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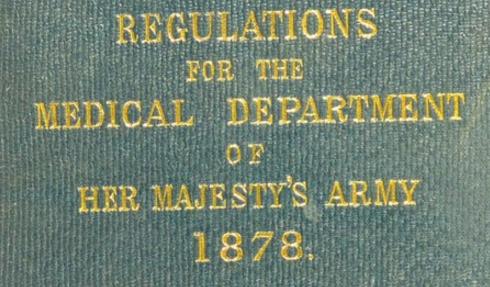
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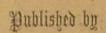
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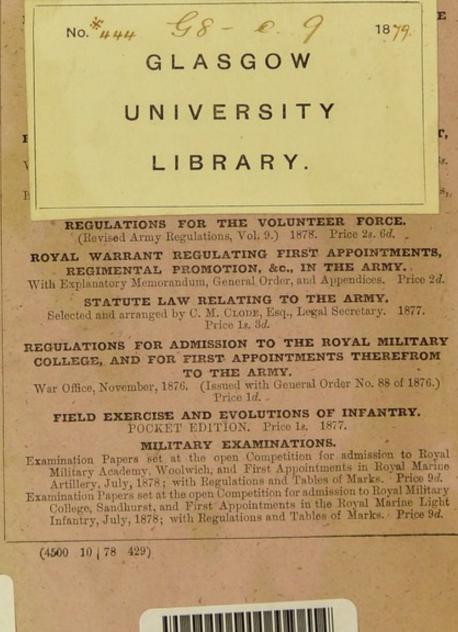
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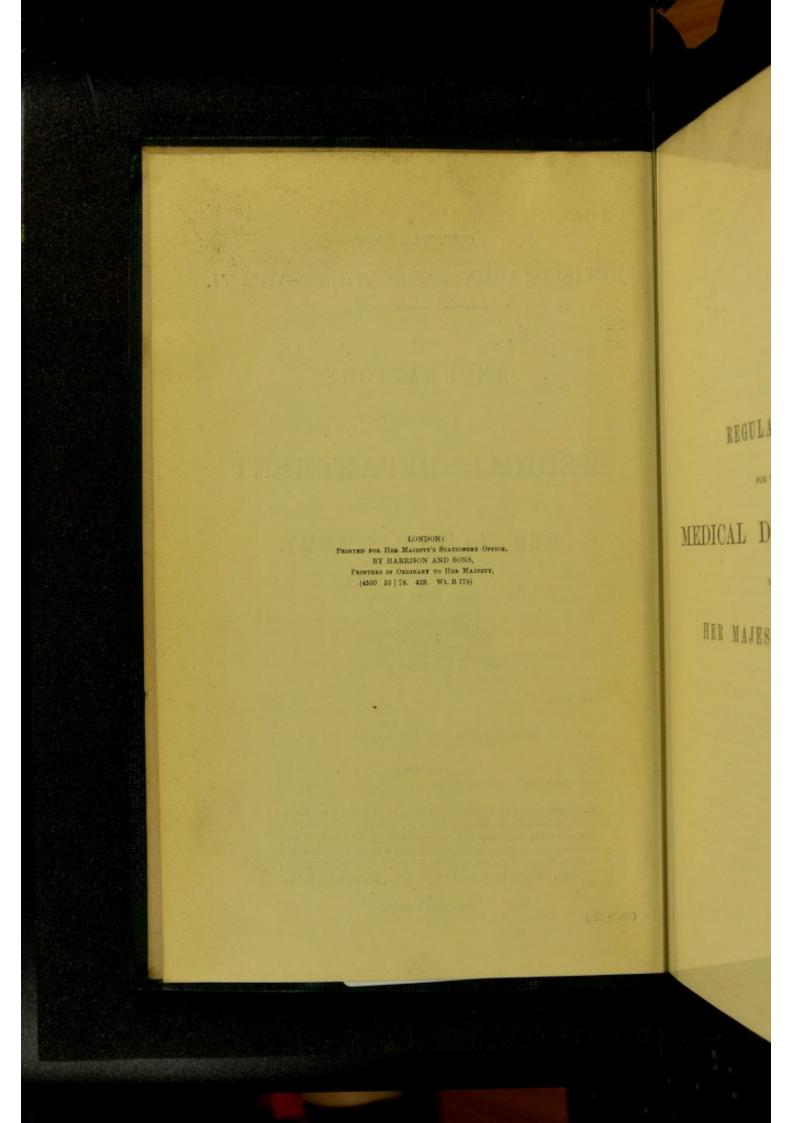
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 V. Elementary Instruction.
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- Appendix.

Revision of Part II., Section 1, of the Manual of Artillery Exercises-Heavy Ordnance. 1877. ' Price 3d.



REGULATIONS

FOR THE

MEDICAL DEPARTMENT

OF

HER MAJESTY'S ARMY.



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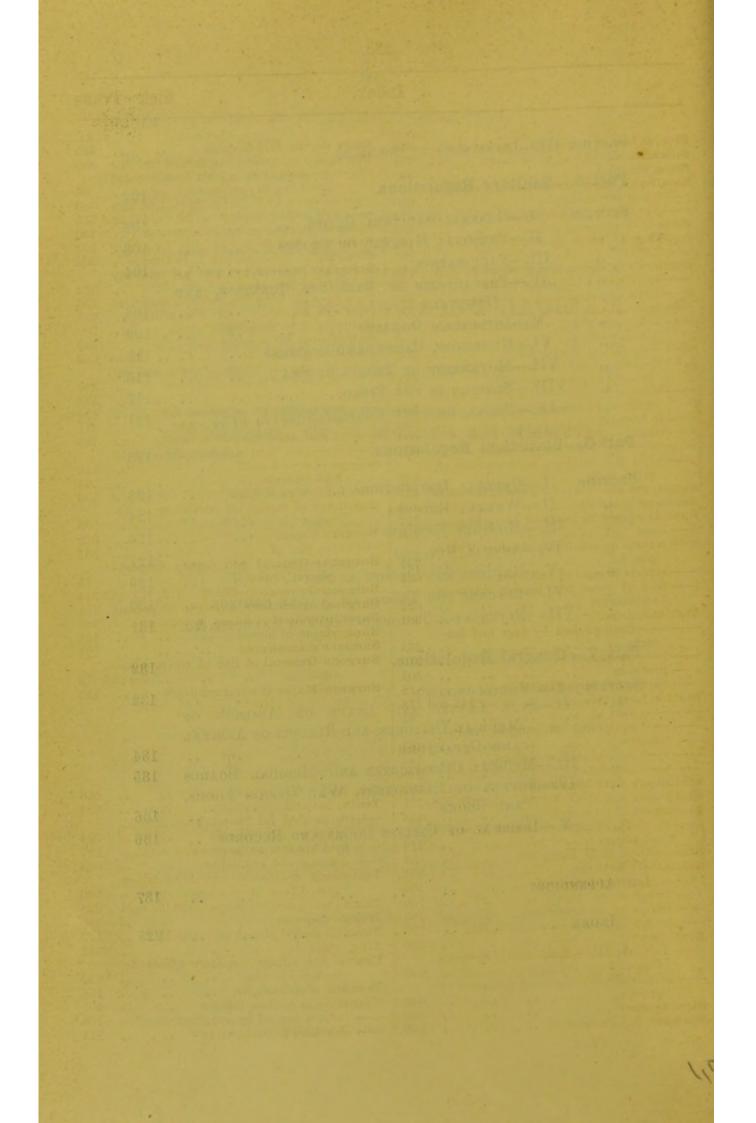
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SECTION I.-CONSTITUTION OF THE DEPARTMENT.

I.-Director General.

II.-Administrative Officers.

III.-Executive Officers.

IV .- The Army Hospital Corps.

I.-DIRECTOR GENERAL.

1. The Director-General of the Army Medical Department is Director the responsible Head of that Department.

2. He will be assisted by three Administrative Officers, who Administrawill conduct

(a.) The Medical Branch.

(b.) The Sanitary Branch.

(c.) The Statistical Branch,

3. These officers will preside at Medical Boards at the office Their duties. of the Army Medical Department; and will make inspections of hospitals, barracks, camps, &c., when deemed necessary by the Director-General.

II.-ADMINISTRATIVE OFFICERS.

4. The Administrative officers of the Army Medical Depart- Administrament will be of the rank-

(a.) of Surgeon General.

(b,) of Deputy Surgeon General.

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General.

tive Medical Officers at headquarters.

tive Officers of the Department.

CONSTITUTION, &c.

Section I.

Constitution of the Department.

2

III.-EXECUTIVE OFFICERS.

Executive Officers. 5. The executive officers will be of the rank— (a.) of Surgeon Major. (b.) of Surgeon.

IV.-THE ARMY HOSPITAL CORPS.

Officers of Army Hospital Corp. 6. The officers of the Army Hospital Corps are of the rank— (a,) of Captain of Orderlies. (b.) of Lieutenant of Orderlies.

PART I.

Distribution of Department.

3

Section II.

SECTION II.-DISTRIBUTION OF THE DEPARTMENT.

7. The officers of the Army Medical Department will, subject Medical to the supreme command of the officer Commanding-in-Chief, be Officers detailed for duty by the Director General of the Army Medical Department, in commands and districts, and will be under the Director control of the Principal Medical Officer, both for discipline and General. professional supervision.

8. They will not be removed from commands or districts Removal of without the previous sanction of the Director General, except Officers by Director under exceptional circumstances. General.

9. They will be employed in general, station, or field How to be hospitals, with troops in barracks or in the field; and on all such employed. special duties in camp and quarters as the Director General may decide, and as are laid down in Part II, Section VI, Field Hospitals and Hospital Ships.

10. The Director General of the Army Medical Department, Appointments will nominate medical officers for the following appointments :- by Director General.

- (a.) Principal Medical Officer.
- (b.) The Charge of General, Station, and Field Hospitals.
- (c.) The Command of Bearer Companies.
- (d.) The Charge of Female Hospitals, including charge of General Staff, officers, and their families; also the wives and children of soldiers.
- (e.) Sanitary Officer.

(f.) Examiner of Recruits.

11. Principal Medical Officers will nominate to all other duties, Nominations forwarding a detail of all appointments to the Director General by Principal of the Army Medical Department, except in cases where the Officers. Director General nominates the whole staff himself for a General or Station Hospital.

12. Where a Special Sanitary Medical Officer is not appointed, Sanitary the Principal Medical Officer, or the Senior Medical Officer Officer. present, will act as such, and in all other cases medical officers will follow the instructions contained in paragraph 40 of these Regulations.

13. Medical officers detached from their commands or districts, Medical on special duty, will return thereto on the completion of the Officers detached. special duty.

14. When a regiment moves from one district to another, a Movements of Medical Officer will accompany it, and on completion of the regiments. duty will return to his own district.

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detailed for duty by

Section III.

General Duties.

4

SECTION III.-GENERAL DUTIES.

I.-Duties of Surgeon General and Deputy Surgeon General, II.-Duties of Medical Officers doing duty with Troops. III.-Duties of Medical Officers in charge of Troops on board ship.

I.-DUTIES OF SURGEON GENERAL AND DEPUTY SURGEON. GENERAL.

Duties of Surgeons General and Deputy Sur-

Responsibility for medical

for distribution of Officers, &c.

Inspection of stations and camps.

Inspection of Army Hospi-tal Corps. Inspection of barracks.

15. Surgeons General and Deputy Surgeons General will under General Officers Commanding, have command of the Medical Officers, Officers, Non-commissioned Officers and geons General. Privates of the Army Hospital Corps serving in their districts, they will have medical supervision and superintendence of districts at home and abroad; of General Hospitals; and of Hospital establishments during mobilization, manœuvres, and with armies in the field.

16. They will be responsible for all Medical arrangements and sanitary duties, and for the administration of all Hospitals within arrangements. their districts, or connected with any Force in the field, to which they may be appointed.

17. They will be responsible for the distribution and employment of all Medical Officers serving under them, and for the distribution and employment, under instructions from the Director General of the Army Medical Department, of all Officers. Non-commissioned Officers, and Privates of the Army Hospital Corps allotted to their districts.

18. They will make inspections of all stations and camps where Troops are quartered, throughout their districts, once a year on foreign stations; and twice a year at home, or at such other times as the Director General may appoint.

19. On these occasions they will make a minute inspection of each detachment of the Army Hospital Corps.

20. They will inspect Barracks and all buildings occupied by Troops, and all subsidiary buildings attached thereto, and garrison and other cells in their districts, to ascertain if they are in good sanitary condition, and if everything necessary for the health of the troops is supplied.

21. They will ascertain-

(a.) That the conservancy arrangements are satisfactory and carefully attended to;

5

Section III.

DUTIES OF SURGEON GENERAL-continued.

- (b.) That the means of ablution and cleanliness are sufficient, and are made use of by the men;
- (c.) That the water supply is good and abundant and perfectly protected from pollution;
- (d.) That the rations have been good, and that the means of cooking are sufficient and satisfactory;
- (e.) That the duties and employments of the troops are such as are not likely to prove injurious to health; and
- (f.) That recreation rooms, games, and gymnastic exercises are provided and attended by the men, without risk to health.

22. They will make any recommendation, either verbally or in Recommendawriting, to Commanding Officers of Corps, or Medical Officers tions to Comdoing duty therewith that may be considered necessary for preserving the health of the troops or for the mitigation or prevention of disease.

23. They will make frequent visits to Hospitals in their imme- Frequent diate vicinity; and a thorough inspection of all Hospital establishments in their districts twice a year at home, and once a year on foreign stations, so as to ascertain that they are in a good sanitary condition, conducted in conformity with existing regulations, and that everything necessary for the care and treatment of the sick is supplied.

24. They will ascertain that the Hospital accommodation is To ascertain sufficient for the requirements of the station, that the vicinity of the Hospitals and enclosures are in a good sanitary condition, are satisthat the buildings and out-offices are in good repair, and that factory. the conservancy arrangements are satisfactory and carefully attended to.

25. They will also ascertain that the water supply is pure and Water supply, abundant, and sufficient for all the requirements of a Hospital, that due attention is paid to the cleanliness, ventilation, warming, and lighting of the wards, and that the lavatories, bathrooms, and waterclosets are kept in proper order.

26. They will see that all articles of diet and extras are of Diets and good quality, that the supplies are procured without difficulty or delay, and that the necessary returns and vouchers connected with their expenditure are accurately kept, also that the kitchen arrangements are good and sufficient, and that the preparation and distribution of diet and extras are conducted according to regulation.

27. They will ascertain that the equipment of every kind is Equipment of supplied according to regulation and kept in a serviceable con- Medical and dition. They will take care that the medical stores and Surgical surgical instruments are according to the authorised scale and in good condition, that the supplies of medicines and appliances are sufficient, that they are properly cared for, used with the necessary ecomomy, and that drugs of a poisonous character are in safe keeping.

Officers and Medical Officers.

visits to hospitals.

PART 1.

Section III.

General Duties.

DUTIES OF SURGEON GENERAL, &c .- continued.

Army Hospital Corps. 28. They will satisfy themselves that the Non-commissioned Officers of the Army Hospital Corps are competent and trustworthy, that the men are thoroughly efficient, and that each Non-commissioned Officer and Orderly is in possession of a copy of the Regulations for the Corps, also that due order, quietness, and discipline are maintained in the Hospital.

29. They will examine the medical, statistical, sanitary, and all other records to see that they are properly kept, and will ascertain that all cases of interest, and all in which extras have been given, have been recorded.

30. They will ascertain that each Medical Officer has a copy of the Queen's Regulations and Orders for the Army, 1873. (Revised Army Regulations, Vol. II), Army Medical Regulations (Revised Army Regulations, Vol. VI), Standing Orders of the Department, Manual of Instruction for Army Hospital Corps, Ophthalmic Manual, and Nomenclature of Disease, and whether the following books are on charge as part of the Hospital equipment, viz., the British Pharmacopœia, Snellen's Test Types, and the Test Dot Cards, Army Medical Reports commencing at 1874, Hospital Ready Reckoner, and Priced Vocabulary of Stores.

31. They will examine the medicines and instruments in charge of medical officers doing duty with Corps.

32. They will make periodical requisitions on W. O. Form 165 on the War Office, for all supplies of W. O. Forms and books necessary for every medical requirement in the district or command under their superintendence, also for all stationery necessary for station and female hospitals. They will issue these supplies, and check the expenditure thereof.

33. They will ascertain that the mortuary is well ventilated, clean, supplied with the necessary fittings and appliances, and that there are suitable arrangements for the burial of the dead.

34. They will ascertain if there has been any excessive amount of disease or mortality among the troops, and if any epidemic, infectious, or contagious form of disease has appeared in the station or broken out in Hospital, and what measures were taken for prevention and mitigation.

35. They will issue to Medical Officers, either verbally or in writing, any instructions that may be deemed necessary, either in connection with Hospital administration or for the welfare of the sick.

36. Administrative Medical Officers, when they have completed their inspections of barracks and Hospitals, will report the result immediately to the Director General of the Army Medical Department on W. O. Form 824. No other documents will accompany this report.

37. They will also submit all sanitary or other suggestions and recommendations in writing to the General Officer commanding the district, and forward copies to the Director General with their next quarterly sanitary report, W. O. Form 463.

Medicines and Instruments. Requisitions for W.O. Forms.

Mortuaries.

Mortality and disease.

Instructions to Medical Officers.

Report on W.O. Form, 824.

Sanitary recommendations.

entit.

Hospital records.

Books to be in possession of Medical Officers.

CONSTITUTION, &c.

General Duties.

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DUTIES OF SURGEON GENERAL, &c .- continued.

38. They will give their opinion on all matters referred to Opinion or them by the local Military authorities, and only in case of posi- references. tive difficulty or doubt will they refer such local matters to the Director General.

39. In submitting any question for the opinion or decision of Submission of the Director General, they will invariably forward their own opinion for opinion thereon, with the rest of the correspondence.

II .- DUTIES OF MEDICAL OFFICERS DOING DUTY WITH TROOPS.

40. A Medical Officer, doing duty with troops, both in camp Sanitary and quarters, will report any insanitary condition that may Reports. exist in the vicinity of his charge to the Sanitary Officer, or in his absence to the Medical Officer in charge of the Station Hospital; and will be guided in the performance of this and his other duties by existing regulations and by such instructions as he may receive from the Principal Medical Officer of the District.

41. He will, in addition to the above, be available for duty Duty at in the Station Hospital, or for any professional or departmental duty for which he may be detailed by the Principal Medical Officer.

42. He will, in accordance with sec. 14, par. 17, of the Queen's Attendance at Regulations and orders for the Army, 1873, attend parades of parades. the troops when inspected by a General Officer, and any other parades when professional assistance is wanted; under ordinary circumstances the attendance of a Medical Officer at rifle ranges, and at target practice, will not be required; but the name and address of a Medical Officer, who could be sent for if necessary, will be communicated to each officer in charge of parties at practice. The Medical Officer warned for this service will remain either in the hospital or in quarters.

43. At certain stations, where considered necessary by the Medical in-Principal Medical Officer, a medical inspection room, with the spection room. necessary furniture, will be provided in the Barracks, in which men reported sick will be seen, and where the instruments and necessary medicines will be kept. At Stations where there is only one regiment, or where the Hospital is within the Barrack enclosure, an inspection room will not be provided in the Barracks.

44. In accordance with sec. 14, para. 15, Queen's Regulations Examination and orders for the Army, 1873, the Medical Officer will examine of sick. all Non-commissioned Officers and soldiers reported sick where there is an inspection room in Barracks, and those whom he may Sick report. consider unfit for duty will be sent to Hospital. The regimental number, name, and all particulars of each man will be entered on a sick report (furnished in duplicate), as laid down in General Order 14 of 1874, and General Order 20 of 1876; both copies of which will be sent with the men to the Medical Officer in

station hospital.

Director General.

Section III.

General Duties.

8

DUTIES OF MEDICAL OFFICERS, &c .- continued.

charge of the Station Hospital. The disease, and any remarks, will be entered in pencil only.

45. The sick will leave the barracks at such hours as may enable them to reach the Station Hospital before the morning visit.

46. Men requiring only trivial dressings or medicine will be dealt with at the inspection room, and the words "medicine; duty" will be written opposite each man's name.

47. In filling up the sick report great care will be taken that all particulars are correctly stated.

48. When a soldier is reported sick unnecessarily, the word "*duty*" will be written opposite his name in the column of remarks in the sick report which is sent to the Commanding Officer.

49. Soldiers will not be detained in Barracks as convalescents, or as such be excused from duty. Should it be necessary, however, that any men be temporarily excused from drill, musketry practice, or general duty after vaccination, the Medical Officer will include the names of such men on the sick report sent to the Officer Commanding recommending the light duty which he considers appropriate in each case.

50. Soldiers reported sick who may require rest for a day only will be detained in Barracks for that day and employed on such light duty as the Medical Officer may recommend, but if reported sick on the following day they will be sent to Hospital, examined by the Medical Officer in charge thereof, and admitted to Hospital if necessary,

51. When no Medical Officer is especially appointed, the Medical Officer doing duty with troops will attend the Officers of the Station, also their wives and such of their children and servants, as may be entitled to Medical aid; also all women and children belonging or attached to the troops under his charge who are entitled to Medical attendance: those of the women and children who are unable to attend at the inspection room or hospital will be visited at their own quarters.

52. The necessary medicines and appliances for Officers and their families, also for soldier's wives and children, will be procured from the surgery at the Station Hospital.

53. At such Stations where there is only one Medical Officer in charge of both troops and Hospital, the daily state of sick on W. O. Form 986 will be sent to the Officer Commanding; but at large stations or when the Medical Officer doing duty with troops has not charge of the Station Hospital the sick reports specified in paragraphs 44 and 47 only will be furnished to Officers Commanding Corps.

54. The Medical Officer will be responsible for the charge of :-

One field companion.

Sick to arrive before morning visit.

Slight cases.

Sick report.

Soldiers reported sick unnecessarily.

Convalescents.

Sick may be detained one day in Barracks.

Attendance on Officers and their families, and on soldiers' wives and children.

Medicines for officers, &c.

State of sick, W.O. Form 986.

Instruments, &c.

General Duties.

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Section III.

DUTIES OF MEDICAL OFFICERS, &c .- continued.

One stomach pump. One set of tooth instruments. One set of field splints.

55. He will obtain from the Station Hospital, on requisition, Requisition W. O. 884, any further supplies of medicines which the Prin- for medicines. cipal Medical Officer may consider necessary, also such articles as may be required from time to time to keep the field companion complete. All these articles will be kept under lock and key in the inspection room.

56. He will inspect the prisoners at the inspection room Examination before they appear at the orderly room, and also inspect all of prisoners. prisoners to be tried by court-martial, as well as those committed to provost or military prisons, and will furnish the necessa certificates.

57. He will inspect the regimental cells daily, and see each Inspection of prisoner confined therein.

58. He will make the usual weekly health inspection of the Health inspectroops.

59. He will apply to the Officer Commanding for a perma- Orderly for nent orderly to keep the inspection room in order, and to act examination as messenger and orderly for all medical purposes.

60. He will apply to the Principal Medical Officer for what- Stationery. ever stationery may be required ; also for any W. O. Forms that may be necessary.

61. He will only receive orders from the Senior Medical Senior Medi-Officer present.

III. -DUTIES OF MEDICAL OFFICERS IN CHARGE OF TROOPS ON BOARD SHIP.

62. When troops are ordered on foreign service, and have P.M.O.'s inbeen detailed by the Commanding Officer, they will be at once drafts for examined by a medical officer. They will, subsequently, be foreign inspected by the Principal Medical Officer, several days before service. the date of embarkation, to decide as to their general fitness, so as to give Commanding Officers sufficient time to replace those considered ineligible by the Principal Medical Officer.

63. A Medical officer will, on the day of embarkation, Examination of troops if possible, or if this be impracticable, on the previous day, beforeembarkmake a careful examination of every Soldier, Woman, and ing. Child of every Regiment or detachment ordered to embark for foreign service. He will forward to the Principal Medical Officer of the District, for transmission to the Director General of the Army Medical Department, a statement of the number of Men, Women, and Children fit to embark, together with a Certificate that he has made the examination referred to, and and that no case of Infectious Disease exists amongst them.

PART 1.

Section III.

General Duties.

DUTIES OF MEDICAL OFFICERS, &c .- continued.

In all cases where Troops, Soldiers' Wives, or Children are proceeding from one station to another, the sanitary precautions laid down in Part 5, Sec. VII, of these Regulations will be followed.

64. The medical comforts required for Troops embarked on board Her Majesty's ships will be obtained by the Paymaster of the ship, and be issued by him on the requisition of the Medical Officer in charge of the Troops. Supplies of medical comforts required from Army Stores for Her Majesty's ships conveying Troops or Military Invalids will be placed in charge of the Paymaster of the ship, who will be accountable to the Admiralty for the quantities remaining unexpended at the conclusion of the voyage.

65. In hired ships a copy of the Regulations for Her Majesty's Transport Service will be provided by the Admiralty and kept on board, and access can be had thereto by application to the Master of the vessel.

66. All supplies of medical comforts for hired troop ships forts on board furnished by the Admiralty according to the Scale laid down in Appendix No. XIX of the Transport Regulations will be placed in the custody of the Master of the vessel, and will be issued by him as required during the voyage on the requisition of the Medical Officer in charge.

> 67. These medical comforts are supplied whether the Troops be victualled by the Government or by the shipowners; but should the Principal Medical Officer at the port of embarkation be of opinion that either from the number of sick about to be embarked, or from the nature of the cases, the regulated supply is insufficient or requires to be supplemented with special articles, such additional medical comforts as he may consider necessary will be obtained by the Naval Authorities at the port, or by the Commissariat Department, and will be placed in charge of the Master for issue on the requisition of the Medical Officer in charge.

> 68. The Principal Medical Officer when inspecting the medical arrangements for Troops to be embarked, as required under Section 17 of the Queen's Regulations and Orders for the Army 1873, will ascertain that the regulated medical comforts for the numbers and duration of the voyage, as well as such additional articles as he may have suggested, are on board.

> 69. Should the medical comforts on board be inadequate, the Medical Officer in charge is at liberty during the voyage to draw from the Master such cabin stores as he may consider necessary, and for which payment will be made by the Admiralty; and on arrival in any port should he estimate that the medical comforts remaining on board will be insufficient for the rest of the voyage, he will represent the same to the Commanding Officer, in order that he may take the necessary steps for obtaining a further supply.

Medical comforts on board Her Majesty's ships.

Regulations for hired ships.

Medical comhired ships.

Medical comforts on board hired ships.

Medical comforts on board hired ships.

Medical comforts on board hired ships.

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DUTIES. OF MEDICAL OFFICERS, &c .- continued.

70. The Medical Officer will enter daily in the Diet Sheet, Expenditure W.O. Form 1145 (recording the total quantities in his Journal), of Medical such medical comforts as he may administer to patients. The comforts. Diet Sheet will be examined at the port of disembarkation, or at Netley, by the Principal Medical Officer, who will satisfy himself as to the correctness and necessity of the issues. On the termination of the voyage the Medical Officer in charge will sign a receipt for everything he has drawn from the Paymaster on board Her Majesty's ships, or from the Master in the case of a hired vessel.

71. The Principal Medical Officer when inspecting the Medical Medical Offiarrangements for Troops about to embark, will see that the vided with Medical Officer in charge is provided for the voyage with the W.O. forms, means of keeping his Medical Journal, and with a sufficient stationery, supply of stationery and of the necessary W.O. Forms and and books. Books, which will be obtained on requisition.

72. One Compounder of Medicines, one Second Corporal, Army Hospiand three Privates of the Army Hospital Corps, will form the Establishment Army Hospital Establishment on board each of Her Majesty's and duties. Indian Troop ships; and one Compounder, one Second Corporal and two Privates on board other of Her Majesty's Troop ships on Foreign Service, and in hired ships when considered necessary. The Compounder in addition to his other duties will Act as Ward-master. The Second Corporal will act as Assistant Ward-master, and will also perform such of the duties of Pack Storekeeper, laid down in Army Hospital Corps Regulations, as are applicable on board ship; money and other valuables in possession of the Sick will be taken over by him and handed to the Military Officer in Command of Troops and Invalids. The Pack Store Book, W. O. Book 182, will invariably be used in taking over the effects of Sick in Hospital. The directions relating to Compounders, Medicines, Medical and Hospital Stores, contained in the Admiralty Instructions for Her Majesty's Indian Troopships, will be followed.

73. When there are no Orderlies of the Army Hospital Corps Soldiers on board ships conveying Troops, or there is not a sufficient employed as number of the Corps for attendance on the Sick, Soldiers from Servants. Regiments or Detachments on board may be employed as Hospital Servants in the proportion laid down in paragraph 72, but the employment of Soldiers as Cooks for the Sick will not be allowed, except under urgent circumstances. Extra Sick Attendants may be employed in special cases. The Medical Officer in charge will sign a Certificate stating that the Servants were actually and necessarily in attendance on the Sick, so as to enable the Men employed to recover their extra duty pay (see Article 910 of the Royal Warrant of the 1st May, 1878 Revised Army Regulations, Vol. I) on arrival in port. The Certificate will be accompanied by a statement of the average number of Sick under treatment and in Hospital during the voyage.

Section II.

Section II.

General Duties.

DUTIES OF MEDICAL OFFICERS, &c .- continued.

Medical and Surgical equipment.

Sick to be sent to hospital on disembarkation.

Documents to be rendered to P.M.O. at Port of Disembarkation, or Netley. 74. Principal Medical Officers will be responsible that a sufficient Supply of Medicines and Surgical appliances is placed on board every ship conveying Troops. When Troops are conveyed in Her Majesty's ships between ports in the United Kingdom, the Medical Officer in charge will be provided with the Regulation "Field Companion" fully equipped, and a Surgeons case of instruments. Should any further supply of Medicines be required during the voyage, he will apply for them to the Naval Medical Officer on board.

75. Medical Officers proceeding in charge of Troops will take care that any men who are seriously ill are, upon arrival at the port of disembarkation, ready to be sent at once to Hospital, accompanied by abstracts of their Cases and Medical Certificates. (W. O. Book, 172).

76. They will, without delay, report themselves for further instructions to the Principal Medical Officer at the port of disembarkation, or at Netley, and furnish him with the following documents in duplicate:—

(a.) Nominal Return of Men to be sent to Hospital.

- (b.) Return of Sick on board ship, W. O. Form 294 B. Whenever the Troops embarked comprise invalids as well as time-expired or effective men, a separate return will be furnished for the invalids; and all particulars relative to the strength, cases of sickness, &c., among the invalids, will be omitted from the Return showing the details of the other portion of the force embarked.
- (c.) A separate Report on Sickness and Medical Transactions during the voyage.
- (d.) Return of Medical Comforts, W. O. Form 836.
- (e.) Copies of Correspondence on Professional Points on Board.
- (f.) Nominal List of Women who have been sick during the voyage.
- (g.) Nominal List of Children who have been sick during the voyage.

77. They will also be prepared with information on the following points :--

- (a.) Date of Departure of the vessel from the port where the Troops embarked, and the name of the port.
- (b.) Length of the passage in days.
- (c.) State health of Troops on board.
- (d.) Whether the ship has been provided with every requisite, with special reference to the amount and quality of provisions in accordance with the scale, and with an adequate supply of water, medicines, instruments, and medical comforts.

Additional Information to be prepared.

General Duties.

Section II.

DUTIES OF MEDICAL OFFICERS, &c .- continued.

- (e.) Whether the ship has been kept in a good sanitary condition in respect to ventilation, cleanliness, means of ablution, &c.
- (f.) Whether the accommodation has been good, and whether the superficial area and cubic space per Man of sleeping accommo ation has been sufficient.
- (g.) Whether any defects have been discovered during the voyage.
- (h.) The number of Officers, Men, Women, and Children embarked.
- (i.) The deaths in each class.
- (i.) The number of births during the voyage.
- (k.) The prevailing diseases on board, and their causes.
- (1.) The nature of the accommodation for the reception and treatment of the Sick, including the superficial area and cubic space per sick bed.
- (m.) When lime juice and sugar have been issued, the quantities of each supplied for each man, for what length of time used, and the total of each consumed during the voyage. A detail of names will not be required.

78. Medical Officers in charge prior to their arrival will also W. O. Books, complete and have ready for the inspection of the Principal Medical His-Medical Officer at the port of disembarkation, or at Netley, the and Medical Admission and Discharge Book, W. O. Book, 27; Medical Case Journal. Book, W. O. Book 187 ; Requisition Book, W. O. Book 30; Medical History Sheets, W. O. Form 1143; Pack Store Book, W. O. Book, 182; and Medical Journal.

79. They will fill up the Medical Certificates (W. O. Book Medical Cer-172) with the result of cases of sickness embarked, and transmit tificates to be forwarded. them to the Principal Medical Officer in order that the result may be entered in the Admission and Discharge Book at the Hospital of the Station from which the Sick proceeded.

80. Medical Officers proceeding in charge of troops on board Section 17, ship will make themselves specially acquainted with Section 17 Queen's Re-of The Queen's Regulations and Orders for the Army, 1873, movement of referring to the movement of Treams have a section of the section of the section of the movement of referring to the movement of Troops by sea, as well as with the troops by sea. sanitary duties laid down in Part 5, Sec. VII of these Regulations.

PART 2.-ARMY HOSPITALS.

SECTION I.-ORGANIZATION AND GENERAL MANAGEMENT OF HOSPITALS.

81. Hospitals are classified as follows :--

- a. General Hospitals.
- b. Station Hospitals.
- c. Non-Dieted Hospitals.
- d. Female Hospitals.
- e. Field Hospitals.

82. All Hospitals will be under the immediate control and management of the Medical Officers appointed to the charge of them.

83. The Medical Officers in charge of Hospitals will be responsible to the Principal Medical Officer of the District, and will carry on the discipline of the Hospital, subject to the local Military Commanding Officer.

84. General Hospitals and Station Hospitals will be fully equipped and dieted agreeably to Part 2, Sections II, III, VII.

85. Non-Dieted Hospitals will be equipped according to instructions contained in the Regulations for Non-Dieted Hospitals. Part 2, Section IV.

86. Female Hospitals will be dieted and equipped according to the Regulations for Female Hospitals. Part 2, Section IV.

87. Field Hospitals are of two kinds, as laid down in the Regulations for Field Hospitals. Part 2, Section VI.

88. All Hospitals will be provided with Instruments, Material, and Medicines, agreeably to Part 3, Sections I and II, of these Regulations.

Control of Hospitals.

Discipline.

General and station hospitals diet.

Non-dieted hospitals.

Female hospitals.

Field hospitals.

Medicines and surgical equipment. General Hospitals.

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Section II.

SECTION II.-GENERAL HOSPITALS.

I.-Organization.

II.-Principal Medical Officer.

III.-Sanitary Officer.

IV.-Registrar.

V.-Nurses.

VI.-Army Hospital Corps, and Medical and Surgical Supplies.

I.-ORGANIZATION.

89. General Hospitals will be organised under the following Officers :---

> Principal Medical Officer. Sanitary Officer. Registrar. Superintendent of Nurses. Officer of Orderlies, Army Hospital Corps.

II .- PRINCIPAL MEDICAL OFFICER.

90. The Principal Medical Officer will be nominated by the Director General of the Army Medical Department, will be of Principal removable by him, and will be subject to his directions in all Medical matters connected with the Military discipline and professional management of the Hospital.

91. Subject to the General Officer Commanding the District, Disciplinary he will have Military Authority over all Medical Officers, Officers, Power. Non-Commissioned Officers and Privates of the Army Hospital Corps allowed to the Hospital, over all patients in Hospital, and Non-Commissioned Officers and Privates of other corps attached to the Hospital for duty, without their own Officers; and will be responsible for the discipline of the whole establishment.

92. He will personally superintend the treatment of the sick, Superintenin order to ensure proper attention on the part of the Medical dence. Officer and attendants; and will detail such Orderly Medical Officers, and such night guards of Army Hospital Corps as he may consider necessary. He will also see that all returns and reports required by the Director General are prepared and forwarded.

93. He will satisfy himself as to the clothing, bedding, and Hospital comfort of the sick; and as to the quality and cooking of diets. equipment.

94. He will direct a list of Medicines and Medical and Surgical Medicines and appliances required for the Hospitals, to be made out at the Surgical

Appointment Officer.

appliances.

PART 2.

General Hospitals.

PRINCIPAL MEDICAL OFFICERS-continued.

usual periods, and transmitted to the Director General of the Army Medical Department.

95. He will ascertain that the stores and equipment of the hospitals which are under the responsible charge of the Officer of Orderlies, are according to regulation, in good condition, and sufficient for the requirements of the Hospital, according to maximum occupation during the preceding three years. He will direct the Officer of Orderlies to keep the equipment up to this standard.

96. He will ascertain that the Officer of Orderlies forwards timely requisition for all provisions, stores, and transport that may be necessary, to the Commissariat Officer in charge.

97. He will direct the Officer of Orderlies to forward to the Royal Engineer Department a statement of any alterations or repairs to buildings that may be required, or for any changes or improvements in the sanitary arrangements of the Hospital or vicinity.

98. Under emergent circumstances, he will direct the Officer of Orderlies to hire or provide any transport, labour, supplies, or equipment which cannot be obtained from the Commissariat in charge, and which he considers to be absolutely necessary for the Hospital. In these cases the authority of the General Officer Commanding, and covering approval of the Secretary of State will be at once applied for.

99. He will be empowered to call upon the Triennial Contractor for the Royal Engineer Department or his agent, or, in the Contractor's default or absence, on some other local tradesman, to carry out such urgent repairs, or sanitary alterations to buildings as the Royal Engineer Department may not be in a position to perform without delay, and which he considers indispensable and urgent. In all such cases, he will at once send to the Commanding Royal Engineer a copy of the order he may have given, to enable that Officer to arrange for the payment of the work, the cost being chargeable to the vote for works.

100. He will approve all requisitions made by the Officer of Orderlies on the Commissariat Department for equipment, and for all services on the Royal Engineer Department, and will state when these requirements are of an urgent nature.

101. He will issue orders for the hours during which patients in Hospital may receive visits from their friends or comrades.

III.-SANITARY OFFICER.

Principal Medical Officer-responsible Sanitary Officer.

Requisitions

on Commis-

Royal Engi-

neer Departments.

Visitors to Patients.

sariat and

102. The Principal Medical Officer in charge of a General Hospital is the responsible Sanitary Officer; but he may detail a Medical Officer to assist him in making sanitary inspections and reports.

Stores and equipment to be in good condition and according to occupation.

Requisitions.

Repairs.

Labour supplies or equipment required under emergent circum-

repairs.

stances. Urgent

Section II.

ARMY HOSPITALS.

General Hospitals.

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IV .-- REGISTRAR.

103. In every General Hospital a Medical Officer will be Appointment appointed by the Director General of the Army Medical Depart- of Registrar. ment to act as Registrar, and keep the Statistics of the Hospital.

104. The Registrar will compile all statistical returns that Statistical are required by regulation, or may be called for from time to Returns. time, taking the Admission and Discharge Book as his only guide for information and statistics, and dealing with each patient as a unit in a sick population of which he has to give a complete account.

105. He will draw up all reports necessary to explain the Reports exreturns, submitting them to the Principal Medical Officer for planatory of approval before embodying them in that portion of any Return Returns. set apart for such remarks; he will also prepare the general reports, furnished by the Principal Medical Officer, from all available information; but such reports will not deal with the specialities of cases or details of treatment.

106. He will enter the name of every man admitted into Name of every Hospital, whether requiring treatment or not, or whether man admitted suffering from disease or not, in the Admission and Discharge Book (W.O. Book 27) filling up the various headings from the in Admission man's documents, leaving the column for diseases, wards, &c., and Discharge blank, till supplied with a report giving the man's disability as Book. diagnosed by the Medical Officer under whom he is placed in Hospital, which information, together with the name or number of the ward and division in which the patient is being treated, will be conveyed to him by medical certificate immediately the diagnosis is determined.

107. Cases not diagnosed in time, will be shown in the Weekly Cases not Returns as "not yet diagnosed," and if eventually the men be diagnosed. pronounced to be free from disease, and fit for duty, they will be so accounted for in the Weekly State, and also in the Admission and Discharge Book.

108. He will assign each patient on admission an index num- Index ber (the printed or black ink number in column 1 of Admission Number for and Discharge Book), which will accompany him through every stage of his sojourn in Hospital, and this number will be entered upon every record or other document having reference to the man's medical history during his stay there.

109. He will, in the event of the admission into Hospital of Entries in cases not to be included in the general Returns, or to be accounted for separately, make the entries in the Admission and Book. Discharge Book in the following manner; viz., the consecutive or index numbers in the first column, either printed or in black ink, to apply to the whole admissions for the year from No. 1 upwards; the different classes, say for example "invalids," "duty men," "Army Hospital Corps," being respectively distinguished by a continuous supernumerary number, in the order of admission of

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to be entered

each Patient.

Section II.

Section II.

General Hospitals.

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REGISTRAR.-continued.

each class, placed in different coloured inks below the index No., say, for example, "Red" for invalid, "Black" for duty men, "Blue" for Army Hospital Corps; thus $\frac{10}{1}$, $\frac{84}{5}$, $\frac{120}{15}$, would represent the 10th general admission, but the 1st of invalids; the 84th general admission, but the 5th of duty men; and the 120th general admission of the 15th of Army Hospital Corps, the lower number indicating the consecutive cases of each class admitted. This will enable the number of each class admitted to be easily dealt with separately, and facilitate the compilation of any requisite returns by classes.

110. He will be present with a clerk at the hour of admission each day and at all times on the arrival of a party of invalids, to enter the names of all men admitted in the Admission and Discharge Book, and to see that the names of invalids correspond with the particulars in each nominal roll.

111. He will be informed at once of the arrival of invalid parties by an orderly sent by the Medical Officer on duty, and should he be necessarily absent he will arrange with some responsible Medical Officer for the due performance of these duties on his behalt.

112. He will be immediately informed by the Medical Officer in charge of the case of every change in the nomenclature of disease arising during the progress of the case; this information to be communicated by medical certificate.

113. He will, on the final discharge of a soldier from Hospital, or when his case is otherwise disposed of, fill up the remaining columns in the Admission and Discharge Book, the necessary information having been at once communicated to him, by medical certificate, by the Medical Officer who has had charge of the case during its last stage.

114. He will, at Hospitals where invalids are admitted or disposed of, keep all books, forms, or returns in connection with them that may be required by regulation, receiving the necessary information from the invalid's documents, which will be handed to him on their arrival at the Hospital, which documents will be available through him for the information of the Medical Officer in charge of the case. On the final disposal of all invalids' cases the detailed medical histories will be completed and retained in the registry for permanent record there.

115. He will take charge of, keep up, complete at termination of case, and transmit to their final destination, as laid down by regulation, the Medical History Sheets of all men admitted, but these documents will be available through him for the information of the Medical Officer in charge of the case during its treatment.

116. He will, when Medical and Surgical Case Books which have been in use in the Hospital have been filled up, and are no

Registrar to be present on the arrival of Invalids.

Change in nomenclature of disease.

Final discharge from hospital.

Books, Forms, and Returns, relating to Invalids.

Medical History Sheets.

Custody of Case Books.

General Hospitals.

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REGISTRAR-continued.

longer required in the wards, be charged with their permanent custody; and he will take care to have them properly numbered and arranged to facilitate easy reference to their contents.

117. He will, when this duty is not otherwise provided for, Meteorohave charge of and be responsible for the meteorological instru- logical Instruments, and the proper registration of the observations requisite Returns. to enable him to prepare the return of these observations.

118. He will, from the information contained in his Admission Daily State of and Discharge Book, furnish the Principal Medical Officer with a morning daily state of sick, and such other particulars as to vacant beds, &c., in divisions and wards as may be called for.

119. In carrying out these duties, it is to be distinctly under- Further stood-

a. That only one Admission and Discharge Book (W.O. Book 27) numbered from No. 1 upwards for each year is to be used, in which the name of every man, whether invalid or soldier, of whatever corps or from whatever station, is to be recorded in the order of admission. In the event of W.O. Book 27 being insufficient for the number of admissions, a second or as many books of the same Form as may be required can be taken into use, the numbers from No. I upwards being made continuous throughout the whole series for the year.

b. That at all times the Medical Certificate will be the means of communicating information to the Registrar, or to and from one Medical Officer to another.

V.-NURSES.

120. A Superintendent of Nurses, with the necessary Staff of Superinten-Trained Nurses, will be appointed by the Secretary of State dent and Staff on the recommendation of the Director Concrel of the Area of Trained on the recommendation of the Director General of the Army Nurses. Medical Department to General or other Hospitals, and no Nurse will be appointed to or removed from a Hospital without reference to the Director General.

121. The Superintendent and Staff of Sisters will receive Instructions their instructions with regard to the nursing arrangements from ments. the Medical Officer in charge of the Hospital to which they may be attached.

122. The Superintendent will select and dismiss sisters, sub-ject to reference in each case to the Director General of the Army Medical Department, through the Medical Officer in charge of sisters. the Hospital, and Principal Medical Officer of the District.

123. She will exercise control and supervision over the Nurs- Supervision of ing Sisters.

124. She will allot specific duties to them and will place Duties to be C 2 (429)

and arrange-

nurses.

allotted.

Instructions.

Section II.

Section II.

General Hospitals.

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NURSES-continued.

each in charge of one or more wards, as may be considered necessary by the Medical Officer in charge, and will be assisted in the wards by orderlies of the Army Hospital Corps.

125. She will not be expected to arrange for night duties, unless her establishment of Nursing Sisters is on a war footing, or considered sufficient for the duty by the Principal Medical Officer of the District.

126. She will not be expected to take charge of, or detail Nursing Sisters for duty in the Infectious Female Wards.

127. The Nursing Sisters will not be required to serve in venereal or convalescent wards but only in the general wards of the hospital.

128. They will enter on their ward duties each day at such hour as the Superintendent may direct under the instructions of the Medical Officer in charge of the hospital.

129. They will be responsible that arrangements are made for the personal cleanliness of the patients; that the wards, and furniture and utensils therein are kept clean; that the orders of the Medical Officer are obeyed; and that helpless patients are washed before the morning visit of the Surgeon.

130. They will keep the keys of store closets or lock-up places in the wards, and nothing belonging to the wards will be kept in the sisters' room.

131. They will be present and render assistance at Surgical operations if required.

132. They will give such instructions to the orderlies attached to or serving in their wards, as may be necessary.

133. They will report any neglect of duty, impropriety of conduct or breach of discipline, either by the orderlies or patients in their wards, to the Superintendent, who will report immediately to the Medical Officer in charge; on an emergency she will report directly to the Medical Officer on duty.

134. They will not be employed to bring diets or extras to the wards.

135. They will carry out the directions of the Medical Officer with regard to the application of dressings, and observe the hours tor administration of diets, extras, or medicines, as written in the ward book, or specified by the Medical Officer.

136. Medicines, wine, spirits and malt liquors will always be administered during the day by the Sister, at the hours and in the quantities ordered by the Medical Officer.

137. The Surgeon of Division or prescribing Medical Officer of a ward, as the case may be, in any General or other Hospital where there are Nurses, will require the Nurse to attend him in his visits, and will deliver to her his orders with reference to the sick; but when he considers that any change of arrangements of duty is desirable, he will communicate on the subject directly with the Superintendent of Nurses.

Infectious Female Wards. Nurses not required in certain wards. Hours of attendance.

Night duties.

Duties in the wards.

Charge of keys.

To be present at surgical operations. Instructions

to orderlies. Discipline in the wards.

To carry out directions of Medical Officer.

Administration of medicines and medical comforts. Nurse to attend Medi-

cal Officer.

General Hospitals.

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NURSES-continued.

138. The Medical Officer will notify immediately to the Super-intendent any neglect of duty or misconduct on the part of a part of a Nurse, in order that the necessary steps may be taken by the Nurse. Superintendent.

VI. -ARMY HOSPITAL CORPS, AND MEDICAL AND SURGICAL SUPPLIES.

139. The necessary medical and nursing establishments of Army Hosthe Army Hospital Corps will be detailed, and the supply of and Medical Medical and Surgical Material will be laid lown by the Director Supplies. General of the Army Medical Department, for each General or other Hospital.

140. The establishments referred to in the foregoing para- Discipline of graph will in matters of discipline and in all other respects be Army Hosunder the direction and control of the Principal Medical Officer, pital Corps. or Medical Officer in charge of the hospital.

Section II.

22 ARMY HOSPITALS.

Section III.

Station Hospitals.

SECTION III.-STATION HOSPITALS.

For what purpose established.

Administration.

Medical Officer in charge.

Medical Staff at certain Station Hospitals.

Distribution of Sick.

Army Hospital Corps, discipline and control of.

Hospital accommodation. 141. Station Hospitals will be for the reception and treatment of sick from all Corps in Garrison, including those of the Auxiliary Forces when embodied, and such other soldiers, seamen of the Royal Navy, and Royal Marines, as the Officer commanding the Station may direct to be admitted therein.

142. All Station Hospitals will be subject to the authority of the General or other Officer in command of the Troops, but the internal administration will be under the control and superintendence of the Principal Medical Officer of the District, who will be responsible that the arrangements are suitable and in accordance with existing regulations.

143. The Director General of the Army Medical Department will especially appoint a Medical Officer to the charge of each Station Hospital at such places as may be deemed necessary, and this Officer will not be subject to removal without the Director General's sanction. At Stations where there is a Brigade Depôt the Surgeon-Major in charge of the Depôt will, as a rule, have charge of the Station Hospital, in addition to his other duties; the charge of the Station Hospital will otherwise devolve on the Senior Medical Officer present, in addition to his other duties.

144. The Director General will appoint to certain Station Hospitals a fixed Staff of Medical Officers, who will act under the Medical Officer in charge, and the Officers appointed to the Staff will not be moved by the Principal Medical Officer of the District without reference to the Director General, except under very urgent circumstances, which will be reported at once to the Director General.

145. Station Hospitals will be for the treatment of sick generally, and the Medical Officer in charge will at his own discretion appropriate wards for the treatment of infectious or contagious diseases, lunatics, sick prisoners, ophthalmic, or other special cases.

146. The establishment of Officers, Non-commissioned Officers, and Men of the Army Hospital Corps, and others appointed for duty in the Hospital, will be under the disciplinary control of the Medical Officer in charge of the Hospital, from whom will emanate all instructions, orders, arrangements, and details for carrying on all duties connected with the Hospital.

147. The Officer of Orderlies will take over from the Commissariat Officer in charge the duly appropriated Hospital

Station Hospitals.

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STATION HOSPITALS .- continued.

accommodation except what may be deemed to be absolutely necessary for Commissariat Hospital Reserve Stores. He will then hand the same over to the Steward at Out-Stations, who will be responsible to the Officer of Orderlies.

148. Hospital enclosures will be allotted to the Officer of Hospital Orderlies by the Commissariat Officer in charge, and be dealt enclosures. with as part of the Hospital premises. A Hospital servant will act as gardener where necessary, and all requisitions for the proper maintenance and repairs of such enclosures will be made on the Royal Engineer Department.

149. Every Station Hospital will be equipped according Equipment to the regulated scale laid down in the Regulations for the Com- and stores. missariat Department [Revised Army Regulations, Vol, IV. Part I, Section XI], the proportion of stores being calculated on the maximum occupation during the preceding three years.

150. This equipment will be issued by the Commissariat Respon-Department on inventory to the Officer of Orderlies, who will sibility. then become financially responsible for the same.

151. A general inventory (W. O. Form 1411) of furniture, General utensils, bedding, and clothing will be prepared in duplicate by Inventories. the Commissariat Department for each Hospital in the district. These inventories will be signed by (a) the Commissariat Officer in charge, and (b) the Officer of Orderlies and Steward responsible for the care and safe custody of the stores. One copy of the inventory will be retained by the Commissariat Department and the other by the Officer of Orderlies. A third copy, if requisite, may be made out by the person having the actual custody of the stores.

152. Inventory boards, one showing the fixtures (to be Ward signed by an Officer of the Royal Engineer Department), the other, the furniture and utensils, (to be signed by the Commissariat Officer in charge), will be made out and hung up in each ward or room.

153. No alterations or additions will, under any circum- Alterations in stances, be made in the inventory boards, except by the re- ward invenspective Officers of the Royal Engineer or Commissariat Departments.

154. Care will be taken not to enter on these boards any of the articles of personal equipment mentioned in paragraph 115 (K) and Appendix, page 42, Army Hospital Corps Regulations.

155. Should it at any time be absolutely necessary to Necessity for make any alteration in the number of articles in a room or ward, be notified by due notice thereof will be given by the Officer of Orderlies to Officer of the Commissariat Officer in charge, in order that he may prepare Orderlies. fresh inventory boards.

156. Bedding in wards will not be entered on the Bedding not inventory boards, but in a Bedding Book, W. O. Form 54, to be entered on Inventory altered to meet the description of Hospital stores.

Inventories.

Boards.

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Station Hospitals.

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STATION HOSPITALS-continued.

Bedding account with Wardmasters.

157. The Steward or other person in charge of the equipment will open an account in a Bedding Book against each Wardmaster.

158. Each Wardmaster will be supplied with a bedding book.

159. All transactions between Steward and Wardmaster will be duly recorded therein, and the signatures of both issuer and receiver will be attached in the columns set apart for that purpose.

160. At the quarterly inspections made by an Officer of the Royal Engineer and Commissariat Departments, the Officer of Orderlies will attend.

161. At monthly and quarterly inspections the Officers will be careful to verify the balances of bedding in charge of each Wardmaster, and see that the totals of the Bedding Books agree with the Steward's bedding book.

162. All articles requiring to be washed will be handed over to the Commissariat Officer in charge in exchange for a similar number of clean articles. Should it, however, be found more convenient, under exceptional circumstances, tor the articles to be issued to, and received direct from, the contractor or laundry, this will be done under the direction of the Commissariat Department, and a barrack serjeant will be present at the issue and return of the articles. The Washing Book (W. O. Book 175) will be kept by the Commissariat Department.

163. On the transfer of a Steward or other person having the custody of stores from one hospital to another, steps will immediately be taken to ensure the stores being counted and duly handed over to his successor. The Officer of Orderlies will be present at the transfer.

164. Transfers from one Officer of Orderlies to another will be witnessed by the Commissariat Officer in each Sub-District from whom the stores are held on inventory, unless an Officer from the Surveyor General's Department is specially nominated to attend.

165. In non-dieted Military Hospitals which are in charge of Civil Practitioners, the number of beds considered necessary by the Director General of the Army Medical Department, for the treatment of severe cases, will be fully equipped and handed over by the Commissariat Department to the Officer of Orderlies, who will place the equipment under charge of a Non-commissioned Officer of the Army Hospital Corps.

166. Damages to buildings will be assessed by the Royal Engineer Department, and those relating to damages to Hospital clothing and stores, or charges for the loss of Hospital clothing and stores, by the Commissariat Department, according to the instructions laid down in the Queen's Regulations and

Transactions between Steward and Wardmaster.

Quarterly inspection by R.E.D. and Commissariat Department.

Inspecting Officers to verify the balances in Bedding Books.

Exchange of soiled linen, &c.

Transfer of Steward, &c.

Transfers to be witnessed by Commissariat Officer.

Non-dieted Ho pitals.

Assessment of damages.

Station Hospitals.

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STATION HOSPITALS-continued.

Orders for the Army, 1873, section 15, paragraphs 26 to 30; Regulations for the Commissariat Department, Part I., section XI (Revised Army Regulations, Vol. IV.); and Regulations for the Royal Engineer Department, section IV (Revised Army Regulations, Vol. V.) These charges will be noted in the Personal Charge Book (W.O. Book 51), referred to in the Army Hospital Corps Regulations, paragraph 118, and be dealt with as directed therein.

167. General charges for damages or deficiencies attri- Assessment of butable to wantonness or neglect, will be assessed by the Royal general Engineer and Commissariat Departments, proportionately against charges for damages. Regiments or Corps, as hereinafter provided in paragraph 200 of these Regulations.

168. The Medical Officer in charge will distribute the Duties of duties between himself and the Medical Officer serving under Medical Officers in him, and will exercise a general supervision over all the sick in charge. Hospital, and the expenditure of medicines, diets, and extras.

169. Each Medical Officer will be responsible for the Responsibility 169. Each Medical Oncer will be responsible for the of Medical Medical treatment, dieting, and nursing of the patients under Officers in his care; but the attention of the Medical Officer in charge will charge of be drawn to any serious cases under the care and treatment of serious cases. the Medical Officer serving under him.

170. All matters of doubt and difficulty either in the Matters of management of the sick or in Hospital administration, which doubt and difficulty. cannot be decided by the Medical Officer in charge, will be referred by him in writing to the Medical Principal Officer of the district.

171. A duly qualified Serjeant of the Army Hospital Compounder Corps will be appointed at such Hospitals as may be decided on of Medicines. by the Director General to act as a Compounder of medicines. He will be responsible under the Medical Officer for the care and safe custody of the medicines, surgical appliances and instruments, and for the careful dispensing of the medicines. Medicines of a poisonous nature, and expensive drugs, will be kept under lock and key.

172. The Medical Officer in charge will be held directly Responsibility responsible for all the duties of the Hospital. He will take care of the Medithat the instruments, medicines, Hospital equipment, clothing charge. and stores held on inventory are in good condition, sufficient, according to regulation, and kept in sate custody; that the supplies are of good quality, and that the cooking and distribubution of the diets are properly carried out.

173. Requisitions for Hospital supplies from the Commissariat Department or from contractors will be prepared and signed by the Officer of Orderlies attached to the Hospital, or by the Steward where there is no Officer.

174. The details of requisitions will be fully entered on Counterfoils the counterfoils, and these also will be signed by the Officer or of requisitions.

Requisitions for supplies.

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Section III.

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Station Hospitals.

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STATION HOSPITALS .- continued.

Non-commissioned Officer of the Army Hospital Corps who prepares them. The countertoil will be retained as an office record.

175. Medical Officers will visit the Hospitals twice daily, and at such other times as may be required. At Home Stations, the hours of morning visit will be before 10 o'clock a.m., and the hours of evening visit between 5 and 8 o'clock. At Foreign Stations, the morning and evening visits will be made at such hours as are suitable to the climate and station.

