
Cephalalgia.	Meningitis.
Dementia.	Neuralgia.
Encephalitis.	Neurasthenia.
Epilepsia.	Nausea marina.
Hysteria.	Paralysis.
Insolatio.	Tetanus.
Insomnia.	Vertigo.
Irritatio spinalis.	

*Diseases of the Eye.*

Achromatopsia.	Hordeolum.
Amaurosis.	Iritis.
Asthenopia.	Keratitis.
Blepharitis.	Myopia.
Cataracta.	Nyctalopia.
Conjunctivitis.	Ophthalmia.
Ectropium.	Pterygium.
Fistula lachrymalis.	Retinitis.
Glaucoma.	Sclerotitis.
Hemeralopia.	Ulcus corneæ.

*Diseases of the Ear.*

Otalgia.	Otorrhœa.
Otitis.	Surditas.

*Diseases of the Nose.*

Catarrhus nasalis.	Ozæna.
Epistaxis.	

*Diseases of the Circulatory System.*

Aneurysma.	Morb: valvul: cordis.
Angina pectoris.	Palpitatio.
Dilatatio cordis.	Pericarditis.
Endocarditis.	Phlebitis.
Hydrops pericardii.	Varix.
Hypertrophia cordis.	

*Diseases of the Respiratory System.*

Asthma.	Laryngitis.
Bronchitis acuta.	Pleuritis.
Bronchitis chronica.	Pneumonia.
Catarrhus.	Pneumo-thorax.
Emphysema.	Phthisis pneumon: acuta.
Hæmoptysis.	Phthisis pneumon: chronica.

*Diseases of the Digestive System.*

Caries dentium.	Gastritis.
Odontalgia.	Gastrodynia.
Parulis.	Hæmatemesis.
Ascites.	Hæmorrhøis.
Cholera morbus.	Hepatitis acuta.
Colica.	Hepatitis chronica.
Constipatio.	Icterus.
Congestio hepatis.	Peritonitis.
Cirrhosis hepatis.	Pharyngitis.
Dyspepsia.	Prolapsus ani.
Diarrhœa acuta.	Rhagades ani.
Diarrhœa chronica.	Stomatitis.
Enteritis.	Tonsillitis.
Fistula in ano.	Typhlitis.

*Diseases of the Lymphatic System.*

Adenitis.	Splenitis.
Lymphangitis.	

*Diseases of the Urinary System.*

Albuminuria.	Enuresis.
Calculus.	Hæmaturia.
Cystitis.	Ischuria.
Dysuria.	Nephritis.

*Diseases of the Generative System.*

Balanitis.	Prostatitis.
Chancroides.	Spermatorrhœa.
Hydrocele.	Urethræ strictura.
Orchitis.	Urethritis.
Paraphymosis.	Varicocele.
Phymosis.	

*Diseases of the Locomotor System.*

Ankylosis.	Ostitis.
Arthritis.	Periostitis.
Caries.	Synovitis.
Necrosis.	

*Diseases of the Integumentary System.*

Abscessus.	Paronychia.
Acne.	Pemphigus.
Anthrax.	Pernio.
Clavus.	Porrigo.
Ecthyma.	Prurigo.
Eczema.	Psoriasis.
Erythema.	Rupia.
Furunculus.	Scabies.
Herpes.	Tinea.
Impetigo.	Ulcus.
Lichen.	Unguis involutus.
Lupus.	Urticaria.
Onychia.	Verruca.

## PARASITIC DISEASES.

Filaria.	Vermes.
Trichinosis.	

## POISONS.

Colica pictonum.	Vulnus venenatum.
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## TUMORS AND CYSTS.

*(Malignant or Non-malignant.)*

Adenoma.	Fibroma.
Angeioma.	Lipoma.
Chondroma.	Neuroma.
Condyloma.	Osteoma.
Cystis.	Polypus.
Epithelioma.	Sarcoma.

## INJURIES, &amp;c.

Abrasio.	Stremma.
Ambustio.	Submersio.
Concussio.	Vulnus contusum.
Contusio.	Vulnus incisum.
Fractura.	Vulnus laceratum.
Hernia.	Vulnus punctum.
Luxatio.	Vulnus sclopetarium.

## FEIGNED DISEASES.

## SURGICAL OPERATIONS.

NOTE.—Diseases not mentioned should be grouped under the respective classes to which they belong; *e. g.*, *Oesophagitis*, Diseases of the Digestive System.

For the purposes of amplification the following examples may be cited:

General Diseases, Class 2, *Febris Intermittens* may be quotidian, tertian, &c.

Circulatory System—*Aneurysma*; Aortic, Femoral, Axillary, &c.

Parasitic Diseases—*Vermes*; *Ascarides*, *Lumbrici*, *Tænia*, &c.

Injuries, &c.—*Fractura*; variety, part affected, &c.

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The first part of the paper is devoted to a general discussion of the problem of the origin of life. It is shown that the problem is one of the most important and interesting in the history of science. The author discusses the various theories of the origin of life, and shows that the most plausible is the theory of spontaneous generation.

The second part of the paper is devoted to a detailed discussion of the theory of spontaneous generation. It is shown that this theory is based on the fact that life is a complex of many different parts, and that these parts are all derived from a common ancestor. The author shows that this theory is supported by the facts of the history of life on earth.

The third part of the paper is devoted to a discussion of the evidence in favor of the theory of spontaneous generation. It is shown that this evidence is of a very strong nature, and that it is supported by the facts of the history of life on earth. The author shows that the theory of spontaneous generation is the only one that is supported by the facts of the history of life on earth.

The fourth part of the paper is devoted to a discussion of the objections to the theory of spontaneous generation. It is shown that these objections are of a very weak nature, and that they are not supported by the facts of the history of life on earth. The author shows that the theory of spontaneous generation is the only one that is supported by the facts of the history of life on earth.

The fifth part of the paper is devoted to a discussion of the conclusions of the author. It is shown that the theory of spontaneous generation is the only one that is supported by the facts of the history of life on earth. The author shows that the theory of spontaneous generation is the only one that is supported by the facts of the history of life on earth.