176. The men of each Corps sent for admission will be accompanied by a Non-commissioned Officer, who will bring with him the sick reports in duplicate, as laid down in General Order 14 of 1874, and General Order 20 of 1876.

177. Except in case of accidents or other emergencies, the sick will, at Home Stations, arrive at the Hospital before 9 a.m. in summer, and 10 a.m. in winter. At Foreign Stations, they will arrive at such suitable hours as may be determined upon.

178. The Medical Officer in charge will examine, as soon as possible, all men sent to Hospital, will diagnose their diseases, and allot them to wards. He will cause the names of those admitted to be entered with the particulars in the Admission and Discharge Book (W.O. Book 27), the disease and the word "Hospital" being entered in ink opposite each man's name on both the sick reports : one of these will be returned without delay to the Officer commanding the Corps; the other will be retained as an office record.

179. In the event of a sick soldier not being likely to require treatment beyond the day on which he has reported himself sick, he will be detained in the Hospital for that day only and subsisted from his Corps, to which he will return if considered fit for duty; but if at the evening visit he is found unfit for duty, he will be regularly admitted and placed on Hospital diet for the following day, notice to that effect being sent to the Officer commanding the Corps.

180. When men are admitted into Hospital, the headings of the Diet Sheets (W.O. Form 1145) will be filled in immediately from the Morning Sick Reports by the Wardmaster, who will transmit these sheets daily, after the diets and extras are entered, to the Steward, to enable him to prepare the Provision Ticket (W.O. Form 183), in duplicate, to which his signature will be attached. He will send one copy to the Wardmaster to enable him to enter an abstract of the diet and extras on W.O. Form 175, the other to the Cook that he may distribute the diets for the respective wards. W.O. Form 175 will be signed daily by the Medical Officer in charge, and at the end of the month will be completed and forwarded to the Commissariat Officer in charge, with W.O. Form 184.

Attendance of Medical Officers at Hospital.

Men sent for admission.

Time for arrival of Sick at Hospital.

Course on arrival at Hospitals.

Men detained in Hospital.

Preparation of Diet Sheets, Provision Tickets, &c.

Section III.

Station Hospitals.

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STATION HOSPITALS-continued.

181. From the information contained on the Provision Preparation Ticket (W.O. Form 183), the Steward will keep a daily record of W.O. Form on W.O. Form 185 of the number and description of diets and extras issued to each ward. This form will be examined daily by the Officer of Orderlies attached to the Hospital, if present, and completed at the end of the month by the Steward, who will sign and submit it for the examination and signature of the Officer of Orderlies; after which it will be retained as a Hospital record.

182. On the last day of the month a statement of all Preparation of receipts and issues during the period will be prepared by the W.O. Form Steward on W.O. Form 184, which will be submitted for the examination and signature of the Office of Orderlies attached to the Hospital, and forwarded to the Commissariat Officer in charge.

183. The names of men intended for discharge from Notice to be Hospital will be sent as early as possible to the Officer Com- sent to Commanding the Corps, on W.O Form 986, in order that a Non- Officer of men commissioned Officer may be sent to conduct the men dis- discharged. charged back to barracks at such suitable hour in the afternoon or evening as may be determined on.

184. When a man is discharged from or dies in Hospital, Men disthe Medical Officer in charge of the case will immediately charged and acquaint the Medical Officer in charge of the Hospital, and all deaths. deaths will be at once reported to the Officer Commanding the Corps, as well as to the Officer Commanding the Station, on that portion of W.O. Form 986 set apart for that purpose; and the date on which the interment may take place will be stated.

185. Whenever it may be necessary to bring forward Invaliding. soldiers for discharge as Invalids, notice of such intention will be sent by the Medical Officer in charge of the Hospital to the Officer Commanding the Corps, who will furnish all the information as to service and other details, required on the first page of W.O. Form 891.

186. All medical documents in connection with the Invalidis Invaliding will be prepared by the Medical Officer under whose care the case may be, and they will be sent to the Medical Officer in charge of the Hospital for examination, counter-signature, and transmission to the Principal Medical Officer of the District.

187. In Station Hospitals separate Admission and Dis- Admission charge Books, on W.O. Book 27, will be kept for (a) Regular and Discharge Troops; (b) for Troops of the Auxiliary Forces; and (c) for Seamen of the Royal Navy, Royal Marines, Foreign Sailors, and others that may be admitted into Hospital under the special sanction of the Officer Commanding. Admission and Discharge Books will be permanently retained in the Station Hospitals. At the end of each year a space will be left in the Admission and Discharge Books before commencing the entries for the following year.

documents.

Section III.

Station Hospitals.

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STATION HOSPITALS-continued.

Medical History sheets.

Daily state of Sick.

Transmission of Dietary Returns, &c.

Diet Sheet and Extra Sheets.

Preparation of Dietary Returns, &c.

Stoppage returns.

Articles for cleaning purposes.

Detailed them not required. Fuel.

188. The Medical History Sheets of all Corps will be retained at General and Station Hospitals, and on removal of Corps the sheets will be completed and handed over by the Medical Officer in charge of the Hospital to Commanding Officers.

189. The Medical Officer in charge will furnish a daily state of the Sick in Hospital to the Officer Commanding the Station, on W. O. Form 986. At the Head Quarters of the District this state will be sent to the Principal Medical Officer for transmission to the Officer Commanding.

190. The Diet Sheets (W.O. Form 1145), and extra sheets, (W.O. Form 1200), will be forwarded at the end of each month, as directed in paragraph 466 of these Regulations.

191. The Principal Medical Officer will forward to the Commissary General of the District the Diet Sheets (W.O. Form 1145), and the Extra Sheets (W.O. Form 1200) as soon as possible after the close of each month. These vouchers (to support and verify the statement of provisions rendered by the Steward on W.O. Form 184) will be in original. In no instance will copies of these be substituted on account of the originals being dirty or defaced.

192. When there is an Officer of the Army Hospital Corps attached to a Station Hospital, he will be responsible for the preparation of the Dieting Returns, W.O. Forms 183 and 184.

193. He will also make out the stoppage returns, W.O. Forms 152, 152a, and 152b, from the Admission and Discharge Book, in duplicate, and submit them to the Medical Officer in charge for counter-signature and transmission, one copy being sent to the Paymaster of the Corps. These stoppage returns should in all respects agree with the abstract entered on the first page of W.O. Form 184, and if a discrepancy is discovered in the stoppage accounts, the necessary correction of W.O. Form 184 will be notified to the Commissariat Department.

194. Articles for cleaning purposes will be drawn from the Commissariat Department monthly, in accordance with the scale laid down in the Appendix to Clause 177, Army Circulars, 1874, and the directions in Clause 91, Army Circulars, 1877.

195. No detail of expenditure of these articles will be required ; expenditure of the requisition duly signed, and signed a second time as a receipt, is all that is necessary.

196. Fuel will be drawn from the Commissariat Department; in accordance with the scale laid down in the Regulations relating to fuel and light in Clause 56 (b) Army Circulars 1878, in convenient quantities sufficient for a period not exceeding one month. The requisition will not show details, but merely state the quantity required. The Officer of Orderlies or Steward will sign the requisition, and sign it a second time as having received the supply, thus rendering at the same time both requisition and receipt.

Station Hospitals.

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STATION HOSPITALS-continued.

197. The daily expenditure of the supplies of fuel will be Detail of shown in detail on W.O. Form 1417, which will be submitted in expenditure. original to and signed by the Medical Officer in charge every day, in the column for remarks, and at the end of the month this form will be completed, both as regards the recapitulation and expenditure, and signed by the Officer of Orderlies or by the Steward. It will then be countersigned by the Medical Officer in charge, and forwarded to the Commissariat Officer in charge.

198. Monthly inspections will be made by the Officers of Quarterly and Orderlies at all Stations, to ascertain if the fixtures, equipment, monthly inspection of and stores in charge at each Hospital are complete, conformably Stores. to section 15, paragraph 26, Queen's Regulations and Orders for the Army 1873.

199. At these inspections the Officer of Orderlies will examine the Steward's books and records, reporting the result to the Medical Officer in charge of each Hospital.

200. The Officer of Orderlies will furnish the Royal Engineer Charges to be and Commissariat Departments, at their quarterly or marching- levied against out inspection, under the Regulations of those Departments Regiments or Corps, or respectively (Revised Army Regulations, Vols. IV and V), those connecwith such information as may be necessary to enable the ted with the damages and deficiences to be assessed against the Regiments Hospital. or Corps whose sick have been treated in Hospital, or against those connected with the Hospital, as the case may be.

201. On the relief of the Medical Officer in charge of a Station Transfer Hospital he will prepare, in duplicate, a transfer return of all returns of instruments, medicines, and appliances, on W.O. Form 299, with instruments, &c. all particulars showing the expenditure up to date; one copy will be forwarded to the Director General, Army Medical Depart- Records, ment, the other will be retained at the Hospital. A manuscript books, and transfer return of all medical records, books, and other documents documents. in use will likewise be prepared in duplicate, and similarly dealt with.

202. A transfer return of Blank W.O. Forms and Books will Blank W.O. be prepared in duplicate on W.O. Form 165; one copy will be Forms. sent to the Principal Medical Officer of the District, and retained Stationery. by him, the other will be kept in the Hospital; a transfer return of stationery in duplicate will also be made out and disposed of in the same manner. All these transfer returns will be signed both by the Officer giving over, and the Officer assuming, charge.

203. Whenever it becomes necessary to employ soldiers in Employment Hospitals in substitution of, or addition to the Staff of the Army of extra Hospital Corps, the following will be the proportions authorised Orderlies. to be employed, viz .:--

1 Non-Commissioned officer, 1 When the sick exceed 10 { Private as cook, with order-lies, at the rate of 1 fcr ten patients.

Section III.

Station Hospitals.

STATION HOSPITALS-continued.

When there are at least 57 1 Orderly in addition to the patients over the 10 or above. multiple of 10 ...

A Non-Commissioned Officer as cook, with one private as When the sick exceed 50-Assistant Cook.

Special Orderlies.

204. Special Orderlies in excess of the numbers specified in paragraph 203, will only be employed with the sanction of the Principal Medical Officer, who will in such cases report the circumstances under which he approved their employment to the Director-General of the Army Medical Department, for the information of the Secretary of State.

205. Any charges for men employed without the Director General's sanction, or on insufficient grounds, will be disallowed, and made against the Medical Officer under whose authority they were employed.

206. At the end of every month the Medical Officer in charge return of men will send to the Paymaster of each Regiment to which the soldiers employed in Hospital duties belong, a return on W.O. Form 194 of the men necessarily employed.

207. The following books will be kept on charge at the Station Hospital and produced when required by the Principal Medical Officer of the District :--

> British Pharmacopoeia. Snellen's Test Types. Priced Vocabulary of Stores. Test Dot Cards, W.O. Form 1233. Army Medical Reports, commencing at 1874. Hospital Ready Reckoner.

208. Stationery will be supplied on requisition made halfyearly, by the Principal Medical Officer, according to a regulated scale. War Office Forms and Books will be supplied from the same source on requisition made half-yearly (W.O. Form 165).

209. All medicines and surgical appliances required for Officers, their families, the wives and children of men belonging to Regiments, and others entitled by regulation to medical attendance, willbe supplied from the Hospital Surgery, at hours fixed by the Principal Medical Officer, and the Medical Officer in charge will make such arrangements for the making up of prescriptions, and the issue of medicines, as not to interfere with the working of the Hospital. Only in cases of emergency will medicines be supplied at other hours than those laid down by the Principal Medical Officer of the District.

210. The Medical Officer in charge will cause a Weekly Return to be made out on W.O. Form 931 of men admitted into Hospital or discharged therefrom after treatment on account of

Charges for men unauthorised will be disallowed.

employed.

Books.

Stationery, &c.

Medicines for Officers and their families, women, children, &c.

Misconduct Returns, W.O. Form 931.

Station Hospitals.

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STATION HOSPITALS-continued.

the following diseases, viz .: - Primary Venereal affections, Gonorrhœa (fresh attacks only), and Delirium Tremens. This Return will be signed by the Medical Officer in charge and forwarded to the Officer Commanding for signature and transmission to the Paymaster of the Corps.

211. Vaccination and re-vaccination of all soldiers and recruits Vaccination. will be performed at Station Hospitals, where the vaccination registers will be kept, in which the names of men for all arms of the Service will be entered.

212. When a Corps leaves a Station, the sick under treatment Sick to be in the Station Hospital will be detained till sufficiently recovered detained to rejoin the Head Quarters of the Corps.

213. Allauthorised returns required by Regiments from Station Returns. Hospitals will be sent direct to Officers Commanding Regiments or Corps, by Medical Officers in charge.

214. All applications for documents will be made in the first Applications instance direct by Regimental Commanding Officers to Medical ments. Officers in charge of Hospitals, or on the other hand by Medical Officers in charge to Commanding Officers; but any further reference or correspondence regarding them will be addressed, through the proper channel, to the General or other Officer Commanding the Brigade or Station.

215. The assembly of Regimental Boards in Hospital will be Regimental arranged for between Officers Commanding the Corps and the Boards. Medical Officer in charge.

216. When patients in Hospital are transferred from one Corps, Patients Battery, Troop, or Company to another, Officers Commanding transferred Corps will inform the Medical Officer in charge of the Hospital, Hospital. in writing, of such transfer.

217. When an Officer is placed on the sick list or discharged Officers placed from it, intimation will be sent immediately by the Medical on or dis-Officer in charge of the case, on W.O. Form 986, to the Officer charged from Commanding the Corps, or to the head of the Department to which the Officer belongs.

218. When sick soldiers are transferred from one Hospital to Medical another, the Medical Certificate W.O. B. 172 will be used in certificate conveying information. A brief detail of the case will be 172, to be written on the back of the certificate which has been left blank used in the for this purpose.

recovered.

W.O. Book transfer of a patient from one hospital to another.

Section III.

Section IV.

Non-Dieted Station Hospitals.

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SECTION IV .- NON-DIETED STATION HOSPITALS.

Where to be opened. 219. Non-dieted Station Hospitals will be opened at stations where small detachments of less than one hundred men are quartered.

Equipment.

220. At stations where the strength of the detachment is 40 and under 100, Hospital equipment on the following scale will be supplied.

221. For a strength of 40 men, two cots; for 70 men, three cots; and for 90 men, four cots.

222. At Stations where the detachments are under 40 men, these Hospitals will not be supplied with Hospital equipment, and men who are admitted will use the barrack bedding and utensils.

223. The patients in these Hospitals will be placed generally under the medical charge of Civilian Medical Practitioners.

224. Where Hospital equipment is sanctioned it will be drawn as directed in paragraph 165 of these Regulations, and placed in charge of a Non-commissioned Officer of the Army Hospital Corps.

225. In Hospitals where the men use their barrack bedding, application will be made to the Officer Commanding the Corps to which the sick belong for a Non-commissioned Officer to take charge of the equipment.

226. Application will be made to the Officer Commanding for Hospital attendants for the sick in the proportions laid down in paragraph 203.

227. The ordinary Commissariat ration, in lieu of a Hospital diet, will be drawn, and supplied from the regiment or detachment to which the patient belongs, or is attached.

228. The following extras will be issued when considered necessary—viz., essence of beef, tea, sugar, oatmeal, arrowroot, barley, wine, brandy, mustard, pepper, salt, condensed milk and eggs.

229. The authorised extras will be drawn from the Commissariat Contractor on requisition (W.O. Books 189 and 190), signed by the Civilian Surgeon in charge.

230. In accounting for extras the following W.O. Forms will be used—viz., Diet Sheet, W.O. Form 1145, W.O. Forms 175, 184, and 185. Stoppages for extras will be forwarded in accord-

Generally under charge

Hospital

Equipment.

of Civilian Surgeons. Equipment

how drawn.

When not supplied with Hospital Equipment.

Hospital Orderlies.

Rations.

Issue of extras.

Extras will be drawn from the Commissariat. Returns of

extras issued.

Non-Dieted Station Hospitals.

NON-DIETED STATION HOSPITALS-continued.

33

ance with instructions contained in paragraph 193 of these Regulations.

231. Non-dieted Hospitals will be opened for Regiments of Militia when called out for training where there are no Station Hospitals, unless there be special authority from the Director General Army Medical Department to open Dieted Hospitals. **232.** Field Hospital equipment will be supplied to Militia Field Hospi-

Regiments encamped for training in accordance with the scale tal equiplaid down in the Appendix, page 197.

233. Medicines and surgical materials for these non-dieted Hospitals will be supplied on requisition through the Principal Surgical Medical Officer of the District.

Non-dieted and dieted Hospitals for

Militia. Medicines and appliances.

D

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Section IV.

Section V.

Hospitals for Soldiers' Wives and Children.

SECTION V.-HOSPITALS FOR SOLDIERS' WIVES AND CHILDREN.

I.-General Rules.

II.-Hospital for cases of Parturition and General Diseases. III.-Hospital for Infectious Diseases.

I.-GENERAL RULES.

Female hospitals at certain stations.

Two kinds.

Persons entitled to Hospital treatment.

The term "Family."

Diet and extras.

Parturition cases.

234. Hospitals are provided at certain stations by the special authority of the Secretary of State for soldiers' wives and children, and the same discipline and good order will be preserved in them as in other Military Hospitals.

235. These Hospitals are of two kinds, forming distinct establishments, one for the treatment of cases of parturition and general disease, the other for infectious diseases.

236. The families of Non-commissioned Officers and soldiers married with leave, and on the married roll of a regiment and provided with quarters, may be admitted to these Hospitals and receive treatment at the Public expense, when there is available accommodation. Male children above the age of 10 (unless in very special cases) will not be admitted into Hospitals for women and children.

237. The term family, when used in these regulations, will be understood to include the wife of the soldier, and his legitimate children and step-children under 14 years of age.

238. While soldiers' wives and children are under treatment in Hospital they will receive the same diets and extras as are authorised in the regulations for Hospital diets for soldiers, and the same returns will be used for the issue, and rendered for the expenditure of these diets and extras as are laid down for guidance in that portion of these regulations relating to dieted Hospitals.

239. The wives of Non-commissioned Officers and soldiers when occupying wooden huts, will be entitled to admission to Hospital for their confinements. When in quarters or barracks they will also be entitled to admission, except—

a. When occupying two rooms;

b. When occupying one room and without children.

240. Cases of serious and acute disease will only be admitted when, in the opinion of the Principal Medical Officer, the

General diseases.

Hospitals for Soldiers' Wives and Children.

GENERAL RULES-continued.

nature or the circumstances of the cases are such as to justify their treatment in Hospital at the Public expense. Cases of chronic disease will not be admitted without reference to, and the approval of, the Director General of the Army Medical Department.

241. When a Medical Officer considers a woman or child, labouring under serious or acute disease, requires Hospital treatment, he will submit an application for admission to the Principal Medical Officer according to the following form :--

Station

Date

W. O. Form 881.

Application for the admission of (a Woman or Child) Regiment, into the Hospital for Soldiers' Wives and Children. of

			Amount and Class of Barrack Accommodation.				rack	Remarks Explanatory of Circumstances
Name.	Age.	Disease.	Date of Attack.	No. of Rooms.	If in room with other families.	No. of Children.	If in Wooden Huts.	deemed to require Hospital Treatment.
				1-8			1	
	inter al			a barra		12.7		

suffers from a serious attack of acute I certify that would be seriously endangered if left for treatand that I consider quarters, owing to the want of proper nursing, quiet and rest. ment in (Signature of Medical Officer.) Approved.

Principal Medical Officer.

Patients sent to the Hospital must carry this form with them.

242. Cases of scarlet fever, diphtheria, and small-pox, when Infectious occurring in barracks or huts, will always be admitted into diseases. Hospital with a view of preventing, or limiting, the spread of such diseases. Other infectious maladies will, as a rule, be treated in quarters, and cases will only be admitted into Hospital on the order of the Principal Medical Officer, under circumstances which in his opinion justify a departure from the general rule.

243. Infectious cases will never be treated in any of the Hospitals devoted to cases of parturition and general disease.

244. The wives and children of soldiers coming to Hospital Certificate for admission, will be required to bring a certificate on W.O. necessary for Form 1135, signed by the Commanding Officer, that the appli- admission. cant is the wife or child of a soldier on the married roll of a regiment and entitled to quarters. This form will also be signed by a Medical Officer, who will certify as to the nature of the disease.

PART 2.

Section V.

Section V.

Exceptional

cases.

Hospitals for Soldiers' Wives and Children.

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GENERAL RULES -- continued.

245. Cases of those who are the wives or children of soldiers not on the married roll are only admissible (upon payment of a daily stoppage of 1s. for each adult, and 6d. for each child) under exceptional circumstances, or when their removal may be deemed necessary, as a matter of safety to the troops and the public.

246. Prior to admission of the cases referred to in the preceding paragraph, the sanction of the General Officer Commanding will be obtained through the Assistant Quartermaster General according to the following form :---

I recommend to the favourable consideration of the General officer Commanding, for admission to the Hospital for the Wives and Children of Soldiers, as an of a soldier of the exceptional case, Regiment under my Command, but not " on the strength."

The person is respectable and deserving of Hospital treatment.

Commanding.

The expenses of the above-mentioned person are guaranteed by me

Name

Rank

*I certify that+

now residing in barracks (or Quarters), is labouring under

and requires to be removed to Hospital to prevent the spread of infection.

The

A.-Q.-M.-General,

* The Medical Officer who sends the Patient to the Hospital will fill up and sign this certificate when the disease is of a contagious description.

† Insert name.
 † Insert Small Pox, Scarlatina, or Diphtheria, as the case may be.
 ‡ Insert Small Pox, Scarlatina, or Diphtheria, as the case may be.
 N.B.—The Medical Officer in charge of the Hospital will transmit these applications, after they have been approved of, to the Commissariat Officer.

In cases of general and infectious disease the approval of the Principal Medical Officer will be forwarded when the sanction of the General Officer Commanding is applied for.

247. The authorised number of beds in each Hospital must never be exceeded, unless with the authority of the Secretary of

State. 248. At stations where Hospitals for women and children have not been established, a room in barracks, if available, may be allotted as a ward for the reception of such cases of sick women and children belonging to families on the married roll as it may be deemed expedient to remove from their quarters. Equipment and fuel and light will be provided for such ward; but it is distinctly to be understood that under no circumstances will any expense for nursing or diet be admitted as a charge against the Public, and only the medical comforts-viz., port wine or sherry,

Number of beds.

Wards.

Form for admission.

Hospitals for Soldiers' Wives and Children.

GENERAL RULES-continued.

brandy, arrowroot, and essence of beef, or "Extractum Carnis," may be issued where there is a Hospital provision store.

249. Medical Officers will send patients requiring admission at Patients to be an early hour, if possible, in order that they may be placed on sent early to hospital. diet the following day.

250. The responsibility of Medical Officers doing duty with Responsibility Corps will not cease until they have satisfied themselves that the of Medical Medical Officer in charge has actually assumed professional care of any woman or child they may have sent for admission.

II.-HOSPITALS FOR CASES OF PARTURITION AND GENERAL DISEASES.

251. The Medical Officer will be appointed by the Director Medical General of the Army Medical Department.

appointed. 252. He will be responsible for all medical arrangements and Control of the the internal management of the Hospital, and will also have hospital. control over all the servants and patients.

253. At stations where it is practicable to do so, he will give a course of practical and theoretical instruction to soldiers' wives soldiers' wives who are desirous of becoming qualified to attend as Army Mid- who are wives and Sick Nurses on the wives and children of soldiers. Regulations on this subject for the guidance of Medical Officers midwives. will be found detailed in Appendix No. 1, page 139.

254. The Medical Officer in charge will at the end of every month forward to the Principal Medical Officer of the District for the information of the Director General, a return on W.O. Form 1020, of the patients treated in Hospital, affording at the same time any explanation that may be necessary as regards the admission of cases of general disease.

255. He will submit, at the end of every year, an annual Annual report of the admissions and deaths, with remarks, on a form report. which will be supplied on application to the Director General, through the Principal Medical Officer of the District.

256. A Matron will be appointed, with the approval of the Appointment of Matron. Director General, to each Hospital.

257. She will obey all regulations respecting discipline, and Duties of the the proper discharge of her duties, which may from time to time be issued for her guidance, and attend strictly to the orders of the Medical Officer regarding the care and nursing of the sick, the general management, washing, warming and ventilation of the wards, the administration of diets and medicines, and cleanliness of the sick. She will also render what aid the Medical Officer may require, and be responsible for the safe custody of the equipment of the Hospital.

258. She will not leave the Hospital without the authority of Not to leave the Medical Officer. In her absence a nurse will be selected, without perwith his approval, to supply her place.

mission.

Instruction in midwifery to desirous of qualifying as

Officer, how

Monthly return.

Matron.

Officers sending cases for admission.

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HOSPITALS FOR CASES, &c .- continued.

Visitors.

Dieting and extra return.

Nurses.

.

To take charge of wards and equipment. Cook.

Charge of kitchen entrance and bath rooms. Complaints.

Smoking prohibited.

Equipment not to be removed from hospital.

Patients to hand over articles of value.

Women to bring certain articles to hospital.

Woman when sufficiently recovered to assist.

Personal cleanliness.

Clothing.

259. No person will be allowed to pass in or out of the Hospital without the knowledge of the Matron or her Deputy. 260. The Matron will prepare the necessary returns for the

diets and extras, referred to in paragraphs 180–182.

261. She will be assisted by a staff of nurses who will carry out her orders. These nurses will be required to be neat and clean in their dress; and it will be their special duty,—

a. To clean out their respective wards;

b. To attend regularly to the personal cleanliness of the patients who are helpless, and to see that those who are able to do so make use of the ablution room.

262. They will take charge in their respective wards of the equipment as well as of all articles of clothing, and see that the patients take proper care of the articles in their possession.

263. The Nurse who acts as cook will be careful to have the meals ready at the following hours: breakfast, 8 o'clock; dinner, 1 o'clock; tea, 5.30 p.m. No provisions will be kept in the wards.

264. The cook will also have charge of the kitchen equipment, the entrance, kitchen and bath-rooms. In pressure of sickness she will be expected to assist the Nurses.

265. Patients having any complaints to make relative to the diet, or to any neglect or bad conduct on the part of the Nurses, will make them to the Surgeon during his visit.

266. Smoking is strictly prohibited, either within the hospital or its vicinity.

267. Persons removing furniture or any equipment belonging to Government from the Hospital will be liable to prosecution. All wilful injury to equipment or stores will be charged as normal damages against the persons in default.

268. Every patient upon admission will be required to hand over the money and articles of value in her possession to the Matron, who will enter them in a book in the presence of the patient, giving the latter a receipt in return. The property will be returned on the day of the patient's discharge.

269. Every woman is expected to bring with her a change of linen, a brush and comb, and if admitted for confinement, infant clothes also.

270. Such women as may be considered sufficiently recovered, will be required, if called upon, to assist the Nurses in cleaning the wards and attending on their fellow patients.

271. Every person who is allowed to leave her bed must be washed, have her hair neat, and her bed made up by 9 A.M. in summer, and 10 A.M. in winter.

272. The clothing not in use will be put away in the press, and numbered so as to correspond with the bed; the

Hospitals for Soldiers' Wives and Children.

HOSPITALS FOR CASES, &c .- continued.

other articles of dress will be neatly folded and placed on the bed box.

273. Patients will strictly obey the orders of the Medical Patients to Officer, Matron and Nurses, and will not leave the hospital obey orders. without permission from the Medical Officer. Loud talking and noise are strictly forbidden.

274. With the sanction of the Medical Officer, female Visitors. relations and friends will be permitted to visit patients during the day, and husbands will be admitted to see their wives between the hours of 6 and 8 P.M. No visitor will, however, be permitted to enter or leave the hospital without the knowledge of the Matron. Only one visitor for each patient will be allowed at a time.

275. Visitors are forbidden to bring the patients intoxi- Intoxicating cating liquors of any kind, and food will not be allowed to be brought by them into the hospital without the permission of the allowed to be Medical Officer.

276. Soiled linen will be at once removed to the place appointed for it.

277. To these hospitals a certain staff will be appointed who will attend all Officers and their families in the garrison; also all soldiers' wives and families, who are entitled to attendance.

278. Vaccination and re-vaccination of all Officers and Vaccination. their families, and of all women and children in the garrison, will and Re-vaccibe performed by the Medical Staff of the Hospital, and only one Vaccination Register will be kept for all.

III.-HOSPITALS FOR INFECTIOUS DISEASES.

279. The Medical Officer who is to take charge of a Hospital for Infectious Diseases will be detailed for the duty from Medical the extra establishment by the Principal Medical Officer of the Officer. District.

280. A trained and competent Head Nurse will also be Head nurse to appointed by the Principal Medical Officer, and she will be be assisted if necessary. assisted by as many Nurses as may be deemed necessary.

281. The Head Nurse will act as Matron, and will cary To act as out all orders of the Medical Officer in charge.

282. Mothers of children who are admitted will not be Mothers of allowed to remain in hospital without the Medical Officer's children admitted into sanction, unless suckling a child. Mothers permitted to remain hospital. in hospital will not visit the barracks without special permission. They will be required to assist the Nurses by attending to their own children's beds and keeping the wards clean.

283. A change of clothing will be brought with every Clothing while patient, which in the case of a child will be washed by the in hospital,

food not brought into hospital. Disposal of soiled linen. Staff.

matron.

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Hospitals for Soldiers' Wives and Children.

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HOSPITALS FOR INFECTIOUS DISEASES-continued.

mother. On leaving the Hospital each patient will have a perfectly clean set of clothing, and that which has been in wear up to the period of leaving will be properly disinfected before being handed over to the parties to whom it belongs.

284. No Visitor will be allowed in hospital without the special sanction of the Medical Officer in charge.

285. The same rules with regard to diet, nursing, cleanliness, and good order will be observed in hospitals for infectious diseases as are laid down in regulations for hospitals for parturition and general diseases.

Visitors.

Diet, nursing, and good order. ARMY HOSPITALS.

PART 2.

Field Hospitals and Hospital Ships.

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Section VI.

SECTION VI.-FIELD HOSPITALS AND HOSPITAL SHIPS.

- I.-Field Hospitals.
- II.-Field Service.

III.-Summer Manœuvres.

- IV.-Mobilization.
- V.-Duties of Medical Officers attached to an Army Corps in the field on Active Service.

VI.-The Bearer column of an Army Corps.

- VII.-Movable Field Hospital with an Army Corps on Active Service.
- VIII.-Stationary Field Hospital for an Army Corps on Active Service.
- IX .- Medical Staff on the Line of Communications and at the base of operations.

X.-Hospital Ships for an Army Corps.

I.-FIELD HOSPITALS.

286. Field Hospitals attached to and moving with troops Field hospiwhether at home during Summer Manœuvres or Mobilization of tals with Army Corps or with a force on active service, will be non-dieted. troops at (See Regulations for Non-dieted Hospitals Part 2 Section IV (See Regulations for Non-dieted Hospitals, Part 2, Section IV. and Regulations for Hospital Diets, Part 2, Section VII.)

287. Field Hospitals attached to and moving with troops To be proat home during Manœuvres or Mobilization of Army Corps, or vided with attached to a force on active service will be furnished with bell tents. tents only (double circular, without lining) and with a light equipment of bedding and clothing.

288. Hospitals at the base of operations will, under all How dieted. circumstances of service, be dieted. See paragraph 474 of these Regulations.

289. Field Hospitals at the base of operations, either at Hospital home or abroad, on active service will be provided with hospital marquees. marquees (when huts or buildings are not available) and with a complete equipment of everything necessary for the care and treatment of sick and wounded.

II.-FIELD SERVICE.

290. Medical Officers will be employed with troops in the field.

- (a) At home during Summer Manœuvres or with mobilized Army Corps.
- (b) With Army Corps on active service.

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Field Hospitals and Hospital Ships.

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III.-SUMMER MANCEUVRES.

Detail of Medical Officers, Army Hospital Corps Establishments, and Hospitals for Summer Manœuvres.

Detail of Medical Officers. 291. The following is the detail of Medical Officers, Army Hospital Corps Establishments, and of hospital arrangements and equipments for a Division during Summer Manœuvres :—

- One Principal Medical Officer, who will also act as a Sanitary Officer.
- One Medical Officer in charge of Divisional Staff.
- One Executive Medical Officer for each Brigade, who will
 - be at head-quarters of the brigade, will have charge of brigade staff, and be available for military duty of the brigade.
- Three Medical Officers for each of the Brigade Field Hospital. The senior to have charge of hospital and to act as Senior and Sanitary Medical Officer of the Brigade.
- One Army Hospital Corps Officer as Quarter-Master, for duty with the Principal Medical Officer. This officer will draw the equipment of all kinds on requisition, on the authority of the Principal Medical Officer, and give the necessary receipts for the same, handing it over to the senior non-commissioned officer of the Army Hospital Corps attached to each Brigade Field Hospital. The Medical Officer in charge of the Hospital will satisfy himself that the equipment is according to regulations.

One Sergeant-Clerk, Army Hospital Corps.

2. Detail of Personnel, Equipment, and Camp Equipage for a Brigade Field Hospital.

Details.

292. The following is the detail of Personnel, Equipment and Camp Equipage for a Brigade Field Hospital :--

(a.) Personnel.

Medical Officers.

293. Three Medical Officers; the senior will have charge and act as Senior and Sanitary Officer of Brigade.

Army Hospital Corps Establishment.

One sergeant. One 2nd corporal. Three privates. 43

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SUMMER MANCEUVRES-continued.

(b.) Equipment.

12 double circular tents without lining.

2 latrine screens.

50 waterproof sheets.

50 blankets, general service.

A and B canteens (new pattern).

Medical comfort boxes, Nos. 1 and 2 (divisional).

1 flag, field, HP (white, red cross, 4 feet square).

1 lantern, red coloured, marquee, hospital.

2 lanterns, hand, small F and H.

3 spades.

2 pickaxes.

1 chopper.

2 pails, water, wood.

1 pair field panniers complete, with a full set of capital instruments, and 1 admission and discharge book. W. O. Book, No. 27.

3 field companions.

1 box field splints.

(c.) Camp Equipage.

2 bell tents for Medical Officers.

- 1 do. do. for inspecting men reported sick.
- 1 do. do. for senior non-commissioned officer, surgery, and stores.
- 1 do. do. for hospital attendants and servants.

2 camp kettles.

(d.) Wheeled Carriages, &c.

Servi	ice wage	n		1	4
lance	Wagons	with s	six stret	cners	-
			• -		6
lart					2
	lance	lance Wagons		lance Wagons with six stret	lance Wagons with six stretchers

Medical Officers of the Household Troops, Yeomanry, and Volunteer Corps.

294. Medical Officers of the Household Troops, and those of Yeomanry and of Volunteer Corps, will remain with their Regiments.

ARMY HOSPITALS.

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Field Hospitals and Hospital Ships.

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SUMMER MANCEUVRES-continued.

Militia Medical Officers.

295. Militia Medical Officers attending manœuvres will be for general duty under the orders of the Principal Medical Officer, and will be employed either with a regiment or with a Brigade Field Hospital, as may be necessary.

Position of a Brigade Field Hospital.

296. The Brigade Field Hospital will be placed in rear of the centre of the brigade. On the line of march, the Brigade Field Hospital will follow in rear of its brigade and in front of all baggage.

297. Soldiers of the brigade reported sick will be taken at once to the Brigade Field Hospital without any intermediate inspection, bringing the usual company sick report, which will be returned to the Commanding Officer of the Regiment after the men have been inspected by the Medical Officer of the Brigade Field Hospital.

298. Sick Soldiers will not be retained in Camp under any circumstances longer than twenty-four hours, but will be sent daily by ambulance wagons or railway to the nearest Field or Station Hospital.

299. When sick are sent to the Field or Station Hospitals intimation will be sent on W. O. Form 986 by the Medical Officer in charge of the Brigade Hospital to the Commanding Officer of each Regiment or Corps.

300. If sent by ambulance wagons a nominal roll will be prepared, stating Regimental number and the name of each man and his disease. This will be signed by the Medical Officer in charge of the Brigade Hospital, and sent with the men.

301. If sent by railway the nominal roll will be sent with the party; the railway warrant will be handed to the Station master by the Medical Officer or Non-commissioned Officer in charge. Application should be made for a book of warrants to the War Office.

Stationary Field Hospitals.

302. In the event of the Summer Manœuvres being held in localities too distant from the line of railway to admit of the sick being sent daily from the Brigade Field Hospitals to the Station Hospitals, Stationary Field Hospitals will be formed and placed in the most convenient positions, and will be for the reception of sick from the Brigade Hospitals until they can be conveyed to Station or Base Hospitals.

303. The following is a detail of a Stationary Field Hospital :-

Position of hospital.

Soldiers reported sick.

Soldiers reported sick.

Soldiers reported sick.

Nominal roll when sent by ambulance wagons.

Railway warrants.

Stationary Field hospitals.

Detail.

Field Hospitals and Hospital Ships.

SUMMER MANGUVRES-continued.

(a.) Personnel.

Medical Officers.

3 medical officers,

Army Hospital Corps.

1 officer of orderlies.

2 non-commissioned officers.

1 cook.

6 privates.

(b.) Equipment.

3 hospital marquees.

*9 bundles bedding.

6 ordinary bell tents.

2 office tables.

2 chairs.

2 medical comfort boxes (divisional size).

A and B canteens (new pattern).

2 camp kettles.

1 pair field panniers, complete, with admission and discharge book, W.O. book, No. 27, and instruments.

1 field fracture box.

2 latrine screens.

2 pickaxes.

4 spades.

1 flag, field hospital (white, red cross, 4 feet square).

4 flags, field hospital, directing.

1 axe, felling, 41 lb., straight handle, helved.

1 red lantern, coloured, marquee hospital.

3 lanterns, hand, small Fd. H.

1 cooking screen.

2 saws (hand) 26 inches.

6 reaping hooks.

9 buckets, iron, galvanized, 4 gallons.

(c). Camp Equipment.

2 bell tents for medical officers.

* A bundle of bedding contains	the	follow	ing art	icles :-	_
Blankets, general service					10
Cases, paillasse, barrack .					5
" bolster, barrack .					5
Bed covers, waterproof .					5
Cholera belts					5

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Field Hospitals and Hospital Ships.

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SUMMER MANCEUVRES-continued.

- 1 ditto for officer of orderlies.
- 1 ditto for inspecting sick, and as an office.
- 1 ditto for senior non-commissioned officers and stores.
- 1 ditto for second non-commissioned officers and privates, A.H.C.

1 latrine screen.

(d.) Wheeled Carriages.

2 general serv	vice wago	ns				Horses. 8
3 ambulance	wagons,	with	6	stretcher	's]	6
each		••	••		J	2
1 water cart	••		•••		•••	
		Total	hor	ses	• •	16

IV.-MOBILIZATION.

Mobilization of an Army Corps for Service at Home.

Principal Medical Officer of district, also of Army Corps.

Principal Medical Officer of district, also of Army Corps.

Civil practitioner.

Detail.

304. The principal Medical Officer of a District to which an Army Corps belongs will, ex-officio, be Principal Medical Officer of the mobilized Corps; and on the order for mobilization being issued will at once put himself in communication with the General Officer appointed to command it, and with the local heads of Departments.

305. In the absence of instructions from the Director General of the Army Medical Department, he will appoint the Senior Medical Officers in his District as Principal Medical Officers of Divisions, and the Executive Medical Officers to the charge of Brigade Field Hospitals, and will make use of Militia Medical Officers in whatever manner the exigencies of the service may require.

306. When necessary he will recommend to the Officer Commanding Civil Medical Practitioners for taking charge of Station or Base Hospitals at contract rates.

307. The following is a detail of Cadre of Medical Officers and Army Hospital Corps for a Mobilized Army Corps :---

(a.) Medical Officers.

1 Principal Medical Officer.

- 3 Principal Medical Officers of Divisions, who will also act as Sanitary Officers of Division.
- 1 Medical Officer Secretary to Principal Medical Officer.
- 11 Executive Medical Officers for military duty with
 - Brigades, and to take charge of Brigade Staff.

Field Hospitals and Hospital Ships.

Section VI.

MOBILIZATION-continued.

33 Medical Officers for 11 Brigade Field Hospitals-3 for each Hospital. The Senior to have charge of the Hospital, and to act as Senior and Sanitary Officer of the Brigade.

(b) Army Hospital Corps.

- 1 Officer Army Hospital Corps to act under Principal Medical Officer.
- 1 Officer Army Hospital Corps as Quarter-Master with each Principal Medical Officer of Division.

1 Serjeant As clerks to Principal Medical Officer of 1 Private Army Corps.

3 Serjeants, clerks to Principal Medical Officers of Division.

3 Serieants, clerks for Officer of Orderlies of Divisions.

11 Serjeants 11 2nd Corporals 33 Privates	Serjeant, 1 Privates to Hospital.	2nd Corporal, each Brigade	and 3 Field
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308. The Principal Medical Officer will, as far as possible, equip Medical his Corps with medical and surgical appliances from the stores at equipment of his disposal, and for all further supplies apply at once to the Director General of the Army Medical Department, who will direct the supplies to be forwarded to the Principal Medical Officer for distribution.

309. The Principal Medical Officer will ascertain, from personal Accommodainspection, that arrangements are made at the different base hospitals herein detailed for the reception of the sick; and where accommodation is insufficient will apply for marquees or barrack buildings to supplement the hospitals.

310. Brigade Field Hospitals and Stationary Field Hospitals Brigade and will be formed and attached to brigades in the same manner as stationary detailed for manœuvres. The same equipment and transport will also be supplied. See Section III, "Summer Manœuvres."

311. The same arrangements with regard to sick will be fol- Hospitals to lowed; but the sick will invariably be sent to the General and be used during Station Hospitals of the District to which the Corps belongs, mobilization. every advantage being taken of the different lines of railway for this purpose, The details of Hospitals to be used by Brigades and Divisions during mobilization, are as follows :---

Army Corps.

tion of sick.

field hospitals.

Section VI.

Field Hospitals and Hospital Ships.

MOBILIZATION-continued.

Detail of Hospitals to be used by Brigades and Divisions during Mobilization.

Division, &c.	Station of Assembly.	Detail.	Sick to be sent to.
Cavalry Brigade .	 Maldon	· · · · · · ·	Station Hospital, Colchester.
1st Division	 Colchester	1st and 2nd Infantry Brigades and Divi- sional Troops	Station Hospital, Colchester.
2nd Division	 Chelmsford	1st and 2nd Infantry Brigades and Divi- sional Troops	Station Hospital, Warley.
3rd Division	 Gravesend and Chatham	1st Brigade and Divi- sional Troops 2nd Brigade	Station Hospital, Gravesend. Station Hospital, Chatham.
Corps Artillery	 Colchester .		Station Hospital, Colchester.
Corps Engineer	 Colchester .		Station Hospital, Colchester.

I. ARMY CORPS.-COLCHESTER DISTRICT.

II. ARMY CORPS.-ALDERSHOT DISTRICT.

Division, &c.	Station of Assembly.	Detail.	Sick to be sent to.
Cavalry Brigade	Lewes		Station Hospital, Brighton.
1st Division	Aldershot	1st and 2nd Brigades and Divisional Troops	No. 1 Station Hos- pital, Aldershot.
2nd Division	Guildford	1st and 2nd Brigades and Divisional Troops	No. 2 Station Hos- pital, Aldershot.
3rd Division	Dorking	1st and 2nd Brigades and Divisional Troops	No. 3 Station Hos- pital, Aldershot.
Corps Artillery	Aldershot		Station Hospital, Aldershot.
Corps Engineer	Aldershot		Station Hospital, Aldershot.

Field Hospitals and Hospital Ships.

Section VI.

MOBILIZATION-continued.

III. ARMY CORPS.-CROYDON DISTRICT.

Division, &c.		Station of Assembly.	Detail.	Sick to be Sent to.	
Cavalry Brigade	.,	Ashford		Station Hospital, Canterbury.	
Ist Division		London and Croydon Croydon	1st Brigade and 2nd Brigade Divisional Troops	Guards' Hospital, London. Herbert Hospital, Woolwich.	
2nd Division		Redhill	1st and 2nd Brigades and Divisional Troops	Stationary Field Hospital, Red- hill.	
3rd Division		Tunbridge Wells Maidstone	1st Brigade and Divi- sional Troops 2nd Brigade	Station Hospital Maidstone. Station Hospital Maidstone.	
Corps Artillery		Croydon'		Herbert Hospital Woolwich.	

IV. ARMY CORPS .- DUBLIN DISTRICT.

Division, &c.		Station of Assembly.	Detail.	Sick to be Sent to.	
Cavalry Brigade		Curragh		No. 1 Station Hos- pital, Curragh.	
1st Division		Dublin Belfast	sional Troops	Station Hospital, Dublin. Station Hospital, Belfast.	
2nd Division		Curragh	1st and 2nd Brigades and Divisional Troops	Nos. 1 and 2 Sta- tion Hospitals, Curragh.	
3rd Division		Cork Limerick .	sional Troops	Station Hospital, Cork. Station Hospital, Limerick.	
Corps Artillery		Dublin		Station Hospital, Dublin.	

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Section VI.

Field Hospitals and Hospital Ships.

MOBILIZATION-continued.

V. ARMY CORPS.-SALISBURY DISTRICT.

Division, &c.	Station of Assembly.	Detail.	Sick to be Sent to.	
Cavalry Brigade	Yeovil	· · · · · · · · · · · · · · · · · · ·	Station Hospital, Dorchester.	
1st Division	Salisbury	1st and 2nd Brigades and Divisional Troops	General Hospital, Netley,	
2nd Division	Warminster	1st and 2nd Brigades and Divisional Troops	Station Hospitals at Devizes and Bristol.	
3rd Division	Gloucester .	1st and 2nd Brigades and Divisional Troops	Stationary Field Hospital Glou- cester.	

VI. ARMY CORPS .- CHESTER DISTRICT.

Division, &c.	Station of Assembly,	Detail.	Sick to be Sent to.	
Cavalry Brigade	Crewe		Station Hospital, Chester.	
1st Division	Chester	1st and 2nd Brigades and Divisional Troops	Station Hospital, Chester.	
2nd Division	Liverpool	1st and 2nd Brigades and Divisional Troops	Station Hospitals at Rupert House and North Fort, Liverpool.	
Brd Division	Manchester	1st Brigade and Divi- sional Troops	Station Hospitals, Hulme and Sal- ford, Manchester.	
	Preston	2nd Brigade	The they II conital	

Field Hospitals and Hospital Ships.

Section VI.

MOBILIZATION-continued.

VII. ARMY CORPS .- YORK DISTRICT.

Division, &c.	~~~	Station of Assembly.		Detail.	Sick to be Sent to.	
Cavalry Brigade .	Doncas	ster .			Station Hospital, Doncaster.	
1st Division .	York			1st and 2nd Brigades and Divisional Troops	Station Hospital, York.	
2nd Division	. North	ampton		1st and 2nd Brigades and Divisional Troops	Station Hospitals, Northampton and Bedford.	
3rd Division	. Darlir	igton.		1st Brigade and Divi- sional Troops.	Stationary Field Hospital, Dar- lington.	
	Newc	astle		2nd Brigade	Station Hospital, Newcastle.	

VIII. ARMY CORPS.-EDINBURGH DISTRICT.

Division, &c.	Division, &c. Station of Assembly.		Detail.		Sick to be Sent to.	
Cavalry Brigade	. Musselb	urgh			Station Piershil burgh.	Hospital, l, Edin-
1st.Division	. Edinbur	gh 1s	t and 2nd nd Division:	Brigades al Troops	Station The Edinbu	Hospital, Castle, rgh.
2nd Division	Glasgov		t Brigade a ional Troop		Station I Glasgov Paisley.	v and
	Hamilto	on 21	nd Brigade		Station I Hamilt	
3rd Division	Melrose	··· ··]1	st and 2nd and Division	Brigade al Troops	Stationar Hospita rose.	

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Field Hospitals and Hospital Ships.

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V.-DUTIES OF MEDICAL OFFICERS ATTACHED TO AN ARMY CORPS IN THE FIELD ON ACTIVE SERVICE.

Duties of the Administrative Medical Staff.

Surgeon General-in-Chief.

Arrangements by Surgeon General of Army Corps.

Surgeon General at head-quarters of Army Corps.

Communicates with heads of departments.

Sanitary.

Distribution.

Bearer Companies, and Field Hospitals. Dressing

station.

Bearer Companies and Field Hospitals with division.

Principal Medical Officer of division.

Field Director.

His duties.

312. On the Staff of a General Officer commanding an army there will be one Surgeon General-in-Chief, whose duties will be on the Staff of the General Officer Commanding the Army, and who will have the supreme control under that Officer of all Medical arrangements connected with the force. (See Appendix No. 9, page 194.)

313. All Medical arrangements for an Army Corps, the strength of which on active service will be 36,805 of all ranks, will be made by the Surgeon General, and carried out with the approval and under the orders of the General Officer commanding. The detail of the Administrative Medical Staff for Stationary Field Hospitals is shown in Appendix No. 8, page 192.

314. The Surgeon General of an Army Corps will remain with the head-quarters of the corps; and will advise the General Officer commanding regarding the disposition and movements of the Bearer Companies and the moveable Field Hospitals.

315. He will place himself in communication with the heads of departments, and intimate to each department concerned the equipment and supplies that will be probably required for the sick and wounded.

316. He will direct all medical and sanitary matters, on the line of march, in camp and in quarters.

317. He will be responsible for the distribution of Medical Officers, of Officers and men of the Army Hospital Corps, of the reserve, and of civilians employed with the department.

318. He will be responsible for the disposal of such Bearer Companies and Field Hospitals as may not be required for immediate duty.

319. He will indicate the positions for dressing stations when an engagement is expected.

320. The Bearer Companies and Field Hospitals attached to a division will be under the command of the General Officer commanding the Division; but the Principal Medical Officer of the Division, in the absence of the Surgeon-General of the Army-Corps, will be responsible for the movements and proper disposal of them at all times.

321. When a division is detached so as to render communication with the head-quarters of the Army Corps impracticable, the Principal Medical Officer of the Division will perform all the duties of the Surgeon General of an Army Corps in respect to the division.

322. The Field Director will receive his instructions from the Surgeon General of the Army Corps.

323. He will regulate all the details of the movements of the Field Hospitals.

Field Hospitals and Hospital Ships

DUTIES OF MEDICAL OFFICERS, &c .- continued.

324. He will visit them frequently and, with the surgeon in His duties. charge, examine the cases received from Corps, and from the dressing stations of the bearer companies, with a view to the disposal of sick and wounded, so as to obviate overcrowding, by removing with all possible despatch to Hospitals along line of communication or at the base (should their state permit), patients who are not likely to become effective within a reasonable time.

325. He will report to the Surgeon-General of the Army Corps To report any deficiencies in clothing, medical and surgical appliances, or Deficiencies, any conditions likely to affect the health of the sick or wounded in hospital, so that immediate steps may be taken to supply deficiences, or make necessary arrangements.

326. He will report to the Surgeon General when any build- and Buildings ings are available for hospital purposes.

327. He will always when possible confer with the Principal To consult Medical Officers of Divisions, before submitting any reports to the Surgeon General of the Army Corps.

328. When necessary he will communicate directly with the Surgeon General of the line of communications; so that there may General of be no delay in supplies being forwarded or proper steps taken for line of comthe transfer of the sick and wounded from the moveable field hospitals, and will report as soon as possible to the Surgeon General of the Army Corps what arrangements have been made. Duties of

329. The duties of the Sanitary Officer at Head-Quarters will Sanitary be found in the Sanitary Regulations.

Medical Officers doing duty with Corps.

330. Medical Officers doing duty with Corps will afford such Medical Officers doing temporary assistance as may be required in camp, on the line of duty with march, and in action; all cases of sickness occurring in camp, and Corps. requiring prolonged treatment, will be sent to the nearest Field Hospital.

331. The cadre of Medical Officers who will do duty with Corps is shown in Appendix No. 10, page 196.

332. Two men a company, trained as stretcher-bearers, will Two men per be under the orders of Medical Officers doing duty with Corps, company, trained as and in cases of outpost duty or detached battalions will perform stretcher the duties that are performed divisionally by the men of the bearer bearers. company; in extensive actions they will also assist the wounded. It is desirable that Commanding Officers of Regiments should cause four men a company to be trained to meet casualties.

333. The regimental stretcher-bearers will never be removed Not to be from battalions without the special sanction of the General removed. Officer commanding the division.

334. Under ordinary circumstances, field companions, in the Regimental proportion of two for each regiment, and water-bottles, in the proportion of two for each company, will be carried by the regimen-

Hospitals. Medical

Officers of Divisions and Surgeonmunications.

Officer at Head Quarters.

company,

equipment.

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Section VI.

Field Hospitals and Hospital Ships.

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DUTIES OF MEDICAL OFFICERS, &c .- continued.

tal bearers. When the battalions are detached, or whenever it is considered necessary by the Principal Medical Officer of Division, he will cause additional medical supplies or assistance to be furnished.

335. A field-stretcher for each company will be carried on the line of march in the battalion company carts. When an action is expected, the regimental bearers will leave their rifles and valises in the carts, and march with the stretchers, water bottles, and field companions under the direction of the Medical Officers to the scene of action.

336. In minor actions, Medical Officers doing duty with the regiments engaged will be assisted by surgeons of Corps which are not engaged in applying first dressings to wounded.

337. In serious actions, Medical Officers doing duty with Corps will only afford such temporary aid to the wounded as may be necessary until the staff of the Bearer Company arrives; on such occasions they will not, as a rule, undertake any serious surgical operation, but always keep in close proximity to their respective Corps.

VI .- THE BEARER COLUMN OF AN ARMY CORPS.

Bearer Column.

Bearer Company for mountain warfare.

Bearer Company divisible.

Two lines of ambulance wagons.

Ambulance wagons, first line. **338.** The duties of a Bearer Column will be to render first assistance to the wounded and remove them from the field to dressing stations and Field Hospitals. A Bearer Column will consist of four companies, one for each division, and one for the Corps troops, including the cavalry brigade.

339. When operations are being carried out in a mountainous district, an appropriate mountain equipment will replace the carriages, draught horses, and matériel of one of the four Bearer Companies with an Army Corps.

340. The details of a Bearer Company and of the mountain equipment are given in Appendix No. 5, pages 186–188.

341. A Bearer Company is divisible into two half-companies, each of which, by the arrangements made for distribution of personnel and stores, is capable of acting independently.

342. When a Bearer Company is divided, the Medical Officer next in rank to the Medical Officer in charge will command the

half-company which is detached. **343.** The half-company of a Bearer Company will rejoin the head-quarters of the Company as soon as possible after the duties for which it has been detached have been completed.

344. There will be two lines of ambulance wagons belonging to each Bearer Company, 10 in the first line and 23 in the second line; the first line of ambulance wagons will, under all circumstances, be kept up to its full strength by supply from the second line.

345. The ambulance wagons of the first line, and the surgical

Regimental stretcher bearers during an action.

Medical Officers with

corps to afford

temporary aid.

Field Hospitals and Hospital Ships.

BEARER COLUMN, &c .- continued.

wagons and carts of a Bearer Company will all be of service pattern.

346. It may be necessary to form the second line of ambulance Ambulance wagons from local sources, but as no local carriage can be so wagons, suitable for wounded men as the regulation ambulance wagons, these should be used if possible, although horsed from local sources.

347. Ambulance wagons in the second line when supplied from local sources will be proportionately increased in number if they are not capable of conveying as many sick or wounded as the regulation ambulance wagons.

348. When such local auxiliary transport for the sick is sup- Auxiliary plied, the same proportion of Non-commissioned Officers and Transport. artificers from the Army Service Corps will be allowed, as if all the ambulance wagons were of the regulation pattern.

349. The wagons for the Bearer Companies will be supplied by Supply of the Ordnance Store Department, the horses, drivers, and artificers horses, by the Army Service Corps, and maintained by the Commissariat drivers, and Department; but will be under the direction of the Medical artificers Officer in charge as long as they are attached to the Bearer Companies.

350. The following will be the order observed by the Bearer Order of Company on the line of march :---

- At the head of the Company the sick bearers of the Army Hospital Corps will march in fours; the wagons and carts will immediately follow these in column of route, the ambulance wagons leading.
- The posts of Officers will be as follows :--- Medical Officers in front of the Army Hospital Corps, Officers of Orderlies in rear of the Army Hospital Corps, and the Transport Officer on the directing flank of the store wagons. The Medical Officer in command will move from one part to another as occasion requires his presence for the preservation of order. The rear of the company will be brought up by remounts and spare horses. When the Bearer Company is provided with mountain equipment the pack animals will immediately follow the Army Hospital Corps in half sections.

351. One-fourth of the men composing the Bearer Company Water tins, will be equipped with water-tins, and the bearer-company- &c. haversack containing bandages, tourniquets, &c.

352. Medical Officers will see that the sick bearers keep their water-tins replenished and the haversack supplied with dressing apparatus.

353. The Bearer Company will be under the direct command Command of of the Medical Officer in charge, who will be responsible through Bearer Com-

second line.

for bearer companies.

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Field Hospitals and Hospital Ships.

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BEARER COLUMN, &c.-continued.

the Officer commanding the troops to the Principal Medical Officer of division for its efficiency at all times.

354. The Medical Officer in charge will cause the Senior Officer of Orderlies to make all the requisitions on the Commissariat, Ordnance Store, and Medical Departments, for such equipment and supplies as may be required for the Bearer Company. The requisitions will be signed by the Officer of Orderlies receiving the supplies and approved of by the Medical The requisitions for equip-Officer in command of the company. ment will be made out in strict conformity with the arrangement of Stores by sections shown in Appendix No. 11, pages 197-202.

355. The Senior Officer of Orderlies will be responsible for the charge of the medical equipment and stores of the Bearer Company, and will act as Quarter-Master and Paymaster, and will conduct the duties connected with the formation and arrangements of the dressing station, under the orders of the Medical Officer in charge.

356. The Lieutenants of the Army Hospital Corps will be employed during an action in conducting the ambulance wagons to and from dressing stations, and will perform such other duties as the senior Medical Officer present may consider necessary for the welfare of the sick and wounded.

357. The Transport Officer of the Army Service Corps will command the detachment of his own corps attached to the Bearer Service Corps. Company, but he will carry out all instructions received from the Medical Officer in charge as to the disposition and movements of the store wagons and horses.

358. Before an action commences the Principal Medical Officer of the Division will advise with the General Officer commanding, in regard to the positions where dressing stations will be established.

359. In the absence of the General Officer or other Officer commanding, the Principal Medical Officer of Division will issue the necessary instructions to the Bearer Company.

360. When no orders have been received from the General Officer Commanding, or from the Principal Medical Officer of Division, the Medical Officer in charge of the company will on his own responsibility organize the dressing station or stations, and take such measures as may be necessary for the relief and transport of the sick and wounded.

361. Dressing stations will be established, if possible, at points not exposed to fire. If there be suitable buildings near the scene of action they will be utilized, otherwise an operating tent will be pitched under cover, and the Medical Officer in charge of the Bearer Company will issue such directions as he may consider necessary for the organization of the dressing stations, and apportion to each Medical Officer his duties.

362. At the dressing stations the surgical wagons, water carts,

Requisition for supplies and equipment.

Senior Officer of Orderlies, Army Hospital Corps.

Lieutenants, Army Hospital Corps.

Transport Officer, Army

Principal Medical Officer, and General Officer Commanding.

Dressing stations.

Field Hospitals and Hospital Ships.

BEARER COLUMN, &c .- continued.

and store wagons will be placed in position under the orders of the Medical Officer in charge.

363. The dressing station will be distinguished during day- How distintime by two Geneva flags, and during the night by two red guished. lanterns.

364. During the action wounded straggling from the field Straggling will be attended to at the dressing station, and transferred to the rear with all possible speed.

365. At the close of an action two medical officers with Mode of the sick bearers, followed by a Lieutenant of the Army Hos- collecting pital Corps conducting the first lines of ambulance wagons, will after action. advance by the shortest available route, and halt as near as possible to the scene of action. The halting place will be termed the "Collecting Station." The wagons will be drawn up with the horses' heads towards the dressing station.

366. The bearers will then take the stretchers from the ambulance wagons in the proportion of one stretcher for every four men; two to carry the wounded man and two to act as reliefs or fatigue-men, assisting in placing him on the stretcher and carrying the wounded man's rifle and valise, and, in the absence of the Medical Officer, applying a first dressing if necessary.

367. The sick bearers will be divided into two half-companies-each half company being under the direction of a medical officer; the wings will be further divided into sections of 16 men, each section being under the direction of a Noncommissioned Officer.

368. The bearers thus detailed will patrol the battlefield and its vicinity, examine the fallen, and separate the living from the dead, removing the wounded to the ambulance wagons for conveyance to the dressing station, and returning again immediately with the stretchers to the field.

369. When the ambulance wagons have been loaded they will proceed to the dressing station, each wagon being followed by an attendant-if possible, a Non-commissioned Officer -who will assist in the removal of the wounded from the wagons.

370. Whenever practicable, the wounded will be carried to the dressing station, or even to one of the field hospitals, in the vicinity, without removal from the stretchers.

371. When all the wounded have been removed from Vicinity of the open, the woods and ditches in the neighbourhood will be scene of methodically searched, so that there may be no possibility of searched. any wounded remaining uncared for. Lanterns for searching in the dark form part of the equipment of a surgery wagon.

372. When the wounded, with their rifles and valises, have Return of been deposited at the dressing stations, the stretchers will be wagons to the cleaned, and the ambulance wagons will at once return to the field. field.

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Section VI.

Arms and

wounded.

valises of the

Field Hospitals and Hospital Ships.

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BEARER COLUMN, &c .- continued.

373. The arms and accoutrements of wounded men will be carried with them in the ambulance wagons to the dressing stations and field hospitals, and will be handed over to a sergeant of the Army Hospital Corps.

374. Before using a wounded man's rifle as a splint, or placing it in an ambulance wagon, the charge must be withdrawn if the weapon be loaded.

375. Officers and Non-commissioned Officers of a Bearer Company will be responsible that the private property of the dead and wounded is not appropriated. A severe punishment will follow any such act of appropriation.

376. The second line of ambulance wagons will be under the charge of an officer of the Army Hospital Corps, and under ordinary circumstances about half a day's march in rear of the company.

377. When the wounded begin to arrive at the dressing station, the Medical Officer in charge will send an Officer of Orderlies with orders for the 2nd line of ambulance wagons, or as many of them as may be considered necessary, to advance to the dressing station to remove them to the nearest Field Hospital.

378. In case of the troops retiring, the Principal Medical Officer of Division, or, in his absence, the Medical Officer in charge of the Bearer Company, will determine what portion of the medical establishment will be left behind.

379. With each Bearer Company there will be two surgery wagons, containing a complete equipment of instruments, surgical appliances, medicines, and medical comforts for the first assistance in the field. The contents, and mode of packing a surgery wagon, are shown in Appendix No.4, page 175 to 185.

380. When the necessary surgical treatment has been afforded at the dressing station, the Medical Officer will attach to the clothes of the wounded man a diagnosis ticket, on which will be specified his regiment, number, rank and name, with the nature of the injury, the treatment, and any precautions required as to transport; all these details will also be written in the "Tally Book."

381. The plan of an encampment for a bearer company and the plan of a Surgery Wagon showing the mode of packing the baskets and boxes, will be found printed in the Appendix, pages 188 and 185.

VII.-MOVABLE FIELD HOSPITAL, WITH AN ARMY CORPS ON ACTIVE SERVICE.

382. Movable Field Hospitals will form the second line of medical assistance in the field; they will be an integral portion of the Army Corps, and will receive the sick and wounded from dressing stations and corps.

Private property of dead and wounded.

Second line of ambulance wagons.

Medical establishment left behind.

Surgery wagons.

Diagnosis ticket.

Plan of an encampment and of a Surgery Wagon.

Movable Field Hospital. me

Field Hospitals and Hospital Ships.

MOVABLE FIELD HOSPITAL, &c .- continued.

383. There will be twelve movable field hospitals for an Number of Army Corps; two will be attached to each division, six re- and how dimaining for general disposal. The detail of a field hospital is vded. shown in Appendix No. 6, pages 189 and 190. Each Field Hospital will accommodate 200 sick, and will be divisible into two, each half-field Hospital being complete in personnel and matériel for 100 sick. When a Field Hospital is divided the Surgeon next in rank to the Medical Officer in charge will take the command of the detached portion. The regulation in paragraph 343, for a Bearer Company, will be followed in the case of a Field Hospital placed under similar circumstances.

384. Each hospital tent in a movable Field Hospital will Hospital accommodate four patients; but the number may be increased or decreased in accordance with the requirements of the sick and wounded.

385. Only transport for three Field Hospitals of those Transport that are not attached to divisions will be kept up; when neces- of field hospisary, transport for the remaining Hospitals will be supplied on tals not requisition by the Commissariat Department. The Principal Medical Officer of a Division will be responsible that a sufficient number of Field Hospitals are opened. When more than two are Additional required for the Division, he will apply to the Surgeon General field hospitals through the General Officer commanding the division for such for divisions. of the unattached field hospitals as may be required. When a Field Hospital of a Division cannot be moved on account of the number of sick and wounded, want of transport, or other circumstances, the Hospital will cease to belong to the Division, and its place will be taken by a reserve Field Hospital detailed for the purpose by the Surgeon General of the Army Corps.

386. The Principal Medical Officer of a Division will Number advise the General Officer commanding as to the number and of Field; position of Field Hospitals that may be considered necessary Hospitals. while in camp.

387. When no instructions have been received from the head-quarters of a Division, the Medical Officer in charge of a movable Field Hospital will use his discretion in opening it, reporting his reasons for so doing to the General Officer Commanding the Division, who will refer the matter to the Principal Medical Officer.

388. The Medical Officer in charge of a movable Field Requisition Hospital will cause the senior officer of orderlies to make all the equipment. requisitions on the Commissariat, Ordnance Store, and Medical Departments for such equipment and supplies as may be required.

389. The requisitions will be signed by the Officer of Orderlies receiving the supplies, and approved of by the Medical Officer in command of the Field Hospital. The requisitions for equipment will be made out in strict conformity with the

attached to divisions.

for stores and

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MOVABLE FIELD HOSPITAL, &c .- continued.

arrangement of Stores by sections shown in Appendix No. 11, pages 197 to 202.

390. He will send all sick and wounded to the Hospitals along the line of communication and the base as soon as practicable, only retaining under treatment cases that are likely to be fit for duty within a short period, or those which might suffer by removal.

391. Before an action the movable Field Hospitals will be cleared of any sick or wounded that can be removed to the rear.

392. In selecting a site for a Field Hospital before an action, due precautions will be taken that the position is as close as possible to the first line of assistance, and that there is a practicable road for the ambulances from the front, and a sufficient water supply in the vicinity.

393. Advantage will be taken of any available and suitable buildings in towns and villages for the establishment of these Field Hospitals.

394. When there are no buildings available the hospital tents will be pitched, and the pharmacy, store wagons, and water carts drawn up under the direction of the medical officer

395. There are four Field Hospital store wagons in a Field Hospital movable Field Hospital, each containing the ward equipment, cooking utensils, and medical stores for 50 patients; the contents and mode of packing of these wagons are detailed in Appendix No. 2, pages 142 to 152.

396. There are two pharmacy wagons for a field hospital, each containing a complete equipment of instruments, surgical appliances, medicines, means of compounding, and medical comforts. The contents and directions for packing are fully detailed in Appendix No. 3, pages 153 to 174.

397. The following will be the order observed in the case of a movable Field Hospital on the line of march :----

- The Non-commissioned Officers and men of the Army Hospital Corps will march in front, followed by the pharmacy, field hospital store wagons, water carts, personal equipment wagons, and forage carts, spare horses bringing up the rear.
- The posts of Officers will be as follows :- The Medical Officers before the Army Hospital Corps, Officers of Orderlies in the rear of the Army Hospital Corps, the Transport Officer in the directing flank of the wagons. On the line of march the Medical Officer in command will exercise constant supervision over the Field Hospital column.

The plan of an encampment for a movable Field Hospital will be found printed in Appendix 17, page 225.

Sick and wounded to the rear.

Selection of site for a Field Hospital.

Tents to be used for Hospitals when buildings not avail- in charge. able.

store wagons.

Pharmacy wagons.

Order of march for Field Hospitals.

Plan of encampment.

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VIII .- STATIONARY FIELD HOSPITALS FOR AN ARMY ON ACTIVE SERVICE.

398. The third line of medical assistance in] the field will Third line of consist of stationary field hospitals along the line or lines of assistance. communication, and at the base of operations.

399. In choosing sites for stationary hospitals, due attention Choosing of will be paid to the character and elevation of the country, the sites. nature of the soil, the proximity and purity of the water supply, the practicability of drainage, the shelter afforded by wood or high land from cold winds, and care will be taken that the position is easy of access and at a convenient distance from the main road, and, as far as circumstances will admit, in accordance with instructions contained in the sanitary section of the medical regulations.

400. If possible these hospitals will be established in buildings Buildings or or wooden huts at the port of embarkation, and in towns, villages, huts for or farm-houses along the lines of communication. Hospital marquees will be stored at the base of operations, and issued for stationary hospitals when other shelter is not available.

401. In forming stationary field hospitals along the lines Provision of communication, existing lines of railway and roads will be utilized. The hospitals and provision stations will be placed at regular and convenient intervals so as to suit the position of the forces, and the circumstances of the wounded.

402. Stationary field hospitals will have equipment similar to Equipment of movable field hospitals as regards medical and surgical stores and ward utensils, but double the quantity of hospital clothing will be allowed; they will not be supplied with special wagons or transport.

403. In establishing hospitals at the base, or on lines of Stores: alteracommunication, the Deputy Surgeon Generals concerned will direct an Officer of the Army Hospital Corps to apply to the of huts. Commissariat or Ordnance Store Departments for the necessary stores, and to the Royal Engineer Department in the event of the erection of wooden huts or alterations to existing buildings being required, and will keep the Surgeon General of the line of communications informed on all such points.

404. The sick and wounded from the army in front will be transported by the ambulance wagons of the second line as far as beyond the advanced depôt, where other conveyance provided by the advanced Commissariat on the requisition of the Surgeon General of the line of communications, or the Deputy Surgeon General with the Road Commandant will meet and convey them to their destination.

405. On no account are the ambulance wagons of the second line to convey sick and wounded beyond the advanced depôt.

406. Before the removal of sick and wounded, care will Removal and be taken in the first instance to ascertain through the Road Com- transport of

hospitals. Marquees.

stations.

these hospitals.

tion of buildings, erection

Removal of wounded depôt.

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STATIONARY FIELD HOSPITAL, &c .- continued.

sick and wounded along line of communication.

Civilian Surgeons and Medical Students employed during war. mandant when the road will be open and available for their transport; due notice will in all cases be given by the Deputy Surgeon Generals of Division of the removal of sick and wounded from the movable hospitals to the Surgeon General of Army Corps and to the Surgeon General, and to the Inspector General of the line of communications, and the latter will be responsible that intelligence is communicated throughout the whole line and to the Principal Medical Officer at base of operations.

407. Surgeons, medical students, and others rendering voluntary aid as hospital helpers will, under the sanction of the War Office, be employed in stationary hospitals. They will, on arrival at the seat of war, report themselves to the Surgeon General at the base of operations, who will appoint them to vacancies on the Hospital Staff. While thus serving, civilian surgeons and others will act under the military medical officer in charge of each hospital.

IX.-MEDICAL STAFF ON THE LINE OF COMMUNICATIONS AND AT THE BASE OF OPERATIONS.

Surgeon General of lines of communication.

Duties.

Responsibility for forwarding supplies.

Removal and embarkation of sick and wounded.

Hospital ships. The Medical equipment.

408. There will be one Surgeon General for the line of communications and base of operations.

409. He will carry on the duties of the Department under the orders of the Inspector General of the line of communications, and will be responsible to the Surgeon General in Chief of the Army for Medical arrangements along the line of communications and at the base of operations.

410. He will be responsible for the medical administration of all stationary hospitals, both at the base of operations and on the line of communications; also that sufficient supplies of medical and surgical equipment, to meet the requirements of the whole Army, are in store both at the base and at the advanced depôt, and will report all wants and deficiencies to the Director General of the Army Medical Department, informing the General Officer Commanding thereof.

411. He will be responsible for the forwarding of medical and surgical appliances and stores for the hospitals of the whole Army.

412. He will be responsible, under the Inspector General of the line of communications, for the removal of all sick and wounded from the advanced depôt to the stationary hospitals on the line of communications or at the base, and also for the embarkation, under the instructions of the Commandant at the base of operations, of sick and wounded to England, or to any convalescent station.

413. The hospital ships, so far as their medical equipment and readiness for the reception of sick and wounded, will also be under his supervision and control.

Field Hospitals and Hospital Ships.

MEDICAL STAFF, &c .- continued.

414.. Two classes of patients will be transferred from base Classes of hospitals to hospital ships: (a) Those who are invalided, and to be transawaiting transport to England, or a sanitarium; and (b) sick ferred to sent on board for change of air, or to obviate overcrowding at hospital ships. the base.

Deputy Surgeon General. Field Inspector of the Line of communications.

415. A field Inspector will be appointed for each road of Field communication, and will carry on his duties under the Road Inspector. Commandant. He will be responsible to the Surgeon General of the line of communications for all medical arrangements as detailed in the Field Hospital Regulations, Section VI, Sub-section V, and will frequently visit the stationary hospitals on the line of communications, and will, in consultation with the medical officers in charge, decide regarding the patients that may return to duty, and those who are to be invalided, furnishing a report thereof to the Surgeon General.

416. He will inform the Surgeon General without delay of any Deficiencies of deficiencies in hospital equipment or medical stores that may stores to be exist in these hospitals, so that immediate steps may be taken to reported. supply what is needed.

Base of Operations.

417. There will be three Deputy Surgeon Generals at the Administrabase of operations, the senior of whom, acting under the Sur- tive Medical geon General of the line of communications will perform the base of duties of Principal Medical Officer under the Officer Com- operations. manding at the base.

418. He will also act as Sanitary Officer, and will be Sanitary consulted as to the selection of buildings to be used as barracks Officer. or hospitals, of sites for camps and camp hospitals at the base, and will be responsible for the medical supervision of the same, and that the equipments and supplies of such hospitals are procured.

419. The Second Surgeon General will be responsible for the Disposal of arrangements connected with the reception of sick and wounded sick and from the stationary field hospitals along the line of communi- at base. cations and from the army in front. He will also superintend the embarka- tion of sick and wounded, and will preside over all medical invaliding boards.

420. He will intimate to the General Officer commanding, Invaliding. when it is necessary for invaliding boards to assemble, and will take due precautions that there is no delay in bringing forward officers and men for invaliding, when they are not likely to become effective within a reasonable time.

421. The Third Surgeon General will be responsible that Medical and

Officers at

wounded

stores.

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MEDICAL STAFF, &c .- continued.

there is a sufficiency of medical and surgical stores, and will arrange with the Commissariat Department for the forwarding of the same to the hospitals on the line of communications, and the advanced depôts, for the use of the hospitals and bearer companies with Army Corps.

Advanced Depôts.

422. One Surgeon Major will be stationed at the advanced depôt, and, acting under the Surgeon General of the line of communications, will have charge of such medical and surgical supplies and appliances as it may be considered necessary to keep there. He will procure, by requisition from the Deputy Surgeon General at the base of operations, these stores, and will be responsible that a sufficient supply is kept at the advanced depôt to meet the urgent requirements of the movable hospitals and bearer companies in front, and will arrange with the Commissariat Department for forwarding them to the hospitals and bearer companies.

X.-HOSPITAL SHIPS FOR AN ARMY CORPS.

423. The relative responsibility of the Admiralty and War Office with regard to Hospital Ships for an Army Corps, will be as follows.

424. The Admiralty will undertake the lodging, victualling, and conveyance of the sick, and for that purpose will provide the necessary shipping, fittings, bedding, food, medical comforts, disinfectants, and mess utensils of every kind.

425. The War Office will undertake to furnish the medical and other attendance necessary for the proper treatment and nursing of the sick, and the washing of all Hospital clothing and bedding used by them, and will supply all articles of personal and Hospital clothing, medical and surgical appliances, and Hospital utensils.

426. Floating Hospital accommodation, whether stationary or for transport purposes, will be separate and exclusive of the Hospital accommodation for the force on land.

427. The following will be the floating Hospital accommodation for an Army Corps. Each division of an Army Corps will have a depôt Hospital Ship (with steam power) capable of making up 200 beds, or 250 on an emergency.

428. There will be one or more swift powerful steamers, each making up 60 beds, which will be employed as relieving ships for the depôt Hospital Ships to take the worst cases to England. Despatch vessels, each fitted out with about 30 canvas cots, will carry less severe cases to any available packet station to meet the packets on their way to England.

Surgeon Major at advanced depôt.

Relative responsibility of Admiralty and War Office. Admiralty.

War Office.

Floating hospital accommodation. Depôt hospital ships.

Relieving ships.

HOSPITAL SHIPS, &c .- continued.

429. Special arrangements will be made for carrying a small Arrangements for invalids in number of invalids in each steam packet. steam packets.

430. Each depôt Hospital Ship will have a small steam transport attached as a store ship.

431. Every transport will accommodate temporarily in its sick sick accombay three per cent. of the entire force that it carries.

432. Each depôt Hospital Ship will be supplied with 400 canvas cots in addition to the cots required for use on board. These will be fitted into transports remaining at the base of operations when additional Hospital accomodation is required.

433. The dieting of patients on board depôt Hospital Ships and their relieving vessels will be conducted in the same way as in Station Hospitals, and the same War Office Forms will be used. Daily requisitions for articles of diet and medical comforts will be made on the Paymaster, or, if it be a hired ship, on the Master of the vessel.

434. A statement of provisions received, issued, and remaining, will be completed on W.O. Form 184, at the end of each Statement of month, and forwarded to the head-quarters of the Army Medical Department for transmission to the Surveyor General of the Ordnance, War Office, London.

435. Each of these Hospital Ships will be provided with a sufficient staff of the Army Hospital Corps for carrying out the Hospital duties detailed in paragraph 425.

436. The regulations for medical officers in charge of troops on board ship [Part 1, Section III, Subsection III] will apply to despatch vessels, transports, and packets used for the temporary accommodation of the sick of the Army Corps.

437. When a ship has been taken up by the Admiralty for the conveyance of Troops either as a transport or a Troop freight ship, an Army Medical Officer (if possible the Medical Officer who is to have charge of the Troops) will make a careful inspection of the ship's crew, at the time of the "first inspection" of the vessel; and will immediately inform the Naval Inspecting Officer of the result, reporting the same to the Principal Medical Officer.

438. The Medical Officer in charge of Troops on board Tran- Medical sports and Troop Freight Ships will take medical charge of the Officers in ship's crew also, when the ship does not carry a Surgeon, and will supply medicines, &c., for their use from the public stock on board transboard; he will have a general sanitary supervision over the ship, port ships to and will make inspections of the quarters occupied both by the the crews. Troops and by the crew.

439. The following is the detail of the medical equipment Medical which will be put on board a Transport for the use of Troops board Trans and crew :-

One Medicine Chest, complete. (429)

modation on transport ships. Canvas cots for additional hospital accommodation in transports. Dieting on board depôt hospital ships and relieving vessels, W.O. Forms. provisions.

Army Hospital Corps Staff for hospital duties. Regulations for Medical Officers in charge of troops on board ship. Transport ships.

troops on take care of

equipment on ports.

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Small steam

store ships.

transports as

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Section VI.

Field Hospitals and Hospital Ships.

HOSPITAL SHIPS, &c .- continued.

One case of Surgeon's Instruments. One case of Tooth Instruments. One Stomach Pump. One box of Fracture Apparatus.

440. This equipment will be put on board and handed over to the Medical Officer in charge, who will give a receipt for the same to the Principal Medical Officer at the port of embarkation.

441. In the event of the Medical Officer landing with the Troops when Transports are employed during military operations, the equipment will be left on board the ship, under the charge of the master, who will give a receipt to the Medical Officer, specifying the number of articles, not quantities, contained in each. The Master will be furnished with a duplicate thereof countersigned by the Medical Officer.

442. The equipment will be handed over again to the first Medical Officer who embarks for duty on board, and who will furnish the master with a receipt for the same.

Equipment on board Transports to the left in charge of the Master. Hospital Diets.

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Section VII.

PART 2.

SECTION VII.-REGULATIONS AS TO HOSPITAL DIETS.

443. The dietary, as set forth in the diet table, printed in the General and Appendix No. 12, page 203, [W. O. Form 147,] will be used station hosin all dieted Hospitals.

444. All articles issued for Hospital purposes are exclusively for the use of the sick. They will not, at any time or under any circumstances, be applied to any other purpose, or used in any place not actually connected with or set apart for the treatment of the sick.

445. A copy of the diet table will be hung up in a conspicuous place in every ward of the Hospital.

446. The following extrasare authorised and may be given on Extras all diets except entire and varied, when necessary for the treatment of the case, viz., eggs, milk, tea, beef-tea, arrowroot, sago, oatmeal, rice-pudding, sago-pudding, the customary fruits in season, wines, spirits and malt liquors; the following are also authorised on all diets, including entire and varied, when requisite, viz., barley-water, rice-water, gruel, and lemonade.

447. Eight ounces of white fish, with 2 oz. of butter, may be ordered on milk, low, and half diets.

448. Eight ounces of potatoes, or 4 oz. of vegetables, will be admissible as an extra on low diet, when it is found necessary to keep a patient on this diet for any lengthened period, or when there is a tendency to a scorbutic taint.

449. The only extras allowed on entire and varied diets are wines, spirits, malt liquors, and the diet drinks specified in paragraph 446.

450. When rice or sago-puddings are ordered, they will be Rice and sago puddings. made with the following ingredients :--

Rice Pudding.		Sago P	udding.
Rice 2 of	z.	Sago -	- $1\frac{1}{2}$ oz.
Milk - $-\frac{3}{4}$ p	int.	Milk -	- ² / ₃ pint.
Sugar $-\frac{1}{2}$ 0	z.	Sugar-	$-\frac{1}{2}$ OZ.
Egg 1.		Egg -	- 1 .
Flavoured with ci	nnamon	Flavoured	with cinnamon.
or lemon.			

451. Oatmeal, arrowroot, and sago, when ordered, are not to Oatmeal, exceed the following proportions:-F 2 (429)

allowed.

pitals' dietary.

arrowroot and sago.

PART 2.

Section VII.

W

Regulations as to Hospital Diets.

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HOSPITAL DIETS-continued.

Oatmeal	-	-	4	oz.,	wit	h milk	-	8 oz.
Arrowroe	ot	-	2	,,	,,	sugar	-	1 "
Sago				,,	,,	,,	-	1 "
vines include								

Malt liquor includes porter and are. Spirits include brandy, whisky, and gin.

452. The composition and proportion of the drinks are stated on W. O. Form 147, but when fresh lemons cannot be procured lemonade may be made with lime-juice, in the proportion of 2 oz. of the lime-juice to one pint of the beverage.

453. Under very special circumstances, soda water, bottled lemonade, and calfs-foot jelly may be given, but only when the issue is approved of by the Principal Medical Officer, or in his absence the senior Medical Officer in the command.

454. The beef and mutton for the various diets, as also the fowls, are to be of good quality, and must weigh in the raw state exclusive of bone, the weight specified in the Diet Table; one fourth more will be considered an equivalent when meat is issued with bone.

455. The bread is also to be of the best household kind.

456. The meat on low diet is to be used for beef tea, so as to make three quarters of a pint of good beef tea for each patient on such diet.

457. The meat on half and entire diets, is to be boiled with the vegetables, barley and flour; and a $\frac{1}{4}$ -oz. of sugar, for each soup diet, may be charged in addition to the allowance on the scale. The meat on entire diets is to be roasted, baked, or stewed. For varied diets mustard may also be issued in the proportion of 1 oz. for every 20 diets; pepper for seasoning will be allowed at the rate of 2 oz. for every 100 diets of all kinds excepting Tea and Milk.

458. In the diets, when no soup is given, the vegetables are to be cooked in bulk, and served up to each patient in the proportions specified.

459. When potatoes cannot be procured of a sufficiently good quality, either 3 ozs. of rice, 3 ozs. of flour, or 8 ozs. of bread, may be issued in lieu of 16 ozs. of potatoes.

460. Preserved potatoes, when issued, will be in the proportion of 1 oz. of the preserved to 5 ozs. of fresh, and 1 oz. of mixed preserved vegetables in lieu of 10 ozs. of fresh.

461. Half an ounce of Coffee may be substituted for $\frac{1}{8}$ oz. of tea at breakfast and supper.

462. Milk, Wines, and Spirits are to be calculated at 20 oz. the imperial pint. The reputed quart bottle should contain $5\frac{1}{3}$ gills or $26\frac{2}{3}$ oz.

463. When men, on admission to Hospital, require nourishment before they are placed on regular diet, Medical Officers may order what is necessary from the following extras :—

Drinks.

Soda water.

Quality of beef, mutton, and chicken.

Bread. Beef tea.

Soups and ceasoning.

Vegetables.

Substitutes for potatoes.

Coffee.

Milk, wine and spirits.

Extras for patients not on regular diet.

Regulations as to Hospital Diets.

Section VII.

HOSPITAL DIETS-continued.

Bread, butter, tea, sugar, eggs, essence of beef, arrowroot, milk, wines, and spirits;

and on the departure of invalids who are not on diet, a similar course may be adopted, but in all such cases the extras will be entered on the diet sheet.

464. Previous to the issue of any diets, extras, or drinks, they Diet Sheets will be entered on the diet sheet W.O. Form 1145. This will be and recording filled up daily by the prescribing Medical Officer, ordinary diets of diets. for the following day, extras and drinks for the day of issue. The first entry of each man's diet will be written in words, and subsequent entries of the same diet will be indicated by the initial letter of the diet, which will be marked in the proper column from day to day by the prescribing Medical Officer, who will at the same time obliterate the colums in which no entries have been made by drawing a line through each unoccupied space. The date of discharge will invariably be filled in by the prescribing Medical Officer, who will also sign the sheet when completed. The diet sheet will be hung up at the head of the patient's bed.

465. The names of all men on Hospital diet, or to whom extras have been given, will be duly entered in the Hospital Admission and Discharge Book (W.O. B. 27), and a record kept of the number of days on Diet, or Hospital comforts, for completion at the end of each month of W.O. Form 152 to enable the regulated stoppages applicable to each case to be recovered.

466. A Monthly Abstract of Diets and Extras (W.O. Form Forms to be 175), and a Monthly Statement of Provisions, &c., received, ex- rendered. pended, and remaining (W.O. Form 184) will be sent at the end of each month to the Commissariat Officer or his representative at the Station, who will ascertain the correctness of the computation of both Forms, and see that they are duly certified and agree as regards expenditure. The Diet Sheets (W.O. Form 1145) and Extra Sheets (W.O. Form 1200) will, at the end of each month, be sent by the Medical Officer in charge direct to the Principal Medical Officer of the District. (See par. 191.)

467. Medical Officers must always bear in mind that, although Economy in no instructions can be laid down in regulations as to the character ordering of cases needing extras, the necessary economy, compatible with extras. the well-being of the patient, should be practised, in order that an undue or injudicious issue of extras may be avoided.

468. Every case in which extras have been prescribed will be Cases to be entered by the prescribing Medical Officer in the Medical Case recorded. Book, and the daily amount of extras recorded, so that the Principal Medical Officer may be enabled to satisfy himself as to the necessity of the issue.

469. Prescribing Medical Officers will be held directly responsible to the Principal Medical Officer for all entries on their

PART 2.

Section VII.

Regulations as to Hospital Diets.

HOSPITAL DIETS-continued.

Diet Sheets, and when called upon will have to justify the necessity of the issue of all articles ordered by them.

470. The Principal Medical Officer will supervise the nature and quantities of diets and extras, as suited to individual cases. It will be his duty to call for explanation of any seeming excess of issue on W.O. Form 465, to check irregularities, or any apparent waste or extravagance, and to report the same, with his opinion thereon, to the Director General of the Army Medical Department, for such action as may be necessary.

471. It is only in cases of great emergency that any deviation from the dietary here authorized can be permitted, and the histories of such cases will be submitted at their termination to the Director General of the Army Medical Department, in transcript from the Case Book showing the necessity for the course adopted.

472. Medical Officers will frequently inspect the various articles composing the diets and extras before being cooked or prepared, as well as after they are served up.

473. Movable Field Hospitals will be non-dieted; the field ration will be drawn from the Commissariat Department, and cooked, and distributed to the patients according to the requirements of the different cases, and will be supplemented by such medical comforts as may be necessary, the quantities of the latter issued to each case will be entered on the diet sheet.

474. During war, the scale of diets laid down will, if practicable, be used in general and base hospitals, but should any deviation from the same be found necessary, it will be the duty of the Principal Medical Officer on the field to decide what those deviations may be, and to lay down a scale adapted to the position, climate, and the supplies obtainable, submitting the same for approval to the General Officer Commanding.

475. Should it be impossible during active service to adhere to the scale of diets, low and entire will be considered as the authorized diets.

476. In all Hospitals the system of drawing perishable articles of diet or medical comforts will be by daily requisitions on the Commissariat Department, or their agents or contractors. Articles not perishable will be drawn in quantities calculated to last a week or longer, according to circumstances.

477. The requisitions for all such supplies will also be the receipt.

Principal Medical Officer will supervise nature of diets and extras.

Directions from dietary.

Movable Field Hospitals.

Scale of diets during war.

Regulations for diets, and medical comforts.

PART 3.-SUPPLY OF SURGICAL IN-STRUMENTS, APPLIANCES, AND MATERIALS, AND OF MEDICINES AND MEDICAL MATERIALS.

I.-Instruments, Appliances and Materials. II .- Medicines and Medical Materials.

SECTION I.-INSTRUMENTS, APPLIANCES, AND MATERIALS.

478. Medical Officers upon attaining the rank of Surgeon Pocket Major, will not in future be required to provide, at their own cost, Instruments. a capital case of Surgical Instruments; but it will be incumbent upon all executive Medical Officers to provide themselves with, and keep up at their own expense, a case of Pocket Instruments of the authorised pattern containing the Articles specified in the Appendix No. 13, page 204.

479. The case of pocket instruments will be carried on Service How carried. in the authorised undress Regulation shoulder pouch.

480. At the Head-Quarters of each District an equipment of District Surgical Instruments, Appliances, and Materials, consisting of Equipment the articles specified in the following list, will be provided for struments &c. use throughout the District :--

> Air Beds Air Pillows > three boxes complete. Air Bellows Aspirator. Bandage for bloodless operations, Bistouries, No. 6, case of. Bougies, rectum, set of. Bougies, à Boule, set of. Carbolized Cat-gut for Ligatures. Catheters, Silver and Nickel, case of. Capital Instruments, full set of. Chemical Cabinet. Compresser Aneurismal, No. 2. Crutches with stuffed-heads, 4 pairs. Cupping Instruments. Ear Syringe.

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INSTRUMENTS, &c.-continued.

Eve Instruments. Eye Douches, No. 3. Electro Magnetic Machines, No. 2. Ether Inhaler. Ecrasseur. Fractured Patella Apparatus. Fractured Jaw Apparatus. Forceps Polypus. Fistula Director. Hæmorrhoidal Clamp, with three buttons. Ice Bags, set 1. Irrigators, sets two. Microscope. Ophthalmoscope and Laryngoscope, in case. Spray Producer. Sounds, case of. Spectacles, case of. Speculum Auris. Speculum Recti. Tonsil Guillotine. Tourniquet Abdominal. Tooth Stopping and Scaling Instruments. Urethra Dilator, Holt's. Urinometer Apparatus, large. Varicocele Rings and Needles. Water Beds, No. 2. Water Pillows, No. 2.

481. The Instruments and Appliances will be placed under the charge of the Principal Medical Officer, who will be responsible that they are in safe custody and kept in good order, and they will be issued on loan by requisition on the Principal Medical Officer, to whom they will be returned when no longer required.

482. The Principal Medical Officer at Home Stations will forward half-yearly to the Director General Army Medical Department a list of the Instruments and Appliances, stating the condition of each article. From Foreign Stations the list will be sent annually.

483. At each Station Hospital an equipment of Surgical Instruments, Appliances, and Materials consisting of the articles specified in the following list will be provided :—

Station Hospitals Equipment of Surgical Instruments.

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Section I.

Article.	No. 1. 1000 Troops.	No. 2. 500 Troops.	No. 3. 250 Troops.
Arm Sling Bolus Knives Brushes, Glass Corkscrew Caustic Holder Caustic Holder Caustic Holder Catheters, Elastic Gum, set Eye Shades Eye Baths. Field Fracture Case Fracture and Dislocation Appa Filter Hone and Strop Irrigator Measuring Tape Operating Table Pill Machine Pins, Safety Post-Mortem Instruments Pus Post-Mortem Instruments Post-Mortem Instruments Scales and Weights, Pillar Sciesors, Counter Scales and Weights, Pillar Sciesors, Counter Stethoscopes Stethoscopes Stomach Pump Surgeon's Case of Instruments Thermometers, Bath Tooth I	 $\begin{array}{c} & & \ddots & & \\ & & & & & \\ & & & & & \\ & & & &$	$ \begin{array}{c} 1\\2\\\\1\\1\\.\\.\\1\\\\1\\\\1\\\\1\\1\\.\\.\\1$	

INSTRUMENTS, &c .- continued.

484. The Medical Officer in charge of the Hospital will be responsible for the safe custody and condition of the foregoing Stores, and requisitions for all repairs, completions, and replacements will be included, as far as practicable, in the half-yearly demands.

485. The Instruments will be kept in the surgery under lock and key; and all other articles either in the surgery or store. These Instruments, Appliances, and Materials will be accounted for half-yearly at Home Stations on W.O. Form 299; annually at Foreign Stations on W.O. Form 828 and 829. The half-yearly Return of General Stores at Home will be made on W.O. Forms 828 and 829.

486. The following Scale of Surgical Materials, &c., is calculated for the use of a Force consisting of 1,000 troops (inclusive of Women and Children) for a period of six months. Requisi-

PART 3.

INSTRUMENTS, &c.-continued.

tions put forward for a greater or smaller number of troops will be made in proportion as nearly as practicable,—viz., for 750, three-quarters; for 500, one-half; and for 250, one-quarter of this Scale.

Syringes, Urethra, Pewter	No. 12	Camel-hair Pencils	 No. 12
" " Glass	" 6	Cotton Wool	 lbs. 2
Surgeon's Sponges	" 12	Tape	 piece 1
Bandages, Calico	" 36	Thread for Ligatures	 oz. 2
" Flannel		Needles, common	 paper 1
" 18 tailed	" 4	Test tubes	 set 1
" Suspensory	" 12	" Paper	 books 4
Flannel for Fomentations	yds. 6	Glass Brushes	 No. 2
Gutta-Percha Tissue	" 4	", Rods	 " 2
Oiled Silk	,, 1	Eye Shades .,	 " 6
Spongio Piline	" 1	1.10.220	

487. All demands for such articles will be forwarded on W.O. Form 300, in the manner detailed in paragraphs 490 and 501.

488. The Surgical Instruments and Appliances authorized by paragraph 54, will be kept under lock and key in the Instrument and Book box; a return of Instruments and Appliances in charge will be furnished by the Medical Officer to the Principal Medical Officer of the District in manuscript half-yearly, specifying the condition of each Instrument and Appliance.

489. The supply of Instruments and Appliances for Troops embarked coastwise, and proceeding on, or returning from Foreign service (except India) is dealt with in the "Regulations for Medical Officers in charge of troops on board ship." (See par. 74).

490. When any Instrument or Surgical Appliance becomes unserviceable or deficient, a Requisition in duplicate on W.O. Form 300, together with a report of the circumstances under which the damage or deficiency occurred, will be transmitted to the Principal Medical Officer, who, if at any Home Station except in Ireland, will through the Director General of the Army Medical Department, take immediate steps for its replacement or repair. At Foreign Stations, the Principal Medical Officer will arrange for replacing all damages and deficiencies, reporting the steps taken in regard thereto, to the Director General.

491. When a Medical Officer is removed from any charge he will transfer all Surgical Instruments and Appliances belonging to the Hospital, to the Medical Officer relieving him, as laid down in paragraph 502 of these Regulations. The condition of each article of surgical equipment will be stated in the Transfer-Return, or the Medical Officer taking over charge will be held responsible for any deficiencies afterwards reported.

492. At Foreign Stations, Medical Officers may procure Instruments at the prices paid for them by the public from the Public Stores, to replace those of the regulation Pocket-Case which may

Instruments, &c., for Medical Officers doing duty with Corps.

Instruments, &c., for Medical Officer in charge of troops on board ship.

Instruments, &c., becoming unserviceable.

Transfers.

Instruments lost or damaged.

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INSTRUMENTS, &c .- continued.

be lost or become damaged, provided the articles required are on charge at the Station.

493. Steel Trusses, when considered necessary, will be applied Steel trusses. for by Requisition in duplicate on W.O. Form 295 At Home Stations, with the exception of Ireland, the requisitions will be forwarded through the Principal Medical Officer of the District to the Director General, and at Foreign Stations they will be forwarded to the Principal Medical Officer for supply from the Army Medical Stores.

494. Each Truss supplied will be expected to last at least To last three three years, but if, from any unforeseen causes, it should require years. renewal within a less period, full explanation of the circumstances under which it has become inefficient will invariably accompany the requisition.

495. In those Station Hospitals where trusses are authorized Nominal lists to be supplied, a nominal list of the issues made will be appended of issues of to the periodical Returns of Medicines and Instruments formed at trusses. to the periodical Returns of Medicines and Instruments forwarded to the Director General.

496. Commissioned Officers of the Army, and persons em- Purchase of 496. Commissioned Oncers of the Army, and persons chi-ployed under Government at Foreign Stations, will, subject to Officers and the approval of the Commanding Officer and the Principal Departmental Medical Officer, be allowed to purchase from the Public Stores employes. such Steel Trusses as may be required for their personal use, at the prices paid by the Government. The proceeds of these sales will be immediately paid into the military chest and duly reported by the Principal Medical Officer for the information of the Director General of the Army Medical Department, and all such sales will be entered in the Annual Returns rendered to the Army Medical Department, supported by the usual vouchers.

Section I.

Section II.

Medicines and Medical Materials.

SECTION II.-MEDICINES AND MEDICAL MATERIALS.

Scale of proportions. **497.** The following Scale of Medicines and Medical Materials, is calculated for the use of a Force consisting of 1,000 troops (inclusive of Women and Children) for a period of Six Months. Requisitions put forward for a greater or smaller number of troops will be made in proportion as nearly as practicable—viz., for 750, three-quarters; for 500, one-half; and for 250, one-quarter of this scale :—

-	lbs. oz.		lbs, oz.
Acacia	2 0	Condy's Disinfectant	4 pints.
., Pulvis	2 0	Conf: Rosæ Gall:	0 4
Acet : Scillæ	1 0	" Sennæ	1 0
Acid : Acetic	4 0	Copaiba	6 0
Glaciala	0 2	Creasotum	0 3
Conholia	3 0	Creta Præparata	2 0
Oitain	1 8	Cubebæ Pulvis	6 0
Callin	0 4	Cupri Sulphas	0 8
Hudvahlau	1 8	Dec: Alöes Comp:	2 0
Hydroavan . dil .	0 2	Elaterium	20 grns.
Nitria	1 8	Emplast: Belladon:	1 0
Dhamhonia, dil.	1 0	C. L.P. James	2 0
" Phosphoric: dil:	2 0	Clanthanid	1 0
" Sulphuric:	1 0	Hadaona	1 0
" Sulphurosum	0 8	Onii	7 0
" Tannic :	3 0	" Opii	1 0
" Tartaric :		" Resina	1 0
Adeps Benzoat	3 0	" Saponis	0 1
Æther	0 12	Extract: Aconit:	
Alumen	3 0	" Alöes	0 2
Ammonii Chlorid :	2 0	" Belladon:	0 4
Ammoniæ Carb :	2 0	" Colch: Acet:	0 1
Amylum	3 0	" Coloc: Co:	1 0
Antim : Tartarat	0 6	" Conii	0 4
Aqua Destillata	⅓ gall.	" Ergotæ Liq:	0 2
Aqua Rosæ	$2 \ 0$	" Filicis Liq:	0 4
Argent : Nitras	04	" Gentian	0 4
Atropia	10 grs.	" Hyoscyam:	0 8
Bismuth : Subnit :	0 4	" Nucis Vomic:	0 01
Borax	2 0	" Opii	0 2
Buchu Folia	0 8	", Sarsæ Liquid:	8 0
Calumb : Radix	1 0	Extract Taraxici	1 0
Camphora	1 8	Ferri et Ammon: Cit:	0 8
Capsici Pulv :	0 2	" Quiniæ Cit:	0 12
Carbo Ligni	3 0	" Phosphas	0 4
Catechu	0 2	" Sulphas	0 8
	$\begin{array}{ccc} 0 & 2 \\ 0 & 2 \end{array}$	Ferrum Tartaratum	0 6
	1 0	Gallæ Pulvis	0 4
Chirata	1 0	Gentiana	2 0
Chloral Hydras	0 8	Glycerinum	3 0
Chloroform	0 12	Guaiaci Resina.	0 8
" Methyl	2 0	Hydrarg: Iodid: Rub:	0 2
Cinchon : Flavæ Cortex	0 4	", Oxid: Rub:	0 4
Collodium	0 4	, oxid. atto:	

Medicines and Medical Materials.

Section II.

MEDICINES, &c .- continued.

		11.0		1	lbs. oz	
		lbs.	0Z.	.	Potassæ Acetas 2 0	
Hydrag: Perchlorid:	•••	1	ō		Biegrhon	
" Subchlorid:		ō	8	1	Chlores 2 0	
Hydrargyrum cum Creta	•••	õ	1		Nitrag	
Inject: Morph: Hypoderm:		0	2		" Permanganas 0 4	
Iodum	•••	1	õ		Towtwood 1 0	
Ipecacuanhæ Pulvis	•••	1	ŏ		" Acida 4 0	
Jalapæ Pulvis		-	cwt		Puly: Antim: Jacobi 0 2	
Lini Farina	•••		O		Costo Arom:	
" Semen	•••	4			" cum Opio 1 8	
Liniment: Aconit:	••	0	4		" Treesenanher Comp: 1 0	
" Belladon:		0	8		" Talana Comp: 2 0	
" Camphor: Co:	••	5	0		, oatapa comp	
" Iodi	••	0	8		,, Hino comp	
" Saponis	••	10	0		" Inter comp	
Liquor: Ammoniae	••	2	0		Quassia	
" " Acet: Co	nc:	3	0		Quinte Surpris 0 0	
". Arsenicalis		0	4		Teller T dittio	
" Calcis Sulph		8	0		Troste Gamere I Com	
" Donovani		0	8		Santoninum	
" Epispasticus		0	4		Bapo Duras	
Ferri Pernit:		0	8		Jocammontant IV III	
Onii Sed:		0	6	;	Genega	
Plumbi Subacet:		2	C)	Senna 6 0	
Potesse		4	0)	Sinapis 10 0	
Sode Chlor:		4	0)	" Charta 6 boxe	
Stentio		0	8	3	Soda Tartarata 6	
Zinci Chlor:		6	pin	ts.	Sodæ Bicarbonas 4	
Magnesiæ Carbonas		2	÷	D	ii Caroolao ii ii	0
", Sulphas		56	; (0	Spiritus Ætheris 1	8
Manganese: Oxid: Nig:		0	: (0	., Nitrosi 5 (0
Mel				0	Ammon: Aromat: 3	0
		0		01	" Chloroformi 2	0
Morphiæ Acetas , Hydrochlor:		0		01	., Rectificat: 1 pin	nt.
		0		01	", ", Methyl: 6 pin	ts.
				8	Strychnia 30 g	rs.
" Cajuputi	• •			01		0
" Carui	• •	6		1	Syrup: Chloralis 1	0
" Caryoph:	• •			01	" Ferri Iodid: 2	0
" Cassiæ		1		4	Phosphy 1	0
" Crotonis …	•			õ	Popoveris	0
" Lini	•			2	Sulla 5	0
" Menth: Pip:	•	0/		õ	Tripler 2	0
" Morrhuæ	•	1.	× .	õ		8
" Olivæ	•	0		õ	Amian 1	0
" Ricini	•			õ	" Assafatid: 0	8
" Terebinth:	•		0	2	" Amant: 1	0
Opii Pulvis				õ	" Balladon: 0	4
Oxymel Scillæ			2	8	" Benzoin: Co: 0	8
Pareira			0	1	Columba 1	0
Pepsin				4	Comphor: Comp: 9	0
Pilul: Aloes et Myrrh			0	2	Contharid: 0	8
" Assafætid: Co:			0	0	", Capsici 0	8
" Hydrarg:			1	8	Cardam: Comp. 3	õ
", ", Sub-Chlo			0	8	Catachu 2	0
" Phosphori			0		"Cinchon: Comp:	ŏ
" Rhei Comp:		••	0	8	" Colch: Sem: 1	0
" Scillæ Comp:		••	0	4	"Digitalia 0	8
Plumbi Acetas		••	2	0	" The The The The	0
Podophylli Resina		••	0	1	" Gantian Comp: 2	0
Potassii Bromidum		••	1	0	Guaiaci Ammon: 0	8
" Iodidum		••	4	0	"Hypegyami . 3	0
Potassa Caustica		••	0	1	, Tadi 2	ŏ
" Sulphurata		••	2	0	,, 10di 2	

Section II.

Medicines and Medical Materials.

MEDICINES, &c .- continued.

	lbs.	oz.	1	lbs. oz.
Tinctura Kino	0	8	Lint, Fine	10 0
" Lavand Comp:	1	0	" Second	20 0
" Lobeliæ Æther:	0	4	Surgeons' Tow	60 0
" Myrrhæ	1	0	Bleached Linen Sheeting	yards, 2
" Nucis Vomicae	0	4	Calico	" 3
Onii	4	0	Adhesive Plaster, spread	, 20
Rhei	2	0	Soap Cerate Plaster	, 7
Saillan	4	0	Isinglass Plaster on gauze	, 11/2
Sonno	3	0	Waterproof Cloth	" 4
Tolutana	1	0	Poultice Cloth	" 2
Volorian: Ammon.	õ	8	Straining Cloth	
"Zingiber		õ	Old Linen Sheets	No.3
Unguent: Cetacei	10	0	Skins of Leather	,, 2
Unguent: Cetacer	0	0	Pins	papers 2
" Hydrarg:		0	Filtering Paper	quires 1
1)	0	õ	D'II Denne Oldin	papers 4
" Resinæ		0	10 Mar	
" Sabinæ	-			,, 4
" Simplex		0	Vials, 1 oz.	
Veratria	-	-	" <u>1</u> "	
Vinum Antimoniale	. 3	0	2	gross 1
" Colchici		8	Bottles, 4 "	
" Ferri		0	,, 6 ,,	
" Ipecacuanhæ	. 5		" 8 ")	
" Opii	. 0		Galipots, in sorts	dozen 2
Zinci Chloridum	. 0	2	Corks, Vial	gross 2
" Oxidum	. 0	8	" Pint	" 1
" Sulphas	. 2	0	Quart	
Volovianas	. 0		Packthread	oz. 6
Zingiber	0		Labels	1000
Dalais	. 1			
" Fuivis ••• •	-	-	and the second sec	

Mode of obtaining supplies of Medicines.

on W.O. Form 297, accompanied by half-yearly Returns on W.O. Form 299. The half-yearly Returns of General Stores will be rendered on W.O. Forms 828 and 829. 499. These demands (except in Ireland) will be put forward

to the Director General by the Medical Officer in charge of each Hospital, through the Principal Medical Officer of the District.

498. Supplies of Medicines and Medical Materials in accord-

ance with the foregoing scale will be drawn at home by half-

yearly Requisitions, in duplicate, on the 1st April and 1st October,

500. Intermediate demands will be put forward in the same manner, but they will be accompanied in each instance with a full explanation of the circumstances which render them necessary. From Foreign Stations the Requisitions will be annual, dated the 1st April, on W.O. Form 297, with Returns on W.O. Form 828 and 829, for the year ending the 31st March.

501. Demands for Medicines and Surgical Instruments and Materials will not be included on the same Form; the former will be indented for on W.O. Form 297 or 884, and the latter on W.O. Form 300.

502. When a Medical Officer is removed from any charge where the custody of Medicines is included, a Transfer Return in detail, up to the date of relinquishing such charge, will be prepared in duplicate on W.O. Form 299, which will be duly

Intermediate demands.

Requisitions from Foreign Stations.

Demands for Medicines and Instruments to be on separate Forms.

Transfer Returns. SURGICAL

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MEDICINES, &c .- continued.

signed both by the Medical Officer giving over and the Medical Officer receiving the Stores. One copy will be transmitted to the Director General of the Army Medical Department, through the Principal Medical Officer, and the other will be retained for reference.

503. The scale contained in paragraph 497 has been framed Demands to with the view of placing at the disposal of Medical Officers such the recognized a choice of remedies as it is presumed will be sufficient to meet scale. all the wants of the sick ; but it is of course to be understood that the whole of the articles specified therein are not required for any one service. Extra articles not included in the scale will only be sanctioned under very exceptional circumstances, which will be fully explained at the time of making the demand. In putting forward requisitions to the Director General the Principal Medical Officer of each District will carefully examine them in order to satisfy himself that they are strictly in accordance with the scale, and that the articles demanded are absolutely necesary for the use of the service for which the demand is made.

504. Medicines supplied by different firms will not be mixed together in the same jar or bottle, in order that, should objection from different be made to their quantity or quality, no difficulty may be experienced in applying to the Contractor who supplied them.

505. On the 1st of October in each year a report will be trans- Annual Remitted to the Director General on all supplies of Medicines received during the past twelve months. Any objections, therefore, as to the age, adulteration, or chemical defects of the Medicines will be noted from time to time, that the report may be fully All losses or casualties resulting from bad substantiated. packing, leakage, or accident will, at home, be reported at the time of receiving the stores.

506. On the receipt of supplies of Medicines at Foreign Supplies for Stations every case or other package will be opened, and its con- Stations. tents carefully examined in the presence of a Board of Medical Officers, by whom notice must be taken, in all cases of breakage, whether there is any deficiency of packing material, or other circumstance to lead to the belief that the loss resulted from insufficient or careless packing; or whether any external marks exist on the cases showing that they have been subjected to rough usage in transit. Such observations will be fully recorded in the copy of the proceedings transmitted to the Director-General, Army Medical Department.

507. On Home Service, all empty bottles and packages in Disposal of which supplies of Medical Stores have been received, will be empty bottles and packages and such as will not probably and packages carefully preserved from damage, and such as will not probably on Home be wanted for further Hospital use will be reported to the Service. Director General, either on the 1st of April or the 1st of October, a detailed list being furnished, in duplicate, stating the number and description of each article, and particularly specifying the

Supplies of Medicines Firms to be kept separate. Medicines.

Foreign

Section II.

Section II.

Medicines and Medical Materials.

MEDICINES, ETC.-continued.

packages which are serviceable, and the numbers of each kind of bottle or jar which have not contained oils, turpentine, copaiba, or ointment, together with estimates of the highest sum obtainable for these stores, if disposed of locally. The proposed sales, when approved by the Director General, will be forthwith effected, the proceeds thereof duly handed over to the Departmental Paymaster, and a notification of the payment transmitted to the Director General.

508. On Foreign Service, sales of empty bottles, packages, and other articles will be made under the orders of the Principal Medical Officer at each station annually, or more frequently if deemed expedient, and the proceeds of such sales will be immediately paid into the military chest, and duly reported to the Secretary of State for War.

509. Medicines or other articles not contained in the scale set forth in paragraph 497, will not be allowed at the public expense if purchased without the previous sanction of the Director General at home, or of the Principal Medical Officer abroad, unless under circumstances so urgent as not to admit of the delay of reference, in which case a covering authority will be obtained as early as possible. All bills for such urgent purchases, purchases of leeches, and for carriage of stores, after being certified to the effect that the articles or leeches were absolutely necessary, that they were obtained on the best and cheapest terms, and that the stores for which carriage is charged were solely for the public service, will be sent to the Principal Medical Officer of the District for examination, who will cause an abstract in duplicate on W.O. Form 292, to be prepared, in order that the same may be forwarded at the end of each quarter (with the bills) to the Director General of the Army Medical Department for his final approval. The bills, with one copy of the abstract, will be returned for payment with as little delay as possible to the Departmental Paymaster of the District, through the Principal Medical Officer of the same. The foregoing instructions will not apply to Foreign Stations.

510. Such articles as vinegar, linseed meal, loaf sugar, and mustard, when necessarily provided by the Commissariat Department for medical purposes, will be included in the abstract referred to in the foregoing paragraph, the Commissariat Officer giving the necessary information.

511. On each prescription or order for medicines for a soldier's wife or child will be written the regimental number, name, rank and corps of the husband or father, which will be signed by the Prescribing Officer. Every prescription or order tor Medicines for Officers, and all others received at the Surgeries will bear the signature of the prescribing Medical Officer, and will be copied daily in a book (W.O. Book 39) to be used for that purpose; each entry will bear the signature of the Compounder

Disposal of empty bottles and packages on Foreign Service.

Purchases of Medicine.

Medicines for soldier's families.

Medicines and Medical Materials.

MEDICINES, &c .- continued.

of Medicines, or qualified person who dispensed the prescription, which will be retained and filed for future reference.

512. At each visit to, or inspection of, a Hospital or Surgery all prescriptions and entries will be carefully compared by the Principal Medical Officer, who will ascertain the accuracy of all entries, and satisfy himself that the issue of all Medicines and Materials has been properly made and regularly accounted for.

513. The Field Companion authorised by the Director General Equipment of for the use of Regiments and Corps will be under the charge of the Medical Officer doing duty with such Regiment or Corps, and he will be held responsible for the same, and will include it in the manuscript return required to be furnished by paragraph of these Regulations.

514. The supply of Medicines for Troops embarked coastwise Equipment of and proceeding on, or returning from, Foreign Service (except India), is provided for by the Regulations for Medical Officers in board ship. charge of Troops on board ship, paragraph 74. In all cases of issues of Medical equipment from General Stores to Troops embarking for, or returning from, Foreign Service, Invoices in duplicate, duly signed by the Medical Officer receiving the supply, will be forwarded at once to the Director General.

515. The undermentioned equipment will be furnished by the Medical and Principal Medical Officer at a port of embarkation for the use of Surgical Transports specially engaged in Troop Service.

> Medicine Chest, complete. Case of Surgeon's Instruments. Tooth Instruments. Stomach Pump. Box of Fracture Apparatus.

516. This equipment will be retained on board until the period for which the Transport is taken up has expired, when it will be returned into Army Medical Stores at home.

517. All articles for disinfecting purposes will be obtained Disinfectants. from the Commissariat Department, and will not be included in requisitions put forward to the Director General.

Medicines for Regiments and Corps.

Troops on

equipment for Transports specially employed.

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PART 4.—MEDICAL ATTENDANCE AND EXAMINATION.

SECTION I.-MEDICAL ATTENDANCE.

I.-General Instructions.

II .- Officers, their Wives, Children, and Civilian Servants.

III.-Non-Commissioned Officers and Soldiers.

IV .- The Wives and Children of Non-Commissioned Officers and Soldiers.

V. Officers, Pensioners, Non-Commissioned Officers and Soldiers of the Army Reserve when called out for duty.

VI .- Staff Officers of Pensioners, and Governors of Military Prisons.

- VII.-Non-Commissioned Officers of Enrolled Pensioners, their Wives and Children.
- VIII.—Pensioners, Clerks, Permanent Labourers, and other Civilians employed under the War Department.

IX .- Employment of Private Medical Practitioners.

I.-GENERAL INSTRUCTIONS.

Definition of the term " Medical attendance."

Supply of medicines limited to Admission to. Hospital explained.

518. The term "medical attendance" throughout these regulations means the protessional advice and care during sickness or injury afforded by a Medical Officer or by a Private Medical Practitioner appointed to take Medical charge of Troops. Medical attendance will be restricted to the persons detailed in the following regulations, and subject to the conditions therein laid down; it will include the supply of medicines prescribed by the Medical Officer in charge of the case, and ordered by him from the public stock, or the medicines prescribed and supplied quoted above. by a Private Medical Practitioner when appointed.

519. No person unless authorised by regulation will be admitted into Military Hospitals without the special sanction of the Secretary of State, and any departure from this rule will render the officer authorising such deviation liable for all expenses which may be incurred.

Medicines and Medical Materials.

GENERAL INSTRUCTIONS-continued.

520. No issue of medical comforts or diets will be made to any Medical comperson not entitled to them by regulation, and any articles of forts or diets. this nature ordered on the authority of Commanding or Medical officers for women, children, or other persons not entitled thereto will not be sanctioned as a charge against the public, and the value of all articles so issued will be recovered from the Officers on whose certificate the issues were made.

521. Attendance cannot be claimed for women during their Attendance confinement (with the exception of the wives of soldiers cannot be admitted into Female Hospital), unless the assistance of a Mid-case of childwife or Civil Practitioner cannot be procured, or unless the Mid- birth. wife or Civil Practioner privately employed should require the assistance of a Medical Officer in any case of danger.

522. When medical attendance is claimed from a Medical Nominal Roll Officer for any persons who are not enlisted soldiers or members of persons Officer for any persons who are not emisted solutiers of memoers claiming of their families, and not belonging to the Corps to which the medical atten-Medical Officer may be attached, a Nominal Roll (on W. O. dance, to be Form 1328), with the rank or occupation and address of each furnished to person, will be furnished by the Officer Commanding, or the Medical Head of the Department on the first of each work to the Officer. Head of the Department, on the first of each month to the Principal Medical Officer, or to the Senior Medical Officer of the Station, and no person will be considered entitled to medical attendance whose name is not included in this Monthly Roll.

II.-OFFICERS, THEIR WIVES, CHILDREN, AND CIVILIAN SERVANTS.

523. Officers are entitled to medical attendance at the public Conditions of expense only at Stations where there is a Medical Officer nomi- attendance. nated for the duty, or where a Private Medical Practitioner is employed at contract rates for attendance on Non-commissioned Officers and men, and provided that in each case the Officer claiming medical attendance is on full pay, or holding a staff appointment at the Station, and resides within a radius of one mile from the Army Dispensary. In all cases of attendance by a Medical Officer, the medicines ordered by him will be obtained from the Military Dispensary.

524. Sick Officers, on the recommendation of a Medical Admission to Board, may be admitted for treatment into Military Hospitals Hospital. at Stations where special accommodation has been authorised, and on payment of the regulated stoppages.

525. The Wives and Children (up to 14 years of age) of Officers' wives Officers will be entitled to medical attendance and medicine and children. at the public expense only when the Officers are serving under the conditions stated in paragraph 523.

526. Officers will be allowed medical attendance and medicine Civilian at the public expense for civilian servants, on the conditions servan's of stated in paragraph 523. The attendance will be allowed only for G 2

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Section I.

Medical Attendance.

OFFICERS, THEIR WIVES, &c .- continued.

servants actually kept and not exceeding the numbers authorised by the Regulations relating to servants allowance published in the Army Circulars.

527. When an Officer is allowed the services of a soldier servant, or employs any soldier, orderly, labourer, messenger, or other person paid by the Government to act in any capacity as servant, the soldier or other person so employed must be reckoned as part of the maximum number of servants, as stated in the above Schedule, for whom medical attendance will be allowed.

528. Civilian servants of Officers requiring medical attendance and medicines will attend at the Military Hospital, Dispensary, or residence of the Private Medical Practitioner (as the case may be) at fixed hours, unless their illness be of such a nature as to prevent their doing so, in which case they will be visited at their master's quarters or residence, provided it is within the prescribed radius.

529. The names and occupations of civilian servants for whom medical attendance is claimed will be specified each month in W. O. Form 1328.

530. Private claims for reimbursement on account of the services of Medical Practitioners employed by any Officer of the Army, or by members of the Military and Civil Departments for attendance on themselves, their wives, children, or servants, or for medicine purchased by them will not be entertained under any circumstances.

III.-NON-COMMISSIONED OFFICERS AND SOLDIERS.

531. All Non-commissioned Officers and Soldiers, when present, doing duty and borne on the muster roll of their respective corps or depôt, or when employed on detached duty, or on furlough; also seamen of the Royal Navy and Non-commissioned Officers and Men of the Royal Marines when sick will be admitted to Military Hospitals, and there provided with medical attendance, medicines, and diet, subject to the regulated stoppages.

532. Where there is no Military Hospital, all Non-commissioned Officers and Soldiers when on duty or on sick furlough will also be entitled to medical attendance at the public expense; but this does not apply to soldiers on ordinary furlough or to deserters, who, however, if necessity arise, may be treated in Military Hospitals. Claims for medical attendance on such men from Private Medical Practitioners are, however, inadmissible.

533. In any exceptional case where from sudden illness or other cause it is necessary to subsist a discharged man in hos-

Civilian servants to attend at Dispensary.

Names and occupations to be specified monthly.

Claims of Private Medical Practitioners employed by Officers.

Non-commissioned Officers and Soldiers entitled to admission to Hospital.

Where there is no military hospital.

Discharged Soldiers unable

Medical Attendance.

NON-COMMISSIONED OFFICERS AND SOLDIERS-continued.

pital, he will, if a pensioner, be charged a stoppage of 1s., through illsubject to the provision, that if his pension be not equal to 1s. 3d. ness to subject to the provision, that it his pension be not equal to 18.5d. proceed to a day, the rate of stoppage will be such as to leave him a their destinabalance of 3d. a day. If the soldier be discharged without a tion. pension he will be subsisted free.

IV .- THE WIVES AND CHILDREN OF NON-COMMISSIONED OFFICERS AND SOLDIERS.

534. The wives of Non-commissioned Officers and Soldiers Women must who are borne on the Married Roll of Corps, with their legiti-mate children and step-children (up to 14 years of age), will, allowed mediwhen present with Corps, be allowed medical attendance and cal atmedicine at the public expense only at Stations where there is a tendance. Medical Officer, or where a private Medical Practitioner is employed at contract rates, and provided in each case that they reside within a radius of one mile from a Military Dispensary.

535. Medical comforts will only be issued to the wives and Women and children of the Non-commissioned Officers and Soldiers detailed children in the preceding paragraph, and under the conditions therein medical specified, when they are sick, and are treated in their quarters. comforts. No medical comforts will be issued unless they can be procured from a Military Hospital.

536. The following are the medical comforts which will be Medical comissued, viz., wines, port or sherry, brandy, arrowroot, and essence forts detailed. of beef or extractum carnis; fresh meat will not be supplied for the preparation of beef tea.

537. Previous to the first issue of medical comforts, the First issue of signature of the Officer Commanding will be obtained to the medical comcertificate on W.O Form 1200, on which an entry of all demands forts. for issues will be made daily by the prescribing Medical Officer, and the cases of all individuals requiring medical comforts will be entered in the case book (W.O. Book 187).

538. The wives of Non-commissioned Officers and Soldiers Admission may be admitted into Hospital under the conditions laid down to female in Part 2, Section V of these Regulations.

539. The wives and children of the Militia Staff occupying quarters in barracks will not be entitled to medical comforts unless the Non-commissioned Officers are transfers serving under their Army engagement, in which case the medical comforts detailed in paragraph 536 will be issued.

540. Medical Officers are at liberty in urgent cases to attend the wives and children of soldiers married without leave, and to supply medicines for them from the public stock to a limited extent at the discretion of the Principal Medical Officer; in all such cases the prescriptions will be filed in the surgery for subsequent examination.

Hospital.

Section I.

Section I.

Medical Attendance.

V .- OFFICERS, PENSIONERS, NON-COMMISSIONED OFFICERS, AND SOLDIERS OF ARMY RESERVE WHEN CALLED OUT FOR DUTY.

Medical attendance on Army Reserve.

541. Officers, Pensioners, Non-commissioned Officers, and Soldiers of the Army Reserve when called out for training or duty will, while so employed and if taken ill during the period of such duty, be treated, as regards medical attendance and hospital accommodation, in all respects as other Officers and Soldiers in Her Majesty's Service, subject to such stoppages as may from time to time be authorised.

VI.-STAFF OFFICERS OF PENSIONERS AND GOVERNORS OF MILITARY PRISONS.

Staff Officers of Pensioners and governors of prisons.

542. Staff Officers of Pensioners and Governors of Military and Provost Prisons will be entitled to medical attendance at the public expense-

- a. For themselves, subject to the conditions stated at paragraphs 523 and 524
- b. For their wives and children, subject to the conditions stated at paragraph 525.
- c. For civilian servants, subject to the conditions stated at paragraphs 526 to 528.

VII.-NON-COMMISSIONED OFFICERS OF ENROLLED PEN-SIONERS, THEIR WIVES AND CHILDREN.

Non-commissioned Officers

543. Non-commissioned Officers employed on the Out-Pension Staff under Staff Officers of Pensioners, and permanent of Pensioners. Warders in Military and Provost Prisons will be entitled to medical attendance and medicines for themselves, their wives, and children up to 14 years of age, at the public expense, provided they reside within one mile from an Army Dispensary; but where their duties compel them to live beyond that radius, a Private Medical Practitioner may be employed at contract rates to attend them, in all cases subject to the conditions stated in paragraphs 534 to 540.

544. Any Pensioner brought before a Medical Officer for inspection at the request of a Staff Officer of Pensioners will be examined, and the requisite certificate furnished.

Inspection of a Pensioner when required by Staff Officer.

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VIII.-PENSIONERS, CLERKS, PERMANENT LABOURERS, AND OTHER CIVILIANS EMPLOYED UNDER THE WAR DEPARTMENT.

545. Pensioners employed in the Military and Civil De- Medical partments of the Army, occupying quarters in barracks by War Pensioners Office authority, will be allowed medical attendance at the and their public expense for themselves, their wives, and children up to families. 14 years of age, at Stations where there is a Medical Officer or a Private Medical Practitioner in attendance on Non-commissioned Officers and Men of the Army, and provided that in every case they reside within the radius of one mile from the Army Dispensary of the Station.

546. Civilian Clerks, labourers, and those on the perma-Medical nent establishment of the Civil Departments of the Army, attendance whose terms of engagement subject them to the conditions labourers of the Mutiny Act and Articles of War, will be considered en- and others of the Mutiny Act and Articles of War, will be considered on employed in titled to medical attendance for themselves, their wives, and Civil Departchildren up to 14 years of age, under similar conditions to those ments of the specified in paragraphs 534 to 540.

547. Civilians on the fixed establishments of the Manu- Medical atfacturing Departments under the control of the War Office will tendance on civilians emfacturing Departments under the control of themselves, their wives, ployed in be entitled to medical attendance for themselves, their wives, ployed in Manuand children under 14 years of age; but workmen and labourers on the Wages List will be entitled to individual medical attendance only, after 3 years' continuous service, except in cases of injury from accident on duty. In both cases the residences of those requiring medical attendance must be within the radius of one mile from the Dispensary. This limit of distance, however, does not apply to the Royal Arsenal, Woolwich where the radius of one mile has been fixed from a point equidistant from the main and Plumstead gates, as shown by a yellow semicircle in a plan kept at the Offices of the Heads of Departments, Royal Arsenal.

548. Pensioners or others employed in the Military or Pensioners Civil Departments of the Army and occupying quarters in and others barracks by War Office authority, when attacked by any con-tagious or infectious disease which, in the opinion of the Senior attacked with Medical Officer, renders their removal to Hospital necessary on infectious sanitary grounds, will be admitted to Military Hospitals (subject disease. to special hospital stoppages) whenever hospital accommodation can be made available for them.

Army. facturing Department.

IX .- EMPLOYMENT OF PRIVATE MEDICAL PRACTITIONERS.

549. If there be no Medical Officer at a station where officer com-there are Non-commissioned Officers and soldiers entitled by powered to

PART 4.

Section I.

Section I.

Medical Attendance.

EMPLOYMENT OF PRIVATE MEDICAL PRACTITIONERS-continued.

employ private Medical practitioners. the foregoing regulations, to medical attendance and medicine at the public expense, the Officer Commanding at the station may, under the provisions of Art. 434 of the Royal Warrant of 1st May, 1878 (Revised Army Regulations, Vol. I), engage the services of a properly qualified Private Medical Practitioner for attendance on the Non-commissioned Officers and Soldiers present. The Private Medical Practitioner employed in this service will receive the weekly contract rates laid down in that Article. On the employment of a Private Medical Practitioner, which will be duly reported to the Principal Medical Officer of the district, all persons at the same station who are entitled to medical attendance, on the conditions laid down in these regulations, will be included in the numbers to be attended, provided they reside within the prescribed radius of one mile from the Military Dispensary.

550. When a Military Foreman of Works or a Noncommissioned Officer of the Royal Artillery, Royal Engineers, or any Corps, is sent for duty, for any period likely to exceed one month, to a station where there is no Medical Officer, or where, if one be present, his services owing to distance cannot be made available, the Officer Commanding the Corps will obtain the services of a duly qualified Medical Practitioner, for all those of the party entitled to medical attendance, at the contract rates agreeably to the directions contained in paragraph 549.

551. Where a Private Medical Practitioner has been employed at contract rates, the several Commanding Officers and Heads of Departments will, on the first of each month, furnish him with a nominal roll (on W.O. Form 1328) of all persons other than soldiers who are entitled to medical attendance, and in every case the rank, occupation, and address of each person will be stated on the rolls. In the case of a detachment of soldiers consisting of more than 10 Non-commissioned Officers and Privates, these rolls will not be necessary.

552. All persons, though belonging to different Corps or Departments at the same Station, will be attended by the same Private Medical Practitioner, and the total number included in one claim on W.O. Form 154, which will be certified and signed by the Senior Military Officer at the Station.

553. Under ordinary circumstances no claim for medical attendance will be entertained unless made in conformity with the rates referred to in paragraph 549, and unless it is submitted by the Military Officer who engaged the services of the Private Medical Practitioner direct to the Secretary of State for War at the end of each quarter, or at the termination of the service if for less than a quarter, on W.O Form 154, to which the lists on W.O. Form 1328 will invariably be attached. Where, however, exceptional circumstances have arisen in the

For Non-commissioned Officers and soldiers, &c. detached.

Nominal rolls to be forwarded.

All persons to be included in one claim.

How claims are to be forwarded. 89

Section I.

EMPLOYMENT OF PRIVATE MEDICAL PRACTITIONERS-continued.

employment of a Private Medical Practitioner to necessitate a departure from any of the foregoing instructions, full explanaof the circumstances will be given in each case, and the particulars of the claim furnished by the responsible Military Officer will be submitted on W.O. Form 296, for the approval of the Secretary of State for War.

554. The claims, when they have been approved by the Settlement of Director General of the Army Medical Department, will be re- claims. turned to the Military Officers who signed them, for settlement by the Staff Paymasters of Districts.

555. Whenever a Civil Medical Practitioner may be employed at any Garrison or Station for the treatment of cases of infectious or contagious diseases among Officers, Non-commissioned Officers or their families who are not attended by a Military Medical Officer, a report of the case must at once be obtained by the Officer or Soldier employing him aud forwarded for the information of the Officer Commanding, and the Senior Medical Officer at the Station (see G.O. 45, of July 1877).

Medical Examination of Recruits and Re-engaged Men. Section II.

SECTION II.-MEDICAL EXAMINATION OF RECRUITS AND RE-ENGAGED MEN.

I.-Inspection of Recruits.

II.-General Examination of Recruits.

III.-Special Examination.

IV.-General Instructions.

I.-INSPECTION OF RECRUITS.

Physical capacity of recruits.

556. In the Inspection of Recruits, Medical Officers, must be guided by their judgment and experience in rejecting men who do not possess the physical capacity requisite for the endurance of the toil, hardships, and exposure, incidental to Military life.

557. The principal points to be attended to are :-

- a. That the recruit is sufficiently intelligent.
- b. That his vision is sufficiently good to enable him to see clearly with either eye at the required distance.
- c. That his hearing is good.
- d. That his speech is without impediment.
- e. That he has no glandular swellings or marks of scrofula.
- f. That his chest is capacious and well formed, and that the soundness of his heart and lungs has been ascertained by means of the stethoscope.
- g. That he is not ruptured.
- h. That the limbs are well formed and fully developed.
- *i*. That there is free and perfect motion of all the joints.
- *j*. That the feet and toes are well formed.

Mental

558. Great care is to be taken in ascertaining the mental capacity of recruits.

His height, weight, and chest measurement must also accord with his age. [See G. O. 19, Recruiting, March 1878, and table therewith.

559. Men presenting any of the following conditions will be rejected :- scrofula; phthisis; undoubted primary or secondary syphilis; impaired constitution; defective intelligence; defects of vision, voice, or hearing; hernia; hæmorrhoids; varicose veins beyond a limited extent, or marked varicocele with testicle unusually pendant : inveterate cutaneous disease ; chronic ulcers; traces of corporal punishment, or evidence of having

capacity. Height,

weight, and chest measurement. Grounds of rejection.

Medical Examination of Recruits and Re-engaged Men. Section II.

INSPECTION OF RECRUITS-continued.

been marked with the letters D. or B.C.; contracted or deformed chest; abnormal curvature of spine; or any other disease or physical defect calculated to unfit them for the duties of a soldier.

560. When not required to approach the recruit for special objects, the surgeon should always take his place at a distance of about six feet from him. The recruit should be placed so that the light may fall upon him.

II.-GENERAL EXAMINATION OF RECRUITS.

561. The recruit being wholly undressed, the following Directions for directions are given seriatim:---

General Examination.

a. Walk up and down the room smartly two or three times.

- b. Hop across the room on the right foot.
- c. Back again on the right foot.
- d. Hop across the room on the left foot.
- e. Back again on the left foot.
- (The hops should be short and upon the toes.)
- f. The recruit is halted, standing upright, with his arms extended above his head, while the surgeon walks slowly round him, carefully inspecting the whole surface of his body.

562. This completes the general examination. The objects to be observed and noted in this part are the following :- the existence of any obvious defects in physical constitution; the formation and development of the limbs; the power of motion in joints, especially in the feet and hips: flatness of the feet; formation of the toes: skin disease; varicose veins; cicatrices or ulcers; marks of the letter D., or letters B.C., or of medical treatment; and any special marks from congenital or accidental causes. If any obviously disabling defects are noticed in the general examination, it is of course not necessary to proceed with the exercise further. If no such defects are found, the second part of the examination will be at once proceeded with.

III.-SPECIAL EXAMINATION.

563. The trunk will be examined from below upwards. The Examination recruit stands with his arms extended above his head, the backs of the trunk. of the hands being in contact. The following will be the order of inspection :--

a. The surgeon notes indications of venereal disease.

b. He examines the scrotum to ascertain if the testicles have descended and are normal, or if there be varicocele.

PART 4.

Section II.	Medical	Examination of	Recruits and	Re-engaged Men.

SPECIAL EXAMINATION-continued.

- c. He inserts the point of his finger in the external abdominal ring of each side, and desires the recruit to cough two or three times, to ascertain if he be ruptured or liable to that condition.
- d. He examines the abdominal walls and parietes of the chest.
- e. He desires the recruit to "take in a full breath" several times, while he watches the action of the chest. Careful stethoscopic examination is made.
- f. He examines the action of the heart, and notes its sounds.

564. This comprehends the inspection for venereal disease, disease of the testes, varicocele, hernia, visceral disease of the abdomen and chest, and capacity of chest.

565. The inspection of the lower extremities and back will be made from below upwards. The recruit first faces the surgeon, afterwards turns his back to him. The following are the directions given :—

- a. Stand on one foot, put the other forward.
- b. Bend the ankle joint and toes of each foot alternately, backwards and forwards.
- c. Turn round. Kneel down on one knee.
- d. Up again.
- e. Down on the other knee.
- f. Down on both knees, and up from that position with a simultaneous spring of both legs.
- g. Separate the legs.
- h. Touch the ground with the hands.

566. While the recruit performs these movements, the surgeon will observe the action of the knee-joints, the condition of the perinæum, and of the spinal column.

567. This includes the inspection for defects of the toe, ankle, and knee-joints; for hæmorrhoids, prolapsus ani, fistula in perinæo, and spinal deformity.

568. The examination of the upper extremities will be made from below upwards. Time is saved by the surgeon himself acting as well as telling the recruit the movements he desires to be made. The following are the directions :---

- a. Stretch out your arms with the palms of your hands upwards.
- b. Bend the fingers backwards and forwards.
- c. Bend your thumbs across the palms of your hands.
- d. Bend the fingers over your thumbs.
- e. Bend your wrists backwards and forwards.
- f. Bend the elbows.
- g. Turn the backs of the hands upwards.
- h. Swing your arms round at the shoulders.

The lower extremities and back.

The upper

extremities.

Medical Examination of Recruits and Re-engaged Men.

SPECIAL EXAMINATION-continued.

569. The surgeon will approach the recruit and examine for marks of vaccination.

570. This comprehends the inspection for loss or defects of the fingers, thumbs, wrists, elbow and shoulder-joints; power of rotating the forearm, and vaccination. If not vaccinated, the circumstance should be stated on the attestation paper.

571. The examination of the head and neck will be made The head from above downwards. The surgeon will note the intelligence, and neck. character of voice, and power of hearing of the recruit by his replies to the questions put to him. The following are the directions :---

- a. Have you had any blows or cuts on the head? Are you subject to fits of giddiness? The surgeon at the same time examines the scalp.
- b. The surgeon examines the ears.
- c. Do you see well? The surgeon examines the eyes and eyelids.
- d. He examines the nostrils.
- e. He examines the mouth, palate, and fauces, and then tells the recruit to say loudly, "Who comes there?"
- f. He examines the neck.
- g. The recruit is desired to dress himself.
- h. The special tests for power and range of vision are applied to each eye, as directed on the card of test dots W. O. Form 1233, furnished for that purpose.

572. This comprehends the inspection for injuries of thehead; deafness; disease of the ears; defect of voice; polypus of nose; state of teeth; scrofulous ulceration; glandular enlargements; and defects of vision.

IV-GENERAL INSTRUCTIONS.

573. If the examining Surgeon detect a recruit simulating Simulation of disabilities, he is to attach a slip of paper to the man's attestation, disability. containing a statement of the fact.

574. The signature of an Examining Surgeon to an attesta- Medical tion will be considered tantamount to a declaration that he per- Officers' cersonally examined the recruit in question according to these instructions, and that the man has no blemish or defect, except those noted on the attestation; remarks relative to any defects in the recruit will be in the Examining Officer's own handwriting.

575. The approving Officer is responsible for the measure- Measurement ment of recruits as regards standard and chest, and for their age being in accordance with the schedules given in General Orders from time to time.

576. The Medical Officer will enter (in pencil) on the left hand Attestation. corner of the Attestation, 2nd page, the chest measurement made

of recruits.

PART 4.

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Section II.

GENERAL INSTRUCTIONS-continued.

by him, and his opinion of the man's age, in order to assist the approving Medical Officer in forming his judgment; but the Medical Officer is not held responsible for any ultimate rejection or for any decision contrary to the opinions he may have given.

577. The Medical Officer will also note on the Attestation his opinion whether, judging from the medical inspection, or from the general appearance of the recruit, the man has previously served.

578. Recruits passed by Civilian Medical Practitioners (including Medical Officers of Militia and Yeomanry, except when their regiments are embodied or out for training) will in all cases be re-examined by a Military Medical Officer.

579. When a recruit, who has not been passed by a Military Medical Officer, is found on joining his corps from a Sub-District, to be unfit for service, a fully detailed report on his case will be made on W. O. Form 584, by the Medical Officer who considers him unfit, and who will state not only the nature of the disability, but also its extent.

580. In the case of recruits primarily passed by Civilian Medical Practitioners, who may be considered unfit for service on the secondary examination by the Medical Officer of the Brigade Depôt of the Sub-District in which they are raised, no report on W. O. Form 584 will be necessary.

581. The approval of a recruit by any Military Medical Officer is to be held as final at the corps to which he may be sent, and the man if considered unfit for service can only be brought forward for discharge as an invalid.

582. An extract of paragraph 14, also paragraph 22, Section 19, Queen's Regulations and Orders for the Army, 1873, are re-published for the information of Medical Officers.

- 14. "No boy is to be received into the service for the purpose of being trained as a trumpeter, drummer, or bugler, who does not, from his make and stature, give fair promise of growth, and of becoming, when he has attained the proper age, an effective soldier." * *
- 22. "Soldiers wishing to re-engage while serving are not to be rejected on account of minor defects or trivial ailments which do not interfere with the efficient performance of their duties. The medical certificate in the re-engagement schedule is to be considered final so far as their physical fitness is concerned."

583. When a soldier is considered physically unfit for reengagement, the Medical Officer will draw up a medical report of the case on the re-engagement schedule, according to the instructions on the 4th page of that Form; the opinion of the Principal Medical Officer will also be recorded on the same page.

584. In doubtful cases, the soldier may be allowed to appear

Whether Recruit has previously served:

Recruits passed by a Civil Practitioner.

Recruits found unfit.

Approval of a recruit by a Military Medical Officer considered final.

Boys.

Men reengaging before expiration of service.

Medical Report on soldiers considered unfit for re-engagement. Doubtful

Doubtful cases.

Medical Examination of Recruits and Re-engaged Men. Section II.

GENERAL INSTRUCTIONS .- continued.

before a medical board with a view to a decision being arrived at as to his fitness or unfitness to re-engage.

585. Recruit registers (W. O. Book No. 46) will be kept by Recruit Medical Officers employed in recruiting duties, in charge of Register. Brigade Depôts, and General or Station Hospitals. Separate recruit registers will be kept for the Regular Army and the Auxiliary Forces. These registers will on no account be removed from the office or hospital where the recruits are medically inspected.

586. In filling up the column headed "Trade or Occupation," Directions the journeyman will be distinguished from the master in all up. cases. The term "Agricultural Labourer", will apply to all labourers in agriculture (except shepherds) not living in the farm house; those living in the house of the farmer will be more correctly designated as "Farm Servants." In the case of workers in manufactures and mines, and generally in the constructive arts, the particular branch of work and the material will always be distinctly expressed. The term "Farmer" should be applied only to those who have occupied land. The sons of farmers may be returned "Farmers' Sons" when not agricultural labourers.

587. The cause of fitness or unfitness, and remarks with regard to vaccination, will invariably be entered in the handwriting of the Medical Officer.

588. The certificates as to the fitness of recruits on W. O. Certificate of Form 497 (2nd page), will both be signed by the Examining fitness. Medical Officer, whose examination is final, if no previous examination has been made, and if the first certificate has not been signed.

589. Militia recruits passed by an Army Medical Officer Militia Recannot be rejected by a Militia Surgeon; such cases will be cruits passed by an Army referred to the principal Medical Officer of the District.

Medical Officer.

PART 4.

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Section III.

Invaliding of Soldiers.

SECTION III.-INVALIDING OF SOLDIERS.

Soldiers brought forward for invaliding at the headquarters of a district.

Invalids at

out-stations.

590. When soldiers serving at the head-quarters of a district are considered unfit for further service, a detailed medical history of each case on W.O. Form 891, accompanied by the soldier's medical history sheet (W.O. Form 1143), will be submitted for approval to the Principal Medical Officer, who will inspect the proposed invalids; if found unfit by him, they will be subsequently examined by a Medical Board for final decision. The president of the board, if possible, will not be under the rank of Deputy Surgeon-General.

591. Para. 27, of Section 20, Queen's Regulations and Orders for the Army, 1873, is here re-published for the information of Medical Officers :--

" . Before any soldier is sent in from an out-station to the head-quarters of the district, for the purpose of being invalided, a detailed medical history (W.O. Form 891), and his medical history sheet, together with any statements or remarks deemed necessary for the elucidation of the case, are to be forwarded to the Principal Medical Officer of the district, who, on receipt of these documents, will signify to the Medical Officer his concurrence, or otherwise, in the necessity for the proposed transfer. Should the Medical Officer concur, steps will be taken through the military authorities for the invalid's removal to head-quarters, as directed in the preceding paragraph (26). The medical history sheets are in all cases to be returned to the out-station after perusal."

592. A medical board, assembled for the purpose of examining invalids, will record their opinion on the third page of the detailed medical history (W.O. Form 891), and their proceedings will be submitted for the approval of the Principal Medical Officer.

593. Para. 28 of Section 20, Queen's Regulations and Orders for the Army, 1873, is here re-published for the information of Medical Officers:—

" . Should the medical board, in ordinary cases, pronounce the men unfit for further service, the General Officer Commanding will then come to a decision, with the assistance of the Principal Medical Officer, and transmit in a covering-letter to the Adjutant-General [or if in Ireland, to the Deputy Adjutant-General in Dublin], on W.O. Form

Medical invaliding Board.

Men unfit for further service. MEDICAL

vices."

Invaliding of Soldiers.

85, a return of those men proposed for discharge, sending back at his discretion to their respective corps those found fit for further service. A very brief statement of the cause of disability is sufficient in this return, the details being inserted in the medical report accompanying the proceedings of the board. When finally passed as unfit, the General Officer Commanding will cause the discharge board to be at once assembled to record the men's ser-

actually seen the man in a true epileptic fit, will be attached to the detailed medical history.

600. An invalid who has been referred back by a medical Invalids reboard for further treatment, or is considered fit for service, will by a Medical not be again brought forward for invaliding until the expi- Board. ration of six months from the date of his examination by the board.

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documents.

information according to the instructions detailed on the form. 595. The summary of causes of invaliding, or remarks on re- Summary of 595. The summary of causes of invaluing, of remarks on the causes of in-mand to regiment, station, or depôt, will be made on the fourth validing or page of the detailed medical history, and will be signed by the remand. Principal Medical Officer.

Form 891), and medical history sheets (W.O. Form 1143), will be sent to the Medical Officer in charge of the Station Hospital for transmission to the Officer Commanding, when authority has been received from the Adjutant-General for their discharge. To facilitate reference, the detailed medical history (W.O. Form 891), of each invalid will be duly completed with the required

596. The information required in the detailed medical history Care to be being very essential in order to secure a proper treatment and taken in the disposal of the invalid, as well as to adjust correctly his claim on of the the bounty of the public, Medical Officers will be exceedingly detailed careful in the preparation of this document, and will enter all medical such particulars as may aid in the attainment of the ends desired.

597. The medical report to be entered on the discharge docu- Medical ments of every invalid, W.O. Form 83 (or 619, in cases of men report on the invalid's dis-attested, on the combined form), must be a concise statement of invalid's dis-charge docuhis case, and in strict accordance with the instructions detailed ment.

on these forms. 598. In all statements made by a Medical Officer in these Testimony of medical histories and reports, he will carefully distinguish invalid, and between the testimony of the invalid, or of others, and the results of his own observation, or of a reference to authentic other sources.

599. When a soldier is brought forward to be invalided for Cases of epilepsy, a certificate from a Medical Officer, stating that he has epilepsy.

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594. When the invalids have been inspected by the General Detailed Officer Commanding, their detailed medical histories (W.O. history.

INVALIDING OF SOLDIERS-continued.

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Invaliding of Soldiers.

INVALIDING OF SOLDIERS-continued.

601. In the case of invalids sent home from foreign stations for change of air or discharge, the detailed medical history (W.O. Form 891), will be handed over to the Medical Officer proceeding in charge, in order that he may be acquainted with the nature of the cases under his care, and also that he may continue, on the space assigned for that purpose, the history of the progress and the treatment of each invalid up to the date of his arrival at the invalid depôt. The medical report on W.O. Form 83, or 619, will not be filled up until the men are finally disposed of at home.

602. When invalids are sent home from foreign stations (except India), a nominal return briefly recording their disabilities will be made on W.O. Form 821. The names of men eligible for employment as hospital attendants during the voyage will also be stated. This return will be furnished in duplicate—one for the Commanding Officer, and one to accompany the invalids to Netley.

603. Paragraphs 38, 39, 40, 41 and 45 of Section 20, Queen's Regulations and Orders for the Army, 1873, are here republished for the information of Medical Officers :---

". The Commandant at Netley is responsible that invalids arriving at that hospital are, as early as possible, brought forward for discharge. If, after being medically inspected, they are reported by the Principal Medical Officer to be unfit for further military duty, the discharge documents are to be completed and transmitted to the Adjutant General for confirmation. Such men as are found fit for further service are to be sent forthwith to their respective depôts."

". In cases where soldiers on foreign stations are proposed for discharge as invalids, and have received permission from the local authorities to be discharged on the spot, the General or Officer Commanding is to forward their discharge documents, including the parchment certificate, to the Adjutant General, in a covering letter, for the consideration of the Chelsea Board."

". None but soldiers *bonâ fide* disqualified by actual disability—without regard to the length of their service are to be brought forward for discharge as unfit for service. Medical Officers will be held responsible for the proper discharge of their duty in this respect."

" . Men under treatment in hospital, and unfit to be removed therefrom, are not to be brought forward for discharge."

". The following instructions are to be observed in dealing with insane soldiers :---

"(a.) An insane soldier, whether at home or abroad, should,

Detailed medical history to accompany invalids.

Return of invalids from foreign stations excepting India.

Arrival of invalids at Netley.

Settlers at foreign stations.

Bonû fide disability necessary for invaliding.

Soldiers in hospital.

Insane soldiers. Invaliding of Soldiers.

Section III.

INVALIDING OF SOLDIERS-continued.

as a rule, be attended, for one month at least, by the Medical Officer who has been accustomed to treat him, as such Medical Officer, from knowing the probable origin and causes of the attack, is considered the most competent to treat the disease in its earlier stage.

- "(b.) If, after such period of treatment, the patient should not recover, or, if in consequence of exceptional circumstances which do not admit of delay, it be desirable to remove him, application should be made by the Medical Officer in charge to the Director General, if at home, or to the Principal Medical Officer, if abroad, for permission to transfer the insane soldier to a general military hospital, or to any other establishment in which lunatic wards exist. In the latter case, if it be a private asylum, or other asylum unconnected with the War Department, no order for the admission should be given without previous authority from the Secretary of State for War, or if abroad, from the General Officer Commanding.
 - "(c.) Such applications should be accompanied by an abstract of the case, drawn up in accordance with the instructions laid down in the 'Medical Regulations,' together with a copy of the soldier's medical historysheet, and a statement of the reasons which induce the Medical Officer in charge of the case to believe that, if discharged, he will not be able to re-enter the service. On receipt of the documents by the Director General, if at home, or by the Principal Medical Officer, if abroad, the necessary Instructions will be issued for the disposal of the case.
 - "(d.) Insane soldiers at home are not to be brought before an invaliding medical board, or removed to a general military hospital, or to an asylum, until the necessary sanction, as prescribed in (b), has been obtained."

604. The detailed information to be supplied in cases of Information mental disability, is as follows :---

required in cases of mental disability. .

1st. Name. Regiment. Regimental No.

2nd. Age. Length and places of service.

- 3rd. Place of birth. Names and residences of nearest surviving relatives.
- 4th. Social state, married or single.
- 5th. Temperament.
- 6th. Character, especial regard being paid as to whether temperate or otherwise.
- 7th. Form of mental disorder.
- 8th. Whether a first attack?

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Section III.

Invaliding of Soldiers.

INVALIDING OF SOLDIERS-continued.

9th. Duration of present attack.

- 10th. Whether the attack was sudden or insidious? If the latter, mention any peculiarity of behaviour or change in habits which preceded it.
- 11th. Whether insanity was preceded or accompanied by any particular illness, as fever, rheumatism, syphilis, &c.?
- 12th. What are the supposed causes (moral or physical) of the attack? Whether the patient has suffered from sunstroke, concussion, or injury of the head?

13th. Whether any hereditary predisposition exists?

- 14th. What are the particular ideas or actions which have induced the belief of insanity?
- 15th. Whether the disease is complicated with epilepsy or paralysis, with homicidal or suicidal impulses? If suicidal tendency exists, mention the way in which self-destruction has been attempted.
- 16th. Whether the patient is noisy, dangerous, mischievous, or given to steal? Whether his habits are cleanly or dirty?
- 17th. What treatment has been adopted since invasion of disease?
- In designating the particular form of mental unsoundness that the patient labours under, the nomenclature of diseases laid down by the College of Physicians will be strictly adhered to.

605. Whenever it may be deemed advisable to discharge locally soldiers suffering from mental disease who are not dangerous to themselves or the public, the Medical Officer will first take steps to ascertain through the military authorities, whether in the event of discharge, the friends are willing to receive the sufferers, as, failing the friends, the parochial authorities must take charge of them. [See 92nd Section of the Mutiny Act.]

606. The usual documents, with the reply of the friends, will then be forwarded to the Director General, with a letter applying for permission to bring such cases before a district invaliding Board.

607. When insane soldiers are discharged from hospital, they will be removed in the presence of a Medical Officer, and care will be taken that they are dressed with due regard to health and comfort.

608. Insane soldiers transferred from one hospital to another, or sent to their friends, will be accompanied by an escort, consisting of not less than one non-commissioned officer and two men, and application for the escort will be made to the Military Authorities.

Insane soldiers discharged locally.

Precautions to be taken on the removal of invalids.

Invaliding of Soldiers.

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INVALIDING OF SOLDIERS-continued.

609. The insane wives of soldiers will on arrival from foreign stations, be immediately sent to their parish, and placed under the care of the parochial authorities. Pending these arrangements being carried out, the Principal Medical Officer will make local arrangements for their safety and care, after reference to the General Officer Commanding.

610. When invalided Officers or soldiers not in charge of an Invalided Army Medical Officer, are embarked on board any vessel a Officers or Medical Officer will be detailed to accompany them on board, and to explain the nature of their cases to the Commander and Surgeon of the vessel.

611. When insane Officers or soldiers are to embark on Insane board any Royal Mail Steamship, communication will be made Officers to the agents as soon as possible, and the insane patients will, or Soldiers. whenever practicable, be accompanied on board the ship by a Medical Officer, who will explain the case or cases to the Commander and Surgeon of the ship.

612. When men are sent from out-stations to head-quarters to be invalided, they will not be shown as transfers from one hospital to another, unless at the time of transfer they are under treatment in hospital.

soldiers.

Section III.

PART 5.-SANITARY REGULATIONS.

I.-General Sanitary Duties.

II.-Personal Hygiene of Troops.

III-Vaccination.

IV .- Precautions in Barracks, Quarters, and Hospitals.

V.-Infectious Diseases.

VI.-Garrisons, Camps, and Stations.

VII .- Movements of Troops by Sea.

VIII.-Service in the Field.

IX .- Books, Returns, Correspondence, &c.

SECTION I.-GENERAL SANITARY DUTIES.

Sanitary duties of the Army Medical Department. **613.** The Officers of the Medical Department of the Army are charged not only with the medical care of the sick, but with the duty of recommending to Commanding Officers, verbally or in writing, whatever precautionary measures as to barracks, encampments, garrisons, stations, hospitals, transports, diet, dress, as authorised by Regulation, drills, and duties may, in their opinion, conduce to the preservation of the health of the troops, and to the mitigation or prevention of disease in the army. In the event of any verbal representation not being complied with, the Medical Officer will make a representation in writing on the subject to the Commanding Officer forwarding copies of the correspondence to the Principal Medical Officer.

PART 5.

Personal Hygiene of Troops.

Section II.

SECTION II.-PERSONAL HYGIENE OF TROOPS.

614. Medical Officers will inspect the men under their Periodical incharge weekly for the detection of itch, cutaneous complaints, spection for charge weekly for the detection of iten, cutaneous comptonic detection of ocular disease, ulcers, and any ailments indicated by the coundisease. tenance or skin, as fever, small-pox, scurvy, &c.; and will immediately adopt such precautionary measures as may appear to be requisite. Men with itch will, if possible, be placed in a separate room, or in a tent, when the season will permit.

615. On the first arrival of troops at stations in the Venereal United Kingdom to which the Contagious Diseases Act applies disease. or on their return from furlough, and also on disembarkation at any colony where there is a local ordinance or law in force for the prevention of venereal disease, they will be examined with a view to prevent the introduction of such disease. Medical Officers will be careful to bring to the notice of the Commanding Officer any men who have delayed reporting themselves when diseased.

616. The Medical Officer will satisfy himself that the Personal personal cleanliness of the men is properly attended to.

617. He will visit periodically all grounds or places set Gymnastics apart for the physical training of the troops, or for games or and games. amusements, and will give his advice on such matters, and also on the kind and amount of gymnastic exercises best suited to improve the health of the men.

618. He will, from time to time, examine the quality of Cooking, &c. articles of food and drink sold in the canteens, as well as the ventilation of the canteens themselves. He will examine the cooking, and ascertain whether it be sufficiently varied; like-wise the quality and amount of drinking water. He will also ascertain whether wells and other sources of water are protected from soakage from latrines, cesspools, drains, and other causes of impurity.

cleanliness.

Section III.

Vaccination.

SECTION III.-VACCINATION.

Vaccination. Small-pox. Re-vaccination.

Inspection and re-vaccinate during prevalence of small-pox.

Special report of cases of small-pox, in the weekly return.

Special note of those not bearing marks of vaccination.

Recruits to be vaccinated.

Record in medical history sheets. **619.** The Medical Officer will report yearly (on W.O Form 298 A) whether every man, woman, and child belonging to the regiment bears unequivocal marks of either small-pox or cow-pox; and will keep a register, W.O. Books 28, and 28 (a) of the names and appearances, on the days of examination, of all patients vaccinated. At all stations where fresh virus can be procured, every doubtful case, not only of soldiers, but of their wives and children, will undergo re-vaccination.

620. Whenever small-pox is prevalent, Medical Officers in charge of corps or detachments will exercise more than ordinary care and attention in regard to the condition of vaccination among the troops, their wives and children, and for that purpose they will make a careful inspection of every individual, and at once resort to the operation of vaccination or re-vaccination, not only wherever the marks of vaccination are unsatisfactory or indistinct, or a long period has elapsed since the date of the operation, but wherever previous re-vaccination has been unsuccessful.

621. Any cases of small-pox will be immediately reported to the Director General in a special report, specifying the name and age of each individual, with the dates of the operations of vaccination and re-vaccination, with their results respectively, and whether such individual bears satisfactory marks, and the number thereof. All such cases of small-pox will also be invariably noticed in the remarks appended to the Weekly Return of Sick.

622. If the patient be a soldier, and no marks of vaccination exist, the fact will be mentioned in the said report, with a statement showing the date of his joining the corps.

623. Every recruit, without exception, will be vaccinated on joining the head-quarters or depôt of the corps to which he belongs, unless the operation is certified to have been already successfully performed subsequently to his enlistment.

624. The Medical History Sheet of every soldier will furnish information whether he has been re-vaccinated, and Medical Officers will re-vaccinate those cases where no such record exists: and where the Medical History Sheets contain no place specially set apart for it, the date and result of the operation will be inserted in red ink in the body of the sheet, after the last entry of treatment for disease.

VACCINATION-continued.

625. Medical Officers will re-vaccinate the wives of all Re-vaccinasoldiers married with leave, and, as far as possible, this course tion of soldiers'wives. will be pursued, as a measure of public safety, in the case of the wives of soldiers married without leave ; and all soldiers' children will, as a rule, be re-vaccinated wherever 10 years have elapsed and children since the date of their having been vaccinated.

626. The direct method of vaccination will be had recourse Direct to whenever practicable, in preference to that by lymph from method of to whenever practication, in preference to that by simple vaccination tubes or points; it being understood, however, that in vaccina- and source of tion from arm to arm, or in re-vaccination, the lymph is not to lymph. be taken from adults nor from a re-vaccination.

627. When re-vaccination has failed, Medical Officers will Cases of repeat the operation with lymph from another source when failure. practicable, and in the event of the operation still proving unsuccessful, the names of the individuals will be recorded, with a view to their being re-vaccinated at some subsequent date.

628. In re-vaccination Medical Officers will not make the Punctures, necessary punctures in less than two places, and where the number of. evidence of original vaccination is indistinct, or single, three punctures will be made.

629. Vaccination certificates of soldiers' children will not Certificates of be given to the parents, but transmitted to the Registrars of vaccination Births and Deaths.

630. Such certificate will be on the particular Form Registrar, supplied by the Registrar to the parents on the registration of Forms and birth. In order to meet cases in which these Forms may have books of been lost, the Registrar General has prepared books of certificates Certificates. for the use of Medical Practitioners, which will be supplied to Medical Officers on application.

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PART 5.

Section III.

SECTION IV.-PRECAUTIONS IN BARRACKS, QUARTERS, AND HOSPITALS.

Approval of plan and site of barracks and hospitals.

Cubic space to be allowed.

Buildings for hospitals.

Results of the inspection.

Copies of report to be sent to Principal Medical Officer.

Cubic space to be allowed in hospitals. **631.** Before any new barrack or hospital is erected, the plans and site will be submitted to the Director General for approval, in so far as regards the healthiness of the locality and of the buildings.

632. The cubic space for men in barracks and huts, under ordinary circumstances, is laid down in that portion of the Regulations for the Commissariat Department [Revised Army Regulations, Vol. IV,] relating to "Barracks and Quarters." Those regulations will not be departed from without authority.

633. Before any building is taken possession of for hospital purposes, the Sanitary or other Medical Officer, as the case may be, will, in communication with the Commissariat Officer, or a Board of Officers, if appointed, make a careful sanitary inspection of the building and its vicinity, and note the condition of the former as regards external and internal drainage, water supply, ventilation, limewashing, and general cleanliness, the number of beds the building is capable of containing, the number and size of windows, doors, and fireplaces, the amount of light, the state of latrines, or water-closets, as well as all other matters likely to affect the health of the inmates or the purity of the air in the wards.

634. The Sanitary or other Medical Officer will report to the Commanding Officer the results of his inspection, and make any necessary recommendations for removing defects. In the case of hospitals selected for temporary occupation, the Commanding Officer will, in terms of special authority given him for such purposes, forthwith direct such recommendations to be carried out, unless he disapproves of them, in which case he will state in writing his reasons, and immediately transmit them, with the recommendations of the Sanitary or Medical Officer, to superior authority.

635. The Sanitary or other Medical Officer, as the case may be, will at the same time transmit a copy of every such report to the Principal Medical Officer, stating also the steps taken to carry out his recommendations, and the Principal Medical Officer will forthwith forward every such report to the Director General, with any remarks he may have to make on the same.

636. The minimum space to be allowed for each bed in any permanent hospital is 1,200 cubic feet at home and in temperate climates, and 1,500 cubic feet, or as may be specially authorised by the Secretary of State for War in reference to the Commissariat Regulations [Revised Army Regulations, Vol.

Precautions in Barracks, Quarters, and Hospitals.

PRECAUTIONS IN BARRACKS, &c .- continued.

IV], at stations in tropical climates. When hospitals are not fully occupied, the sick will be distributed so as to give, as nearly as may be, the amount specified. The number of beds which each ward is capable of containing in accordance with these measurements will be painted, as directed by Regulation, outside the door of the ward, and will not be increased without the sanction of the Secretary of State. In detached wooden huts in temperate climates the minimum of space will be 600 cubic feet for each bed, where possible. The number of beds in each hut will, also according to Regulation, be painted on the door.

637. All wards will be sufficiently warmed and lighted, Lighting and according to the weather and season, as directed by Regulation. warming of 638. The Medical Officer will also see that the vicinity of hospital wards.

the hospital is preserved in a good sanitary state, that the sur- Vicinity, &c. face is properly drained and swept daily, that there are no of the hosnuisances, that the water supply is good and abundant, that the pital. water-closets and latrines are in an efficient state, that the drainage is not obstructed, that the ventilation of the wards is at all times efficient, that the hospital is kept in a proper state of repair, that the walls are frequently limewashed, and cleansed by scraping if necessary, that the flooring, staircases, &c., are kept clean, and that the floors of the wards are never washed except by the medical officer's special direction.

639. The beds in barracks and hospitals will be placed in Distance of accordance with the instructions contained in Section 15, beds. paragraph 6, Queen's Regulations and Orders for the Army, 1873.

640. The Medical Officer will ascertain whether the num- Number of ber of men in barrack rooms, hospital wards, and guard- men the same rooms is in accordance with the number painted on the door. the door. He will state in his annual report to the Director General what the monthly average cubic space for each man has been.

641. He will satisfy himself that every barrack, guard- Ventilation room, and cell is suitably lighted and provided with sufficient and lighting means of ventilation to keep the air in a pure state by night as buildings. well as by day; that married soldiers' quarters, schools, reading rooms, kitchens, wash-houses, lavatories, urinals, and latrines, are suitably ventilated and lighted; that the means of ventila- Means of tion provided for any barrack, guard-room, or cell, or for any ventilation to school, reading-room, kitchen, washhouse, lavatory, urinal, or be efficient. latrine, are in efficient operation. He will further satisfy himself that the apertures intended specially for ventilation are never Apertures of allowed to be blocked up; that the windows of every barrack ventilation room are opened sufficiently to allow of a free ventilation as blocked up. soon as the men have risen, and that they are kept open to such Opening of extent during the day as the weather and season may admit; windows. that the beds and bedding are freely exposed to the air as laid Beds to be down in the Queen's Regulations and Orders for the Army, 1873, air.

Section IV.

Section IV.

Precautions in Barracks, Quarters, and Hospitals.

PRECAUTIONS IN BARRACKS, &c .- continued.

Barracks to be limewashed.

Inspection of quarters in billets.

Sanitary inspection of barracks and hospitals by Medical Officer. section 15, par. 6; that the walls and ceilings of barracks or quarters are limewashed in accordance with existing regulations, and that the walls are scraped at intervals.

642. When the regiment is billeted, the Medical Officer will visit the men's quarters to ascertain that they are in a good sanitary condition, and that the men's apartments are sufficiently warmed and ventilated, and not overcrowded; also that the bedding is clean and dry.

643. In order to fulfil these duties, the Medical Officer in charge will visit all quarters, guard-rooms, cells, married soldiers' quarters, and every other portion of the barracks at least once a week, to examine their general sanitary condition and cleanliness, in accordance with Section 15, paragraph 10, Queen's Regulations and Orders for the Army, 1873. He will keep notes in W.O. Book 39 of all such examinations, stating whether the results were satisfactory, and recording the defects he discovered and the representations he made, verbally or in writing, to his Commanding Officer, together with the result of such representations.

Infectious Diseases.

Section V.

SECTION V.-INFECTIOUS DISEASES.

644. Hair mattresses, bolsters, and pillows will be used in Hospital all hospitals, except for cases of cholera or of diarrhoa when the bedding. former disease is prevalent. In such cases it is advisable that In cholera the barrack bedding should be used. It should therefore accom-pany the sick to hospital, and when no longer required for use the straw will be burnt, and the bedding, hospital clothing, and such of the clothing worn by the patients at their admission as is not liable to injury thereby, disinfected by dry heat or by such other means as may be practicable. The articles will then be steeped in boiling water, and afterwards washed with soap and water.

645. Such articles of a soldier's kit as cannot be so treated Kit of such will be removed to hospital and there fumigated, and exposed patients to be to the air and sun for a week, beaten, and brushed. When belonging to patients who have suffered from cholera the articles will not be again taken into use until the epidemic has ceased.

646. During the prevalence of cholera, or when an out- Medical break of that disease is anticipated, Medical Officers will con- Officers to form to the special instructions on the subject printed in the to special Appendix No. 14, pages 205 to 211.

647. The following Sanitary precautions will invariably be regarding adopted when infectious fevers or other infectious diseases Infectious shall have occurred among the occupants of Officers', Non- diseases. Commissioned Officers', or married soldiers' quarters, or in precautions. barrack rooms. In cases where hospital bedding, clothing, &c., shall have been used by such patients the instructions contained

648. When a case of scarlet fever occurs in quarters :-

- (a.) The rooms will be vacated, and the windows kept open for as long a time as practicable to insure thorough ventilation.
- (b.) The furniture, floors, and all the painted woodwork will be scrubbed.
- (c.) The bedding, clothes, carpets, &c., will be thoroughly cleansed and disinfected before further use.
- (d.) The ceilings will be whitewashed.
- (e.) The walls, if papered, will be re-papered, the old paper being first carefully scraped off. If not papered, they will be scraped and finished as before.

649. The Medical Officer who may have attended the Medical case, will represent in writing to the Officer Commanding the Officer to

instructions

Scarlet fever in quarters.

Section V.

Infectious Diseases.

INFECTIOUS DISEASES-continued.

action necessary.

Officers commanding will give instructions.

Royal Engineer Department to carry out.

Restriction of re-papering, &c. Infectious disease in barracks,

Barrack bedding and clothing of patients.

Hospital bedding, &c. steps required to be taken under sections a, b, and c, paragraph 648.

650. The Officer Commanding will give the necessary instructions for the performance of the services.

651. The services alluded to in sections d and e, paragraph 648, will be carried out by the Royal Engineer Department on a certificate in writing from the Principal Medical Officer that a case of scarlet fever has occurred.

652. The re-papering, colouring, and whitewashing will be restricted to the room in which the case of fever shall have occurred.

653. Whenever it is considered advisable, in consequence of the occurrence of infectious disease in barrack or quarters, the room will be vacated, thoroughly cleaned, and limewashed, and left unoccupied, with the windows open as long as practicable; and when, in addition, it is deemed necessary in the first instance to fumigate the room, one of the processes detailed for that purpose will be adopted.

654. Of the barrack bedding used by sufferers from infectious fevers or itch, prior to admission into hospital, the straw will be burnt, and the remainder, together with the clothing belonging to the patients but not actually in use, will, if not liable to injury thereby, be disinfected by dry heat or subjected to the process of boiling when practicable, or be immediately steeped in boiling water, without removal to hospital. The articles will then be handed over to the Commissariat Department for the purpose of being exposed to the air and subsequently washed.

655. Whenever hospital bedding, clothing, &c., have been used by patients affected with fevers of infectious character, they will be treated as follows:—

- (a.) The hair of the mattress, &c., will be opened out, exposed to the air, and beaten, and, when practicable, submitted to a dry heat of not less than 212° F., for at least two hours; the remainder of the bedding, hospital clothing, and such of the clothing worn by patients at their admission as is not liable to injury thereby, will also be disinfected by dry heat or chemicals, steeped in boiling water, exposed to the air, beaten, and afterwards washed with soap and water. Boiling the articles instead of steeping them in boiling water is preferable when it can be done, in which case, or where dry heat has been employed, disinfection by chemicals will not be necessary.
- (b.) Such articles of a soldier's kit as cannot be treated in the manner laid down in the foregoing paragraph will be removed to hospital, and there fumigated and

Infectious Diseases.

INFECTIOUS DISEASES-continued.

exposed to the air and sun for a week, beaten and brushed.

656. After the occurrence of a case of yellow fever in any Yellow fever barrack abroad, the room or quarter in which the case occurred in barracks or will be vacated, disinfected, and limewashed. The floors will abroad. be well scoured and the paint well washed with soap and warm water. Before the room or quarter is re-occupied, the windows will be left open for as long as practicable, to secure thorough ventilation.

657. When fumigation is considered to be necessary, one Fumigation. of the following processes will be adopted :-

With Chlorine Gas.

7	Take	common	salt					4 ozs.	
		oxide of 1	nanga	nese (i	n powe	der)		1 ,,	
	,,	sulphuric	acid		•••	••		1 ,,	
	,,	water				•••	•••	2 "	

658. The water and acid to be mixed together, and then poured over the ingredients in a delf basin, which should be placed in a pipkin of hot sand.

With Nitrous Acid Gas.

Ъ.	Take	copper shavings			1 OZ.
	.,	copper shavings nitric acid			15 ,,
		water	 	 ••	1壹 ,,

Pour the acid and water upon the copper in a small jar.

With Sulphurous Acid Gas.

c. Burn two ounces of sulphur in a pipkin.

- d. All doors and windows and other openings in the room will be closed before commencing fumigation.
- e. The operator will leave the room immediately the process has commenced.
- f. At the expiration of from two to three hours all doors and windows will be thrown open, and free ventilation established.
- g. Barrack rooms will be entirely emptied before being fumigated.

659. All processes of disinfection and fumigation will be Disinfection and fumigacarried out by the subordinates of the Medical Department, tion, how to wherever the necessary establishment exists. Materials for the be carried above purposes will be obtained from the Commissariat Depart- out.

Section V.

PART 5.

Section V.

Infectious Diseases.

INFECTIOUS DISEASES-continued.

ment, and Medical Officers will surpervise the use of chemicals when it is necessary to employ them.

660. If any expense in cleaning quarters or rooms be necessary it will be provided for by the Commissariat Department.

661. On the outbreak of any infectious disease the circumstances will be immediately reported to the Principal Medical Officer.

662. When it is necessary to move a case of infectious disease to Hospital, the Medical Officer in attendance will make immediate application to the Commissariat Department for an ambulance to convey the patient to Hospital, at the same time stating the nature and urgency of the case.

Cleaning rooms prior to re-occupation. Outbreak of infectious disease.

Ambulance for cases of infectious disease. Garrisons, Camps, and Stations.

Section VI.

SECTION VI.-GARRISONS, CAMPS, AND STATIONS.

663. In garrisons, camps, and stations, where a special Duties of Sanitary Officer has not been appointed, the Principal Medical sanitary officer. Officer will perform the duties of Sanitary Officer.

664. He will exercise general supervision over the sani- Sanitary state tary condition of all parts of the garrison, camp, or station, of garrison or and its vicinity, as regards drainage, cleanliness, removal of station to be supervised. nuisances, water supply, overcrowding, ventilation, limewashing, lighting of barracks and hospitals, the state of latrines, and all other matters affecting the health of the troops.

665. He will represent any defects in the same, together Precautions to with his recommendations thereon, verbally or in writing, to the be recom-Officer Commanding the troops. In like manner the Medical mended to Officer in charge of any regiment or detachment will represent officer. and recommend to the Commanding Officer, verbally or in writing, whatever he may consider necessary for protecting the health of the troops, whether as regards the abatement or removal of local causes of disease, or as to any alteration of diet, clothing, drills, or duties. If any verbal representation is not complied with, the Principal Medical Officer or Medical Officer in charge will make a representation in writing on the subject to the Commanding Officer.

666. Should any epidemic disease appear in any garrison, Measures for camp, or station, the Principal Medical Officer will immediately preventing camp, or station, the relicipat incurcat onlear with inineutatery epidemic inquire into its cause, and in communication with the Medical diseases Officers in charge thereof, he will, if necessary, recommend in to be recomwriting to the Commanding Officer such measures of precaution mended. as may be requisite for mitigating such disease. In the case of regiments or detachments, similar written representations will be made to the Commanding Officer by the Medical Officer in charge.

667. Whenever there is reason to suppose that the water Chemical supply at any Military Station is of such a character as to be examination likely to affect the health of the troops, the course laid down in of water. clause 85, Army Circulars, 1876, and clauses 12 and 105, Army Circulars, 1877, relating to the examination of samples of water, will be followed.

668. The occurrence of epidemic disease will be reported Reports of to the Director General, and periodical reports will be made epidemic disease. during its continuance.

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Section VI.

Garrisons, Camps, and Stations.

GARRISONS, &c .- continued.

Copies of recommendations to be sent to Principal Medical Officer and Director General. **669.** Medical Officers in charge will transmit to the Principal Medical Officer in garrisons, camps, and stations, and also to the Sanitary Officer, when an army is in the field, copies of all written recommendations they may have considered it necessary to make for protecting the health of troops. Except when an Army is in the field, they will immediately send copies of such recommendations, stating the results, to the Director General. Whenever Medical Officers deem it necessary to forward any suggestions of a sanitary nature to the Director General they will invariably furnish a copy to their Commanding Officer.

Section VII.

Movement of Troops by Sea.

SECTION VII .- MOVEMENT OF TROOPS BY SEA.

670. Every soldier, woman, and child about to embark Preliminary will be carefully examined by a Medical Officer on the day of inspection for contagious departure, or, if the military arrangements will not admit of diseases. this, on the day previous, with a view to prevent any individuals showing symptoms of contagious disease proceeding on board ship. All soldiers' families under orders to proceed to a foreign station should be under medical observation for some weeks before embarkation. Every woman, and every child above three months old, must be vaccinated before proceeding to embark, unless already bearing satisfactory marks of vaccination. Soldiers' wives near their confinement (within two months) will not be embarked in Her Majesty's Indian troop ships, or in mail or contract steamers, or other vessels, and the husbands of such women will be detained with them.

671. When a ship is engaged wholly or partially for the Preliminary conveyance of troops, the inspections prescribed in Section 17, paragraphs 23 to 28, of the Queen's Regulations and Orders for the Army, 1873, will be held, and the Senior Medical Officer on the spot, and, if practicable, the Medical Officer in charge of the troops, will attend the inspections and report upon the sanitary condition of the ship, and on the arrangements made. When invalids are to be embarked the Senior Medical Officer will satisfy himself that there is a due proportion of Medical Officers according to the number and state of the sick.

672. Should the inspecting Medical Officer discover any Officer to defects likely to affect injuriously the health of the troops or recommend the sick during the voyage, he will make his remarks accord- precautionary ingly on the report of inspection; and he will forthwith report measures. the circumstances in writing in such detail as he may consider necessary to the Officer Commanding at the port, transmitting a copy to the Principal Medical Officer on the station, who will forward the same with his remarks to the Director General.

673. The Medical Officer in charge of troops and sick Sanitary will, during the voyage, keep a constant watch over the ven- duties. tilation and cleanliness of the ship, the cleanliness of the waterclosets, the condition of the bilge, and over all other matters likely to affect injuriously the health of the troops or sick [see Queen's Regulations and Orders for the Army, 1873, section 17, "Duties on board ship"]. Should defects arise in any of these I 2

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Section VII.

Movement of Troops by Sea.

MOVEMENT OF TROOPS BY SEA-continued.

matters, the Medical Officer in charge will immediately represent the same to the Officer Commanding on board, with such recommendations as he may consider necessary for the preservation of health. After troops have been 8 days at sea, or whenever the Medical Officer deems necessary, lime juice and sugar will be issued with the daily ration, according to the scale of victualling which is to be seen on board.

674. Medical Officers embarked with troops on board a hired ship deeming it necessary to make any statement animadverting upon the sanitary arrangements, or the supplies on board, will address such report to the Officer Commanding the troops, submitting a duplicate to the Principal Medical Officer at the port of disembarkation. Copies of any adverse remarks embodied in the usual report of sick must also be furnished to the Officer Commanding. The sanitary arrangements on board Her Majesty's troopships rest with the Naval Medical Officer under the Captain, but should the Medical Officer in charge of the troops consider it necessary to make any suggestions on the subject, he will make his report to the Officer Commanding the troops. Whenever scurvy or any infectious disease has made its appearance amongst the soldiers or their families during a voyage, the Medical Officer in charge, on landing, will make a special report of the circumstance to the military and medical authorities at the port of disembarkation.

675. Whenever a disembarkation takes place at any colony where there is any law or local ordinance in force for the prevention of veneral disease, the Medical Officer detailed to visit and inspect the vessel will ascertain whether the Medical Officer in charge has inspected the troops with a view to detect and guard against the introduction of these diseases. He will report the results of his inspection of the vessel to the Principal Medical Officer for transmission to the Director General, with the return of sick on board ship, W.O. Form, 294B.

Disembarkation of troops or sick.

Venereal disease.

PART 5.

Service in the Field.

Section VIII.

SECTION VIII .- SERVICE IN THE FIELD.

676. Before an Army takes the field the Director General, Duty of in addition to the information and advice usually tendered to the War Department on matters connected with the hospital arrangements of the army, will, on the requirement of the Secretary of State for War or the Commander-in-Chief, give his opinion in writing on all matters connected with the country, climate, productions, rations, clothing, shelter, sanitary arrangements and precautions, and on all other matters bearing on the health of the troops.

677. The Director General will recommend a competent Director Medical Officer to be appointed Sanitary Officer, who will be attached to the Quartermaster General's Department of the Sanitary Army.

678. The Director General will issue to the Principal Director Medical Officer of every army on active service such a code of General to Medical Officer of every army on active service such a cour of issue sanitary instructions for his guidance on all matters connected with the instructions. above, as he may see necessary to meet the specialities of each case.

679. The Sanitary Medical Officer will accompany the Sanitary Quartermaster-General, or such officer as the latter may appoint, Officers to make inspec-tions of troops, whether as quarters, tions of hospitals, or stables. He will examine into the sanitary con- buildings and dition of such buildings, as regards cleansing, nuisances, drain-age, ventilation, lighting, water supply, limewashing, cubic master contents, and into all other matters connected with the buildings General. likely to affect the health of the troops or of the sick. He will also advise the Quartermaster General, or his deputy, on all such subjects, sending copies of all reports he may have considered it necessary to make to the Principal Medical Officer. He will point out in his reports any defect requiring remedy, and state the number of troops or sick which can be safely accommodated in the buildings.

680. The Sanitary Medical Officer will further examine Also of towns into the sanitary condition of towns or villages about to be occupied, and their neighbourhood; and he will make recommendations for organizing a proper sanitary police, for the preservation of cleanliness and removal of nuisances, as well as for the execution of such measures as he may consider necessary for protecting the health of troops in occupation.

681. Before selecting any site for an encampment the Inspection of Sanitary Medical Officer will accompany the Quartermaster camp sites.

Director General.

> General to appoint Officer.

Section VIII.

Service in the Field.

SERVICE IN THE FIELD-continued.

General, or such other officer as the latter may appoint, on his inspection. The Sanitary Officer will give his opinion, in writing, if necessary, on the salubrity or otherwise of the proposed position, with any recommendations he may have to make, respecting the drainage, the preparation of the ground, the distance of tents or huts from each other, the number of men to be placed in each tent or hut; the state of cleanliness of surrounding ground, ventilation, water supply; the position and regulation of latrines and slaughtering places; cleansing and disposal of refuse; burial of the dead and of the carcases of animals.

682. He will, in communication with the Officers of the Quartermaster General's or Royal Engineer Department, examine and report on the amount and quality of the water supply, point out the best sources of supply, and also indicate any precautions required in collecting, storing, purifying and distributing water for use.

683. A trench will be dug round each tent sufficiently deep to remove surface water and to keep the ground under the tent dry. This will be done in damp or wet ground, even if the ground be occupied only for one night.

684. Before erecting huts the ground will be cleared and levelled, and a trench dug round the site of the hut sufficiently deep to drain the site.

685. Huts will not be dug out of the ground nor have earth heaped against their sides; they will stand detached and at a sufficient distance from each other, and from any neighbouring higher ground, to allow a free circulation of air around them. In warm climates the floor will be sufficiently raised above the ground to allow of a free circulation of air beneath. The Sanitary Officer will be consulted on these points, also as regards the drainage of sites, and the warming and ventilation of huts and tents.

686. The Sanitary Medical Officer will superintend the sanitary arrangements of the camp and of occupied towns. He will see that the surface and vicinity of camps and towns are kept clean and free from nuisances; that defects of the surface drainage are remedied; that the dead are properly interred, and the carcases of animals and offal properly buried or otherwise disposed of; that latrines are properly regulated; and that the water supply is preserved in a state of purity.

687. He will inform himself as to the sanitary condition of hospitals, huts, tents, houses, and other buildings, in occupation, and will recommend, in writing, if necessary, such precautionary measures for the prevention of disease as he may think fit, as regards cleansing, draining, prevention of overcrowding, ventilating, lighting, limewashing, removal of nuisances, improvement in water supply, and all other local matters affecting the health of the troops or the sick.

Water supply.

Drainage and ventilation of tents

and huts.

Sanitary Officer to superintend sanitary arrangements.

To recommend precautions for preventing disease.

SERVICE IN THE FIELD-continued.

688. The Sanitary Officer will report to the Quartermaster General any defects or negligence in carrying out the duties of

the Camp Police. 689. The Principal Medical Officer of every army in the Principal field will give advice, in writing, to the Commander of the Forces, Medical Officer to give in reference to the composition of rations, clothing, shelter, sani- advice to tary arrangements, as authorised by Regulation, and precautions Commander for preventing disease, and on all other subjects bearing on the of Forces. health and physical efficiency of the troops.

690. The Principal Medical Officer or Sanitary Officer of Principal every army in the field will, with the sanction of the Commander Medical of the Forces, immediately on the opening of a campaign, as well or Sanitary of the such other times as may appear to him to be necessary, issue sanitary issue such instructions regarding sanitary precautions for protect- instructions. ing the health of the troops as he may consider requisite for the guidance of the Medical Officers.

691. The Sanitary Officer will keep up a daily inspection Prevention of the camp, and will especially inform himself as to the health disease. of the troops. Immediately on being informed of the presence of disease he will examine into the cause of the same, whether it proceeds from, or is aggravated by, defects in cleansing, drainage, nuisances, overcrowding, defective ventilation, bad or deficient water supply, dampness, marshy ground, or from any other local cause, or from bad or deficient food, intemperance, unwholesome liquors, fruit, defective clothing or shelter, exposure, fatigue, or any other cause.

692. He will report immediately to the Quartermaster General on such causes, and the measures he has to propose for their removal, sending a copy of all such reports to the Principal Medical Officer of the Army. He will also daily report on the progress or decline of the disease, and on the means adopted for the removal of its causes, until it is no longer necessary to do so.

693. When troops are on the line of march the Sanitary 693. When troops are on the line of march the Sanitary regulations Officer, the Principal Medical Officer, or any Medical Officer for troops appointed by him specially for such duty, or the Medical Officer on march. in charge of a regiment, as the case may be, will accompany the Quartermaster General or the Officer acting under his orders, and collect as much information as possible as to the medical topography of the district, with special reference to places which ought to be selected or avoided for camping ground.

694. During epidemic seasons he will also indicate the best means of mitigating or preventing attacks of disease on the march.

695. Troops, before proceeding on the march, will be sup- for troops plied with some refreshments, especially during epidemic seasons. before a

696. The Principal Medical Officer of every army in the march. field will send to the Director General, at such intervals as the Principal Director General may determine, full information on all subjects Medical Officer to

Sanitary

Refreshment

Section VIII.

Section VIII.

Service in the Field.

SERVICE IN THE FIELD-continued.

connected with the hygiene of the army, together with such recommendations for improving this service as may be considered requisite.

697. All Medical Officers in charge of general hospitals, divisions, and brigades in the field will transmit to the Principal Medical Officer of the army, for the guidance of the Sanitary Officer, full information as to the sanitary state of the troops and hospitals, and on all matters affecting the health and physical efficiency of the men, at such intervals as the Principal Medical Officer may appoint.

698. Sanitary Officers attached to an army in the field, or to any general hospital at the base of operations, will draw up a weekly sanitary report on the state of the army, or hospital, to be sent to the Principal Medical Officer of the Army, for the information of the Commander of the Forces. A copy of the report will be transmitted by the Principal Medical Officer immediately to the Director General.

report to Director General.

Medical Officers to report.

Sanitary Officers to report.

Books, Returns, Correspondence, &c.

Section IX.

PART 5.

SECTION IX.-BOOKS, RETURNS, CORRESPONDENCE, ETC.

699. When any epidemic disease prevails among the civil Reports of population of any garrison, station, or camp, or the neighbour- disease in a hood thereof, a report or memorandum will be forwarded weekly garrison. with the weekly returns of sick to the Director General by the Medical Officer in charge.

700. When any infectious or unusual disease is prevailing Epidemic among the troops or their families, either at home or abroad, or diseases where there are any exceptional circumstances which, in the among troops. judgment of the Medical Officer in charge, require to be communicated to the Director General, he will forthwith notify the same through the Principal Medical Officer, and continue to furnish a daily report on the progress of the disease and the sanitary state of the troops as long as may be necessary. It will not, however, be requisite under ordinary circumstances to report the occurence of every case of infectious disease by letter, as the weekly return on W. O. Form 1,033 will suffice for that pur-This return (W. O. Form 1,033) will be forwarded weekly by the Principal Medical Officer during the prevalence of epidemic disease; when more than one disease prevails epidemically at the same time, separate returns relative to each will be furnished; these will be discontinued after an interval of three weeks from the last admission.

701. Every Medical Officer or civilian medical practitioner Quarterly in charge of troops within the United Kingdom, or of a military Report home. prison, station hospital, hospital for women and children, or military educational establishment, will furnish a quarterly "Sanitary Report," on W.O. Form 463, made up to the last Friday of each quarter, to the Principal Medical Officer of the district, who will transmit the report forthwith to the Director General with a summary, on the same form, made up in his own office. In the event, however, of there having been any cases of infectious disease, any undue prevalence of disease, or any defects of an insanitary kind, Officers in medical charge will, for the time being, send in the Sanitary Report at the end of the month, as has been the practice heretofore.

702. On the foreign stations such sanitary reports will be Report abroad. furnished to the Principal Medical Officer of the command, and he will forward to the Director General, a general quarterly "Sanitary Report," on W.O. Form 463, which will embrace all the reports of the Medical Officers under his superintendence.

703. Both at home and abroad the Principal Medical Distribution Officer's quarterly "Sanitary Report" will be accompanied by a Return.

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Section IX.

Books, Returns, Correspondence, &c.

BOOKS, RETURNS, &c .- continued.

Return showing the Distribution of the Troops and of the Sick on W.O. Form 464.

704. W.O. Book 39 will be used as a note-book, vide paragraph 707.

705. At every station where there are meteorological instruments the Senior Medical Officer (who is responsible for the care and accuracy with which all observations are taken and recorded), will furnish monthly to the Director General a Return of the "Meteorological Observations taken," on W.O. Form 848; and yearly a List of Meteorological Instruments on a lithographed form, which will be supplied by the Director General.

706. The Principal Medical Officer will refer in his Annual Return of Sick (W.O. Form 298) to the manuscript reports of the Medical Officers who may be specially appointed to take charge of the sanitary arrangements at Stations, and also to those furnished by the Medical Officers in charge of the Station Hospitals. He will be careful to specify whether he concurs in the statements made in such reports, and will comply with the instructions laid down in Part 6, Section IV, of these Regulations. A copy of the remarks on Sanitary Conditions on page 11 of W.O. Form 298, will be furnished to the General Officer Commanding.

707. The Medical Officer specially appointed to take charge of the sanitary arrangements at a Station, will furnish to the Medical Officer in charge of the Station Hospital a manuscript annual report thereon stating such leading sanitary improvements as may have been effected in the course of the year in respect of cubic accommodation in barracks, in the ventilation of barrack-rooms, huts, &c., the increased facilities for ablution; extended means for variety of cooking; alterations in the soldiers' diet; and such improvement as may from time to time take place in the clothing of the troops with reference to the climate of the station and season of the year. Any more effective drainage of camps and barracks that may have been carried out, and also the condition of the drainage in their neighbourhood, should be stated, and wherever gymnasia exist the effect of the training on the health of the troops should also be stated.

708. The Medical Officer in charge of the Station Hospital will also furnish in the manuscript report, special remarks on the size, site, &c., of the hospital, the number, the accommodation, and the general sanitary condition of the hospital buildings, and other details contained in the above paragraph which may refer to hospitals.

709. In the preparation of the foregoing reports the abovementioned Medical Officers will be guided generally by the outline of subjects laid down in the Appendix No. 15, at pages 212 -214.

710. W.O. Books 28 and 28A will be used as a register of vaccination and small-pox.

Sanitary notebook.

Meteorological Return.

Sanitary Reports.

Annual Sanitary Report.

Subjects to be included in Report.

Register of vaccination and smallpox.

PART 6 .- STATISTICAL REGULA-TIONS.

I.-General Instructions.

II.-Weekly Returns.

III .- Monthly Returns.

IV .- Annual Returns.

V.-Returns for Troops at Sea.

VI.-Returns for Troops on Active Service.

VII.-- Eeturns for Troops in Camps of Exercise, &c.

SECTION I.-GENERAL INSTRUCTIONS.

711. All cases of sickness will be shown in statistical All cases of returns, whether the men are treated in dieted or in non-dieted sickness to be hospitals, or owing to local circumstances, are under treatment in barracks. Care will be taken that sick men received from other hospitals, or from on board ship, and invalids sent Transfers. from their regiments to the Head-Quarters of the District for further treatment, are not entered in any returns as fresh admissions, but as transfers, in the proper column.

712. A case which, owing to the obscurity of the symptoms, Doubtful cannot at the time be entered under any specific disease will be cases. recorded in the Weekly Return, as "not yet diagnosed." It will be specially noticed in the remarks so long as it is thus recorded, when the disease is ascertained, the case will be entered as a fresh admission, its disposal being noticed in the remarks.

713. The diseases will always be designated by the terms Nomenclaused in the English list of the nomenclature of diseases, a copy diseases. of which has been issued for the personal use of each Medical Officer. This copy of the nomenclature will accompany the Officer wherever he may be serving, and will not be accounted for in any Transfer Return. At certain of the larger hospitals a copy of the nomenclature has been issued marked "for stational use at _____," and bearing a number which must be quoted in all Transfer Returns, when the records of the station are handed over from one Medical Officer to another.

Section II.

Weekly Returns.

SECTION II.-WEEKLY RETURNS.

714. A Weekly Return of Sick, on W.O. Form 294, made

up to 12 o'clock (noon) each Friday, will be rendered to the Director General of the Army Medical Department, by the Medical Officer in charge of every hospital, whether it is a general or station hospital, or a non-dieted hospital; where there is only one Medical Officer at a station, this return will be completed in all its details by him. Each return will contain the details for seven complete days irrespective of the date on

Mode of rendering.

Statement of daily strength to be sent, Medical Officers.

Sick of troops detached.

Weekly returns to be sent to London.

Duplicate of weekly returns.

Details to be furnished to Medical Officer in charge of station hospitals. which the year may close. 715. Arrangements will be made with the Officer Commanding, that a statement of the daily strength of each Corps be sent to the Medical Officer in charge of the station hospital not later than 3 p.m. each Friday afternoon; and this statement will include the strength of all effective troops at outlying stations, whose sick are sent to the hospital for treatment.

716. Should the sick of troops detached at small outstations, or of detachments at musketry practice, at great gun drill, or of troops employed on any other duty at a station where no military hospital is opened, be received into a station hospital, they will be duly included in its Weekly Return of Sick, care being taken to note the average *Weekly* effective strength of such troops in the return. Decimals or fractions will not be used in the Weekly Returns, but the average strength will be stated in the nearest whole numbers.

717. Weekly Returns of Sick will be forwarded direct to London, except only in certain garrisons where local instructions are issued on the subject by the Principal Medical Officer. These Returns will invariably be posted each Saturday afternoon.

718. The duplicate copy of the Weekly Return of Sick which is forwarded to the Principal Medical Officer of the District, will be marked in red ink with the words "original copy sent to Director, General, Army Medical Department, on

_____,"

719. When a Medical Officer is specially appointed to discharge any of the following duties—(a) Medical charge of the Troops; (b) Sanitary duties; (c) Medical attendance on Officers, Women, and Children—he will furnish to the Medical Officer in charge of the station hospital, not later than Saturday morning in each week, all details appertaining to those duties required to

Weekly Returns.

Section II.

WEEKLY RETURNS-continued.

complete the Weekly Return of Sick, together with any necessary remarks in manuscript, both of which will be copied into the Weekly Return of the station hospital.

720. Invalids arriving from stations abroad will not be Invalids from shown in the Weekly Return of the hospital in which they are abroad. treated, but the records of their sickness will be kept distinct from those of troops serving at home, and a separate Weekly Return, headed "Invalids from Abroad," will be furnished for them, and they will be considered as invalids until they are disposed of in one of the following ways :--

- (a.) By discharge from the service;
- (b.) By death;
- (c.) By return to duty as effective men.

Men sent on sick furlough will on their return be again included furlough. among the foreign invalids at the station until they are disposed of. Invalids on their way home, who may be landed at any Foreign Station for treatment, will be similarly accounted Foreign for.

721. At stations abroad, the Weekly Return of Sick will Weekly be sent to the Principal Medical Officer of the Division, or returns of Command. Separate returns will always be furnished for White, and for Black, or Colonial troops.

722. In the remarks appended to the Weekly Return of Important a Hospital, the Medical Officer will notice the more important diseases to be noticed. diseases, especially infectious fevers, shown on page 1 of W.O. Form 294, and describe their distribution amongst the different corps sending sick to the hospital.

723. Full details of the appearances found at the post- Post-mortem mortem examination will be given on page 4 of the Weekly examination. Return in which a death is reported, but if the examination cannot be made in time, the particulars will be given in the Weekly Return for the following week. In such instances, however, immediately on completion of the post-mortem exammation, a special statement of the results ascertained will be forwarded to the Director General, headed, " Post-mortem Examof the ination of the body of

regiment, to complete the Weekly Return of Sick of the 18 ." , for the week ending ____

724. The statistics of the sickness of any non-commis- Men not of sioned officers, or men of the Militia, Pensioners, Yeomanry, the regular Volunteers, Royal Marines, Seamen of the Royal Navy, Governo, forces. Volunteers, Royal Marines, Seamen of the Royal Navy, Government Labourers, or others, who may be under treatment in a military hospital, will not be included with those of the Regular troops, but will be shown in the special table on page 4 of the Weekly Return. If the non-commissioned Officers or men, exceed fifty in number, a separate Weekly Return on W.O.

Men on sick

Invalids landed at stations.

sick abroad.

Monthly Returns.

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WEEKLY RETURNS-continued.

Form 294 will be rendered, the heading of the return being suitably altered.

725. When it is found that the disease of a man admitted designation of into hospital in a preceding week has been wrongly diagnosed, the case will be entered in the proper column of the Weekly Return as "discharged otherwise," and a fresh entry will be made for it in the column for admissions. No second entry for this case, however, will be made in the Admission and Discharge Book of the Hospital, but the first and erroneous designation of the disease will be crossed out, and the correct one inserted above it in red ink. This will prevent two admissions for the same illness appearing in the Annual Return.

726. Should another disease supervene on that for which a man was admitted, the original case will be shown in the column for "discharged otherwise," and a fresh admission for the new disease will be made both in the Return, and in the Admission and Discharge Book of the Hospital. Every such instance will be noticed in the remarks on page 4 of the Weekly Return.

727. Medical Officers need not report specially on the state of either troops or barracks unless unusual sickness, that is in amount, or importance from its special nature, occurs in the former, or the sanitary state of the latter is unsatisfactory. Should either of these circumstances occur, the Medical Officer in charge will report it in writing through the Surgeon Major in charge of the station hospital, to the Principal Medical Officer of the District, in order that it may be recorded by the former with his remarks on the next Weekly Return, and by the latter in his Sanitary Report of the District.

SECTION III .- MONTHLY RETURNS.

Monthly Returns.

728. Principal Medical Officers abroad will furnish to the Director General a Return of Sick on W.O. Form 892, for a period of four or five weeks (as the case may be) ending on the last Friday of the month. The return will be forwarded not later than by the first mail which leaves the Command after the 15th of the month following that to which it refers, except in the Bengal, Madras, and Bombay Commands. It being of importance that the latest information respecting the health of the troops in every Command should be in the possession of the Director General, a special letter, explaining the reasons of the delay, must be sent whenever this return is not forwarded at the proper time.

Special Reports. STATISTICAL

supervening.

Fresh disease

Erroneous

disease.

Annual Returns.

SECTION IV.-ANNUAL RETURNS.

729. Every Medical Officer in charge of a hospital on the Annual 31st of December, will furnish an Annual Return of Sick on W.O. Form 298 A, for the period from 1st January to 31st December. As the permanent records of the sickness of the Army will be contained in these returns, the responsible Medical Officers should endeavour to make them as accurate as possible in every particular. The fact of an admission for illness having been recorded under a certain disease in a Weekly Return, should not prevent a necessary correction being made in the Annual Return, wherever the Medical Officer has reason to believe that the first recorded diagnosis was incorrect.

730. No admission will appear in an Annual Return of Cases to be Sick as "Not yet diagnosed," as sufficient time will always have elapsed between the date of admission of a case of illness of an obscure nature, and the completion of the Annual Return, to ascertain the disease with exactness, or to class the case as one of "No appreciable disease," should observation justify the use of this term.

731. The average number of daily sick will be obtained by Average daily adding up the number of days each man was under treatment, sick, how calculated. and dividing the total by 365, or 366 for leap-year; the number of days during the current year on which every patient was under treatment will of course be included.

732. The Medical Officer in charge of any hospital which Return to be may be closed in consequence of the removal of the troops from furnished the station, will transmit, through the Principal Medical Officer when hospital of the District to the Director General a return on W.O. F. of the District to the Director General a return, on W.O. Form 298 A, showing the sickness and mortality from 1st January to the date on which the hospital was closed.

733. In the Annual Return from pages 1 to 9, the statistics Mode of of all the sick of the Regular troops only who have been under compiling treatment during the year will be included. Under the head annual return. of "Invalids" only such men will be included as are sent for invaliding from the troops serving at the station. Any men not belonging to the Regular Forces, admitted to hospital will be shown in the separate Return, No. 13, on page 10.

734. The Annual Return will be forwarded to the Principal Date of Medical Officer of the District at home, or of a Command annual abroad, not later than the 31st of January of the succeeding return. year.

Returns.

PART 6.

Section IV.

Section IV.

Annual Returns.

MONTHLY RETURNS-continued.

735. The statistics relating to the sickness of invalids, not belonging to the District or Command, or those of sick men casually left in a Command, will not be included in the Annual Return, pages 1 to 9, but will be shown in the Special Return, No. 14, on page 10.

736. Medical Officers will severally prepare the portions of the annual manuscript report which refer to their particular duties, and furnish the same to the Medical Officer in charge of the hospital, who will attach them to his annual report on prevailing diseases. Any Medical Officer quitting his station after 31st December, will, before he leaves the station, hand over the report on the special duties entrusted to him.

737. Where there is only one Medical Officer at a station, he will furnish the Annual Return of Recruits, W.O. Form 1038; but when a Medical Officer is specially appointed to recruiting duty he will prepare the Annual Return of Recruits, and send it to the Medical Officer in charge of the hospital, for transmission with his Annual Return of Sick.

738. Principal Medical Officers will compile, on W.O. Form 298, from the Annual Returns of the Hospitals (which will be forwarded to the Director General with the General Return), the more important details into an Annual Return of the Troops in the District, or Foreign Command, and add thereto a manuscript report on the prevailing diseases (taking as a guide the last published Army Medical Department Volume), in which they will elucidate the matters affecting the health of the troops, by suitable remarks. A copy of the Remarks on Sanitary Conditions on page 11 of W.O. Form 298, Annual Return of Sick, will be furnished to the General Officer Commanding.

739. The Principal Medical Officer of a District at home, will furnish annually three separate Returns of Invalids on W.O. Form 1067, for the period from 1st January to 31st December, including (a) all non-commissioned officers and men invalided from regiments, &c., serving at home; (b) all men invalided from the depôts of regiments, &c., which are serving abroad: and (c) invalids who returned from Commands abroad, and were discharged the service during the year, not having served at the depôts as effective men after their return. Non-commissioned officers and men, sent home from abroad as invalids, will be so considered until disposed of (a), by return to duty as effective men (b), by discharge from the surface, or (c) by death. Invalids from abroad, sent on sick furlough, will on their return be still considered as foreign invalids, until finally disposed of in one or other of the methods stated above.

Special cases.

Manuscript reports.

Of Recruits.

Annual Return of Principal Medical Officers.

Invalids at home.

740. Medical Officers in charge of troops at sea, on the Statistical Returns for completion of the voyage, will furnish a Return on W.O. Form troops at sea 294B, for the period from the day of embarkation to that preceding disembarkation. If troops are disembarked at more than one place on the same voyage, the dates, and other particulars, will be specified in the columns for that purpose on page 3 of the form. A separate Return will be furnished for invalids, when embarked in the same ship with effective troops, or time-expired men.

SECTION V.-RETURNS FOR TROOPS AT SEA.

741. Medical Officers in charge of troops on board ship, Cases to be whether time-expired men, or invalids, will be careful to return admissions. as admissions, all cases of sickness occurring amongst the noncommissioned officers and men which, if treated on shore, would be entered in the Admission and Discharge Book, and in the Weekly Return of Sick, &c. The sickness of all men attending hospital for more than one day, will thus always be shown in the Returns.

742. Medical Officers who may have charge of troops board H.M. embarked on board Her Majesty's ships when they are not ships. accompanied by an Officer of the Army Medical Department (under the instructions in General Order 66 of 1877), will, on arrival at the port of destination, forward to the Principal Medical Officer of the command, the usual Return on W.O. Form 294B, which will be issued, for that purpose, at the port at which the troops embark.

K

Returns for Troops at Sea.

Section V.

PART 6.

Section VI.

Returns for Troops on Active Service.

SECTION VI.-RETURNS FOR TROOPS ON ACTIVE SERVICE.

Statistical Returns for troops on Active Service.

Daily state of sick.

Monthly return.

Return to be furnished after an action.

Classified return of wounds and injuries received in action.

Army in the field.

Casualty return.

743. Each Medical Officer in charge of a hospital, whatever may be its designation, will furnish a Weekly Return, on W.O. Form 294A, to the Principal Medical Officer, to commence on the day the troops take the field, and continue to furnish it until the operations are terminated, or until the force is broken up. A copy of this Return will invariably be sent, by the Medical Officer, direct to the Director General of the Army Medical Department, through the most expeditious channel.

744. The Principal Medical Officer of the force, will prepare a daily state of sick on W.O. Form 6, and transmit the same regularly to the Military Authorities.

745. From the date of taking the field, to the end of the operations, the Principal Medical Officer will furnish to the Director General, a Monthly Return on W. O. Form 892, for the whole force.

746. The Medical Officer attached to a corps or detachment, will forward to the Principal Medical Officer, as soon as possible after an action, a nominal return of Officers, Non-commissioned officers and Men, who have received wounds, or injuries in battle. In this return the kind of wound received, and its degree of severity, will be described as tersely and as accurately as possible.

747. A classified return of wounds and injuries of every kind received in action, for which men have been admitted into hospital, will be made up on W.O. Form 151A, and will be transmitted every week by the Medical Officer in charge of each hospital, to the Principal Medical Officer. Separate forms will be used for Officers, and for Non-commissioned officers and Men.

748. The Principal Medical Officer of an army in the field, will furnish to the Director General a special Return, exhibiting the sickness, casualties in action, invaliding, and other loss accruing to the force during its employment, from the commencement, to the termination of the field service. In this Return he will embody the statistics furnished to him on W.O. Form 151A; and in the tables on page 2 of the Weekly Return, W.O. Form 294A.

749. The Principal Medical Officer of an army in the field, on the termination of the service, will furnish a general casualty return on W.O. Form 298.

Section VII.

Returns for Troops in Camps of Exercise, &c.

SECTION VII.-RETURNS FOR TROOPS IN CAMPS OF EXERCISE, ETC.

750. When a body of troops is brought together as a se- Statistical parate command, in a Camp of Exercise, for Autumn Manœuvres, Returns for troops in or other service in time of peace, every Medical Officer in charge Camps of of the sick of such troops, at whatever station they may be under Exercise, &c. treatment, will include the ame in his usual Weekly Returns of Sick, but he will in addition furnish to the Principal Medical Officer of the force, a Weekly Return showing the sick of such troops only, on W.O. Form 294A. The sick of the force will be included in the Annual Return of the Hospitals in which they may have been treated.

751. At the conclusion of any of the above-mentioned special services, the Principal Medical Officer will furnish to the Director returns on General, Special Returns similar to those specified in paragraphs conclusion of camps of 748 and 749 for an army in the field. exercise, &c.

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PART 7.-GENERAL REGULATIONS.

I. Correspondence.

II. Sick Leave and Leave of Absence of Medical Officers, and Reports of arrival and departure.

III. Medical Certificates, and Medical Boards.

IV. Supply of Stationery, W.O. Forms, and Books.

V. Disposal of useless Books and Records.

SECTION I.-CORRESPONDENCE.

Official letters.

Signatures to letters, &c.

Principal Medical Officer's responsibility.

Letters to Director General, how to be addressed and transmitted.

Numbers and dates to be quoted. 752. Official letters will contain full information of all particulars upon the subject to which they relate. Each letter will refer to one subject only, and will be written, when practicable, on foolscap paper, a half to quarter margin being left on the inner side of each page. The paragraphs will be numbered, and the enclosures (if any) described in the margin or on a separate schedule, half a sheet of paper only being used when the letter or other document does not extend over the first page.

753. Signatures to all letters, accounts, and documents, will be written in a clear, legible character, and the official designation of the person signing will be stated; the station and date will also be invariably given.

754. Principal Medical Officers will be responsible for the correctness of what is set forth in documents submitted by them. It is their duty to endeavour to adjust all matters that come within the scope of their authority; and in transmitting correspondence to the Director General of the Army Medical Department they will follow the instructions contained in paragraph 39 of these Regulations.

755. Letters and applications from Medical Officers intended for the Director General will be transmitted to him through their immediate superiors.

756. All letters and documents intended for the Director General will be addressed on the envelope to The Under Secretary of State for War, War Office, Pall Mall, London, S.W., with the words "Army Medical Department" on the left hand corner.

757. In all replies to communications received, the number as well as the date and purport of the letter answered, will be quoted.

Correspondence.

Section I.

CORRESPONDENCE-continued.

758. Access to official records will only be permitted to Access to those who are intrusted with the duties of the hospital or office official to which they belong; and these records will not be made records. public or communicated to individuals unconnected with the office or hospital without the knowledge or sanction of the Medical Officer in charge.

759. All applications for the employment of Regimental Regimental 759. All applications for the employment of negligibility orderlies, Orderlies, all sanitary suggestions or recommendations involving sanitary sugoutlay, and all communications involving questions of finance, gestions, &c., will invariably be addressed to the local military authorities. and expense Copies of such correspondence will be forwarded for the infor- connected therewith. mation of the Director General.

760. Medical Officers will see that a list of all letters, tele- Lists of grams, &c., which may have been necessarily dispatched by letters to be them on the public service is carefully kept in their office or in the kept. hospital, and will from time to time verify its correctness. The amount disbursed under this head will be recovered at the end of each quarter from the District Paymaster, on a certificate W.O. Form 904, signed by the person who made the payment and vouched for as correct by the Medical Officer.

Section II.

Sick Leave, Leave of Absence, etc.

SECTION II. — SICK LEAVE, LEAVE OF ABSENCE, AND REPORTS OF ARRIVAL FROM OR DEPARTURE FOR, FOREIGN SERVICE.

Medical Officers on sick leave or half-pay to report.

Applications for leave.

Reports of arrival from or departure for foreign stations. 761. Medical Officers on sick leave, or who have been placed on temporary half-pay on the recommendation of a Medical Board, will report their state of health, in writing, to the Director General, Army Medical Department, fourteen days before the expiration of their leave, or the period for which they may have been granted half-pay.

762. In all applications for leave of absence, Medical Officers will be guided by the instructions laid down in section 13, of the Queen's Regulations and Orders for the Army, 1873.

763. Medical Officers proceeding to, or returning from Foreign Stations, will report their departure or arrival, as the case may be, in accordance with instructions in section 17, paragraph 59, and section 13, paragraph 24, of the Queen's Regulations and Orders for the Army, 1873.

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Section III.

Medical Certificates and Medical Boards.

SECTION III.-MEDICAL CERTIFICATES AND MEDICAL BOARDS.

764. In granting Medical certificates to Officers desirous to Medical retire from the Service, to exchange to another corps, or to certificates. obtain sick leave, Medical Officers will be guided by the in-structions contained in sections 3 and 4 of the Queen's Regulations and Orders for the Army, 1873.

765. Medical Boards will as a rule consist of three Medical Medical Officers, but in cases of emergency, two will be considered suffi-The Senior Medical Officer present will be the President. cient.

766. The proceedings of Medical Boards on sick or Proceedings wounded Officers, who are recommended to leave the Command, of Medical Boards. will be made in triplicate and forwarded to the Principal Medical Officer, who will transmit one copy to the Officer ordering the Board, a second, he will give to the sick Officer, with instructions to present it to the Medical Board in London, and the third (with a detailed statement of the Officer's case from the Medical Officer under whose care he has been treated), he will forward to the Army Medical Department, addressed under cover, to the Under-Secretary of State for War.

767. Proceedings of Medical Boards on Officers who may be recommended for leave with the Command where they are serving, are not required to be forwarded to this country. One copy only will be furnished, which will be forwarded through the Principal Medical Officer to the Officer ordering the Board.

768. The Principal Medical Officer will keep a Register of Register of all Medical Boards held within the Command, on sick Officers or Medical invalid soldiers, in which he will enter the Rank, Name, and Corps of the Officer or soldier, and the Regimental Number of the latter, the date on which the Board assembled, the nature of the disability and the opinion of the Board, together with any other remarks he may think fit.

769. Medical Boards in forming their opinion on the claims Opinion of of Officers for compensation for wounds received in action, will Medical be guided by the rules laid down in Part II, Sec. VI, of the compensation Royal Warrant of the 1st May 1878. (Revised Army Regu- for wounds. lations, Vol. I.)

770. Medical Officers in giving certificates to sick Officers, and Medical Boards in their proceedings will, invariably state whether in their opinion the disability was caused "in and by the service."

Boards.

Section IV.

Stationery, Printed Forms, and Books.

SECTION IV.-STATIONERY, PRINTED FORMS, AND BOOKS.

Stationery and W.O. Forms. 771. Principal Medical Officers will obtain supplies of stationery and forms by requisition made out on W.O. Forms 165 and 832. These requisitions will be made annually in accordance with the instructions published from time to time in the Army Circulars.

SECTION V.-DISPOSAL OF USELESS BOOKS.

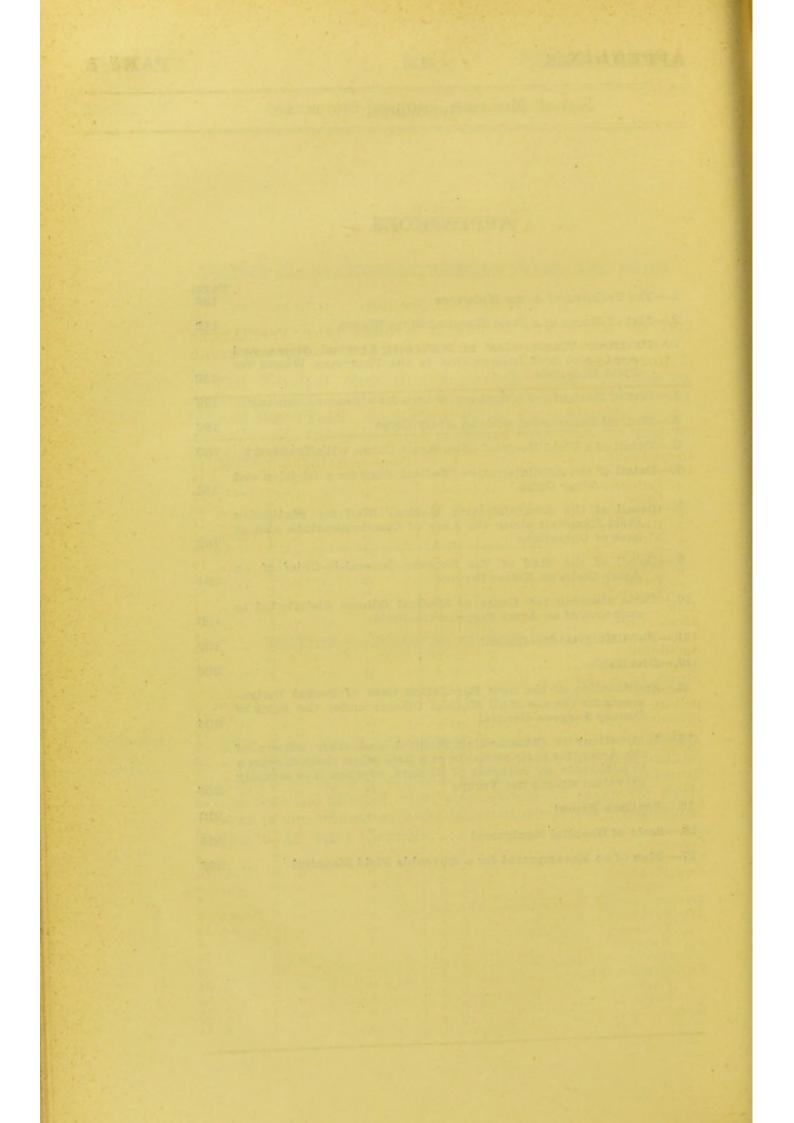
Disposal of useless records. **772.** When books, documents, records, and printed forms have unduly accumulated, and it is considered that their further retention is undesirable, either in the interests of the public or in a professional point of view, steps should be taken for their disposal in accordance with the instruction laid down from time to time in the Army Circulars.

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The Training of Army Midwives.

APPENDIX No. 1.

THE TRAINING OF ARMY MIDWIVES.

General Regulations.

1. If possible such women only as are without family should be selected for instruction as Army Midwives, and a preference should be given to such as possess a fair elementary education.

2. Practical instruction at the patient's bedside, under the personal superintendence of the Medical Officer, should be conveyed as frequently as practicable to the women attending the class, to illustrate the principles and directions laid down in the lectures.

3. A certificate of proficiency should be given to each woman who has regularly attended a full course of lectures, and has shown by her replies at a final examination that she is quite conversant with the subjects taught. But no woman must be admitted to such final examination until she has attended at least 20 cases of labour to the satisfaction of the Medical Officer.

4. At convenient hours, and not oftener than three times a week, the Medical Officer will hold a class for the instruction of the women in the form of lecture and oral examination, illustrated—when practicable—by models and diagrams.

5. The length of such theoretical course of instruction should as a general rule be limited to three months, including 36 lectures. Should a woman after this fail to qualify as laid down in paragraph 3, she should be, at the option of the Medical Officer, remitted to a further course of study, or otherwise.

6. An outline of the course of instruction which midwives should undergo is appended.

At some stations it will probably not be found possible to give full instruction in all the details of this outline, but an attempt should be made to approach to it as nearly as possible.

Outline of Instruction by Lectures.

1. A simple and general idea of the human skeleton.

2. A more particular description of the female pelvis, its bones, measurements, axes, natural and deformed states.

3. A simple account of the female sexual organs, and the anatomy and physiology of the vagina, uterus, ovaries, urethra, rectum, &c., with their relation to each other.

4. A simple account of the development of the feetus, its growth, nutrition, membranes, &c., with remarks on the placenta and umbilical cord.

5. Some account of the impregnated uterus; the signs of pregnancy; the duration of utero-gestation; death of the foctus in utero, &c.

6. Abortion and premature labour, the signs of their coming on, means of prevention.

7. Full instructions on the mechanism of labour.

The Training of Army Midwives.

THE TRAINING OF ARMY MIDWIVES-continued.

8. Instructions as to presentations in labour.

To distinguish natural from mal-presentations.

9. Natural labour, its three stages, and their average duration; application of knowledge acquired under former heads; condition of parts at each stage; on undue interference; the delivery; parts that may be injured in delivery; attention to bladder and rectum; management of the cord and placenta; attention to compresses, bandages, bedding, comfort of patient generally.

10. Preternatural labours, distinguishing marks of each variety. Deficient and excessive uterine action; rigidity of the parts, tumours, accumulations in the various viscera; deformities; affections of the fœtal membranes, of the fœtus itself; plural births, &c.

11. Complex labours; cord presentations; retained placenta; hæmorrhage; convulsions; rupture of different parts, &c.

12. Conditions after birth; syncope; flooding; abnormal uterine contraction; inversion of uterus; the lochia; puerperal conditions, fever, mania, &c.; infection; cleanliness; recumbent posture and its term; proper food; as to stimulants, &c.

13. The child: attention to it; asphyxia; deformities; occlusions; treatment of the cord; first food; popular fallacies; the mother's breast, nipples, milk, &c.

General Principles of Sick Nursing.

It being of great importance that the women under training should have a clear and correct conception of the general principles of sick nursing, a few lectures should be devoted to this purpose. The instructions here appended should be amplified and illustrated by the Medical Officer as occasions offer.

1. The Sick Room .- It should be kept scrupulously clean, but excessive sweeping, rubbing, and other movements creating noise and raising dust should be avoided. The least possible amount of furniture and hangings should be retained in the room, as tending to diminish cubic space, impair ventilation, and attract dust, infectious emanations, &c. Means should be taken to secure a free ventilation, and as much sunlight as possible, without actually exposing the patient to draughts or to glaring light directly on the face. Care should be taken to regulate the amount of fire in the room, so that the temperature should remain at about 60°. It is useful to have a thermometer in the room, hung away from the fire and near the patient, to show this. It should also be remembered that gas-burning and other artificial lighting tend to vitiate the air, and heat the room, and they are to be employed only sparingly. In most conditions of weather, in most rooms, it will be possible and proper to open the windows freely from the top for a reasonable time, or times, every day. Patients are not more likely to catch cold when properly covered up in bed, than when moving about dressed. A general cheerfulness of arrangement, or even ornamentation when practicable, should not be neglected in a sick room, and the general feeling in the room should be one of order, quietness, and repose. The fumigation and disinfection of a sick room should only be carried out under the direction of the Medical Officer, but the immediate removal of all discharges from the sick, and the thorough purification of the vessels before replacing them should never be neglected. The

The Training of Army Midwives.

THE TRAINING OF ARMY MIDWIVES-continued.

same rules apply to all dishes which have been used for food and drinks. If possible cooking should not be carried on in a sick room, although drinks or other articles may be warmed or kept warm, when it is otherwise necessary to have a fire. Access to a sufficient supply of hot and cold water is very desirable.

2. The care of the Patient.—There are very few cases indeed in which it is not possible and indeed imperative to sponge daily with tepid water, at least, the hands and face of the sick person. At longer intervals there is seldom objection, and nearly always much advantage from this refreshing process being extended to the other parts of the body, care being taken not to wet the bedding. In feverish cases or where the patient craves it, the lips may be safely moistened at short intervals with cold water, or very dilute vinegar and water, and a cloth or towel wrung out of the same may be passed over the face or laid on the forehead with refreshing effect. The bed and bedding should be scrupulously clean, and changed as often as necessary, spread evenly, and so as to be neither too hard nor too soft, and to be without crease. The head and shoulders are better somewhat raised by an elastic feather pillow, especially during the day.

Examination should be frequently made as to the warmth of the extremities, the soiling of the bedclothes, the appearances of the skin as to eruption, abrasion, or threatened bedsore. The feelings and cravings of the patient are generally well worthy of attention, and probably of gratification. The movement of a hand or an eye should suffice often as a sign to a watchful attendant to spare the fatigue of speech. The temperature of the patient is often of moment to register, and the small thermometer made for the purpose placed in the armpit or under the tongue becomes soon easy to use, and gives valuable information to the Medical Officer at his next visit. The preparation and administration of different kinds of food and drinks can only be learned practically; but points to be remembered are, simplicity of preparation, attention to the Medical Officer's directions, and to the patient's cravings, care that they are neither too hot nor too cold, not too frequently forced down, not too long delayed, and not neglected at night, and especially towards early morning. The administration of medicines by measure-ment and otherwise, the application of blisters, plasters, ointments, washes, and the like, the preparation and uses of poultices, injections, fomentations, baths, &c., must all be carefully studied, and the Medical Officer's directions as to them on all points faithfully observed. On no account must the nurse take upon herself to administer stimulants to parturient women or others without instructions, nor interpose with fanciful remedies in any case.

The sick nurse should be *simply* dressed, so that she may move about without noise or disturbance of furniture. She should be cheerful without being talkative, gentle and hopeful in demeanour and never harsh or abrupt even in gesture. She must not introduce frequent visitors or gossips to the sick room, nor should she frequently leave it for any unnecessary purpose. She should have her pencil and bit of paper to jot down directions from the Medical Officer, and minute information as to symptoms, progress, &c., for him. She should study to know when it is absolutely necessary to call in the Medical Officer, and arrange beforehand as to some means of conveniently getting access to him. Stores in a Field Hospital Store Wagon.

APPENDIX No. 2.

LIST OF STORES IN A FIELD HOSPITAL STORE WAGON.

No., Where placed. Articles. &c. Axes, felling, 41-lbs., straight handles, 2 Outside wagon helved . . 2 Axes, pick, helved, 61 lbs Compartment B 1 Bag, canvas, for flags .. D, 1, No. 6. C Box 2, Nos. 7 & 9 D 1, No. 6 Basins, iron, enamelled, F.S., 71 in. 5 33 ... 40 6 in. • • 22 " zinc, "11-in., MP ... 5 ... • • 33 A 50 Blankets, grey, G.S. 22 Box, money, for money, medals, &c., field, C, Box 3, No. 1 1* 33 HP, equipment 2 D Box 1 " 6 Brushes, hand, scrubbing .. 35 1 " 3 C 2 " shaving, HP ... 22 . . . 1 " 6 D 6 washing, laundry .. 17 .. 1 7 23 D 2 ,, whitewash, 6 oz. • • 33 D 1 6 2 Buckets, iron, galvanized, 4 galls ... 22 22 ... 2 D 1 Cans, tin, oil, feeding, 1 pint 33 ... C Box 2, No. 6 " " soup or water, 3 gallons 2 " .. D 1 oil, with screw top ... •• ,, B 50 Cases, bolster, barrack 33 • • в 50 palliasse, ditto • • " C 2, Tray 4 1 ,, Castor, pepper, pewter » **4** D 1 ... 33 .. D 4 1 ... " .. C, Box 2, Tray 4 Cocks, bib, driving, for beer, 3-inch 2 32 ... " 1 do 3 B 5 23 ... ,, 1 3 B 2 33 . . " 4, No. 3 C Corkscrews, iron, folding, HP ... 2 . . " ", 2, Tray 4 ", 2 do 2 & 3 ", 1, No. 2. Cups, egg, powter, HP ,, tin, drinking, 1 pint, HP, canteen... ,, zinc, spitting, HP, F.S. Feeders, earthen, HP C 10 ,, C 34 33 D 6 32 C Box 2, No. 6 3 22 , 2 , 1 Filters, Crease's, iron, galvanized, complete C 1 33 Flags, field, HP, white, with red cross, 4 feet square 1 B 33 In bag B 2 triangular, directing 22 C, Box 2, Tray 3 Forks, carving, buck handles 1 ... 23 . . " ² " ⁴ 2 C ,, 50 dinner, black handled, large 33 4.4 D " 1 33 33 flesh, small .. •• C Box 4 do 3 2-in. " 39 3 2 D Funnels, tin, half-pint .. 1-in. " B Box 1 ,, 1 5 33 Gowns, blue serge D " 4 Hammers, handled, claw, 20-oz., small ... 1 Outside wagon 1 Hooks, bill, handled

(General Service Wagon with Fittings.)

* Two only for each Field Hospital.

Stores in a Field Hospital Store Wagon.

STORES IN A FIELD HOSPITAL STORE WAGON-continued.

Articles.	No., &c.	Where placed.
Kettles, tin, cooking, nests of 8	2	Compartment C, Box 2, Nos. 4 & 5
Knives, butchers', cutting, 10-inch	3	" D " 4
carving, buck handled		" C Box 2, Tray 3 " C " 2 " 1 " C " 2 " 3
" dinner, black handled, large	0	" C " 2 " 3
, opening meat tins		D Por 4
Ladles, iron, tinned, soup	0	D 8
Lamps, hand, small, F.H		" D " 3
Lines, clothes, HP., 80 yards	2	Compartment B Box, 1, No. 3
Machine, weighing, 14 lbs., with enam-		I manual and a second second
elled pan* and weights, field, HP,	1	" D 5 " 1
equipment		
Measures, pewter, wine and spirit, nested,	11	" C " 4 " 3
1 gill to 1 quart	1 6 -	
Mill, coffee, small, FH	1	" D " 5
Needles, collar or packing, sizes (1 to 6).	. 6	" B Box 1, No. 3 " B " 1 " 3
" sewing, assorted, women's .	. 50	
Pans, iron, frying, round, 12-in., with	1 6 -	" C " 2, Nos.4&5
shifting handles	1- 1	" D 1, No. 1
Pans, bed, zinc, HP	50	", C Box 2 , 8
Poles, { lanterns and square flags, 16 feet	11	
Poles, 16 feet	. } 1	Outside wagon.
wood, for triangular flags, 7 feet .	0	>> >>
Pots, zinc, chamber, HP and MP		Compartment D, 2, No. 1
Rags, linen lb		" B
	. 2	", B, BOX 1, NO. 3
	. 1	" B " 1 " 3
Salt cellars, wooden	· 3 · 1	, C ,, 2, Tray 4 Outside wagon.
Saw, cross cut, 5 ft., complete, with case	1 1	Outside wagon.
	: 1	Compartment D, 4
Scales, weighing, with weights, pillar, fo	- 1	
groceries, 7 lbs		" D 5 " 1
Chinama hain antiina Hinah	. 2	Compartment B Box 1, No. 3
Scoops, half-pint	. 2	Compartment B box 1, No. 5 "C , 4, Nos. 2&3 , C , 2, No. 6
Shapes, or dishes, pudding, 1 pint .	. 6	" C ,, 2, No. 6
Sheets, barrack, linen	. 120.	60-in., Compartment A
		1 12-in B
" ground, waterproof	. 25	10 B
	12	Compartment B, Box 1, No. 2
Shirts	12	, B , 1, , 4
(1) which shallow make of 0	3	" D 4
Slippers, brown leather pair		" B Box 1, No. 2
Socks, woollen,	25	" B " 1 " 3
Spades, helved, common	2	Outside wagon
Sponges, bath, 2 oz	2	Compartment D, 1, No. 6
Spoons, German silver, table	50	" C Box 2 Tray 5
Steels, butchers'	1	" D 4
Stools, camp, folding	2	" A " D, 1, Nos.1, 4, 8
,, close, iron, HP canteen, complet		
Stretchers, ambulance wagon, new pat- tern with slings, complete	17 4	,, A, B, C over all
Tables, camp, folding	1	,, A

* The pan packs in box 2-6

Stores in a Field Hospital Store Wagon.

Articles.	Articles.			Where placed.			
", worsted, grey Towels, hand, HP Trowsers, serge, blue line Urinals, pewter	 d 	1b. ,, pairs 		.,,	B, Box 1, Nos.2&3 B, 1, No. 3 B, 1, 3 B, 1, 3 B, 1, 2 B, 1, 2 B, 1, 1 D, 1, 5 B Box 1, 4 D, 1, 6		

STORES IN A FIELD HOSPITAL STORE WAGON-continued.

Medical Comforts and Supplies.

Contraction of the local division of the loc							a	0	Dem	-	No	
Arrowroot					lbs.	50	Compartment		DOX			
Brandy				b	ottles	30	"	C		4		1
Essence of			ig's,		lbs.	72	33	C	"	5		3
Mustard, in					,,,	5	"	C	,,,	5	,,,	4
Oil, colza,*					galls.	3	,,	D	,,	3		-
Pepper					lbs.	5	33	C	33	5 5	"	5
And a second sec					33	50	>>	C	,,		,,,	2
Salt					,,	16	33	CD	33	5	"	6
Soap					22	30	22	D	33	2	No	
Sugar				••	33	56	33	CC	33		No.	4
Tea, comp	ressed				. 17	20	33	D	33	4 2	,,,	-
Wax mate	hes				No.	1,000	33			2		
Wick for la	mps,	in.	flat*	••	yds.	2	33	D				
"	,,	,,	round*	••	"	2	27	D	"	2		

List of Tins in Field Hospital Store Wagon.

Can, tin, oil, wi	th screw top Pepper or Mustard	$\frac{1}{2}$
Canisters, tin	Pepper or Mustard Tea	1
(Arrowroot or rice	2
Cases, tin {	Sugar	1
Tins {	Lamp, cotton Soap	1

* Oil and wick are drawn from the Commissariat. The requirements for 25 hospitals are :---

e requirements for Lo	noop	Trento en o .
Oil, colza, galls.		300
Wick, flat, {" yards		200
" round, ozs.		200

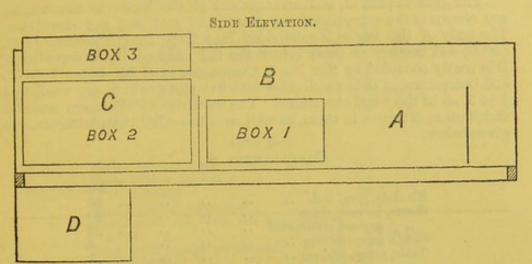
APPENDIX.

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No. 2.

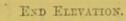
Field Hospital Store Wagon.

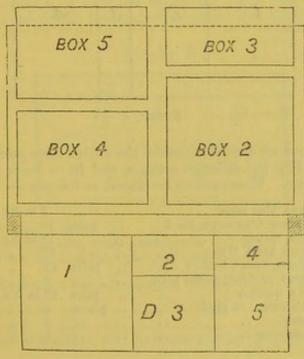
FIELD HOSPITAL STORE WAGON.



PLAN.

BOX 5		
BOX 3	BOX I	





(429)

L

No

Field Hospital Store Wagon.

FIELD HOSPITAL STORE WAGON-continued.

The general plan of, and arrangement of the boxes in the wagon are shown in the acccompanying plans, and side and end elevations. The body of the wagon is subdivided into three compartments, A, B, and C, and another is fixed below the tail, marked D. Compartment B is partly occupied by Box No. 1, Compartment C by boxes 2 to 5, and Compartment D is subdivided into five parts, which are numbered 1 to 5, as in the "end elevation." The subdivisions of boxes and the distribution of stores in them, as well as in the other compartments, are given below.

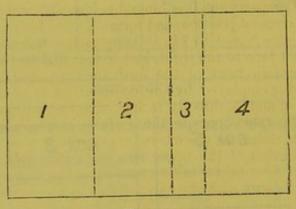
COMPARTMENT A.

Blankets, grey, G.S.	 	 	50
Sheets, barrack, linen	 	 	60
" ground, waterproof	 	 	12
Stools, camp, folding	 	 	2
Table, camp, folding	 	 	1

The blankets are to be folded first lengthwise, then crosswise, and placed in the compartment evenly, one over the other, their greater length being across the wagon. The sheets folded in the same manner are to be placed over the blankets, then the waterproof sheets, and lastly, the table and stools.

COMPARTMENT B.





FRONT.

This box has no partition inside, the dotted lines merely define the spaces occupied by the different articles, and have been introduced to facilitate packing. These are to be placed as follows :---

Gowns, blue serge		 	5 in	No. 1
Trowsers, blue serge, lin	ed	 pairs	10	
Shirts, cotton		 		No. 2
Towe's, hand, HP		 	55	33
Slippers brown leather		 pairs	12	"
Thread, packing, pound	balls	 maina	6 05 in	No. 3
Socks, woollen		 pairs		
Clothes line, 80 yards	••	 pieces	2 2	"
Razors		 	ĩ	33
Razor strop	••	 	-	

FIELD HOSPITAL STORE WAGON-continued.

Combs, hair, 8-inch		5 in No. 3
ivory, small tooth, 31-in		2 ,,
Seissors, hair cutting, 7-in	pairs	2 ,,
Thread sewing, whited brown	1b.	1 ,,
., worsted	1b.	1 ,,
Needles, collar or packing	••	6 ,,
,, sewing, assorted, women's	••	48 10 in No. 4
Waistcoats, blue serge		10
Shirts, flannel		12 ,,

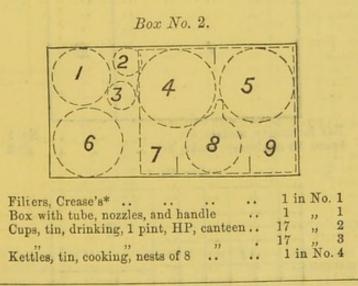
Above Box.

Sheets, barrack, linen	60
Cases, bolster, barrack	50 50
" paillasse	13
Sheets, ground, waterproof	1
4 feet	1 In bag.
Flags, field, triangular, directing	2]
Rags, bundle 1b.	15

The sheets folded as described under A are to be placed over Box No. 1. As the ends are found to rise leaving the centre of the pile lower, this hollow has to be filled up from time to time as the packing goes on. This may be done by first putting in 10 sheets, and then 10 paillasse cases folded lengthwise twice, and 10 bolster cases into the hollow; then another 10 sheets, &c., until the proper number be completed. The waterproof sheets folded as large as possible are to be placed over the others, and the bag of flags and bundle of rags over all.

COMPARTMENT C.

This contains the Boxes 2 to 5, of which the arrangement and contents are as follows. The number in the boxes indicates the position of the different articles named in the subjoined lists. And where more than one description is included under the same number, it is either placed over or inside the first-named opposite that number:—

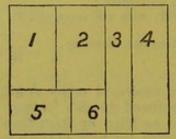


* A description of this filter, with the modes of using it is subjoined. See p. 32. (429) L 2

FIELD HOSPITAL STORE WAGON-continued.

Pan, iron, frying, round,	12-in.	, with s	hift-			
ing handles				1 i	n No	. 4
Kettles, tin, cooking, nest	s of 8			1	33	5
Pan, iron, frying				1		5
Cans, tin, soup, 3 gallons				2	,,,	6
Shapes, pudding				6	,,	6
Feeders, earthenware				8		6
Enamelled pan of meat w	eighi	ng mach	ine	1		6
Basins, iron, enamelled				20	33	7
Plates, tin, dinner (if all			t be			
got in here some may b				50		8
Basins, iron, enamelled				20	,,,	9
Brushes, shaving		1	-	2		3

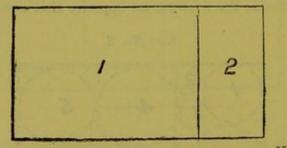
Tray in Box 2.



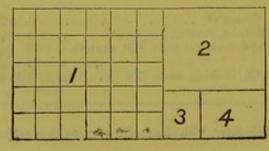
(Position shown by dotted lines.)

Knives, dinner, black handled, la	rge	 50 in	No,	1
Forks ,, ,, ,,		 50	33	2
Knife, carving, black handled		 1		3
Fork ", "		 1	,,	3
Knives, for opening tins		 2		3
Castor, pepper, pewter		 1	1)	4
Cocks, bib, driving, 3-inch		 2	,,	4
Cups, pewter, HP, egg		 10	,,,	4
Salt cellars, wood		 3	,,	4
Spoons, German silver, table		 50	"	5

Box No. 3.



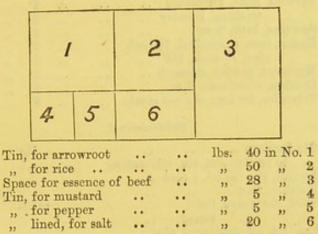
Eox No. 4.



FIELD HOSPITAL STORE WAGON-continued.

Brandy			b	ottles	30 ii	n No	. 1
Tin for sugar				lbs.	50	,,,	2
Scoop, half-pi	nt			••	1	>>	2
Measures, per	wter,	half-gill	to 1	quart,			~
nested				set	1	33	3
Funnels, tin,	half-	pint			2	,,,	3
Scoops, half-]	pint				1	,,	3
Tin, for tea				lbs.	6	33	4
Corkscrews				••	2	33	3

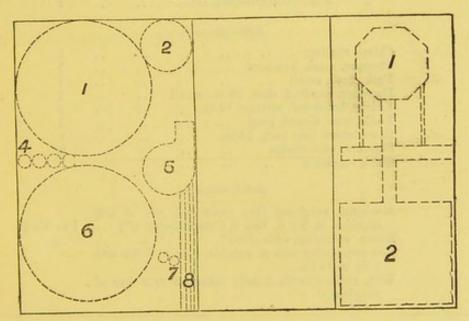




Over A, B, C.

Stretchers (or bearers), N.P., complete .. No. 2

COMPARTMENT D.



The positions of the subdivisions in this compartment are shown in the end elevation given above. In the plans of subdivisions 1 and 5 which follow, the numbers indicate the positions of the different articles in the subjoined lists, and where more than one is included under the same number it is either placed over or inside that first named.

FIELD HOSPITAL STORE WAGON-continued.

Subdivision 1 contains-

Pans, zinc, HP, canteen bed			4 in No. 1	
Rings for close stool frames			3 " 1	
Pans for close stools			3 1 1	
Pots, zinc, chamber		11	6 in Nos. 1	
Cups, zinc, spitting, HP			6 , 2	
Legs for close stool frames, placed	vertica	lly	9 in No. 4	
Urinals, pewter			4 ,, 5	
Buckets, iron. galvanized, 4 gallor	15		2 " 6	
Brushes, hand, scrubbing			2 ,, 6	
", washing, laundry			6 ,, 6	
Sponges, bath, 2 oz			2 ,, 6	
Basins, iron, enamelled, 71-inch			5 ,, 6	
" zinc, 11-inch, MP			5 ,, 6	
Warmers, pewter, stomach			2 " 6	
Brushes, whitewash, 6 oz			2 ,, 7	
Triangles, for legs of close stools			3 " 8	

Subdivision 2.

Tin for soap			1bs. 30	
" to receive can, tin, oil, fe	eding		1	
Funnel, tin, for oil, 1 pint		22	1	
Matches, wax			1,000	
Wick, for lamps, flat			yards 2	
" " round			2	
Can /tin, oil, feeding, 1 pint			1	

Subdivision 3.

Can, tin, with screw stopper, for col	za oil	galls.	8
Lanterns, hand, half round			2
,, tent, distinguishing, red.			1

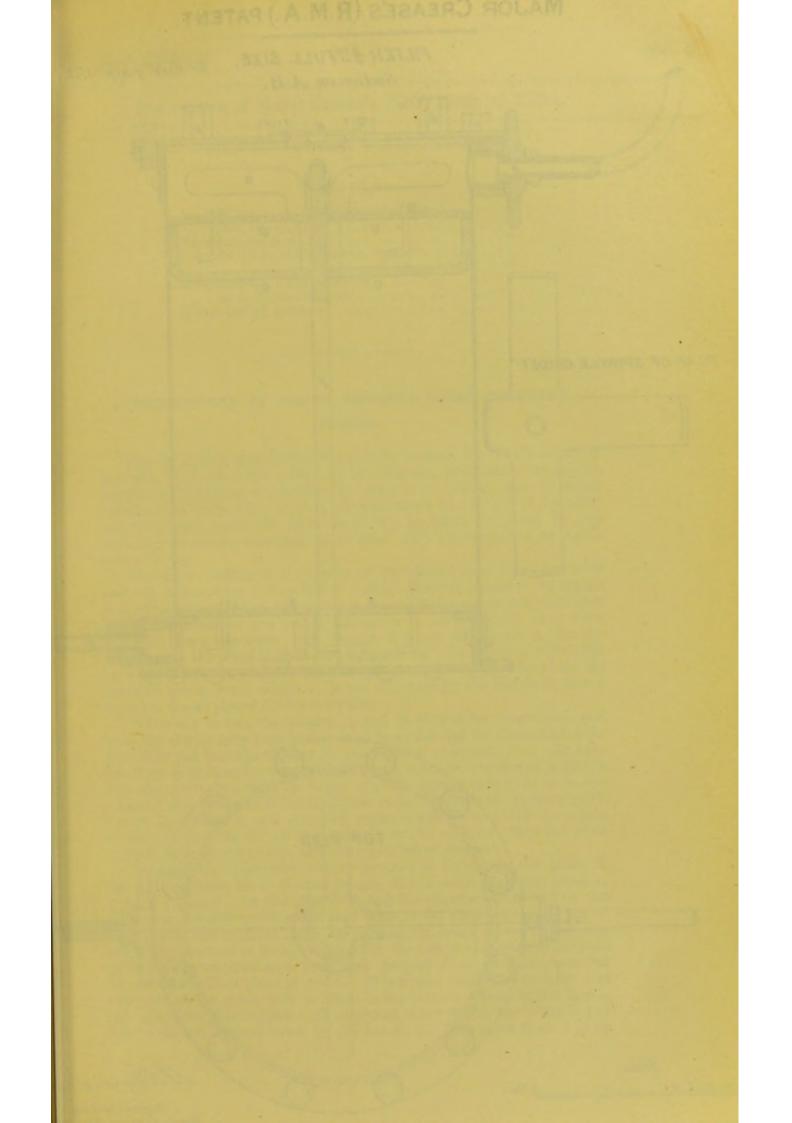
Subdivision 4.

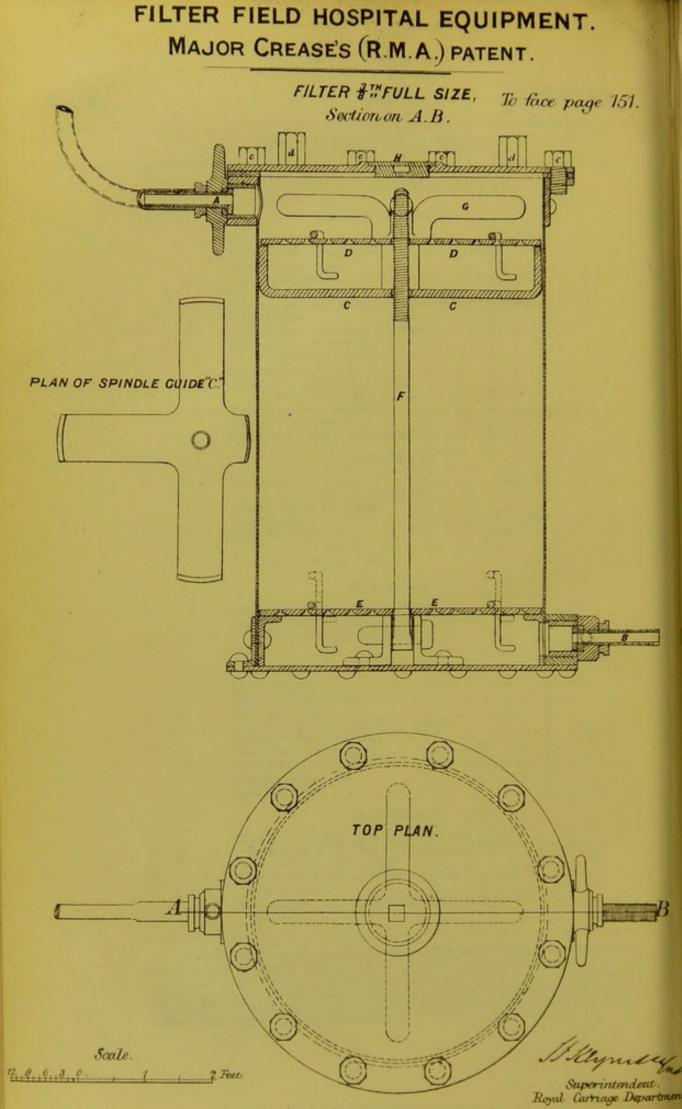
Chisel, ripping		 	1
Chopper, meat, butchers'		 	1
Fork, flesh, small		 	1
Hammer, handled, claw, 2			1
Knives, butchers', cutting,	10-in.	 	3
Ladle, iron, tinned, soup		 	1
Saws, tenon, iron back, 14	-in.	 	1
Skewers, with chains		 	3
Steel, butchers'		 	1

Subdivision 5.

Machine, weighing (the enamelled pan of this machine in No. 6, Box 2, Compartment C*)	1 in No 1
Scales weighing, with pillar*	23
Box containing sets of weights, 1 oz. to 7 lbs. and	
¹ / ₄ lb. to 14 lbs. Mill, coffee ⁺ (with handle taken off over box of weights).	

* Should the large copper pan of these be too wide to go into this subdivision, its sides must be pressed together sufficiently to admit of its being inserted.
+ As in the course of service in the field, it may not always be possible to obtain an upright post sufficiently strong to fix the coffee mill, to the sides of it have been lengthened sufficiently to admit of its being fastened to the rim of the hind-wheel of the warm when required for use. wheel of the wagon when required for use.





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Description of Major Crease's Field Hospital Filter.

FIELD HOSPITAL STORE WAGON-continued.

Outside Wagon.

Axes, felling, 41-lb., straight har	dled,	helved		2
pick, helevd, 61-lb				2
Hook, bill, handled	flags,	&c., 18	feet.	1
		8 "		2
Saws, cross-cut, 5 feet, complete				1
hand, 26-in., complete				100
Spades, helved, common			. * *	2

DESCRIPTION OF MAJOR CREASE'S FIELD HOSPITAL FILTER,

This filter has been designed specially to meet the requirements of movable field hospitals—viz., to be compact, little liable to injury, capable of filtering a considerable supply of water, and of being readily used under the varying circumstances in which field hospitals may be placed, while the filter itself can be taken to pieces by any ordinary workman, cleansed, or re-filled with charcoal, and be again ready for use.

This filter consists of a cylinder of galvanized iron $6\frac{1}{2}$ inches wide and $11\frac{1}{8}$ inches deep, with a bed of animal charcoal from 8 to $8\frac{1}{2}$ inches in depth, through which the water is passed. The accompanying figure shows the details of the interior structure in section (half size) when ready for use; the water then passes through the nozzle A into the space above the plate D, then through that and the charcoal which lies between it and the plate E, and through the holes in the latter into the chamber below, from which it is run off, through the nozzle B, into a separate vessel placed for its reception.

When not in use, the nozzles A and B should be unscrewed, and with the elastic tube kept in the small box provided for them, and corks should be put into the sockets for the nozzles, to exclude dirt. To take the filter to pieces, the screws c and feet d must be unscrewed with the key, the cover can then be lifted off; the handle G is then to be unscrewed, and the plate D lifted off, the charcoal above the spindle guide C is to be taken out, and then the guide itself, after which the whole of the charcoal as far as the plate E can be removed, then the plate E itself may be taken out, and the space below cleaned.

To refill the filter, the reverse process is followed; the plate E, having the holes in it cleared of any dirt or oxide they may contain, is to be replaced over the spindle F, and the edges made to rest on the flanges at the sides; the guide C is then to be placed over the top of the spindle, and retained there to prevent its being moved to one side while the charcoal is being rammed in; the charcoal is then to be filled in, in small quantities at a time, and rammed down moderately round the spindle with a piece of wood. When the requisite quantity has been put in, the guide will be fixed in the portion shown in the figure, and the space above filled with charcoal, after which the plate D will be put on and secured down by the handle G. The cover is then to be

Description of Major Crease's Field Hospital Filter.

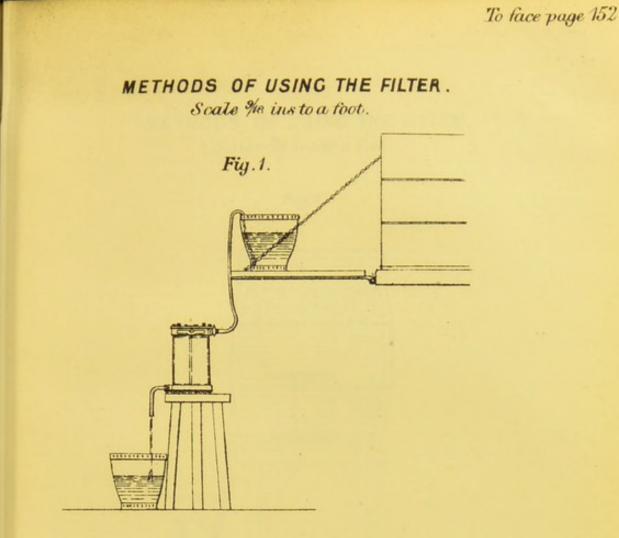
DESCRIPTION OF MAJOR CREASE'S FIELD HOSPITAL FILTER-continued.

replaced and screwed down, and the feet d d d placed in their proper positions, equidistant from each other. When required for use, the nozzles A and B are to be screwed tightly into their respective sockets, and care must be taken that the leather washers on them are present and in good order, as if not, and air can get through between the nozzle and the socket, the filter will not act.

When the filter is intended to act *descensionally*, as in figure 1, the elastic tube must be fixed on nozzle A; the metal plug H in the cover is then to be removed with the square end of the key, and water poured in from above until it commences to run out from nozzle B; the latter is then to be closed by a plug, or merely by placing the finger against it, while water continues to be poured in above until the filter be full, and air have ceased to come up. The elastic tube is now to be lowered sufficiently to allow water from the filter to expel all air and fill it completely, when the sides of the free end are to be compressed firmly between the finger and thumb, while the chamber under the cover is completely filled with water, and the plug screwed in. The free end of the elastic tube is then plunged into the water in a vessel at a higher level, as in figure 1, and on removing the pressure from it, and the obstruction from nozzle B, the filtered water will flow from it in a good stream. As the water is supplied to the filter on the principle of the siphon, care must be taken that the air is completely removed from the apparatus before commencing, and that none can penetrate at any of the joints.

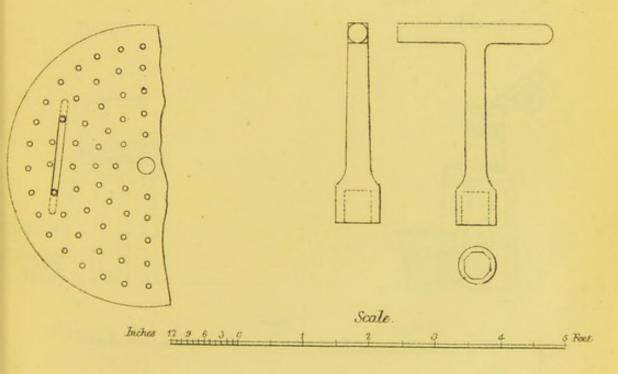
When the filter is required to act ascensionally, as in figures 2 and 3, the elastic tube must be attached to nozzle B instead of A. The metal plug is then to be removed from the cover, and the filter filled with water, and all the air expelled from both the filter and elastic tube, as in the previous case, and the free end of the latter compressed between the finger and thumb, while nozzle A is closed by a plug or otherwise. The metal plug is then to be screwed in, and the filter placed in the vessel containing the water to be filtered, but with the bottom upwards, and the elastic tube hanging down; on removing the obstruction from nozzle A, and the pressure from the elastic tube, the stream of filtered water will commence to flow.

The filter may also be used *descensionally*, as in figure 4, by removing the plug from the cover, and pouring water from a jug or other vessel into the upper chamber, a method which might be useful, if from any cause the elastic tubing was lost or unserviceable.

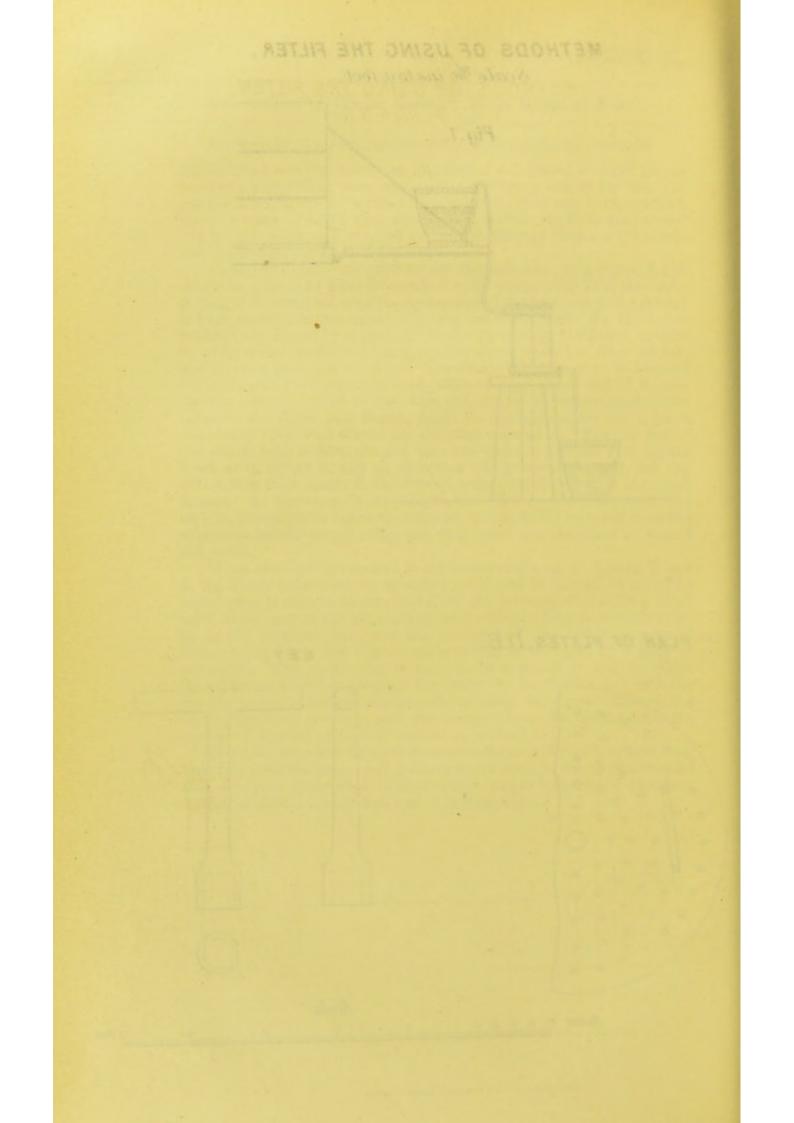


PLAN OF PLATES, D.E.

KEY.



DANCERS TLO LOW 22, BEOFORD ST COVENT GARDEN.



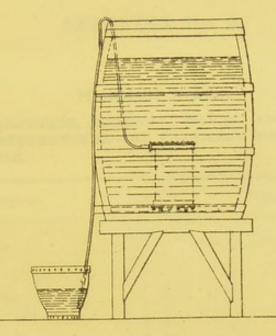
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METHODS OF USING THE FILTER .

Scale % ins to a foot.

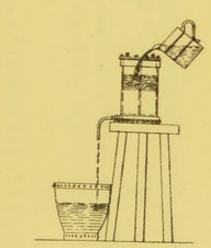
Fig.2.

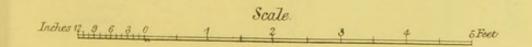


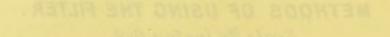














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List of Medicines, Surgical Stores, &c.

APPENDIX No. 3.

PHARMACY WAGON.

LIST OF MEDICINES, SURGICAL STORES, AND APPLIANCES AND INSTRUMENTS IN THE PHARMACY WAGON FOR FIELD HOSPITALS.

Articl	cs.			Quantity.	Wh	ere placed.	- Andrewski
ST. LAND				lbs. oz.	A Martine		N. 10
Acaciæ, Contrit:				1 0	Compartment		No. 12
Acid, Acetic				2 0		,, 1	, 12
" Carbolic				2 0	33	.,, 6	, 12
" Gallic				0 4	"	,, 2	,, 30
" Hydrochlor:				0 8	33	,, 2	" 17
" Hydrocyan: di	il:			0 2	:2	,, 6	Poisons 1
" Nitric				0 8	39	, 2	No. 18
" Phospher: dil:				0 8	33	,, 2	,, 19
" Sulphuric				0 6	33	., 2	,, 1
" Tannie				0 4	33	,, 2	,, 31
" Tart: Pulv:				1 0	33	,, 7	,, 1
Alum				2 0	,,,	,, 7	,, 13
Ammon: Carb:				1 0	13	,, 7	,, 14
Antim: Tartarat:				0 8	33	,, 2	,, 82
Aq: Distillat:				2 0	,,	,, 6	,, 13
Argent: Nitrat:				0 4	33	. ,, 2	,, 9
Atropia, Sulph: (S	avory	& Moo	re's	a marine			
Discs)				No. 250	,,	,, 6	Poisons 3
Bismuth: Subnit:				0 8		., 2	No. 33
Bromine				0 8		., 2	,, 20
Camphor				0 8	,,,	,, 7	,, 2
Capsici Pulv:				0 2		., 2	,, 10
Catechu Contrit:				0 8	33	,, 7	,, 3
Chiretta contus:				3 0	33	" 3	,, 14
Chloral Hydras				1 0		,, 7	,, 4
Chloroform (in 6 b				0 0		., 6	
Cinchon: contus:				0 0		· " 3	
Collodion				0 4	33	., 2	
Creasotum				0 4		,, 2	,, 3
Cupri Sulph:				0 0		6	
Emp: Plumbi:				0 0	33	,, 5	
, Saponis			•	0 0	"	" •	
Ergotine (Savory &	. Moor	o'a dian	· / ·	31- 05/		"	
Ext: Belladon:				0 9		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	L OLUMING
	••		•	0 1	12	"	
" Filicis, Liq:			•	0 0	33	"	
" Hyoscyam:			•	0 0	33	"	. " 1/
" Opii		••	•	0 0	33		
Ferri et Quinæ, Ci		••	•		37		0 01
" Perchlor:	••			0 0	33		0 01
", Sulph:				. 0 8	33		· · ·
Glycerin:	••	••		. 2 8	"	23	o ,, 1

LIST OF	MEDICINES.	SURGICAL	STORES.	&ccontinued.

Articles.		Quar	ntity.	W	here place	ed.		
	0.69	lbs.	oz.	STREET,				
Hydrarg: Iodid: Rub:		0	2	Compartment	D, Slide	6 Pois	sons	2
,, Oxid: Rub:		0	4	11	,,	2	No.	11
,, Perchlorid:		0	2	,		6 Poi	sons	1
" Subchlorid:		0	8	1)	,,	2	No.	12
		0	8		33	2		3'
Iodin:		0	4	,,	,,	2	22	1:
In same any fult.		1	0			7	,1	1
Tin Comenia		2	0		.,	1		1
T. f		-1	0	23		6	33	
" Arsenicalis		0	8	33	33	2	37	2
Palamatia		0	4	100 million (100 m		2	"	-
Sada Chlory		2	õ	22	"	ĩ		1
Stavahnim		õ	2	>>	33		,,	
	•• ••	0	8	"	>>		No.	
Magnesia	•• ••	7	0	33	33	3,		
" Sulphas Morph: Acet: (Savory &	Moore's			13	37	8	33	1
discs)		No.	1,000	,,	,,		oisons	
,, Hydrochlor:		0	2	,,,		2	No.	1
Ol: Anisi		0	2		"	2	**	1
(leveller)		2	0	22		1		1
T tot		12	0	53	33	5	,, 10,	. 1
Month, Pin.		0	2		33	2		
Olive		8	0			1,5	. 16.	1
Ricini		8	0	"		1,5	,, 17,	
m 11/11		2	Ő	"	1820	1		1
0 0	•• ••	0	4	33		2	33	3
Pil: Colocynth: et Hyoscya	•• ••	1	0 D	33	33	6	33	1
		1	0	"	33	6	"	i
" Hydrarg:	•• ••		0	"	23		27	i
Plumbi, Acet:	•• ••	2		**	23	7	33	
Potassa Caustica		0	4	33	32	2 7 7	33	1
Potass: Bicarb:		1	0	,,	,,	1	33	
		1	0	13	22		,,	
" Nitras		2	0	,,	,,	7	33	1
" Permanganas: crud:		14	0	3.9	.,,	3	,,	2
DUP		0	8	11	,,,	2		3
", Tartras Acida		1	0	,,,	,,,	7	22	
Potassii, Bromid:		0	8	and the second s		2	33	4
T 111		1	0	"		7	,,	
	•• ••	4	Ő	,,	"	3		1
Pulv: Cretæ Arom c Opio		0	8	"	,,	7		1
" Ipecac: comp:		1 1	8	"	33	7	"	1
" Jalap: comp:	•• ••		12	>>	22	777	33	i
Quinæ Disulph:				33	37	+ -	No.	i
Rhei: contrit			8	>>	23		NO.	i
Salicine		0	12	33	"	6	22	
Senegæ Rad:			0	13		3	23	1
Sennæ Fol:		3	0		"	3		1
Sodae Bicarb:			0	22		7	22	2
Spirit: Æther Comp:		1	0	23	22	1	22	
Nitrosi		1	0	13.	,,		33	
Ammon: Arom		1 1	0			1	37	
Chloroform:		1 1	0		,,	1	33	
" Reatificat:		0	0		,,	1	22	1
" Rectificate:		A CONTRACTOR OF		A DECK CONTRACTOR	37	6 P	oison	8
Strychniæ (Savory & Moor		0	0	"	27	3	No.	
Sulphur Sublimat:		0	8			2		-
Tinct : Acconit:			8	27		2	22	-
" Aurant:					"	2		-
" Capsici		. 0	8	"	23	-	. 22	1

Article		Quan	tity.	W	here plac	ed.				
inct: Cardam: Co: , Ca.echu				lbs. 1 2 0	oz. 0 0 8	Compartment	D, Slide	2	33 22 33	5 20 25
", Colch: Sem: ", Digitalis				01	8	22	27 22	21	12 33	26 6
", Ferri Perchlo ", Ergotæ	···			0	4	33 33	22	21	33 33	8 7
,, Hyoscyam: ,, Iodi	::			1 1 0	0 8	17 17	37 33		33 33	9 27
" Lobeliæ " Myrrhæ			**	0	8	33 33	"	2	33	28 8
" Opii " Rhei Co:	::			1	0	33 32	"	1	22	9 10
" Scillæ	::	::		1	0 0	32	13 13	1 2	99 99	11
", Valerian Ing: Cetacei	::	.:		28	8 0	33 39	" "	8	23 23	21, 22
" Hyararg For	·t			2	0	3) 1)	97 33	3 3	22 23	1
" Resinæ inci Chlor:			••	0	8 8	33	**	22	3) 32	4
" Oxyd: lingiber. contrit:	::			0		12 51	17	7	33	1

LIST OF MEDICINES, SUBGICAL STORES, &c .- continued.

Dispensing Appliances, &c. Compartment D, Slide 4, Drawer 10 No. 200 Blank labels " " 4 No. 6 2 Bolus Tiles, 10-in. ,, 9 4 12 18 23 Bottles, 4-oz. .. 22 ,, 9 4 22 12 33 33 ,, 9 " 8.oz. 4 1 " .. papers Boxes, chip .. 22 ... 9 4 2.9 2 23 , paper .. Corks, assorted. 33 9 4 ,, 11 ,, gross .. 22 .. 15 5 2 22 33 Corkserews, folding ... 33 15 5 ,, 15 4, 5 Nos. 2 & 1 5 1 ., 22 Funnel, tin, 1 pint 5 Gallipots, nests of 4 .. ,,, 22 No. 1 ., 4, 6 No. 1 Poisons 10 2 ,, Measures, glass, minim .. 2.2 4 No. 1 1 " 2.oz., " 10 " . 22 22 " 1 " 2 33 4 1 23 3.3 • • .. 4 33 1 22 pewter, ounce ... 11 •• ,, 1 22 4 1 22 tin, pint .. 11 • • •• 6 Poisons 10 22 1 Mortars and pestles, small .. • • 22 5 No. 15 Paper wrapping ... 2 22 .. 37 " 7 " 4 4 quire 1 22 22 3 1 22 22 6 Poisons 9 Scales and weights, grain, small 1 22 22 11 3 No. 2 1 17 27 27 17 17 17 large ... 22 stand for . 1 22 23 ., 2 33 3 1 11 ounce 33 ... -1 stand for Spatulas, small" 6 Poisons 10 1 ,, 11 No. 15 5 " ordinary .. " spreading .. 3 ,, 33 •• • • centre. С, 1 .. •• 27 D, Slide 3, No. 1 1 Stopper, loosener 23 ••

* Stems for these on top of Slide.

LIST OF MEDICINES, SURGICAL STORES, &c .- continued.

Dressing Materials, &c.

Articles.	Quantity.	Whe	re pl	aced.			
Bandages, calico, 11-in. by 4 yds. No.	200	Compartment	А,	draw	er	No	. 1
$1, 1, 2\frac{1}{2}, 7, 7$	288	,,,					2
	240						3
", flannel 4 ", 8 ", "	50	57					
Calico yds.	50	22	E				1
Carded cotton Ibs.	and the second se	53				,,	1
Flannel yds.		,,				33	1
fron wire, plated oz.		33	D,	Slide	3		12
Leather, skins of No.		;;		,,,	4	,,	16
Ligature, cat-gut, carbolized . oz.		33		.,,	3	,,	13
Ligature, silk ,,	8	,,		22	8	23	12
Linen yds.))	E			33	1
Lint 1bs.		33	В				
" Marine "	86	;;	-				
Diled silk yds.		"	D		4		14
Pins 0z.	. 8	33			3	22	13
Plaster, adhesive, Leslies', tins :	1 200						
12 1-inch tapes, each 12 yards. No.	6] One case of ea					
6 1-inch tapes, each 10 yards . "	12	Compartme	nt D	, ,,	5	,,,	4
1 6-inch tape ,, 14 ,, . ,,	6	12					
Plaster, isinglass yds.	20	Remainder					
" soap "	24	Compartme	nt E			,,,	
Sponges, surgeons' No.	. 36))	D	,,	4	23	11
Tape, broad pieces	6	33		,,	5	,,,	100
Fow, surgeons' 1bs.			B				
Waterproof cloth, German yds.	. 80		E			33	1
Wax for ligatures oz.		11	D		3		12

Surgical Apparatus and Appliances.

Air cushions No.	6	Compartment D, slide 4. No. 16
Arm cushions, Strohmeyer's ,,	6	" C, centre
Arm slings	6	
Brackets, iron, galvanized, and screws	6	
Fracture apparatus, assorted, viz .:		
Thigh-long splint, 2 scored ditto		The second s
pads, &c sets	6	The long splints, those with foot
Thigh-long splint, with foot pieces		pieces and accompanying apparatus
and other articles	2	and Smithson's splints in compart-
Thigh-Smithson's anterior splint	2	ment G; remainder in C, left side
Knee joint, flannel for, plaster of		
Paris	4	Compartment C, centre.
Leg and ankle scored splints, pads,		
&c., 17-inch sets	3	" left side
Leg and ankle scored splints, pads,		
&c., 19-inch sets	3	
iron, with pads, right	3	11 11
1.0	3	
", flannel, for plaster of	1	
	6	centre
Paris	3	laft side
" McNalty's splints		,, ICIUSIUS

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List of Medicines, Surgical Stores, &c.

LIST OF MEDICINES, SURGICAL STORES, &c .- continued.

Articles.	Quantity.	W	here placed.
	1	1	
Surgical Apparatus—continued. Arm, scored splints, pads, &c., 9 and 11-inch	8	Comparimen	t C, right side
Arm, scored splints, pads, &c., 10 and 12-inch sets	8	,,	
Elbow, winged, hinged splints No.	3		**
Fore-arm, scored splints, pads, &c.,			
13-inch sets	3	13	17
Fore-arm, scored splints, pads, &c., 14-inch	8		33
Fore-arm, scored splints, pads, &c.,	3		
15-inch sets		33	"
Wrist and hand, Palmar splints, No.		33	"
Gutta-percha, 18 inch by 4 inch,	12	The second second	centre
by 3-inch pieces	Contraction of the second s	"	D, slide 4 No. 16
India-rubber drainage tubing yds.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	" 4 " 11
Irrigators and tubing, nest of 3 set	1	,,	" 5 Nos. 5 to 9
Plaster of Paris 1bs.	30	,,	,,
Pullies and lines for counter exten- sion No.	6	IJ	C, centre
Steel trusses, reversible "	4	33	D " 4 No. 15
Suspensory bandages "	6	22	,, 4 ,, 15
Water glass	. 2		" 6 " 15

Sundry Articles.

Pardana vallav			No.	15	Compartme	nt D, slide 3	
Bandage roller	••	•••	110.	-1		spindle in	,, 4
Basins, zinc, 11-inch				2	Compartmen	nt D, slide 4	,, 5
Camel-hair brushes				4	11	,, 3	,, 12
Cover for dispensing	r table a						
				1		H	,, 3
wagon		•••	• • •	î	and the second se	D . 4	,, 12
Hone		•••		2	33		,, 10
Ink bottles		•••			,,	··· · · ·	
" eraser and india	-rubber	• •		1	- 22	33 -	,, 10
				2	33	,, 4	,, 10
Lamps, { hand, sma hospital, o	11, FH			2	22	,, 3	,, 3
Lamps, hospital, o	perating			1	13	H ,, 2	
Matches, wax, box	containin	1g		1,000		D ,, 3	,, 1
Inaccinco, mar, ova	6.in	-9		4		,, 3	., 12
Needles { packing sewing,	women			25		D " 3	., 12
Cil salus	women	•		5*		., 5.	,, 14
Oil, colza			pines	8*	22 -	H " 1	,,
" mineral (kerosi		ram	m)	2	33	D	10
Pencils, blacklead		• • •	••		33		10
Pens, steel		••		2			,, 10
Penholders				4	22	., 4	,, 10
Pins, tent, small				- 10	33	H	,,, 3
Ruler, 12-inch, ebo				1		D. " 4	, 7
Scissors, counter			pairs	2			. ,, 15
Stethoscopes, vulcar			No.	2		,, 4	,, 16
Syringes, enema, p				1		C. centre.	× 11
byringes, enema, p	alang			6		D, slide 4	,, 13
" urethra, g	grass	•••		12			10
	pewter	••		14	23	G " "	,, 10
Table, operating, F	H equip	men	1t,	1	"	u	
					and the second s	No. of Concession, Name	

* Commissariat supply for 12 field hospitals, 120 pints of colza, and 192 pints of mineral oil.

Articles.	Quantity	Wh	ere placed.	
Test paper, litmus books ", ", turmeric " Test tubes, nest of 4 " Thermometer bath " $\int packing, small$ lb. Thread sewing, whited brown, oz. Urinometer apparatus " Wick, for lamps, $\frac{2}{5}$ -inch, flat. yds ", $\frac{1}{5}$ -inch, flat for mineral oil yds.	24 12 6 1 1 4 1 2* 1*	Compartment "" "" "" "" ""	D, Slide 3 " 3 " 4 D " 5 E " 1 D " 5 	No. 11 " 11 " 11 " 9 " 2 " 12 " 12 " 4

* Commissariat supply, for 12 hospitals 48 and 24 yards respectively.

Amputating case	1	Compartment	F, drawer	No.	2
spare knives case	1		,;;	13	2
Bandage, for bloodless operations	1	"	35	<u>99</u>	1
Catheters, case of	1	33	33	**	1
	3	,,	53	33	1
	2	33	33	,,	1
	1	11	,,,	.11	1
Dressing cases, for Orderlies	5	11	,,,	17	1
Eve instruments set	1	33	33	33	1
General case of instruments	1	12	37	"	2
	1	37	j1	33	2
	3	33	19	,,,	1
	1	37		33	1
Pocket case of instruments No.	1	23	>>	23	1
	1			37	1
	1		,,	55	2
	1	33		33	1
Transfusion apparatus (Roussel's)	7		Е, "	37	1
Catheters, case of Cauterising irons Chloroform inhaler Cupping instruments Dressing cases, for Orderlies Eye instruments	1 3 2 1 5 1 1 3 1 1 1 7	33 39 29 39 39 39 39 39 39 39 39 39 39 39 39 39	32 33 33 33 33 33 33 33 33 33 33 33 33 3	33 33 33 33 33 33 33 33 33 33	$1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 2 \\ 2 \\ 1 \\ 1$

Surgical Instruments.

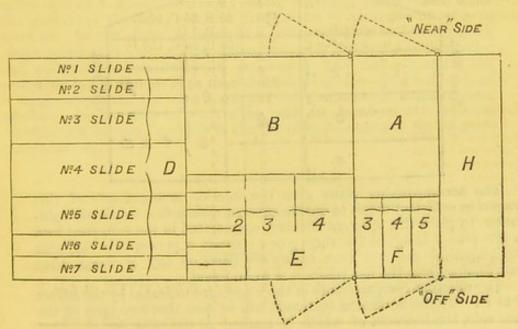
There is space in the wagon for the undermentioned Medical Comforts, and the tins, &c., necessary to carry them are placed in it; but, to save weight, it is not intended that these should be filled unless under very urgent circumstances.

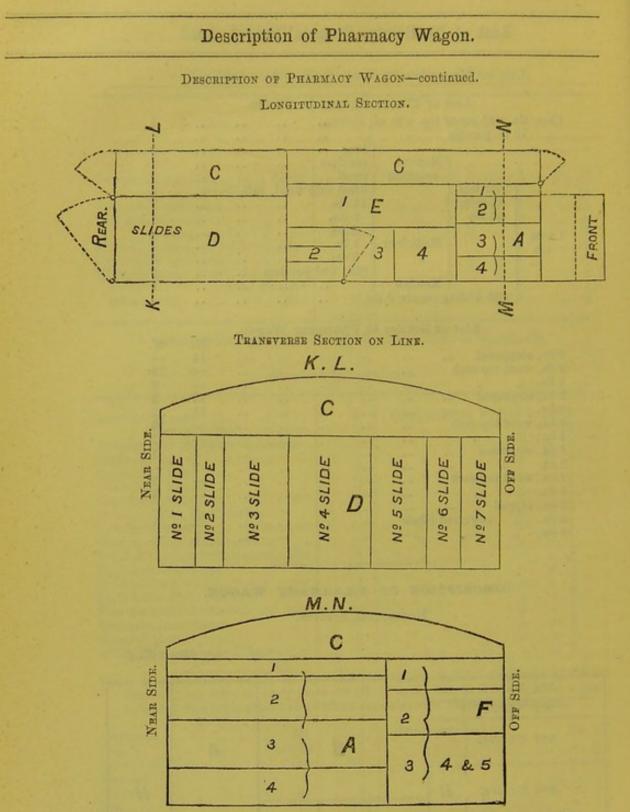
Arrowroot				1bs.	12	Compartment	F,		No. 4
Brandy			b	ottles	18	**	Е		" 2
Essence of m	leat			lbs.	48	33			ii 4
Mustard				27	- 3	97 °			" A
Pepper			••	33	3	"	T		11 4 11 8
Rice			••	22	20 14		Ē		, 4
Salt			•••	37	20	33	F		, 5
Sugar				"	11		F		,, 4
Tea, compres	sed	collon		33	1	33 33	E		,, 3
Kettle, tin, t ,, tin, c	ea, 2- cookii	ng, nest	of 4		î	37	Е	an share	,, 3

LIST OF MEDICINES, SURGICAL STORES, &c .- continued. List of Tins in Pharmacy Wagon. 5 Cans, tin, with screw top, 6 lb. oil • • 1 " 10 lb. paraffin • • long ... medium 2 • • 2 (Medical •• • • • • 2 small .. comforts 1 lined with wood, salt with lids • • 3 15 lbs. •• •• •• opening 6 7 lbs. 2 lbs. • • at top 9 • • 2 Cases, 1 lb. Medicines • • •• • • tin 3 8 ozs. 8 pills and powders • • .. 1 Matches • • .. •• ••• 5 with sliding covers, 8 lbs. List of Bottles in Pharmacy Wagon. N. W. 14 ----2 lb., stoppered 10 ----2 lb., wood top-cork • • • • • • 9 ____ .. 1 lb., """ 1 lb., stoppered ... • • • • • • 13 2 • • • • • • ... 3 11 8 oz., " 8 oz., wood top-cork • • .. • • •• • • 10 •• • • • • • • ... 71 4 oz., ", ", ", ", 4 oz., stoppered" • • • • • • • • ... 52 62 • • • • • • ... ••• 24 2 oz., ", 2 oz., wood top-cork ••• •• ... • • •• •• ••• • • 1 oz., ,, 12 oz., capped • • ... • • • • •• 33 + • • • • 6 oz., " engraved labels • • • • 3 3 oz., " • • •• .. •• 33 23

DESCRIPTION OF PHARMACY WAGON.

HORIZONTAL SECTION.





The accompanying plans give the interior arrangements of this wagon in sufficient detail to enable anyone, with a few words of explanation, to place the different articles enumerated in the subjoined lists in the places assigned for them; or to permit a person who has seen the wagon for the first time to lay his hand on any of these, after ascertaining from the list where it is to be found.

The different compartments in the wagon are indicated by the letters A to H. By the horizontal section it will be seen that two open on the near side, the foremost of which is marked A, the next one B. That

1 Drawa

Description of Pharmacy Wagon.

DESCRIPTION OF PHARMACY WAGON-continued.

marked D opens to the rear, and by the longitudinal section another marked C is shown over it; the two opening on the off side are marked respectively E and F; and the longitudinal section shows another marked G, over A, B, E, and F, but opening from the front over the driver's seat; finally, the compartment under the driving seat is lettered H.

The various subdivisions in these compartments are numbered, commencing with the uppermost, and proceeding from left to right when there are more than one on the same level. Thus Compartment A contains four drawers for bandages (see transverse section MN), which are numbered 1 to 4 from above downwards.

Compartments B and C have no subdivision. Compartments D contains seven slides numbered 1 to 7, of which further details will be given below. Compartment E has four subdivisions, as shown in the longitudinal section; No. 1 being for waterproof cloth and other bulky articles. No. 2 being a small locker for 18 bottles of brandy; No. 3 for cooking utensils; and No. 4 for essence of meat and other medical comforts. Compartment F (see transverse section MN) has five subdivisions, of these Nos. 1 and 2 are drawers for surgical instruments, and Nos. 3, 4, and 5 below are for portions of medical comforts. Compartment G receives the operating table, and the long splints for fractures of the thigh, which cannot be placed elsewhere. Compartment H has two numbered subdivisions; No. 1 for a can of mineral oil, and No. 2 for the operating lamp, while the remainder of the space receives the cover for the dispensing place at the rear, and the horse blankets, brushes, &c. required by the driver.

&c., required by the driver. The door of Compartment D is hinged below, and when opened falls back into the horizontal position, and forms a table for the dispenser to work at. The slides Nos. 1 to 7 in this compartment draw out over this table. Nos. 1 to 4 face to the right, and Nos. 5 to 7 to the left. Slides 1, 2, 6, and 7 contain most of the medicines required in dispensing, while the apparatus employed by the compounder is nearly all placed in the ends of 3, 4, and 5, directly facing him, and within reach, while the portion of the table opposite these slides is available for him to work at. In the slides, as elsewhere, every subdivision is numbered, commencing at the left of the upper row as it faces the compounder, and embracing those below in succession. In slides 3 and 4 the enumeration commences with the subdivisions in the ends, but in 5, as it commences from the other end, the outer subdivision is the highest number. An elevation of each slide, with the numbers of each subdivision, will be found under D in the list of the contents of the separate compartments.

Contents of Compartments.

COMPARTMENT A.

No. 1.	Bandages, calico,	14 in.	wide.	4 3	ards long	 No.	200	
No. 2.	Ditto	21	,,	7		 33	288	
No. 3.	Ditto	3		8	33	 33	240	
No. 4.	Bandages, flannel	,4	11	8		 ,,	50	
(429)							M	

Description of Pharmacy Wagon.

DESCRIPTION OF PHARMACY WAGON-continued.

These bandages to be placed in the drawers on their ends, those in Nos. 2 and 3 in two tiers. As the space occupied will vary somewhat according to the thickness of the material the bandages are made of, should the drawers not contain the above numbers, those for which there is not room in Compartment A can be placed in one of the other compartments.

COMPARTMENT B.

Second Cupboard.

Lint, fine		 	 		1bs. 70
Marine lint, 1 lb.	tins	 	 		No. 36
Surgeons' tow		 	 	••	lbs. 40

The marine lint, in 1 lb. tins, to be placed along the partition between A and B; six tins, standing vertically, are to be placed here with a similar row close to this one, and there being room vertically for two more tins, the full quantity can be disposed of. The tow, in bundles of $\frac{1}{4}$ lb. rolls, is to be placed with the ends of the rolls against the partition between B and D, so as to fill up the space from the side of the wagon to the central position; and the lint, in 1 lb. rolls, is to occupy the space between the marine lint and the tow, the ends of the rolls being against the central partition, with a similar row in front of it. Each article may then be got at from the door of the compartment, without moving any of the others.

COMPARTMENT C.

Under roof, rear of Wagon.

Arm cushions, Strohmeyer's	No. 6
Arm slings	,, 6
Brackets, iron, galvanized, and screws	
Fracture apparatus, assorted-viz. :-*	
Thigh, long splint, 2-scored ditto, pads, &c	Sets 6
", with foot-piece and other articles men-	10 m m
	,, 2
tioned	No. 4
Knee-joint, flannel, for plaster of Paris	
Leg and ankle, scored splints, pads, &c., 17-inch	Sets 3
""""""""""""""""""""""""""""""""""""""	., 3
" iron, with pads, right	,, 3
"" "Ieft	,, 3
" "flannel" for plaster of Paris	No. 6
MaNalty's colint	,, 3
Arm scored splints nads &c. 9 and 11-inch	Sets 8
	,, 8
	No. 3
Elbow, winged, hinged splints	Sets 3
Forearm, scored splints, pads, &c., 13-inch	
Wrist and hand—Palmar splints	,, 3
	. 3
Wrist and hand-Palmar splints	No. 8
Gutta-percha, 18-in. by 4-in. by $\frac{3}{16}$ Pie	eces 12
Pullies and lines for counter-extension	No. 6
Futiles and miles for counter careensite	,, 1
Shabuta, Bhiowara B	,, 1
Syringe, enema, pewter	

* See note on fracture apparatus at page 170.

Description of Pharmacy Wagon.

DESCRIPTION OF PHARMACY WAGON-continued.

The long splints, those with foot pieces and accompanying apparatus, and Smithson's splints, in Compartment G.

In packing this compartment the apparatus for fractures of the thigh should be placed at the left, with that for the leg alongside of it, each occupying the full length from the end to the door, so that sets of either can be got at as required without disturbing the others. Similarly, apparatus for the arm should be placed on the right of the compartment, extending its full length, with those for the fore-arm alongside. In the centre between them the arm slings to be placed at the end, with the Strohmeyer's cushions close to them, and the other smaller articles towards the door, as may be found convenient.

		-	-			-							COURSE CARDING COURSES AND ADDRESS
													No. in Slide
				5	SLID	e N	0. 1.	1					a la
	,	2	5	4	5	6	7	8 9	10	11		-	
			-							102		Name of	
	12	13		4	15	16	17	18	19	20			
6 3 35 6 6	12	10	· ['	-	15	10	1.	10					alon Martin
		-		-		-			-				CONCE IN
Top Division	-Ele	ever	11-1	lb. s	topr	oere	d bot	tles.				199.1	Participant (
Spirit Æt												1 lb.	1
	,,	nit											
												1 "	2
" An	nmon	1: 4	ron	n :	:		::	:			::	1 ,,	23
" An " Ch	amon lorof	i: A	iron	n :		•		100				1 ,	234
" An " Ch Tinct : Ca	amon lorofo ardar	orm n :	ron Co	n : •	•	:		•	•			$ \begin{array}{c} 1 \\ 1 \\ 1 \\ 1 \\ \end{array} $	2 3 4 5
", An ", Ch Tinct: Ca ", Fe	amon lorofo ardan erri I	orm m : Perc	Co :	n : •	;		.:	;				$ \begin{array}{c} 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 , \end{array} $	6
" Am " Ch Tinct: Ca " Fe " H	amon lorofo ardan erri I iyose	orm m : Perc	Co :	n : •				• • •				1 " 1 " 1 " 1 " 1 "	6
" An " Ch Tinet: Ca " Fe " H " H	amon lorofo ardan erri I yoscy pii	orm n : Perc yam	Co : hlor	n :				•••••		.:		1 " 1 " 1 " 1 " 1 " 1 "	6 7 8
" An " Ch Tinct: Ca " Fe " H " O " R	amon lorofo ardan erri I yosc pii hei	n : A orm n : Perc yam	Co : hlor	n : ; ; ;								1 " 1 " 1 " 1 " 1 " 1 " 1 " 1 "	6 7 8 9
" An " Ch Tinet: C: " Fe " H " O " R " So	ardar ardar erri I yosc pii hei cillæ	n : A orm n : Perc yam	Co : hloi	n : : :								1 " 1 " 1 " 1 " 1 " 1 " 1 " 1 "	6 7 8 9 10
" An " Ch Tinet : Ci " Fe " H " O " R " So	amon lorofo ardan erri I yosc pii hei	n : A orm n : Perc yam	Co : chloi	n :								1 " 1 " 1 " 1 " 1 " 1 " 1 "	6 7 8 9
" An " Ch Tinet : Ci " Fe " H " O " R " R " So " So	amon lorofa ardar erri I yosc pii hei cillæ. ennæ	n : A orm m : Perc yam	Co : chlor	n :								1 " 1 " 1 " 1 " 1 " 1 " 1 " 1 "	6 7 8 9 10
" An " Ch Tinct : Ci " Fe " H " O " R " So " So Bottom Divis	amon lorofa ardan erri I yosc pii hei cillæ. ennæ	-N	Co : chlor	n :		oppe	 	ottles				1 " 1 " 1 " 1 " 1 " 1 " 1 " 1 "	6 7 8 9 10 11
" An " Ch Tinct : Ci " Fe " H " O " R " So " So Bottom Divis Acid : A	amon lorofa ardan erri I yosc pii hei cillæ. ennæ <i>ion</i> cetic	i: A orm Perc yam	Co : chlor	n : 2-1b). stö	oppe	 ered b	ottles				1 " 1 " 1 " 1 " 1 " 1 " 1 " 1 "	6 7 8 9 10 11 12
" An " Ch Tinct : Ci " Fe " H " O " R " R " So " So Bottom Divis Acid : A Lin : Say	amon lorofa ardar erri I yosc pii hei cillæ. ennæ con cetic ponis	orm Perc yam	Co : chlor	n : 2-1b	. stč	oppe	 ered b	ottles				1 " 1 " 1 " 1 " 1 " 1 " 1 " 1 "	6 7 8 9 10 11 11 12 13
" An " Ch Tinct: Ci " Fe " H " O " R " So " So Bottom Divis Acid : A Lin : Sap Liq : Sod	amon lorofa ardan erri I lyosc pii hei cillæ. ennæ ion cetic ponis læ C	-N.	Aron Co: hlon L:	n : 	. sto		 ered b	ottles				1 " 1 " 1 " 1 " 1 " 1 " 1 " 1 "	$ \begin{array}{r} 6 \\ 7 \\ 8 \\ 9 \\ 10 \\ 11 \\ 12 \\ 13 \\ 14 \\ \end{array} $
" An " Ch Tinct: Ci " Fe " H " H " Oj " R " So " So Bottom Divis Acid : A Lin : Sap Liq : Sod Ol : Cop	amon lorofa ardan erri I yosc pii hei cillæ. ennæ ion cetic ponis læ Cl aibæ	-N.	Aron Co: hlon :: .	n : 	, stò		 ered b	ottles				1 " 1 " 1 " 1 " 1 " 1 " 1 " 1 "	6 7 8 9 10 11 11 12 13
" An " Ch Tinct: Ci " Fe " H " O " N " N " So " So Bottom Divis Acid : A Lin : Sap Liq : Sod Ol : Copa Ol : Oliv	amon lorofa ardan erri I yosc pii hei cillæ. cennæ cetic ponis læ Cl aibæ	i: A orm Percyam 	Aron Co: hlon ::	n :). stč		ered b	ottles				1 " 1 " 1 " 1 " 1 " 1 " 1 " 1 "	$ \begin{array}{r} 6 \\ 7 \\ 8 \\ 9 \\ 10 \\ 11 \\ 12 \\ 13 \\ 14 \\ 15 \\ 16 \\ \end{array} $
" An " Ch Tinct: Ci " Fe " H " O " R " So " So Bottom Divis Acid : A Lin : Sap Liq : Sod Ol : Copa Ol : Oliv Ol : Rici	amon lorofa ardar erri I yosc pii 	-Ni hlor	Aron Co hlor : .	n :). stč		ered b	ottles				1 " 1 " 1 " 1 " 1 " 1 " 1 " 1 "	$ \begin{array}{c} 6 \\ 7 \\ 8 \\ 9 \\ 10 \\ 11 \\ 12 \\ 13 \\ 14 \\ 15 \\ 16 \\ 17 \\ \end{array} $
" An " Ch Tinct: Ci " Fe " H " O " N " N " So " So Bottom Divis Acid : A Lin : Sap Liq : Sod Ol : Copa Ol : Oliv	amon lorofa ardar erri I yosc pii hei cillæ. ennæ cetic ponis læ Cl aibæ ni ebint	-N.	Aron Co: hlon	n :). stč		ered b	ottles				1 " 1 " 1 " 1 " 1 " 1 " 1 " 1 "	$ \begin{array}{r} 6 \\ 7 \\ 8 \\ 9 \\ 10 \\ 11 \\ 12 \\ 13 \\ 14 \\ 15 \\ 16 \\ \end{array} $

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M 2

Description of Pharmacy Wagon. DESCRIPTION OF PHARMACY WAGON-continued. No. in Slide. SLIDE No. 2. 9 10 11 12 13 14 15 16 2 3 4 5 6 7 8 19 20 21 22 23 24 25 26 27 28 29 17 18 32 33 34 35 35 37 38 39 40 41 42 30 31 Top Division .- Eight 4-oz. stoppered bottles. 6 oz. Acid Sulph : pur : 1 • • • • 4 .. 2 Collodion 4 ,, •• •• 3 Creasote .. •• 4 , .. Ext : Filicis Liq : ... •• •• 4 4 . Liq : Epispasticus • • ... Б 2 " Ol : Anisi .. " Menth : Pip ... •• .. 6 2 " .. 7 4 , 8 Tinct : Ergotse •• Eight 4-oz. wide-mouth bottles. 4 oz. 9 Argent : Nit : •• 2 " Capsici Pulv : ... Hyd : Oxid : Rub : .. 10 • • .. 4 ,, •• 11 ... • • 8 " Subchlor: .. •• • • 12 Todum 4 ,, 13 •• 2 Morph : Hydrochlor : •• 33 14 4 ,, ... • • 15 Potass : Caustica ... •• Centre Division .- 13 8-oz. stoppered bottles. 17 8 oz. Acid, Hydrochlor : pur : .. •• 18 8 " ... Nitric pur : •• ... 19 8 Phosph : dil : .. • • •• 8 " 20 ... Bromine .. • • 8 " 21 .. Liq. Arsenicalis •• ... 22 8 " ... Tinct : Aconiti 23 8 " ... • • •• Aurant : 37 24 8 ** Capsici 8 " 25 22 .. Colch : Sem :.. ••• 8 ,, ,, 26 ... •• ... Digitalis 8 " ,, 27 Lobelize •• 28 23 8 33 .. •• Myrrhe 29 33 8 ... ,, Valerian : •• 22 Bottom Division .- 13 8-oz. wide-mouth bottles. 30 4 oz. ... Acid Gallic 4 , 31 " Tannic ... •• • • •• • • • • ... 32 8 " •• •• Antim : Tart : 8 " 33 • • •• Bismuth : Nit : • • •• 34 8 ,, Ferri et Quiniæ Cit : • • •• •• 35 8 " •• • • Ferri Perchlor: 8 " 36 ... Ferri Sulph : •• • • 8 " 37 •• Hydrarg : c. Creta : •• 38 4 , Opii Pulv : •• 8 .. 39 Potass : Permangan :.. 40 8 " ... Bromid: • • 41 8 Zinci Chlorid : 8 42 ., " Oxid •• ... • •

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Description of Pharmacy Wagon.

DESCRIPTION OF PHARMACY WAGON-continued.

								No. in Slide.
SLI	de No	. 3.						
[[]]	5	6 7	8	9 10	11	12 1.	3	
2 4	14	15	16	17	18	19		
3	-	20		21	4	22		
Bandage roller*	for dit	 to in					No. 1	1
Stopper loosener			· · ·				" 1 " 1	1
Match box							" 1 " 1	2
							" 1	2
(stands for d			of sli	de) †				
						•••	,, 2	5 4
Pill machine			•••			•••	" 1	± 5
Emp: Plumbi	••	••				•••	2 lb.	6
,, Saponis		•••	•••	• •			$\frac{2}{2}$,	7
Ung: Hydrarg:	••	•••		••			0	8
" Resinæ		••	• •	•		•••	0	9
Magnesia	••	••		• •			0 "	10
Sulphur		in .	e ···		No	190	2 .,	11
Test tubes and papers (nes	sts of 4	, NO.		h pla	ted a	vire		r 12
Needles, sewing and pack wax, camel hair brushes	ning, i	and	carbo	lized 1	igatu	TE		1 13
		anu	carbo	incu i	Buen		3 lb.	14
Chiretta Cort : Cinchon:							8 "	15
Magnes: Sulph :							7 "	16
Puly : Creta Arom :							4 ,,	17
Senegæ Rad :							3 ,,	18
Sennæ, Fol:							3 "	19
Potass : Permangan:				100			14 "	20
Ung : Cetacei							28 "	21 & 22
		1000						

SLIDE No. 4.

			7			0		
1	6		8		5			
2 3 4		10	1	12	13	14	15	
5	-		11			16		

* When required to roll a bandage, the trame in No. 1 is to have one end of the horizontal piece placed in the opening at the left-hand corner of the iron ledge round the dispensing table, and the peg attached to the upright at the other end is to be passed through the hole in the l.tter into that in the table, which will fix it in position; the handle is then to be taken from No. 4. and the spindle inserted in the holes in the upright. To roll a bandage, pass the end under the brass wire extending between the uprights, bring it over the spindle, and make one or two turns to secure it, the operator moving the handle away from him at the upper part of the circle, and so on. When the end is secured, the remainder can be wound up quickly and evenly, with a little practice, and when this is done the spindle is withdrawn and the bandage is ready for use.
I In No. 2 there are the teds for two stands for scales, the uprights for them are in leather slips on top of slide, and these merely require to be inserted in the beds when required for use.

DESCRIPTION OF PHARMACY WAGON-continued.

						No. in Slide.
Through of Stide						
Front of Slide— Glass measures, minim, 2-	oz and	1 10-07			No. 3	1
Metal measure, pint					, 1	. 1
Pewter ounce measure					" 1	2
Gallipots, in sorts			100		nest 1	2
Empty tins for pills, &c.					No. 8	3 & 4
Pewter basins, 11-inch					, 2	5
Slabs, 10-inch			1		" 2	6
Spaces left for books and						7 & 8
Ruler, 12-in					No. 1	7
Bath Thermometer					,, 1	9
Bottles, 4-oz					, 19	Drawer 9
0					, 12	,, 9
Paper pill boxes, papers					,, 2	,, 9
(1) in				100	" 1	., 9
Corks, assorted					gross 11	,, 9
Inkstands			1		No. 2	" 10
Inkpowders					packets 2	10
Steel pens					boxes 2	,, 10
Penholders					No. 4	,, 10
Blacklead pencils					, 2	,, 10
701 1 1 1 1					, 200	,, 10
Ink eraser and india-rubl	her				, 1	, 10
× · · · · · · · · · · · · · · · · · · ·					set 1	, 11
Irrigators, set of 3					No. 36	, 11
Sponges, in bag	••		10.00			, 12
Hone, in mahogany						, 13
Pewter syringes, male	**				No. 6	Drawer 13
Glass syringes, in tin cas					yds. 6	, 14
Oiled silk	•••				No. 4	" 15
Trusses, reversible	••			Sec. 1	, 6	15
Suspensory bandages	••					18
Skins of leather	••				yds. 18	10
I. R. tubing	••				No. 2	10 10
Stethoscopes, vulcanite					0	18
Air cushions					,, 0	,, 10

The small tins in Nos. 3 and 4 are for pills or powders, ready for administration, the components of which the medical officer can vary from time to time, to meet the forms of disease then prevailing.

1	2 3		4		1	-		1	
5	6	7	8	9		-	15		
10	11	12	/3	14-					

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Description of Pharmacy Wagon.

DESCRIPTION OF PHARMACY WAGON-CO	ontinue	a.
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					No. in Slide
Six tins, containing plaster, viz :				- 0	-
Emp: Cerat: Saponis			yd	20	Å
Tethmonollo	10 1000	· 19 v	ords eac	, 20	4 4
" Adhesive, Leslie's 1-inch tapes,	6 "	10			
, , , , , , , , , , , , , , , , , ,	• 11	14			4
Lamp wick, colza			yds		4
paraffin			,,		5 to 9
Five tins of Plaster of Paris			•• 1De	s. 30	0 00 0
Five large tins containing:			1b	8. 12	10 & 11
Two Ol: Lini				, 6	12
" Olivæ " Ricini				, 6	13
,, Ricini Colza oll			pir	nts 5	14
ront of Slide-				T. 2	15
Corkscrews				No. 2 3	15 15
Palette knives		•••		" 2	15
Counter seissors	••			" 1	15
Tin funnel				" 2	15
Compo: mortars and pestles					
SLIDE No. 6.					
					Second Second
POISONS					a weeks to be
1234123456	78	9			a seal has not
					City (Second
5678	11				a sa ta inga inga
10	10	17			11.0000
9 12 13 14	15 16	11			and the second
10 11					A CONTRACT
				oz. 2	1
(Acid hydrocyan : dil:				,, 2	
Hydrarg : iodid : rub : Atropine, Savory & I	Moore's	Hypo	dermic	discs	
			191	0. 200	
Ergotine, Savory & I	foore's	Нуро	dermic	discs	4
			N	0. 200	-
Hydrarg : perchlorid :				oz. 2	
Poison Liquor strychniæ Subdivision Morphiæ acet: Savor	. & N	foore's	Hypod	lermie	C
Subdivision Morphiæ acet: Savor discs	y w		No.	1,000	7
Strychnia, Savory & I	Moore's	Нуро	dermic	disc	8
a second and a second se			11	0. 200	
Grain scales and weight	s	••		set I	-
Compo : mortar and pe				INO	-
Minim measure Knife				n doo	
(Amie			110		Contraction of
Open part.					3. 2. 4
				-	. 1
Vacant				lbs.	6 2 to 7
Chloroform }	••				
Liq: Ammon: Fort:					
Tinct : Iodi				"	1 9

DESCRIPTION OF PHARMACY WAGON-continued.

							No. in Slide
Three tins, containing	ng—						
Ext: Belladon:	••					•• oz. 8	10
" Hyoscyam :	••					" 8	10
" Opii			••		••	,, 8	10
Two tins, containing		-					
Pil: Coloc: et H ,, Hydrarg						lb. 1	11
Acid Carbol ci			••		••	,, 1	11 12
Aqua Distill :	•••					2	
Clineseller		••	••	••	••	0 11 2 2	13
Water stars			••		••	2 lb. 8 oz. 1b. 2	14
Cupri Sulph :		•••				1b. 2	16
Salicin:			•	2.	••	02. 12	17
	•••				••	05. 14	
		SLIDE					
			No. 1.))			10
op Division-Eleven		bottles	:				
Acid Tartaric Puly	Y:					lb. 1	1
Camphor						oz. 8	2
Catechu Pulv: .						,, 8	3
Chloral Hydrat						lb. 1	4
Potass: Bicarb: P	ulv:					"1	5
" Chlorat						"1	6
" Tart: Aci	d					"1	7
" Iodid						"1	8
Pulv: Ipecac: Co:						oz. 8	9
Rhei Pulv:	••					"8	10
Zingiber Pulv:						"8	11
ottom Division-Nin	e 2-lb	. bottle	s.				1
Acaciae Pulv:						1 lb.	12
Alum Puly:						2 "	13
Ammon: Carbon:						1 "	14
Ipecac: Pulv :						1 "	15
Plumbi Acet :						2 "	16
Potass: Nitrat: Pul	lv:					2 "	17
Pulv: Jalapæ Co:						1 lb. 8 oz.	18
Quiniæ Sulph:						12 ,,	19
Sodæ Bicarbon:						2 lb.	20
	C		MENT E.				
	00	mrast	MENT L.				
Calico	••					50 yds.	1
Carded cotton			••			6 lbs.	1
Flannel				••		20 yds.	1
Linen sheeting						30 "	1
Plaster, adhesive,			contain	ung:-	•	N. F.	-
1-inch tapes, 12		seach				No. 5	1
1 ,, 10		,			••	"11	1
6 ,, 14		;				,, 5	1
Plaster, soap cerat				8 yard	s each		1
Transfusion appar			8)				1
Urinometer appar						·· • • • • • • • • • • • • • • • • • •	1
Waterproof cloth,		an			••	30 yds.	
Bottles for wine						No. 18	2
Kettle, tin, tea. 2	gallon					" 1	8
Saucepans, cookin	g, nes	t of 4					8
Large tin, wood li	ned, f	or salt				14 lbs.	4
				1000		3 "	4
Tin for pepper				and the second s			
Tin for pepper ,, mustard						3 "	4

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Description of Pharmacy Wagon.

DESCRIPTION OF PHARMACY WAGON-continued.

The roll of waterproof cloth to be placed in No. 1 against the central partition, the calico over this, the flannel and linen outermost against the side; the carded cotton will then be placed in the back between the linen and calico, and the vacant space towards the door of the compartment will receive the plaster tins for which there is not room in Slide 5, Compartment D.

COMPARTMENT F.

Two DRAWERS OF INSTRUMENTS.

No. 1. 7	op.—				
	Bandage for bloodless operations				No. 1
	Catheters, case of				,, 1
	Cauterizing irons				,, 3
	Chloroform inhaler				., 2
	Cupping instruments				Sets 1
	Dressing cases for Orderlies				No. 5
	Eye instruments		••		Set 1
	Hypodermic syringes	••		••	No. 3
	Ophthalmoscope and laryngoscop	e			,, 1
	Pocket case of instruments			••	, 1
	Post-mortem instruments	••			Case 1
	Stomach pump	••			No. 1
No. 2	- The second of the second second				
	Amputating case				No. 1
	" spare knive	es			Case 1
	General case of instruments				No. 1
	Gypsum bandage instruments				Case 1
	Resection instruments			•••	,, 1

DIVISION UNDER DRAWERS.

Sugar in ti	n box						B. No.	
Rice	33		•••	••			, ,,	
Tea		••		••	••	3,		4
Arrowroot	13		•••			9,	, ,,	

COMPARTMENT G.

Recess in Roof, over Box Seat.

Portable operating table, No. 1. Liston's long splints, No. 6. Splints, long, with foot pieces, &c., No. 2 Smithson's anterior splints, No. 2.

The operating table goes into the centre of this compartment. On its left are placed six long thigh splints and two Smithson's wire splints; on its right are two long thigh splints with foot pieces, and the other apparatus alluded to above. (See C, note on fracture apparatus.)

The wire of the Smithson's splints is in the form of a long loop, with cross-pieces regulating the breadth ; the sides, however, are quite straight, as the medical officer, when he comes to apply it, can easily bend these at such points and to such angles as he may find to suit the case.

DESCRIPTION OF PHARMACY WAGON-continued.

COMPARTMENT H.

Box under Driving Seat.

Tin of paraffin oil, about	lon	 	No. 1
Lamp, operating, No. 1		 	" 2
Cover for rear of wagon	 	 	,, 3
Pegs, tent, No. 10	 	 	,, 3

The tank below, in front of the hind axle, is similar to that attached to the ambulance wagon. To fill it, screw the leather funnel to the end of the long tube and attach the funnel to the hook at the right side of the wagon. Open the large stopcock at the lower part of the tank, also the small one above to allow the air to escape, then pour water into the funnel until the tank be filled. When full, close the lower stopcock, and then the small one above, unscrew the funnel from the tube, and hang it to the proper hook below the bed of the wagon. To obtain water from the tank it is only necessary to open the large stopcock, placing a vessel below the end of the tube to receive it. Should it not flow freely, the small stopcock above may be opened.

Note on Fracture Apparatus.

As the preparation of the necessary apparatus for securing fractures occupies considerable time, even when the materials are at hand, it was thought advisable to arrange a number of these containing everything required to put up fractures in the first instance, at least, so as to save valuable time during the hurry and bustle of an action, or of receiving large numbers of wounded immediately after one. Such combinations necessarily limit the selection of the surgeon as to the means he is to employ, but the increased importance of having ready to his hand, when so much pressed, a set of apparatus that will fulfil his object satisfactorily, must be taken as adequate compensation for this not being in every instance in all respects as he might have wished it to be, and when the pressure is removed, it will always be in his power to substitute something else that may be more suitable to the particular case.

As the most generally useful kind of splint is the ordinary scored and lined wood splint, this was selected for the purpose, but pads are required for these, and the means of securing the whole to the limb. Tow, undoubtedly, forms the best pad for splints in most cases, but it occupies much time to prepare, and with discharging wounds would become very soon so soiled as to require to be completely changed. An effort was made to have waterproof cases stuffed with tow, so as to avoid the latter difficulty, but the constant applications of such material to the skin was found to create so much irritation that it had to be abandoned. Thin mats of cocoanut fibre, or coir, were then tried, with the wove part next the splint, and the free ends of the fibres towards the limb, these were found to possess a sufficient degree of elasticity to afford the requisite support to a fracture, while the openness of the texture favoured the coolness of the part, and a double fold of linen between the coir and the skin was found to protect the latter sufficiently from the roughness of the coir fibre. The coir mats, too, could be washed and disinfected with any of the customary

DESCRIPTION OF PHARMACY WAGON-continued.

solutions for that purpose, and were still suitable for the treatment of such injuries.

The selection of apparatus was based on these details : a set for the arm, fore-arm, or leg includes two scored wood splints, two coir pads (those for the leg with holes made in them for the malleoli), two pieces of linen folded to cover the face of the pads, and four pieces of tape, each sufficiently long, when doubled, to go over the splints when applied to the limb, and allow of one end being passed through the loop and tied to the other. Any fracture of the arm or leg can be completely secured by tapes, and in this way each tape can be tightened or loosened as desired, without touching the others or disturbing the limb, and the position of the ends of the bone can be ascertained readily from day to day without undoing the splints. For the thigh, in addition to the above articles, a long splint, a perineal bandage, a piece of linen 4 feet long, 4 inches broad, with the ends for $1\frac{1}{2}$ feet spread with adhesive plaster, to be applied to the leg for extension, and a piece of linen sheeting of $1\frac{1}{4}$ yards by 1 yard, are provided. After applying the short splints to the limb, if desired, and the plaster bandage to the leg for extension, the long splint is to be laid over the edge of the short side of the large piece of linen, and is to be rolled up in this, leaving enough free to pass under and round the thigh, and to admit of the free edge being secured to the upper side of the splint by pins or stitches. By this method the limb can be supported equally well as by the usual plan of bandaging over the splint from the foot upwards, while the saving of time in the first instance, and the ease with which the sheeting can be removed, if desired, have much to recommend it where there are many serious wounds to attend to.

In compartment G are two long splints with foot-pieces; these have the other portions of the apparatus for fractured thigh, enumerated above, tied up with them.

Should it be desired to treat a fracture with an interrupted splint, there are six galvanised iron brackets provided, each with the requisite number of screws tied to it; a long splint may be cut in such a position as may be suitable for the particular case, and one of these brackets applied to keep the ends separate over the wound.

There are several other varieties of splints which are in ordinary use, and which require no special notice. Three of Dr. M'Nalty's, however, for severe injuries of the leg, will, no doubt, prove very useful in appropriate cases.

As it may be found convenient to employ extension, with a weight regulated to the case, six single pulleys with short pieces of line are provided. With one of these pulleys tied to a post at the foot of the patient's bed, and the line passed through it, the surgeon may exert the degree of traction he desires by fastening one end to the limb, and by attaching a bag of earth or sand to the other end, varying the quantity to suit his requirements.

DESCRIPTION OF PHARMACY WAGON-continued.

Contents of the different Cases of Instruments in the Pharmacy Wagon.

wagon.

Amputating Case.

l ordinary amputating saw.	1 screw tourniquet, large.
1 finger saw.	1 field screw tourniquet.
2 101-in. straight one-edged amputation	1 Liston's straight-bone forceps.
knives.	6 large sewing needles.
2 9-in. straight one-edged amputation	12 acupressure needles of sizes.
knives.	24 surgical needles.
2 71-in. straight one-edged amputation	6 scalpels.
knives.	Silk for ligatures.
2 51-in. straight one-edged amputation	Catgut.
knives.	Wax.
knife to scrape off periosteum.	Wire for sutures.
artery forceps,	1 needle for inserting wire.
tenaculum.	1 scissors.
spring forceps.	
0 01 11	T . 10 1 1
Case of Amputating	Knives and Scalpsls.
101-in. straight one-edged amputation	2 51-in. straight one-edged amputation

4 10½-in. straight one-edged amputation knives.
4 9-in. straight one-edged amputation knives.
7½-in. straight one-edged amputation knives.
7½-in. straight one-edged amputation knives.
12 scalpels.

Bandages for Bloodless Operations.

- 1 coil india-rubber webbing.
- 1 tourniquet.

Case of Catheters.

1 staff.

2 silver and nickel	male catheters, of	12 elastic gum catheters, of sizes.
sizes.		6 elastic bougies.

Cupping Instruments.

1 bottle. 6 cupping glasses. 1 scarificator. 1 torch or lamp.

1 dressing forceps.

Skein of thread.

6 needles, common.

Pins, a supply.

Dressing Case for Orderlies.

1 clasp knife, long-bladed.

1 pair strong scissors.

1 large spatula.

1 probe and director, combined.

Eye Instruments.

1 straight iridectomy knife. 1 curved 1 Weber's canaliculus " 1 Bowman's puncture " 2 linear knives. 1 Dixon's cataract knife. 1 Desmarre's retractor. (inside). 1 eyelid ,,, 10 ,, (outside). ,,, Samder's. 1 23 1 pricker. 1 Scarpa's needle. 1 broad .,, 1 Beer's 1 silver spatula.

pair curved iris forceps.
 , curved scissors.
 , straight ,,
 , Maunder's iris scissors.
 , straight forceps.
 , cilia forceps.
 set Bowman's probes.
 vulcanized curette.
 lens hook
 Bowman's stop needle.
 , strabiamus hook.
 Taylor's vecta.
 cystotome and curette.
 double (platina) iris hook.
 double spoon.

DESCRIPTION OF PHARMACY WAGON-continued.

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General Case of Instruments.

 hernia knife. tenotomy knife. curved probed pointed bistoury. straight ", "," ", sharp-pointed "," lithotomy knife. grooved staff. calculus scoop. ", forceps." Langenbach's double hook for tracheotomy. sliver double canulas for tracheotomy. sewing and acupressure needles. cutting pliers. cesophagus forceps (one opening outwards and one from behind to before). rectal trocar with canula. 	 trocar for paracentisis abdominis. horsebair probang for œsophagus (Weiss). polypus forceps, 1 straight, 1 curved. hydrocele trocar. tooth forceps. tooth key, with 3 claws. scissors. Bellocq's canula. Nelaton's probe. subcutaneous injection syringes. Silk for ligatures. Catgut carbolized. Wire for sutures, with needle. aneurism needle. Wax.
--	--

Gypsum Bandage Instruments.

Gypsum knife.

| Gypsum seissors.

Ophthalmoscope and Laryngoscope Case.

Pocket Case of Instruments.

1 ophthalmoscope.

1Probe, curved and straight, sharp-pointed bistouries, in one handle $3\frac{1}{2}$ 1Symes' abscess knife and double-edge scalpel, in one handle $3\frac{1}{2}$ 1Pair crooked scissors1Pair crooked scissors1Bow dressing forceps1Bow dressing forceps1Director and aneurism needle, plated2Probes, plated1Male and female silver catheter combined, caustic-case with palladium crayon442Probes, plated2Dieffenbach's forceps3Silver hypodermic syringe, in case2Dieffenbach's forceps3Silver hypodermic syringe, in case4Length, Breadth4Length, All contained in a Morocco single-flapped case of the follow- ing dimensionsLength, Breadth	No.	Articles.	Dimensions.
handle \cdot <t< th=""><th></th><th></th><th>Inches.</th></t<>			Inches.
handle \cdot <t< td=""><td>-</td><td>The he among and straight sharp-pointed bistouries, in one</td><td></td></t<>	-	The he among and straight sharp-pointed bistouries, in one	
1Symes' abscess knife and double-edge scalpel, in one handle $3\frac{1}{4}$ 1Tenaculum and gum knife, in one handle $3\frac{1}{4}$ 1Pair crooked scissors \cdots $4\frac{1}{4}$ 1Spatula, German silver \cdots $4\frac{1}{4}$ 1Bow dressing forceps \cdots \cdots 1Bow dressing forceps \cdots $4\frac{1}{4}$ 1Bow dressing forceps \cdots $\frac{1}{4\frac{1}{4}}$ 2Director and aneurism needle, plated \cdots $\frac{4\frac{1}{4}}{4\frac{1}{4}}$ 2Probes, plated \cdots $\frac{1}{4\frac{1}{4}}$ 1Male and female silver catheter combined, caustic-case with palladium crayon. $\frac{4}{4\frac{1}{4}}$ 2Lancets \cdots $\frac{1}{4\frac{1}{4}}$ 2Dieffenbach's forceps \cdots $\frac{1}{4\frac{1}{4}}$ 2Dieffenbach's forceps \cdots $\frac{1}{4\frac{1}{4}}$ 3Silver hypodermic syringe, in case \cdots $\frac{1}{4\frac{1}{4}}$ 4Length, $3\frac{1}{4\frac{1}{4}}$ 4All contained in a Morocco single-flapped case of the follow-Iterathing dimensions $\frac{1}{4\frac{1}{4}}$ Iterations $\frac{1}{4\frac{1}{4}}$	1	handle it it it it	• • R
1Tenaculum and gum knife, in one handle		Ramos' shaces knife and double-edge scalpel, in one handle	37
1Spatina, German silver441Bow dressing forceps1Director and aneurism needle, plated451Prair, artery forceps, fenestrated332Probes, plated2Probes, plated1Male and female silver catheter combined, caustic-case with1Palladium crayon1Clinical thermometer2Lancets2Dieffenbach's forceps2Dieffenbach's forceps3Silver hypodermic syringe, in case3Needles, plated4Length,4Length,4Length,5Needles, plated4Length,4Dieffenbach's norceo single-flapped case of the follow-4Inc dimensions		Bonscolum and gum knife, in one handle	. 37
1Spatial, German silver441Bow dressing forceps441Director and aneurism needle, plated451Pair, artery forceps, fenestrated.442Probes, plated441Male and female silver catheter combined, caustic-case with palladium crayon.441Clinical thermometer442Lancets442Lancets442Dieffenbach's forceps242Dieffenbach's forceps333Silver hypodermic syringe, in case33424241Contained in a Morocco single-flapped case of the follow-4I contained in a Morocco single-flapped case of the follow-	1	Pair crocked scissors	. 43
1palladium crayon	1	Snatula German silver	. 43
1palladium crayon	1	Row dressing forceps	. 41
1palladium crayon	1	Director and aneurism needle, plated	. 43
1palladium crayon	î	Pair artery forceps, fenestrated	. 31
1palladium crayon	2	Duches plated	
1palladium crayon	ĩ	Male and female silver catheter combined, caustic-case with	41
1Clînical thermometer $4\frac{1}{4}$ 1Case for ditto, plated $4\frac{1}{4}$ 2Lancets $2\frac{1}{4}$ 2Dieffenbach's forceps $2\frac{1}{4}$ 2Dieffenbach's forceps $2\frac{1}{4}$ 3Silver hypodermic syringe, in case $2\frac{1}{2} \times 2\frac{1}{4}$ 1Tablet of silk and wire for sutures $2\frac{1}{2} \times 2\frac{1}{4}$ 1All contained in a Morocco single-flapped case of the follow-Length, Breadth Thickness	^	palladium crayon	
All contained in a Morocco single-flapped case of the follow-	1	Clinical thermometer	
All contained in a Morocco single-flapped case of the follow-	1		· 48
All contained in a Morocco single-flapped case of the follow-	2	Lancets	. 21
All contained in a Morocco single-flapped case of the follow- ing dimensions	2	Dieffenbach's forceps	. 2
All contained in a Morocco single-flapped case of the follow-	1	Silver hypodermic syringe, in case	. 0
All contained in a Morocco single-flapped case of the follow-	6	Needles, plated	21×21
All contained in a Morocco single-flapped case of the follow- ing dimensions	1	Tablet of silk and wire for sutures	
All contained in a bioloco single happed case of the first thickness			
ing dimensions		All contained in a Morocco single-flapped case of the follow-	
ing unicitation in the states at class		ing dimensions	at clasp, 1

| 1 laryngoscope.

DESCRIPTION OF PHARMACY WAGON-continued.

Post-mortem Instruments.

- 1 blow pipe.
- 1 cartilage knife.
- 1 chisel for opening spinal column.
- 1 forceps.
- 1 hammer.
- 1 hook fixed in handle.
- 1 set of hooks, chains.

- 3 long needles.
- 1 saw.
- 3 ordinary scalpels. 1 tang scalpel.
- 1 pair bowel seissors.
- " sharp-pointed scissors for dis-1 secting.

Resection Instruments.

- 1 large Liston's bone forceps, curved.
- 1 forceps for grasping bone.
- 1 bow saw with 2 spare blades.
- 1 narrow straight saw.
- 1 saw with shifting back.
- 6 resection knives (2 pointed, 2 curved back, 1 button-ended, and 1 with blunt point).
- 2 strong pointed hooks.
- 2 blunt wood hooks, retractors. 2 raspatories, hook drooped and goat-foot shaped.
- 2 elevators (1 single, 1 double).

- 1 grooved chisel. 1 sequestrum forceps.
- 1 chain saw.
- 2 trephines, with trepan crown and hift-ing pyramid (1 of $\frac{1}{10}$ inch diameter 1 of $\frac{9}{10}$ inch diameter).
- 1 brush.
- 1 lenticular.
- 1 pair scissors.
- 2 American bullet forceps.
- 1 midwife's hinge bullet forceps.
- 1 Coxeter's bullet extractor.
- 1 long silver probe.

Stomach Pump.

1 foot for enema. 1 gag. 1 enema, angular. 1 do. straight. 1 wastepipe.

- 1 seat. 1 syringe, double, lever action. 1 tube, connecting, for enema.
- 1 " œsophagus.

APPENDIX No. 4.

LIST OF CONTENTS OF A SURGERY WAGON FOR A BEARER COMPANY.

* The Medicines, Surgical Appliances, and Instruments are contained in 6 Baskets covered with hide, and lettered A, B, C, D, E, and F.
A. Medicines, &c.
B and C. Instruments and Surgical Appliances.
D. Surgical Appliances.
E. " (Splints, &c.)

-

- F. Reserve. "

Artio	eles.		11.2	Quantity.	Letter of Basket in which the articles are placed.
Acid, Carbolic " Gallic			OZ.	12]
Ammon. Carbon.			22	1 8 1 4 2 4	and the second second
Argent, Nitrat			.,,	1	L A.
Brandy			gall.	1	1 m
Chloroform			lb.	4	and and a second se
Chloral Hydrat			OZ.	2	
Chlorodyne			. 15	4	B and C. 2 B, 2 C.
Cocoa and milk			tins	4	b and 0. 2 b, 2 C.
Discs for hypot			ection,	1 000	A CONTRACTOR OF A CONTRACT
Morphia				1,000	AND A CONTRACTOR AND
Discs for hypo		mje	ection,	750	A CONTRACTOR OF
Ergotine	••	••		4	
Ipecac. Pulv	Cone		OZ.	12	And the second s
Liq. Ammon Acet.	- Fort	11	33	12	A.
Liq. Ferri, Perchlo Liq. Morphia, for in	iections		m.vi		
Liq. Petass. Perma	ing.		lb.	11	
Mixt. for diarrhoea			,,	11/2 11/2	
Mustard leaves			tins	2	I see the second
Ol. Menth. Pip.			oz.	1	Lawrence of the
Ol. Olivæ, Carboliz	ed (1 to	50)	1b.	2 1 3 2	
Ol. Ricini	.,		33	2	B.

Medicines, etc.

Articles.	Quantity.	Letter of Basket in which the articles are placed.
Medicines, &c.—continued. D. Terebinth lb. Opii Pulv oz. Pills, Hyd. Subchlor, gr. j bottle (Opii Pulv., gr. j. Plumbi, Acet., gr. ij.) (Hyd. Subchlor, gr. ij., et pil. Coloc. Co., gr. ij.) (Pulv. Opii, gr. j " Quinine, gr. j " Pulv. Ipecac. Comp oz. Quinine " Soda, Tartarata lb. " Bicarbon " Spirit Ætheris, Nit " Ammon. Arom lb. Chloroformi oz. Fablets, Aromatic confection, doz.	$ \begin{array}{c} 1\frac{1}{2}\\ 2\\ 1\\ 1\\ 1\\ 1\\ 4\\ 10\\ 10\\ 10\\ 10\\ 1\frac{1}{4}\\ 12\\ 9\end{array} $	A. 10 oz. A and 4 lb. B. A.
" " " " " " " " " " " " " " " " " " "	$ \begin{array}{c} 12 \\ 12 \\ 12 \\ 1\frac{1}{2} \end{array} $	A CARDON AND A

CONTENTS OF A SURGERY WAGON-continued.

Appliances, Instruments, &c.

Air cushions	6	3 D, 3 E.
Amputating knives set	1	D.
Aprons, attendants'	6	3 D, 3 E.
" Surgeons'	3	2 D, 1 E.
Arm slings, wire	4	F.
Bandages, 1st dressing	100	25 B, 25 C, 50 F.
" for bloodless operations .	2	1 B, 1 C.
Calino 91 in Ends long	200	50 B, 50 C, 100 D.
	6	3 B, 3 C.
11	6	3 B, 3 C.
9 9	500	50 B, 50 C, 100 D, 64 E, and 236 F.
", ", ", ", ", ", ", ", ", ", ", ", ", "	10	5 B, 5 C.
Pasing sing kidney shaned for		0 1, 0 0.
Basins, zinc, kidney-shaped, for	4	A.
washing wounds Bottles 2-oz, and 4-oz, doz.	11	A.
Doceroo, - on	6	A.
Camel hair pencils	2	A.
Carbolized catgut	6	
Cardboard, 23 × 12 pieces		3 D, 3 E.
Chamois skin.	1	D.
Chloroform inhalers, with drop bottles	2 1	A.
Catheter, gum elastic set	+	A.
" Silver and silver plated "	1	A.
Cord 03.	8	B.
Corks, assorted doz.	6	А.
Corkscrew, compound	1	A
Cotton wool Ib.	3	8 oz. B, 8 oz. C, 1 lb. D, 8 oz. F.
Dressing tray	1	F.

CONTENTS OF	A SURGERY	WAGON-continued	1.
-------------	-----------	-----------------	----

Articles.	Quantity.	Letter of Basket in which articles are placed.
Appliances, &ccontinued.		
Flannel, fine yds.	5	F.
" for fomentations "	5	F.
Forceps, tongue	1	A.
Gutta-percha, for splints,		and the set of the set of the set of the
18 × 4 inches pieces	12	F.
Haver:acks-(For contents see end)	12	F.
Hone	1	A
Horn cups, grad	2	A
Instruments, resection case case	1	C.
", surgeon's case "	2	1 D, 1 E.
Irrigators, with stop cocks. 3 ivory	0	DIG
jets, with I. R. tubing	2	1 B, 1 C.
Labels, blank	200	A. 1 B, 1 C, and 1 E.
Lamps, operating, with match boxes	20	10 D, 10 F.
Linen sheeting yds. Lint, fine lbs.	20	2 B, 2 C, 16 F.
	3	A.
Measures, minim	0	2 each A, B, C.
,, pewter, oz		A
" 2 oz Measuring tapes	2 2	1 B, 1 C.
Mortar and pestle	ī	A.
Needles, stout sewing	EO	A.
Oiled silk yds.		3 B, 3 C.
Old linen sheets	6	F.
Packthread oz.	8	C
Pad cases for splints-		
Arm-jointed elbows sets		1
Fore-arm ,,	2	
Leg and ankle pairs	4	}F.
Thigh ,,	2	E 2
Thigh, wood, shaped sets		
Paper, paraffin sheets		6 B, 6 C.
" powder pkt.		A.
Pins papers		2 A, 1 B, 1 C.
, 1st dressing Pill boxes, nested doz.		50 B, 50 C.
Pill boxes, nested doz.		A.
Pill and palette knives	4 30	A. 18 A, 6 B, 6 C.
Plaster, adhesive, tins, 8 yds. each, 1-in.	36	10 A, 13 B, 13 C.
	22	6 A, 6 B, 5 C, 4
ininglass yards		A.
D		A.
		A.
Retractors	7	A.
Scales and weights, with extra		
weights set		A.
Scalpels,	1	A.
Scissors prs.	. 5	1 pair each, A, B, C, D, and E.
Screwdriver, short, for trusses		
A.M.D. supply	. 1	Α.
Solidified soup		B.
Specification tallies books		4 A, 1 B, 1 C.
Longen mille man only for dille	. 3	1 A, 1 B, 1 C.
Cases with pencils for ditto . Splints, arm, iron wire, with pads .		18 F, 12 E.

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Articles.	Quantity.	Letter of Basket in which the articles are placed.
Appliances, &ccontinued.		
Splints, fore-arm, tinned wire, with	and the second	
pad cases	10	4 E, 6 F.
", fore-arm, perforated zinc,	1 2	
with pads	10	5 E, 5 F.
" arm supports, jointed, per-		
forated zine, with pads	2	E.
" arm supports, jointed, tinned	0	17
wire, with pad cases	2	E.
" leg and ankle, tinned wire,	5	9 F 0 F
with pad cases	5	3 E, 2 F.
", leg and ankle, perforated zinc, with pads	5	2 E, 3 F.
long jointed with nade	10	3 E, 7 F.
thigh wood shaped with pade	6	3 E, 3 F
tinned wire with nad		Property of the second second second second
cases	6	2 E, 4 F.
Sponges, small, in 2 waterproof bags	10	А.
" large	3	E.
Spongio Piline, 18 by 18 pieces	4	2 D, 2 E.
Stethoscopes	2	1 B, 1 C.
Stomach pump	1	D.
Stopper Loosener	1	A.
Stump cushions	12	6 E, 6 F.
Sutures	20	10 B, 10 C.
Syringes, hypodermic	2	A.
Tape, broad, in 10 yard pieces, yds.	100	2 A, 4 B, 4 C.
Thread oz.	1	A. D.
Tooth instruments set	6	3 B, 3 C.
Tourniquets, screw Tow, surgeon's lb.	10	2 D, 8 F.
Letter d	5	1 B, 1 C, 3 F.
", carbolized". Trocar, curved, for bladder"	1	A.
Trusses, steel	Î Î	2 D, 2 E.
V. I. R. cloth yds.		D.
Waterproof dressing	6	3 B, 3 C.
Water bottles, copper, tinned, with	1. 1. 1. 1. 1.	
drinking cup and straps complete.	12	F.
Waterproof cloth yds.	. 4	D.
Wax candles	24	12 B, 12 C.
,, and matches in tin boxes,		
with candlesticks	8	1 A, 1 B, 1 C.
Wire nippers prs.	2	· A.
" silver plated oz.		A.
" telegraph wire feet	20	A.

CONTENTS OF A SURGERY WAGON-continued.

APPENDIX.

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Contents of a Surgery Wagon for a Bearer Company.

CONTENTS OF A SURGERY WAGON-continued.

Contents of Baskets in Bearer Wagon.

				-			-		1.44
		Quantity.							
					-		-	-	and the second
		A. MI	DICINI	BASK	ET.			100	
									12 oz.
Acid, carbolic									1 oz.
" gallic	••								8 oz.
Ammon, carbon Argenti, nitrat									1 oz.
Brandy									1 gall.
Chloral hydrat							••		2 oz.
Chloroform									4 lbs. 4 oz.
Chlorodyne			••			••	••		1,000
Discs for hypode	rmic in	njection	, morp	hia	•••				750
33 33		22.	ergot						4 oz.
Ipecac. pulv.	+								12 oz.
Liq. ammon. ace , ferri. perch	t. cone	 t							12 oz.
momphin fo	r inieg	tions (g		in mvi)					4 oz.
" potassæ per	mang.								11 lb.
Mixt. pro diarrh	1œa		·						11 lb.
Mustard leaves									2 tins.
Ol. menthe. pip							•••		1 oz. 3 lbs.
" olivæ, carbol	ized, 1	to 50				1.2.2			11 lb.
" terebinth									2 oz.
Opii. pulv									12 doz.
Pills, hyd. subcl	hlor. g	r. j	mhi a	not or					6 ,,
" Rj. opii. p " Rj. hyd. s	miv., g	r. J. piu	nil co	loc. co.	gr. iii				6 "
mula onii		·, grj.	pin or						12 "
" pulv. opii. " quiniæ, su	lph. g								9 "
Puly. Ipecac. co							(3 oz.
Quiniæ, sulph.									16 oz.
Soda, tartarata								••	10 oz
Sodæ, bicarbon								. 24	10 oz. 10 oz.
Spirit, ætheris n	itrosi								14 lb.
" ammon.									12 oz.
" chlorofor	·m		· · ·	ation (dram	each)		1	9 doz.
Tablets for diar	rncea, s	opiate c	onfecti	on (1	serup	le each)			12 doz.
Wingt hangoin		opiace c		011 (5	- Der alp				12 oz.
Tinct. benzoin (Tinct. opii								1.1.	12 oz:
Ung. cetacei									11 lb.
Ch5. control								- 12	0 11
							12	11 11	-11 C
	All a				1.5				4
Basins, zinc, ki	dney-sl	haped, i	or was	ning wo	ounds	1		•••	11 doz.
Bottles, 2 oz. a	nd 4 0	Z							6
Camel hair bru		hos							1 tin box.
Candle and wa Carbolized cate									2 oz.
Catheters, elast									1 set.
		silver-pl							1
Corks, assorted									6 doz.

CONTENTS OF A SURGERY WAGON-continued.

			Articles						Quantity.
	Conter	nts of	Baskets	-con	tinued.				
Corkscrew, comp									1
Forceps, tongue									1
Horn, cups, grad									2
Hone									1
Inhalers for chlo	roform,	with g	grad. bot	ttles					2
Knives, pill and									4
Labels, blank									200
Measures, minim									3
" 2 oz.									2
" pewter									2
Mortar and pestl									1
Needles, stout, s									50
Plaster, adhesive			0	long		•••			18 tins.
»» »»	1 ,,		8 "	"		•••			10 "
""	6 "	39	6 "	,,			••		6
" isinglass		••		••			••		5 yds.
Pill boxes, nested		••		••	••	••	•••	••	a doz.
Pins		••	••		••				2 papers.
Powder papers	••	••		•••					1 packet.
Razor		••	••		••	••	••	••	1
" strop	••					••			1
Retractors		••		•••	••				4
Scales and weigh		extra	weights	• • •					1 set.
Scalpels	••				•••	••		•••	1
Scissors		••	••	••	••		••		1 pair.
Screwdriver, sho				••		••	••	•••	1
Specification tall		in.			••		••		4 book
Cases with per				••					1
Sponges, surgeon		••	••	••		••	•••	••	10
Stopper loosener			•••		••	•••			1
Syringes, hypode	ermic	::	••	••		•••	••	••	2
Tape, broad (10			••	••	•••	••	••		2 packets.
Thread		•••			•••	••			1 oz.
Trocar, for blade		•••	••	•••	••	••		••	1
Wire, silver plat		••	••			••		••	1 oz.
" Nippers		••	••••			••			2 pairs.
" Telegraph									20 feet.
		в	B. BASK	ET.					
Bandages, calico	. 1-inch	wide.	5 vards	long					3
	11 .,		5 ,,	,,,					3
11 11 11 11	21 ,,	"	5 "	33					50
27 77 28 29	3 "		8 "	"					50
	ressing								25
	el, 4 incl								5
	oodless								1
Candle and mate									1
Candles, wax									12
Carbolized tow									1 lb.
Castor oil									2 ,,
Cocoa and milk									1 "
									1 "

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Contents of a Surgery Wagon for a Bearer Company.

CONTENTS OF A SURGERY	WAGON-continued.	
-----------------------	------------------	--

Specification tables 1 Cases with pencils for ditto 1 8 oz. String (laid cord) 1 Stethoscope 10 Tape, broad, in 10 yard pieces 10 Tape, broad, in 10 yard pieces 1 Tourniquets, screw 1 Tourniquets, screw 3 yds. Waterproof dressing 3 " 1 ⁴ / ₄ 5 " " 1 ⁴ / ₄ 5 " 3 Waterproof dressing 50 " 1 ⁴ / ₄ 5 " " 1 ⁴ / ₄ 5 " " 1 ⁴ / ₄ 5 " " 1 ⁴ / ₈ 5 " " 3 yds. " 1 and			Article	cs.					Quantity.
Lamp, hospital, operating, with match boxes	Co	ntents of J	Basket	s-cont	inued.		inour in	ata	-
Lamp, hospital, operating, with match boxes 2 lb. Measures, pewter, oz.	Irrigator, with stop c	ock, 6 ft. i	india-r	ubber t	ubing,	and 3	ivory je		
Link, nile				n poxes					
Alteratives, power, out, of the set									2
Paraffin paper									3 yds.
Pins. 1 paper. Pus, 1st dressing 1 3 1 3 1 3 1 3 1 3 1 3 1 3 1 3 1 3 1 3 1 3 1 3 1 3 1 3 1 3 3 1 3 3 4 1 10 <									
Prins, 1st dressing 6 tins. Plaster adhesive, 1-inch wide, 8 yards long 13 " " 1 " 6 " " 13 " " 1 " 6 " " 13 " Rochelle salts, in powder 4 lb. Scissors 1 book. Specification tallies String (laid cord) Stattre, or hair lip pins 10 Tape, broad, in 10 yard pieces	A		1 1 1 C					•••	
Image: Princip wide, or yaids long 13 13 13 14 15 15 16 17 18 18 18 18 18 18 18 18 18 18 18 18 18 18 16 18 18 16 19 18 16 19 18 16 19 18 16 19 16 19 16 19 16 19 10						••			
""""""""""""""""""""""""""""""""""""	Plaster adhesive, 1-in	ch wide, 8	3 yards	s long	•••	••			10
Rochelle salts, in powder		/ //		"					0
Ronnelle sails, in power								1000	
Solidified soup 1 Specification tallies 1 book. Cases with pencils for ditto 1 book. String (laid cord) 1 String (laid cord) 1 Stethoscope 10 Tape, broad, in 10 yard pieces 10 Tape, broad, in 10 yard pieces 1 "measure" 1 Tourniquets, screw 3 "measure" 3 "measure" Waterproof dressing "measures, calico, 1-inch wide, 5 yards long "measures, calico, 1-inch wide, 5 yards long "measures, calico, 1-inch wide, 5 yards long	~ ·								
Specification tallies 1 1000k. Cases with pencils for ditto 1 1 String (laid cord) 1 1 String (laid cord) 1 1 Stethoscope 10 Tape, broad, in 10 yard pieces 1 " measure 1 Tourniquets, screw 3 Waterproof dressing " 1 ¹ / ₂ 5 3 yds. " 1 ¹ / ₂ 5							1011	10000	
Cases with pencils for ditto 1 String (laid cord) 8 oz. Stethoscope 10 Suture, or hair lip pins 10 Tape, broad, in 10 yard pieces 10 Tape, broad, in 10 yard pieces 4 , measure 3 Waterproof dressing " n $1^{\frac{1}{2}$ n 5 n n 3 yds. Waterproof dressing									1 book.
String (laid cord) 1 Stethoscope 10 Tape, broad, in 10 yard pieces 10 Tape, broad, in 10 yard pieces 10 Tourniquets, screw 1 Tourniquets, screw 3 Waterproof dressing 3 3 <t< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>									
Stethoscope 10 Suture, or hair lip pins 10 Tape, broad, in 10 yard pieces 4 ", measure 1 Tourniquets, screw 3 Waterproof dressing Bandages, calico, 1-inch wide, 5 yards long " $1\frac{1}{2}$, " 5 " "									the second s
Surve, or hir if p pins 4 Tape, broad, in 10 yard pieces 1 Tourniquets, screw 3 Waterproof dressing 3 Waterproof dressing 3 Waterproof dressing 3 N $1\frac{1}{2}$ n 5 n 3 N $1\frac{1}{2}$ n 5 n Bandages, calico, 1-inch wide, 5 yards long <td>Stethoscope</td> <td></td> <td>••</td> <td></td> <td></td> <td></td> <td>••</td> <td></td> <td></td>	Stethoscope		••				••		
Tape, broad, in 10 yard pieces			••				••		
"measure"		rd pieces	•••						
Tourniquers, serew 3 yds. Waterproof dressing 3 yds. C. BASKET. Bandages, calico, 1-inch wide, 5 yards long 3 n n $1\frac{1}{2}$ n 5 n n n $1\frac{1}{2}$ n 5 n n n $2\frac{1}{2}$ n 5 n n n $2\frac{1}{2}$ n 5 n									
C. BASKET. Bandages, calico, 1-inch wide, 5 yards long 3								10000	
Bandages, calico, 1-inch wide, 5 yards long 3 " $1\frac{1}{2}$ 5 3 " $2\frac{1}{4}$ 5	waterproof dressing								
Bandages, calico, 1-inch wide, 5 yards long 3 " $1\frac{1}{2}$ ", 5 ", ", 2 $\frac{1}{4}$ 3 " $2\frac{1}{4}$ ", 5 ", ", 2 $\frac{1}{4}$ 50 " ", 2 $\frac{1}{4}$ ", 5 ", ", ", 5 50 " ", 2 $\frac{1}{4}$ ", 5 ", ", ", 5 ", ", 2 $\frac{1}{4}$ ", 5 ", ", ", 5									
n $1\frac{1}{2}$ 5 n 1 1 50 n $1\frac{1}{2}$ n 5 n 1 50 n $1\frac{1}{2}$ n 5 n 1 50 n $1\frac{1}{2}$ n 5 1 50 n 3 n 8 n 1 50 n 1st dressing 1 1 25 5 n fannel, 4 inches wide, 8 yards long. 1 1 1 Candle and matches, in tin box, as candlestick 1 1 1 Candles, wax 1 1 1 1 Carbolized tow 1 1 1 1 Coccoa and milk (2 tins) 1 1 1 1 Cotton wool 1 1 1 1 1 Instruments, resection, case of 1 1 1 1 Image: the second se		C.	BASI	CET.					
" " $1\frac{1}{2}$ " " 5 " " " 3 " " $2\frac{1}{2}$ " " 5 " " 50 " " 3 " " " " 50 " " 3 " " " " 50 " " 3 " " " " 50 " 1st dressing 25 " flannel, 4 inches wide, 8 yards long . . 1 Candle and matches, in tin box, as candlestick . . 1 Candles, wax 12 Carbolized tow 1 1 Coccoa and milk (2 tins) 1 . Cotton wool 1 . Instruments, resection, case of 1	Bandages calico Lin	ch wide	vard	slong					3
" " $2\frac{1}{4}$ " " 5 " "	Danuages, canco, 14							1000	3
""""""""""""""""""""""""""""""""""""									
"Ist dressing	3	0							
" Initiality Finctics with of yinds tonght 1 " for bloodless operations 1 " for bloodless operations 1 " Candle and matches, in tin box, as candlestick 1 Candles, wax 1 Carbolized tow 1 Cocoa and milk (2 tins) 1 Cocoa and milk (2 tins) 1 Cotton wool 1 Instruments, resection, case of 1 Instruments, resection, case of 1 Instruments, no cock, 6 ft. india-rubber tubing, and 3 ivory jets 1 Intrigator, with stop cock, 6 ft. india-rubber tubing, and 3 ivory jets 1 Lamp, hospital, operating, with match boxes 2 Measures, pewter, ounce 2 One with stop cock 2	" 1st dressi	ng							
"Toto biolities operations1Candle and matches, in tin box, as candlestick1Candles, wax1Carbolized tow1Carbolized tow1Cocoa and milk (2 tins)1Cotton woolInstruments, resection, case ofIrrigator, with stop cock, 6 ft. india-rubber tubing, and 3 ivory jets.1Int, fineLint, fineMeasures, pewter, ounce21b.	" flannel, 4				ng				
Candles, wax12Carbolized tow1 lb.Coccoa and milk (2 tins)1 lb.Cocton woolInstruments, resection, case of1Irrigator, with stop cock, 6 ft. india-rubber tubing, and 3 ivory jets.1Lamp, hospital, operating, with match boxes1Measures, pewter, ounce2S vds					-				
Carbolized tow1Corbolized tow1Cocoa and milk (2 tins)1Cotton wool1Instruments, resection, case of1Irrigator, with stop cock, 6 ft. india-rubber tubing, and 3 ivory jets.1Iamp, hospital, operating, with match boxes1Lint, fine1Measures, pewter, ounce23 yds								1000	
Cocoa and milk (2 tins)1Cotton wool8 ozs.Instruments, resection, case of1Irrigator, with stop cock, 6 ft. india-rubber tubing, and 3 ivory jets.11Lint, fineMeasures, pewter, ounce2123 yds									
Cotton wool8 ozs.Instruments, resection, case of1Irrigator, with stop cock, 6 ft. india-rubber tubing, and 3 ivory jets.1Lamp, hospital, operating, with match boxesLint, fineMeasures, pewter, ounce23 yds								1000	1 "
Instruments, resection, case of1Irrigator, with stop cock, 6 ft. india-rubber tubing, and 3 ivory jets.1Lamp, hospital, operating, with match boxes1Lint, fine2Measures, pewter, ounce23 yds									8 ozs.
Irrigator, with stop cock, 6 ft. india-rubber tubing, and 3 ivory jets.1Lamp, hospital, operating, with match boxes1Lint, fine1Measures, pewter, ounce121023yds	Instruments, resectio	n, case of							
Lamp, hospital, operating, with match boxes	Irrigator, with stop c	ock, 6 ft. i	india-1	rubber t	ubing,	and 3	ivory je	ets	
Lint, fine	Lamp, hospital, oper	ating, with	1 mate	ch boxes			••	•••	
Byda	Lint, fine				•••		•••	-	
					•••			1000	
B sheets									
Parafin paper I paper.								1000	
Pins, 1st dressing									
Plaster, adhesive, 1 inch wide, 8 yards long 6 tins.	Plaster, adhesive, 1 i	nch wide,							
	» » 1	33 33	0						
, , , , , , , , , , 0 ,	,, ,, 6		0	>>	••			1.11	
DCISSOIS				••				1000	1 book.
specification tailles					•••			1000	
Cases with pencils for ditto	Cases with pencils	for ditto							

CONTENTS OF A SURGERY WAGON-continued.

C String (packthread Stethoscopes Sutures, or hair lip Tape, broad, in 10 ,, measure Tourniquets, screw Waterproof dressin	yard pi	 		ontinue	ed.				
String (packthread Stethoscopes Sutures, or hair lip Tape, broad, in 10 ,, measure Tourniquets, screw	l) yard pi	 		••				1.000	a second second
Stethoscopes Sutures, or hair lip Tape, broad, in 10 ,, measure Tourniquets, screw	yard pi	eces	::					and the second se	8 ozs.
Sutures, or hair lip Tape, broad, in 10 ,, measure Tourniquets, screw	yard pi	eces					31		1
Tape, broad, in 10 ,, measure Tourniquets, screw	yard pi	eces							10
,, measure Tourniquets, screw					•••		••		4 pieces.
Tourniquets, screw	· · ·	••		••	••	••			1
									3
in all proof all on									3 yards.
						-			
		D	BASKE	m				1	
			DABAN					and a	
Air cushions					5.		· · ·		3
Amputating knive									1 set.
Aprons, attendants	s'								3
" surgeon's									2
Bandages, calico, 2	21-inch,	5 yard	ls long						100
· · · · · · · · · · · · · · · · · · ·	3 ,,	8 "						11	100
Cardboard						22			3 pieces.
		••						22	1
									11 lb
Instruments, surge		se of ca	apital			11			1
Instruments, tootl						22			1 set.
Linen sheeting					11				10 yds
Scissors							22	22	1 pair
Spongio piline						1.1	• •		2 pieces.
Stomach pump		••	**				••	••	1
Tow		••	11	••	11				2 lbs.
Trusses, steel			**						2 Garda
V. I. R. cloth					11		11		6 yds
Waterproof cloth									4 "
		T	BASKI	-				3.5	
		19.	DASKI				•	2000	
Air cushions					100				3
Aprons, attendant			· · ·						3
", surgeon's									1
Bandages, calico,	3-in., 8				-				64
Cushions for stun					55				6
Cardboard		-	· · ·				- 14	pieces	3
Instruments, surg	con's, c	ase of a	capital	44					1
Lamp, hospital, o	perating	g, with	match	boxes					1
Scissors									1
Sponges, large			- 44				• •	••	3
						1414		pieces	2
Splints, arm, iron	wire, w	with pa	ds	200				••	12
" fore-arm,								••	4 5
	perfor	ated zi	ne, wit	n pads	· · · · · · · · · · · · · · · · · · ·	in and a			52
" arm supp	ports, jo	inted,	perfort	ited zin	ie, with	pads			2
" "				wire, w		u cases	••		3
" leg and a	inkle, ti	nned w	vire, w	in pad	cuses	••	•••	.,	2
» » »»	n' P	errorat	ea zinc						3
" long join	ted, wit	in pads	111	14		••			3
,. thigh, we	ood sha	ped, w	ten pat	18.4.4				•••	2
Trusses, steel	med wi		n pad o						2

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Contents of a Surgery Wagon for a Bearer Company.

CONTENTS OF A SURGERY WAGON-continued	
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		Article	8.	1929	1304	Luce		Quantity.
Cor	ntents	of Bas	ket—co	ntinue	d.			
	F. Res	ERVE]	BASKET					
	mile lo							236
Bandages, calico, 3-in. 8								50
" 1st dressing	••							3 lb.
Carbolized tow	••		••					8 oz.
Cotton wool	12	. 36 1						6
Cushions for stumps								1
Dressing tray		••						5 yards.
Flannel, fine		••						5 "
" fomentation								12 pieces.
Gutta-percha		••						16 lb.
Lint, fine								6 yards.
Linen sheets, old								10 yds.
Linen Sheeting								4 tins.
Plaster, adhesive, 6-inch	ı (6 yaı	ds eacl	n)					
Pad cases for splints-							sets	2
Arm-jointed elbow					•••			2
Fore-arm			••	••	•••		"pairs	4
Leg and ankle			1.11	••		••	-	2
Thigh						••	"sets	2
Thigh, wood shaped					•••			18
Splints arm iron wire	, with 1	pads			••	•••	••	6
fore-arm, tinne	d wire.	with	pad case	es	••			5
nerfo	rated Z	inc, wi	th paus			•••		2
leg and ankle.	tinned	wire w	ith paa	cuses			••	3
	perfora	ted zill	ic, with	paus		••		7
long jointed, w	rith pac	15			••			4
thigh tinned y	wire, wi	th pad	cases			1.11	••	3
wood sh	aped.	with pa	ids					4
arm clings iron	n wire					•••		
Thomas								8 lb.
Also 12 hav	ersacks	and w	rater bo	ottles, c	omplet	e.		Million Contractor

Contents of Haversack.

Articles.			Quantity.
Sal volatile, in stoppered bottle and bo Minim measure, in leather case Grad. horn cup	xwood case	e oz. 	2 1 1
Calico bandages First dressing triangular bandages Lint		oz. yard	2 3 4 1
Isinglass plaster Plaster, adhesive, 8 yards, 1-in. tapes ",",",",",",",",",",",",",",",",",",",		tin "	1 1 2 2
Wax candle and matches Arm splints, with pads, 10 and 12 in Orderlies dressing case		tin box pair	1 1

APPENDIX.

Contents of a Surgery Wagon for a Bearer Company.

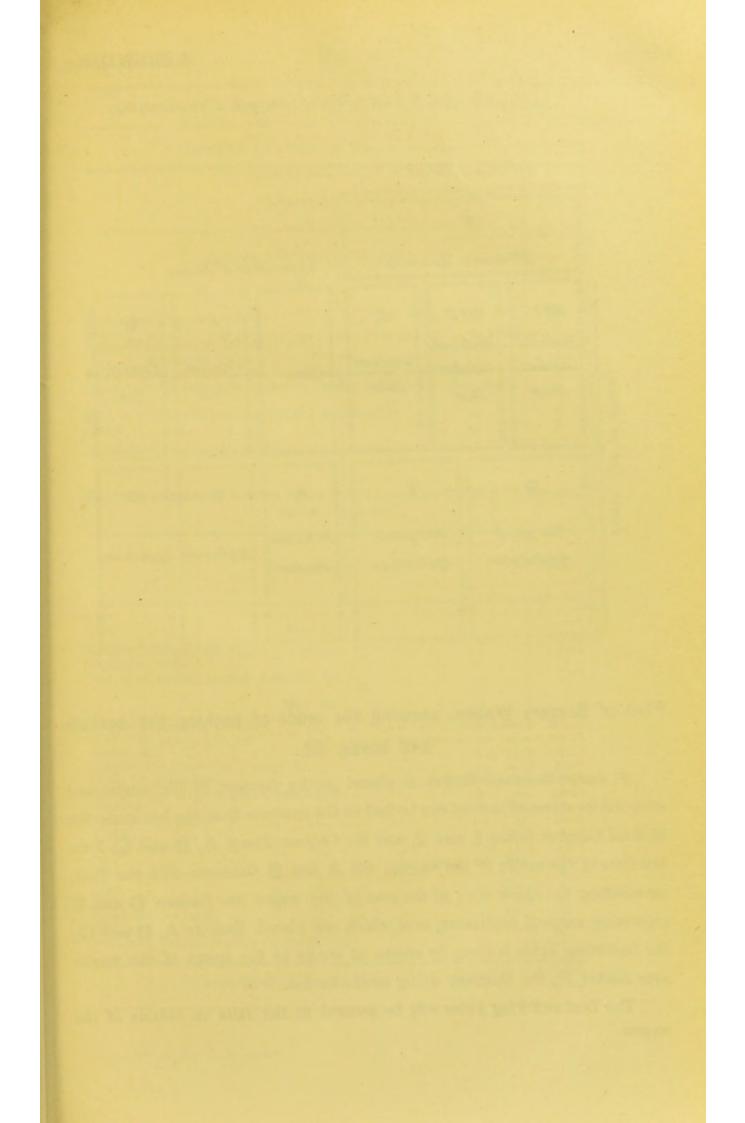
CONTENTS OF A SURGERY WAGON-continued.

The Wagon also contains.

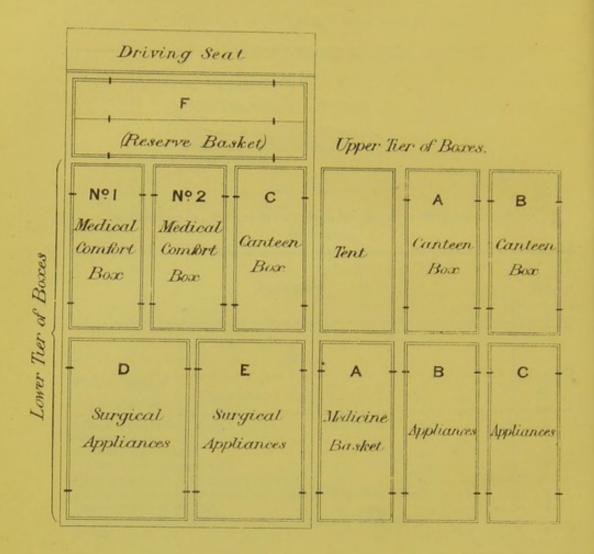
- Poles, wood, FH $\begin{cases} 16 \text{ feet } & 1 \\ 7 & 2 \end{cases}$ An operating table, with mattress.
- A tent. 3 Canteens, wood, HP A, B, and C. 2 Divisional comfort boxes, Nos. 1 & 2. 1 Water Bucket.

Contents of A, B, and C Canteens for Surgery Wagon of Bearer Company.

	Descr	iption						No.
		A.						
hisels, ripping								2
lups, drinking, tin { haif pin	ıt	••	•••		••	••	••	25
[pine	••	••						25 2
	••	•••					box	ĩ
A A A A A A A A A A A A A A A A A A A	•						DUX	2
poons, table, German silver	••							50
aucepans, nests of 8 (12 qts. t							nest	1
riangles with tubular joints,			ith hoo	k attacl				2
amps, hand, small, FH								2 1
Box A, on rollers, with lock an			sunk h	andles				1
traps								2
		в.						
Blue worsted and thread								
Basins, hospital canteen, zinc,	9-in.							4
Bottle, tin, oil, sq are, with se	aled to	p, 2 g	allons	••				1
			••			•••		2
	••		••		••	•••		1 2
	••		••	••	••	•••		2
	••	••						2
	·: (7		and (25 sewin	(No	7) "	acket	ĩ
Needles, viz., 2 packing, 25 dar		NO. 10), and 2	to sewin	-			2
Pans, bed, zinc	••				•••			. 4
Pots, zinc, chamber	••		••			1000	pair	i
Scissors, lamp, with guard Stools, close, field service, con	mlete	consi	sting e				1	
Zinc pan)
Tin lid or covers								
Three legs, tubular iron								2
m to the								
Ring top)
Urinals, pewter								2
Box B, on rollers, with lock an	nd key		sunk h	andles				1
and all and a series of the source of								2



To face page 185.



Plan of Surgery Wagon, shewing the mode of packing the baskets and boxes, &c.

F Large Reserved Basket is placed in the forepart of the wagon and need not be removed, access can be had to the contents from the box seat; the Medical Comfort Boxes 1 and 2, and the Canteen Boxes A, B and C, form two tiers in the centre of the wagon; the A and B Canteens, with the Tent, constituting the upper tier; at the rear of the wagon are Baskets D and E containing surgical appliances, over which are placed Baskets A, B and C; the Operating Table is slung by means of straps to the hoops of the wagon over Basket F, the Mattress lying on the basket.

The Tent and Flag Poles will be secured to the rails on outside of the wagon.

CONTENTS OF A ST	URGE	RY WA	GON-	continu	ied.	-	
Desci	riptic	on.					No.
Contents of Car	iteen	sconti	inued.		200		
- and	C.						
Towels, hand, hospital pattern							24 6 2 6 2
Flannel, white, 27 inches wide		••	••				0
Lanterns, coloured red, HP marquee			••				a a
" (bull's-eye), Police		:					0
Flags, FH, white, with red cross, tri	angu	lar direc	eting, 4	f leet s	quare	.1 0	
Filter, silicated carbon in metal ca	se, v			bber ti	ides a	nd 2	} 1
wood taps						••	1 1
Box, on rollers, with lock and key, a	and s	unk har	idles				1 2
Straps							2

Contents of Medical Comfort Boxes Nos. 1 and 2 for Surgery Wagon of a Bearer Company.

		Desc	eription	1.				No.
		2	īo. 1.					
Brandy, bottles contain	ning 1	th of a	a gallor	1	 			24
Corkscrew, folding					 			1
Box, wood, medical con					 			1
		N	10. 2.					
Extract of meat (in 1	lb. ti	ns)			 		lbs.	21
Extract of meat in 11					 		.,	1
Arrowroot					 		23	4
Candles, wax or stearing					 		37	43
Knife for opening tins					 			1
Measures, set of (quar		t, J-pin	t, 1-pin	nt)	 			
Mustard					 		OZS.	10
Pot, mustard, pewter					 			1
Pepper					 		lbs.	1
Castor, pepper					 			1
Salt					 		lbs.	3
Salt cellar, wood					 			1
Soap					 	••	lbs.	4
Solidified soup					 			6
Sugar, crushed lump					 		lbs.	18
Tea, black					 		"	12
Box, wood, medical co	omfort	t, divisi	ional, 1	10.2	 			1

For mode of packing surgery wagon, see plan attached.

No. 5.

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APPENDIX

	u				Med	lical D	epartmer	nt w	rith	an Arm	y Corr	os.	Testal		-
						13 100	APPEN	DI	x	No. 5.					100
	it, as shown in	, not be moved			Remarks.			& If the mules	are untrained, double the num-	ber of Muleteers will be required, so as to allow one man to each mule.	* Officers en-	titled to public service horses are supplied	cers' saddlery.		
	each un	s a rule	-			Number	76			c1	2163 1bs.	2 pairs 4 "			
32), ISSUED WITH CLAUSE 186, ARMY CIRCULARS, 1877.]	MEDICAL DEPARTMENT WITH AN ARMY-CORPS. The following Tables show the Personnel, Camp Equipment, and Transport required by the Medical Department for an Army-Corps (in addition to the medical officer with each unit, as shown in	tached to each Division. Transport is provided for only three of these as they would, as a rule, not be moved	Equipment.		Equipment.		(50) (26) CACOLETS AND LATTERS. Pairs			Out lining)	Elankets 212 lbs. Kettles, Flanders 212 lbs. Ropes and picketing implements 571 lbs. Officers' baggage ? 560 lbs.	gery Appliances		the following will be added :	Tents (circular, single).
T CLA	RIMY-C	ach Dù t is pro				Number	400 00	15		100 d 10	100	115	191	follow	ts (circu
TITW	T A.	ted to e	Mountain		258.		111				:	1	11		
GES 25 TO 32), ISSUED	(ENT WITH AN the Medical Department for	:	Company, with Mo		Horses, Saddlery and Harness.		HOREE. HOREES' {private NC. Officers'	Total Riding Horses		Pack for Patients for Equipment for Surgery Appliances Animula Spare	Total	Grand Total	SADDLETX.* Riding Pack Saddles	If Tents, &c., are carried for the Officers and Men,	Animals. Pack Saddles.
S (PA(DEPARTMENT port required by the Me	en beloz and treo includ.	1.00											ried fo	Fack .
LABLE	DEP.	as shor ugons) (Details,	e Bei	taking.	L.S.C. for Tran. port purposes.	Others	111	1 17	-	103 03	** : :*	67	2	re car	Muleteers.
ORPS	Transpo	spitals,	No. 1Detail of One Bearer	To be added on taking the Field.	A.S.C. for Trans- port purposes.	Mule- teers.§	111	: : :			: : : :	20	166	&c., a1	Mule
D-YIK	MEDICAL	Ad Ho Imbul Army	tail	o be a	Reserve.	Bâtman.		:::	:		::::=	=		ents,	
I AB	INI	nd Fu	-De	F		Bearers.	111	: : :	1		118.11	90	J	Tf T	
FROM	p Equi	unies an Ind Lin spitals	Io. 1	-	Cadre.			- ea :	11	A.H.C. 1 10 10 10	1 12 1 1	92	11 36 166 		1
CLED	, Cam	Comp lat de 1 lui Ho	A	1			111		:	11111					
[EXTRACTED FROM ARMY-CORPS TABLES (PA	The following Tables show the Personnel	the Regimental Tables). The Department is organized as Bearer Companies and Field Hospitals, as shown below : One Bearer Company and siz Field Hospitals to the Army-Corps Details, including Cavalry Brigade. Transport is provided j on the same time.			Officers and Men.		OFFICERS. Surgeon-Major (in charge) Surgeon DTHER UFFICERS.	Captain of Orderlies Lieutenant of Orderlies Transport Officer	Total Officers	NC. OFFICIES AND MEN. Serjeants Serjeants Corporals , Wheeler	Private Shoeing-smith Privates Muleters Bitment, éc	Tctal NC. Officers and Men.	Total Cadre { Officers Total to be added on taking the Field If Tents are carried, add		

			<u></u>	12	Detai	l of	a I	Beau	rer C	Jomp	any,	&c.	n de la	-12				
		Remarks.			* Divisible into two half comparies. When so divided, the Commis- sariat section, with the force to which the 4 Bearer Company is at- twohed finds one of	and the repairs, do., are performed by its	artificers.	+ If suitable spring car-	riages are procurable locally, these 23 need not be military ambu-	hance carriages; une horses, drivers, and harness shown in block	from the totals.	§ Officers entitled to public service horses	NC. O.'s Saddlery.					Career
ľ		01.°	Mumb		. ci				10	87		40						
AND SHALL ADDRESS TO DITUT THE		Tentage and Camp Equipment.		and the second second	TENTS. TENTS. Operating tents (double circular, without liming), one with each surgery wagon			CARRIAGES.	Ambulance Wagons, 2-horsed	2-horsed Wagon Ior Equipment (and hor	Water Carts	Total Carriages				Men, the following will be added :	Tents circular, single.	23
8011 M	-		Number		*8 %		46	86	101		п		10 S -0		_	n, the f	Wagons.	63
uns nun zer gumunt -'vr		Horses. Saddlery, and Harness.			HORES. General Contracts	Total Riding	Draught {	Total Draught	[Grand Total Horses		SADDLERY.S NC. Officers		HARNESS. Double sets, interchange-	able, lead and wheel		Tents, &c., are carried for Officers and Me	Draught Horses.	80
No. 2Detail of a Bearer Company,"	king	r Trans-	Others.		111	::-	Ħ		: 03 03 H		: : -	6 3	.10	1		e carrie	Drivers.	4
ouror	To be added on taking the Field.	A.S.C. for Trans- port purposes.	Drivers.		111		:		111		{ 23+}	43.		169		&c., ar	Q.	
aB	be ad	Reserve.	.nomth8	1	111	:::	:		:::			=				lents,		
II of	Ĥ.		arers.		1111	:::	:					35				If 1		
Deta		Cadre.			H 00 H	- 63	n	A.H.C.	-22		: : 12	36	11 36		206		1	
i ci		1		T	111				111				13	10				
No.		Officers and Men.			OFFICERS. Surgeon-Major (in charge) Surgeons-Major Surgeous	Captain of Orderlies Lieutenant of Orderlies		NC. OFFIECRS AND MEN.	:::		Privates success success success	1 NC. Officer	Total Cadre { Officers	Total to be added on taking the Field	Frand Total			

PPENDIX.

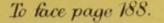
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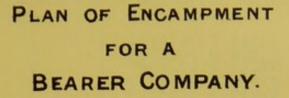
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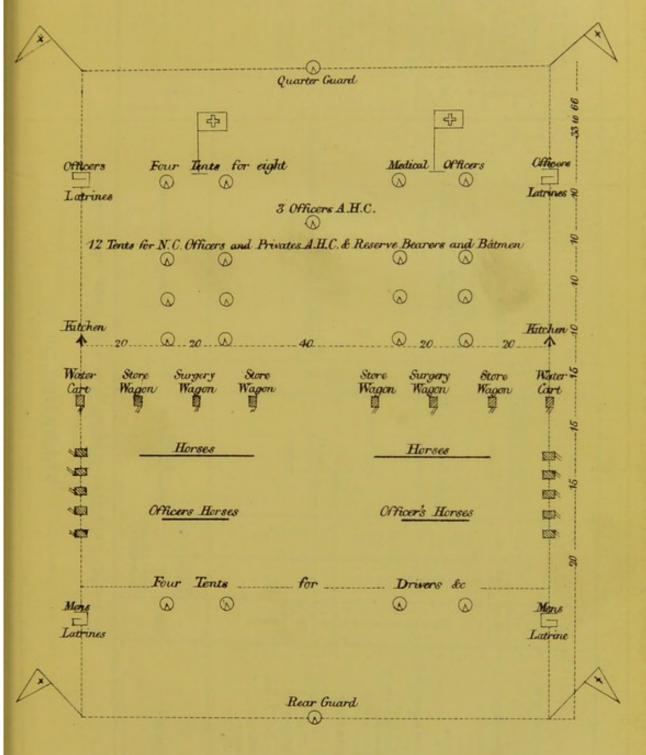
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	Domondua	ROTATES.	§ Detail of Equipment, vide Medi-	cal Regulations.	For pattern of carriages and tents,	966 P.C.1911 T.O. 2.	‡ Any pattern available ; eight to	every 100 blankets.			AO S		A A A A A A A A A A A A A A A A A A A		E		 If suitable spring carriages are procurable, these carriages, with their procurable, these carriages, with their 	drawn from local sources. may be					
-		Drivers.	c	24					63					12	-	67	20	23*	43		4		
		Horaca.		4			Sall.		4		_	N		24	03	9	40	46	86	1	00		
		.IntoT		54					61	1	- 20			12	-	-	17	23	40	added	61		-
	.boar	Ambulance Wagon, 2-hor	1.5	:	1				:		11		-11	IO	:	:	10	23*	33	ill be	:		
cs.	uož	Surgery Wag. 2-horsed.		54					:					:	:	-	03	:	C1	w gui	:		
Carriages.	ts, rsed.	Supply.		:	-		1		:					:	-	:	-	:	-	ollow	:		
0	Carts, 2-horsed.	Water-cart.		:					:					C-3	:	:	C3	:	03	the f			1
	.bos -qup	Wagon for Ed		:					51		14			:	:		64	:	63	If Tents, &c., for Officers and Men are carried, the following will be added:	:		
	-	G.S. Wagon	-		-	UNL.	-	-		-		-	-	:	:		1	:	:	are can	07	-	
		Weight.	Lbs. 200	1,400	56	780	:	12	212	175	231 24	720	80	÷	:	:	1,600	:	:	Men 6	2,070	758	
		Number.	63		58	195	\$16	17	25		ci 10	12	:	:	÷	:		I	:	and	23	101	
		A PART	:		:		:			:	::									flcers	173		
								:	:	-	::	:		:		:	-	-	-	for O	1 1		
			(S	:			:				11			:				:	-	&c., 1		Blankets, horse (does not include Medical Officers)	
-			Operating Tents (double circular, without lining)	:			:		:		11		:		:		:			ents,	1 1	al Office	
	÷.,	ed.	rithou	:	:			:	:	:				:	(suoj	:	:	:		If I	: :	Medic	
		Articles to be conveyed.	alar, v	su	:		1		:			:	:	:	y's rat	:	:	:	əu		: :	clude	
1.8		o pe o	e circi	static	:	:	cts	:	:	:	{ post	:	:		ent da	:	. :	ts	hd Li		: :	not in	
-		icles t	doubl	essing	:	:	blank	:	:	:	nents	:	pots	atient	(curn	:	:	patien	and 2		Officers	(does	
		Art	Tents	for dr		:	Straps, to secure blankets	Buckets (canvas)	Kettle (Flanders)	Ropes (25 yards)	Picketing implements { posts	Officers' baggage	" cooking pots	Carriage for 60 patients	Supply purposes (current day's rations)	are	In	r 138	Total 1st and 2nd Line		Tents, &c., for Officers	horse	
1			ting 3	ment	Axes, hand		s, to s	ets (ci	e (Fla	s (25]	eting 1	ers' ba	CO	iage fo	uly put	Add for Spare	Total	age fo	To		18, dec.	ukets,	
			Opera	SEquipment for dressing stations	Axes,	Blankets	Strap	Buck	Kettl	Rope	Pick	Office	"	Carr	Idns .	Add		Carri			Tent	Blar	
			-	1	14				e 5									2nd Line Carriage for 138 patients			ine		
2									1st Line									nd Li			2nd Line		

APPENDIX

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DANCERTIALD LITH 22. BEDFORD ST COVENT GARDEN.

and the second of the second of the second of the

APPENDIX.

No. 6.

		· Seal	Ďe	tail of	a Fi	ield	H	los	pita	1, &	c.							_
		Remarks.			* Divisible into two half field hospitals.	No Officers or NC. Officers of Transport Company, or	spare Horses or Transport Equipment are included in	the Establishment, but a due proportion would ac-	company the Transport. + May be locally sumplied.	All artificers' work done by Hoad Onerors of the Ser-	tion supplying the Trans-	will be furnished by such Section.	§ If tents are carried for	Officers and Men, no extra transport will be required,	quire 10 circular single tents in addition.	** Officers entitled to public	with NC.O.'s saddlery.	
		u.	Mumbe			ea 8								203	12	1		
No. 6.	Army Corps, with Transport.	Tentage and Camp Equipment.			TENTS.§	Operating Tents (double circular, without lining)					CARRIAGES.	Wagons { For longe and squipment or 3. Wagon Wagons 200 slok	(1 harmacy	Carts, water	Total Carriages			
X	of an 4		Number			e0 14	184	3	52		1	10	1		3 14 3 14			
APPENDIX	Hospital*	Horsee Soldflory and			Honsns.	Riding Cprivate	Draught 5		Total Horses		SADDLERY.**	Riding		HARNESS.	Double sets interchange- able, head of wheel	NEW STREET		
	No. 4Detail of a Field	To be added on taking the Field.	tia A. S. C.			:	:			111	::	: :ð	-	: 83				
	-De	To b takin	Militia Reserve.			:	:	-	:::		11	::	: : "	0 00	ľ			
	No. 4		Cadre.	-	4 03 49	-	8	A. H. C.	01	0	- 01	-* 81	:		8 10	30	75	
			Officers and Men.		Surgeon-Major (II charge) Surgeons-Major	Captain of Orderlies	Total Officers	AND MEN.	Serjeant Major (Steward) Colour-Serjeant (Assistant Steward)	Serjeant (Compounder in charge)	(Principal Medical Officer's Clerk)	t Cooks)	Drivers	Bâtmen, &c		would to be added on taking the Field	Grand Total	

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No. 6.

APPENDIX.

Water Vargons, Pharmacy, Total. 2-horsed, purposes, Horsed. Total.	4 1 8 May, if necessary, he Local Auxiliary Transport. 2 4 2 8 28 14
Total G. S. Weight. Wagons, 4-horsed.	490 60 } 4 5,000 5,000
Articles to be conveyed.	Officers' Baggage 8 8 Cooking pots 8 8 Cooking pots 8 Cooking pots 8 Texts. 2 6 6 20 6 6 60 6 <t< td=""></t<>

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APPENDIX.

Detail of the Administrative Medical Staff, &c.

APPENDIX No. 7.

No. 6.-Detail of the Administrative Medical Staff for a Division and Army Corps.

				1	Iospi	ital C	orps.		
	Appointment and duties.	Rank.	Medical Officers.	Officers of Orderlies.	Officers of Orderlies Serjeunts (clerks).		Privates (clerks).	Båtmen attached.	Horses, Riding.
Division (or Corps Details).	Head-Quarter Staff	Deputy Surgeon- General.	}1		1			9	2
corps actions	In charge of Divisional Staff and to act as Sani-	Surgeon- Major.	}1			1		1	1
	tary Officer] To act as Quarter-Master { under the P. M. O.	Officer of Orderlies.]	1		1		1	1
	Total one Division		2	1	1	2		4	4
	Total three Divisions, and Corps Details		8	4	4	8		16	16
Army Corps Head-Quarters	Head-Quarter Staff {	Surgeon- General.	}1		1		1	2	3
	Field Inspector {	Deputy Surgeon- General.	}1					2	2
	Sanitary Officer	Do. Surgeon-	1		••			2	2
4 1 4 1 4	Secretary to SurgGeneral { Medical Officer in charge]	Major.	}1		•••		1.4	1	1
	of Head-Quarter Staff J To act as Quarter-Master	Do. Captain	1					1	1
	under the Surgeon- General	of Orderlies.	}	1		1		1	1
	Total Head-Quarters		5	1	1	1	1	9	10
	Grand Total, including three Divisions and Army-Corps Details		13	5	5	9	1	25	26

N.B .- Figures in italics denote those that are included in the General Staff in the Tables of a Division or Army Corps. All Officers of the Department below the relative rank of Major are supplied with Public Service

Horses.

No. 8.

APPENDIX.

Detail of the Administrative Medical Staff, &c.

APPENDIX No. 8.

Details of the Administrative Medical Staff for Stationary Field Hospitals along the Line of Communications and at the Base of Operations.

A Constant of the second				Army Hospital Corps.					
	Appointments and Duties.	Rank.	Medical Officers.	Officers of Orderlies.	Serjeants.	Corporals.	Privates.	Båtmen attached.	Riding Horses.
At Head-Quar- ters.	On Staff of the General Officer commanding line of communication	Surgeon- General.	}1					2	3
	Secretary to Surgeon-{	Surgeon- Major.	$\Big\}1$					1	1
1	Orderly Officers to ditto	Surgeons. Lieutenant	2	••	••			2	2
TRANT	Officer of Army Hospital	of Orderlies.	}	1				1	1
	Clerks to Surgeon-General	Serjeants. Privates.	::-		1		2		::
		Total	4	1	1		2	6	7
Advance Maga- zine.	Officer in charge of Stores, advance magazine Officer of Army Hospital Corps Compounders, Army Hos- pital Corps Packers	Surgeon- Major. Lieutenant of Orderlies. Serjeant. Privates.	}1 } 		 2			1 1	1
		Total	1	1	2		2	2	2
On the Lines of communi- cations.	Field Director with each road Commandant Orderly Officer Clerk	Deputy Surgeon- General. Surgeon. Serjeant.	}1 _1 		 1			2 1	2
		Total	2		1			3	1

Details of the Administrative Medical Staff, &c.

DETAILS OF THE ADMINISTRATIVE	MEDICAL STAFF, &c continued.
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(Friday)		the form		Arm	уH	ospita	l Cor	ps.	
	Appointment and Duties.	Rank.	Medical Officers.	Officers of Orderlies.	Serjeants.	Corporals.	Privates.	Båtmen attached.	Horses, Riding.
At the base of operations.	Principal Medical Officer	Deputy Surgeon- General.	$\Big\}$ 1					2	2
	Director of Hospitals	Deputy Surgeon- General.	$\Big\}$ 1					2	2
	Director of Medical and Surgical stores and sup-	Deputy Surgeon- General.	}1					2	2
	Secretary to the Senior Medical Officer	Surgeon. Surgeon.	1			•••		1 1	1
	Orderly Officer to ditto	Serjeant.			1				
	Clerks to ditto {	Corporal.			••	1			•••
	Clerks to the Director of ∫	Corporal. Private.				1	·:		
	Hospitals Officers Army Hospital Corps in charge of Hos- pital equipment in ex- pense and Provision stores	Lieutenant of Orderlies.	 }	1				1	
	Charge of Medical stores	Lieutenant	}	1				1	
		Orderlies. Serjeant.	1.		1				
	Clerks to Director of Stores	Private.					1		
	Compounders under Direc-	Serjeants.			2.				
	tor of stores J Packers under ditto	Privates.					2		
	Clerks Army Hospital Corps to Officers of Orderlies	Corporals.				2			
	Paymaster and Quarter- Master under Surgeon-	Captain of Orderlies.	}	1				1	1
	General { Clerks to ditto {	Non-commis- sioned Officer.	j			1			
	Acting Serjeant-Major and Quarter-Master Serjeant	Acting Serjeant Major.	}.		1				
	1 1 22 2.15	Total .	. 5	3	5	5	4	11	

Note.—All Officers of the Department below the rank of Surgeon-Major will be supplied with Public Service horses. (429) O Detail of the Staff of the Surgeon-General-in-Chief, &c.

APPENDIX No. 9,

Detail of the Staff of the Surgeon-General-in-Chief of an Army-Corps on Active Service.

			Arn	ny Hosp	ital Co	rps.
- Appointment and Duties.	Rank.	Medical Officers.	Officers.	Non-commissioned. Officers.	Batmen.	Horses.
Surgeon-General-in-Chief {	Surgeon- General.	} 1			3	3
Secretary {	Surgeon- Major.	} 1			1	1
Orderly Medical Officers	Do.	2			2	2
Officer of Army Hospital Corps			1		1	1
Clerks {	Colour- Serjeant. Serjeant.	} 		1 1		
Total	aller and	4	1	2	7	7

PENDIX.

· · · · · · · · · · · · · · · · · · ·	Medical Department with an Army Corps.																		
			Remarks.		 † Transport Staff, & e., Staff, & e., Shown in Shown in s- sariat Table. * No Artificers shown; they are included in the Trans- port Sections with Commis- sariat. § Included in the Trans- port Sections with Commis- sariat. No T x All Officers of the Department below the rela- tive rank of Major are sup- plied with Pub- lic Service Horses. 								Field Hospitals require no ex-	the currenges					
-		*s0	and Hors	toT barrie	0101	101	STOR	209	627	00 F-	42	\$ 54	198	940	5i i	196		03 03 60	34
Total Draught.			1			174	522	I.	40	: : :		748	1.1	748		63 gg	34		
1	Horses.		- 1	Spare.	1	19		9	18	:] ea	: :*	: ∞	8	1.1	55		11	÷
	-			Draught.		: ⁸ :	88	\$ 168	\$ 504		38	: :4		\$ 716	1.1	716		02 gg	34
				.ZaibiH	0) 03	11 4	: 0	8	98	00 1-	10.01		10	9	5	213		11	1
			Total.			40 {	Ĩ	64 {	192 {		19 {	12	4 68 885	304 {	11	304		- 00	6
		4	1	4 porsed	;	: *		+	12	12	:	: : :	3 :	57	1 : :	24		1.1	:
				Surgery W	:	¢1	:	¢1	9	:	1	: =	1 1	8	1.1	8	d :-	1.1	:
				Auxiliary .	1	23	:	23	69	1	Ħ		: :	92	1 1	92	be added :-	11	1
	ges.	*U	o Wago	Ambulance	1	10	:	10	30	:	10	: 10	1 1	40	1.1	40	be	11	:
	Carriages.		M 'S 'Đ	Auxiliary	1	: 0	0	00	24	:	1	1 1 2	57	48	1.1	48	Will	11	-
		.IqsoH	[TO] , HO	G. S. Wag	:	: 0	•	00	24	:	:	1 1 1	5 :	48	1 1		ving	11	-
	S-horsed. Water Carts, 2-horsed.		:	-	:	-	60	1	1		: :	+	1.1	1-	ollo	11	-		
			-		*	9	18	:		: - :	-	63		83	he f	11	-		
		Wagon for Equipment,			1		:	61	9	:.	-	1 -	: >	00		00	ed, t	- :	-
				Forage, 4-	:		:	-	:	1							carri	:::	::
	-		40.03	G' S' Mat	:		-	1	-				1 1	:	1 1	1:	are (-
			Total Officers and		5	206	NOT S	366	1,098	13	3 98	101 5	100	1,746	81	2,516	Men are carried, the following	16	17
		From Local		:	:53	16	39	117		:4	12: :	24	164	1.1	164	s and	11	-	
	NC. Officers and Men.	Transport.	e Be-	A. S. Corp includin serves.	:	:8	28	57	171	-		13: :	: 2	269	11	269	Tents, &c., for Officers and	16	17
	ficers a		From Reierves.	Bearers.		8 : 1		3 95	3285		47	:**	: :	380	11	380	, for	11	-
	10 .0.	Medical.	Bere	Bâtman.	01 03	II ::	: 0	23 ^e	6 87	~ ~ ~	· · ·	4 6 4	ê :	\$ 8	22	291	8, &c.	11	-
	A		80	A. H. Corr Cadre.	63	36	:	113	339	5 3		18 33	1	6 09	481 181	1,106		11	-
	13.			Transport.		17 1		-	0	:	11	::-	. eo		1::	-	If	11	-
	Officers.	-	15.0	ifsebr0 10	~	e0 (01	-	~	318	~ 1	- :	- ca 1		329	13 6	41		11	4
l				Medical.	1	8 14		23	58	14	4 :	es 4 1	2 :	125	1 16	231		11	.1
denote ly sup- ncluded Army- ked §.]								~	11		Head- ions of , suffi- s only.	Id 3	ons,	:		11			
l	pe d scally scally fine fine fine fine fine fine fine fine		:		dt		ons	Corps	:: 		1. H ection uny, s tails o	te Fie	perati	:		11			
l	(655) INOTEFigures in Black Type denote the Details that may be locally sup- piled ; those in <i>italica</i> are included with the General Staff in the Army- Corps Tables, except those marked §.] Detail.				tache	tache	ivisio	livis	rmy-(:::	uils.	ached ached of 2 S for pr	in th	of of nicati	:		11		
l				visio	Comp ort all Hosp	ort att	ne Di	I oou	of A	4 ::	Deta Con	rt att rt att ers at port C for 3]	Corps	 base	:		11		
	ni s	c in	s, ex	A	A Division	(Transport attached (2 Field Hospitals	Msur	Total, one Division	Total, three Divisions.	Staff		Corps Details. tive Staff } Bearer Company Transport attached*	o Freid Hospitals Transport attached. Head- Quarters and 2 Sections of Transport Company, suffi- cient for 3 Hospitals only.	rmy	Staff uls at of cor	TOTAL		nies	
	lanur	thos de	Table		Aative	EES	AL	To	To	ative	ompu	Co Oct	E C	an A	utive ospita	To		ompa	
	R H	tied :	orps		A Div Administrative Staff	ine	cnd Lane			Administrative Staff of Army-Corps	port 1	Corps Administrative Staff 1st Line { Transpe	ine	Total with an Army Corps in the Field	Administrative Staff 13 Field Hospitals at base of operations, or along line of communication			rer C	
	INOT	- A3	.0		Adm	Ist Line	DUZ			Adm	Gavalry & Bearer Company Transport attached*	Admi Ist Li	2nd Line	Total	Admi 13 Fi or a			Staff	
	(4)	291												1000			-	9	1

<u>ب</u> (429)

2 Staff 4 Ben

No. 9.

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Cadre of Medical Officers, &c.

APPENDIX No. 10.

The following Table shows the Cadre of Medical Officers distributed to each Arm of an Army Corps in the Field ;--

Arm		Medical Officer.	Number.	Horses.	Bâmen.	
Infantry Battalion	 		Surgeon	 1	1	1
Cavalry Regiment	 		33	1	2	2
Artillery, Horses	 	.,	.,	1	2	2
Field Battery	 		.,,	1	1	1
Engineer Company	 		33	1	1	1
Pontoon Train Troop	 		,,	1	1	1
Telegraph Troop	 		"	1	1	1

TOTAL FOR ARMY CORPS.

21 Infantry Battalion	 Surgeon	21	21	21
6 Regiments, Cavalry	 33	6	12	12
4 Batteries, Royal Horse Artillery	 "	4	8	8
11 Field Batterics, R.A	 33	11	11	11
ROYAL ENGINEER.				
3 Divisional and Reserve	 23	3	6	6
2 Half Companies Reserve	 	2	4	4
Pontoon Train, 1 Troop	 ,,	1	2	• 2
1 Telegraph Troop	 "	1	2	2
Total	 29	49	66	66

Hospital Field Equipment.

APPENDIX No. 11.

FIELD HOSPITAL EQUIPMENT.

(Supplied by Ordnance Store Department.)

Field Hospital Store Wagons, &c.

Hospital Field Equipment.

Articles.	For one Hospital.	For 25 Hospitals.	Remarks.
ents, (double circular without lining) for operating	2	24	{ 12 Field Hospitals.
hread, whited-brown 1b.	4	100	C Ten 19
ins ∫ lamp cotton	4	48	for 12 hospitals,
$\lim_{x \to x} \begin{cases} \text{lamp cotton} & \dots & $	4	48) or 48
SECTION III.			L wagons.
Tools, ARTIFICERS'.			and the second second
rushes, whitewash, 6 oz	8	200	ATTACK SHALLS
hisels, ripping	4	100	ANT STRA
lammers, handled, claw, 20 ozs., small	4	100	
leedles, collar or packing (sizes 1 to 6)	24	600	and the second second
" sewing, assorted, women's	200	5,000	
hand, 26-inch, with case	4	100	THE STATE
aws, { tenon, iron back, 14-inch	4	100	Part Lord
cross cut, 5 ft. with case and handles	. *	100	And a pair of the
SECTION IV.	Stand Land		Statutes.
MISCELLANEOUS.			1 summer
hread, packing, middling, 1-lb. balls	24	600	Barris and a
lags, linen lbs.	60	Inden I	
SECTION V.	- second		- IB mit
ORDNANCE.	- serentia	bin series	Storie and
arts, water	2	50	
Vagons for hospital equipment, G.S. with special fittings	4	48	
" pharmacy	2	24	and the second second
" general service for baggage	20	40	If Transpo
	A LOOP TO T	and a los	is not local supplied.
SECTION VI.		A Party of the second	supplied.
BARRACK AND HOSPITAL STORES.			
Basins, zine, 11-inch, M.P	20	500	and the second
Blankets, grey, general service	200	5,000	
hand, scrubbing	8	200 200	
Brushes shaving, HP	24	600	
	8	200	Test succes
Suckets, iron, galvanized, 4-gallon, butchers'	8	200	and the second
foil, feeding, 1 pint	4	100	and an an and
Jans, tin] soup or water, 3 gallons		200	States (States
∫ bolster, hair or straw ,Bk		5,000	100.000
Cases { bolster, hair or straw ,Bk		5,000	A STREET
Castors, pepper, pewter		100	a la fair anna ann
Dhoppers, meat, butchers'	4 8	100	2.31
Jocks, bib, driving, for beer, 1-inch	90	200 500	A STATE OF THE OWNER
Combs { horn, hair, 8-inch	0	200	
Livory, small tooth, 3g inch	8	200	
Corkscrews, iron folding, HP Cups, egg, pewter, HP,and Recreation Rooms	and the second se	1,000	A REAL PROPERTY AND

* Forty-five blankets, grey, General Service, will be drawn for the Army Hospital Corps establishment of a Field Hospital, independently of the above.

APPENDIX.

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No. 11.

Hospital Field	Equipme	ent.	
Articles.	For one Hospital.	For 25 Hospitals.	Remarks.
Feeders earthen, HP	12	300	
Deeders, carenen, acc	12	300	
Funnels, tin, 1-pint	4	100	
	200	5,000	
Forks dinner, black-handled, large	4	100	
(butchers' cutting, 10-inch	12	300	
againg buck-handled	4	100	
Knives dinner, black-handled, large	200	5,000	
opening meat tins	- 8	200	
Ladles, iron, tinned, soup	4	100	
Lines, clothes, HP, 80 yards	8	200	
Machines, weighing, without weights, 14 lbs.,	200.00	Contraction of the	
enamelled, with pan	4	100	
Pots, zinc, chamber, F.S. and M.P	24	600	Contract of Statements
Saltcellars, wood	12	300	
Scales, weighing, without weights, pillar, for		1	
groceries, 7 lbs.	4	100	
Scissors, hair-cutting. 7-inch pairs	8	200	and the second sec
Scoops, 1-pint	8.	200	
Shapes or dishes, pudding, 1-pint	24	600	the transferration of the
Sheets, barrack, linen	480	12,000	
Skewers, with chains sets of	3 12	300	and the second se
Sponges, bath, 2 oz	9	200	A CONTRACTOR OF A
Spoons, table, German silver	. 200	5,000	
Steels, butchers'	. 4	100	
Towels, hand, HP	. 220	5,500	
Urinals, pewter	. 16	400	
Warmers, pewter, stomach	. 8.	200	
	. 8	200	
	. 8.	200	
Drass, nat < y	. 8	200	
	. 8	200	
(14 lb	. 4	100	a state of the sta
	. 8	200	Contraction of the second
4	. 8	200	
iron, ring { 4 ,, 2 ,, 1 ,,	. 8	200	
1 "	. 8	200	and the second sec
	. 8	200	
	. 8	200	
the second s	Sel a series		
And the second			

If Tents for Officers and men are required they should be carried in the wagons of the Field Hospital. The numbers required are 10 for each hospital. NOTE.—Field Hospitals at the base of operations may receive 11 marquees com-plete in lieu of 50 Circular double Tents without lining.

Clothing supplied by Commissariat Department for Field Hospital Store Wagons.

Articles.		-	For one Hospital.	For 12 Hospitals.	sul
Gowns, blue serge, lined Shirts { white cotton flannel Socks, grey union, pairs Slippers, brown leather Trowsers, blue serge, lined Waistcoats, blue serge, lined Razors Razor strops Worsted	 		20 48 48 100 48 40 40 40 2 1 1 1	$\begin{array}{r} 240\\ 576\\ 576\\ 1,200\\ 576\\ 480\\ 480\\ 24\\ 12\\ 12\\ 12\end{array}$	

No. 11.

Hospital Field Equipment.

For Pharmacy Wagons.

A STATE OF A	15 19		
Articles.	For one Field Hospital.	For twelve Field Hospitals.	Remarks.
SECTION II. CAMP EQUIPMENT, &C. Lamps { hand, small F.H HP, operating Pins, tents, small Tables, operating, F.H. equipment Thread, sewing, whited-brown Thread, sewing, whited-brown Saucepans, cooking, nest of 4 SECTION III. SECTION III. TOOLS, ARTIFICERS', &C.	4 20 22 8 22 2	48 24 240 24 96 24 24 24	
SECTION IV. MISCELLANEOUS. SECTION V. ORDNANCE. Cans, tin, with screw tops { 6 lbs., oil 10 lbs., paraffin and for the screw tops { 10 lbs., paraffin long medical small salt, lined with wood 15 lb 7 , 2 , medicines { 8 oz pills or powdrs.} matches	$ \begin{array}{r} 10 \\ 2 \\ 4 \\ 4 \\ 4 \\ 2 \\ 6 \\ 12 \\ 18 \\ 4 \\ 6 \\ 16 \\ 2 \\ 10 \\ \end{array} $	$120 \\ 24 \\ 48 \\ 48 \\ 48 \\ 48 \\ 24 \\ 72 \\ 144 \\ 216 \\ 48 \\ 72 \\ 192 \\ 24 \\ 120 \\ 12$	
SECTION VI. BARRACK AND HOSPITAL STORES. Basins, zinc, 11-inch	4	48	

Hospital Field Equipment.

For four For one Remarks. Articles. Companies. Company. SECTION II. 112 28 . . Axes, hand Basins, zine, 9-inch, hospital canteen 32 8 • • 8 Boxes, wood, medical No. 1 comfort, divisional No. 2 2 •• ... 2 8 .. 17 68 Buckets, canvas . . 8 2 Canteens, wood {A. . . B. . . • • • • 2 8 8 2 H.P. C. .. :: • • Flags, F.H., white { square, 4 ft. with red cross { triangular, directing Flannel, white, 27-inch ... ya Kettles, Flanders 16 4 ... 16 4 ... 12 48 .. yards 100 25 • • Lamps { hand, small, F.H. ... Lanterns, coloured, red, marquee, H.P. 8 32 ... 6 24 •• 16 4 .. 2 8 Poles, wood, { 16 feet, for square flags F.H. { 7 feet, for triangular flags • • 16 4 ... 32 8 Pots, zinc, chamber • • 42 168 Picketing implements { posts maul • • .. 12 3 7 20 Ropes, picket, tarred, 25 yards 16 4 Stools, close, iron, H.P., complete •• ... 44 11 ... Saddiery, universal sets 64 16 Straps to secure blankets •• 2 8 Tables, operating, bearer column Tents, operating, double circular, without 2 8 inner lining 40 If not locally 10 Wagons, ambulance {N.P. 1st line. . O.P. 2nd " .. • • 92 supplied. 23 .. SECTION III. TOOLS, ARTIFICERS'. 8 32 Chisels, ripping ... 4 16 Hammers, claw, small, 20-oz ... • • ... 4 16 • • packing 200 50 darning, No. 15 ... Needles ... • • 50 200sewing " 7 SECTION IV. MISCELLANEOUS. Bottles, tin, oil, square, with screw top, 2-gallon 2 8 2 8 Scissors, lamp, with guard SECTION V. ORDNANCE. 4 Transport, tip, 1 { supply water.. 8 Carts 2 Mark I. • • • • 2 8 Wagons { ambulance.. equipment { Surgery } G.S. light ... 2 8 spring. ... •• • •

For Surgery Wagons, &c. of Bearer Companies.

Hospital Field Equipment.

FOR SURGERY WAGONS, &C. OF BEARER COMPANIES-continued.

Articles.	For one Company.	Four four Companies.	Remarks.
SECTION VI. BARRACK AND HOSPITAL STORES.		Mary 1	
Blankets, G.S Castors, pepper, pewter Corkscrews, iron, folding	142 2 2	568 8 8	
Cups, tin, drinking $\begin{cases} 1 \text{ pint} & \cdots & \cdots \\ \frac{1}{2} & \cdots & \cdots \\ 1 & 1 & \cdots & \cdots \\ 1 & 1 & 1 & \cdots & 1 \end{cases}$	50 50 2 4	200 200 8 16	i carat
Ladles, iron, tinned, for soup Lanterns, bull's-eye, police quart	$\frac{16}{2}$	64 8 8	
Measures, pewter	2 2 2 4	8 8 16	
Pots { pewter, mustard	2 4 2	8 16 8	
Saucepans, nests of 8 (12 qts. to 1 pt.) nests Spoons, German silver, table Stretchers, am- f 1st line	2 100 60	8 400 240	
bulance, N.P. (2nd ,, Towels, hand, HP Triangles, with tubular joints, and chain with	92 48	368 192	
hook attached Urinals, pewter	4	16 16	

If tents for officers and men be carried the following are the numbers, and should be carried by Transport service :—

Section.	Art	icles.			For one Company.	For four Companies.	Remarks.	
II II V	Blankets, horse, surcingles Tents, circular Wagons, G.S.	with 	pads 	and } 	101 23 2	404 92 8		

Bearer Company-Mountain Equipment.

Section.	Articles.		For one Company.	For four Companies.	Remarks.
VI	Blankets, grey		142		
II	Cacolets, pairs		50	ALCONTRACTOR OF	
II	Kettles, Flanders		25		
II	Litters, pairs		26		
II	Saddles, universal Pack		100	A LINGTON OF	
II	Saddles, riding		11	a state of the	
II	Tents, operating (double without lining)	circular	2	1	
II	Water barrels, pairs	** **	4		

APPENDIX.

W.O. Form 147.

day .- Avoirdupois Weight

et

for

Diets

the different

composing

Milk

Tea.

::::

Bread Rice Milk Sugar

20 a a a 0.00 th 9

1111

Bread Tea Sugar Milk

APPENDIX No. 12.

DIET TABLE.

Diet Table.

Meat... ... 12 oz. Bread ... 6 .. Potatoes ... 16 .. Vegetables ... 4 .. pint ... pint oz. Meat-roasted, baked, or stewed. • 15 (if with bone). 0Z. -+010-+-1 10 10 -101 --2 18 111 { Beef or } 1 Bread ... Potatoes ... Salt ... Trea ... Milk ... Vegetables Butter ... : : : Varied. Tea Bread Butter Ten Bread Butter Juold 1 pint 12 oz. 4 .. pint oz. pint oz. .20 bone). 194 -45 -19 엌 if (Beef or) bread ... 1 bread ... 1 bread ... 1 Barley ... Sait Tea ... Milk ... Vegetables Batter ... :::: with 111 ::: Entire. Soup Meat Bread Potatoes Tea Bread Butter Tea Bread Butter 15 (if * Joint [Beef or or Chop ...) or Steak without a bone ... 8 or. Bread ... 18 ... Potstoes ... 8 ... Read ... 18 ... Sugar ... 18 ... Yegetables 4 ... pint oz. Roast Joint; Chop or Steak roasted or stewed. pint oz. i a a a Roast joint, Chop, or Steak. * * * 61 1.0 % Meat... ... Bread Bread Potatoes 111 Bonst. 111 Tea Bread Butter Ten Bread Butter 1 pint 6 oz. 3 .. pint oz. 8 oz.* · 10 (if with bone). 0 00 discipation of 1 0 * * 30 1.040 :::: a (Beef or) Bread 11 Bread 11 Potatoes 1 Barley 1 Suffer 1 Suffer 1 Vegetables Butter 1 ::: ::: Half. -Soup... Meat... Bread Potatoes Tea Bread Butter Tea Bread Butter BREAKPAST. Flour SUPPER. DINNER. Fowl 8 oz. 8 Rosted, bolied, stewed 3 or mude into For a 12 oz. 1 Bread ... 4 1 Potatoes ... 8 , 1 pint 6 oz. 1 pint 6 oz. 3 .. +.20 * 10 (if with bone). n 6 Laphan 8 6 8 Chicken. ::: 111 Fowl Bread Potatoes Salt Tea Milk Butter ... 1 11111 Tea Bread Butter Tea Bread Butter pint oz. pint oz. ... 15 02. +.ZO Without bonc. : Military Hospitals.-Articles --in - 10 Harter de m --2 00 ::: Low. 111 1111111 Beef ten Bread Tea... Bread Butter Beef Bread Salt Tea Sugar Milk Milk Tea Bread Butter . 12 oz. 2 ... 3 pints 1 oz. 1 pint 4 oz. 1 ., 1 pint 4 oz. 1 pint 4 oz.

11

Milk Bread

1 pint 4 oz.

11

Tea

Rice milk ... Bread ...

1 pint 4 oz.

11

Tea... Bread

Rote,-Drinks for patients are to be made and charged according to the following proportions :- Barley, Water,-Barley, 2 oz.; sugar, 2 oz.; for every five pints.
 Lenonade,-Two large lemons; and sugar, 14 oz., to two pints.
 Cons. of pepter may be issued for every 100 diets except tea and milk diet. j
 1 oz. of mustard may be issued for every 20 beef diets.

: 1

Milk Bread

1 pint 4 oz.

: 1

Tea...

Specification of the New Regulation Case, &c.

APPENDIX No. 13.

Specification of the new Regulation Case of Pocket Instruments for the use of all Medical Officers under the Rank of Deputy Surgeon General.

No.		Dimensions.	I		
	Martin Carlos Barrow	Inches.	£	ε.	d.
1	Probe curved and straight sharp pointed Bistouries in 1 handle	31	0	8	6
1	Symes' abscess knife and double-edge				
-	scalpel, in 1 handle	37	0	8	6
1	Tenaculum and gum knife, in 1 handle	31	0	8	6
	Pair crooked scissors	4ª	0	3	6
1 1 1 1 2	Spatula, German silver	44	0	1	9
1	Bow dressing forceps	42	0	3	6
1	Director and aneurism needle, plated	4문	0	3 2 5	0
1	Pair artery forceps, fenestrated	34	0	5	0
2	Probes, plated	43	0	2	0
1	Male and female silver catheter com- bined caustic-case with palladium }	41	0	18	0
	crayon J	4	0	7	0
1	Clinical Thermometer	41	ŏ	2	0
1	Case for ditto, plated Lancets	24	0	3	0
-	Dieffenbach's forceps	2	0	5	0
2 2 1	Silver hypodemeric syringe, in case	3	0	14	0
6	Needles, plated	and the second	0	2	0
1	Tablet of silk and wire for sutures	$2\frac{1}{2} \times 2\frac{1}{6}$	0	1	3
-	All contained in a Morocco single- flapped case of the following dimen- sions	$ \begin{array}{c} \text{Length} & 5\frac{1}{4} \\ \text{Breadth} & 2\frac{5}{8} \\ \text{Thickness} \\ \text{at clasp } 1\frac{1}{4} \end{array} $	0	9	6
	Total weight with instruments 91 ozs	£	5	5	0

APPENDIX No. 14.

INSTRUCTIONS TO COMMANDING, MEDICAL, AND OTHER OFFICERS OF THE ARMY, FOR THEIR GUIDANCE AT A TIME WHEN THERE IS REASON TO ANTICIPATE AN OUT-BREAK OF CHOLERA, OR WHEN IT IS ACTUALLY PREVA-LENT AMONG THE TROOPS.

Officers whose duty it is to see to the health and comfort of the troops are especially required to exercise the utmost vigilance at a time when Cholera is prevalent, or when there is reason to believe an outbreak may be expected.

I. - Measures to be adopted in anticipation of a threatened invasion of Epidemic Cholera in Military Stations.

1. Medical officers will make themselves acquainted with every arrangement of their corps, and the condition of every locality in and about the barracks, in order that they may be in a position to suggest, for the consideration of their Commanding Officers, not only improvements in ordinary matters, but arrangements of a more temporary character, applicable to an exceptional period.

2. Nuisances will be removed and cleansing enforced *outside* barracks, and with this view local boards or persons entrusted with powers to remove nuisances will be called upon to put their powers in force.

3. As much space as is practicable will be afforded to each individual in barracks; on this account any existing misappropriations will be restored to their proper use.

Should any alteration be made in the appropriation of rooms in barracks or hospitals that has been sanctioned by the Secretary of State for War, the barrack master or Purveyor will report the alteration to the Secretary of State without delay.

4. Careful attention will be paid to the ventilation of all the barrack buildings by enforcing the full use of the means of ventilation, in keeping open all apertures intended specially for ventilating purposes, and by calling the attention of the authorities to any structural defects.

5. The instructions laid down in the Queen's Regulations regarding the cleansing and supervision of barrack rooms will be carefully observed. The floors of the rooms will not be washed in wet weather. The regular airing of bedding and its exposure out of doors in fine weather will be attended to; and if Epidemic Cholera appears in the

INSTRUCTIONS, &c.-continued.

country it will be desirable to cleanse and limewash ceilings and walls of all barracks, hospitals, quarters, and stables. Walls of barracks, &c. that have been recently limewashed will not be limewashed again without the previous sanction of the Secretary of State for War; nor, will walls be limewashed by civil labour without similar authority.
6. All sewers, latrines, urinals, and ashpits will be inspected fre-

6. All sewers, latrines, urinals, and ashpits will be inspected frequently, and their cleanliness ensured by an efficient system of frequent flushing and cleansing; any accumulation in such places will be scrupulously removed, as it must be borne in mind that during the prevalence of an epidemic it is injudicious to disturb old accumulations. A free use of lime is enjoined.

All drains and sewers connected with barracks or hospitals, not otherwise flushed, will be flushed daily by hose, if there are waterworks, or by pails or tubs of water carried by hand if there is no such source of supply. The volume of water used may vary from five gallons to fifty gallons, according to the cross sectional dimensions, length and gradient of the drain or sewer to be flushed. The water should be poured in suddenly, so as to cause a scour.

Sewers and drains with open outlet ends should have the outlets protected by a flap or valve, to prevent sewer air being blown into the buildings.

7. Every source of water supply will be investigated, and the possibility of contamination, by percolation from sewage or from surface impurities, looked to; an examination will be made of the water, and any such impurity detected in it will at once preclude its use for driuking or cooking purposes.

8. Attention will be directed to the soldiers' rations, and care taken that they never fall below the standard quality; the men will be enjoined to be careful as to what they eat; and the purchase of any articles deemed indigestible or deleterious to health will be discouraged as much as possible.

9. As much variety as possible will be afforded in the cooking of the rations.

10. The canteen will be frequently visited, and its supplies carefully examined.

11. It will be unnecessary for medical officers to recommend any change in the ordinary duties of the men, as long as they are not excessive. They will, however, suggest the advisability of reducing the night duties to the minimum that the necessities of the station will permit, and point out to the Commanding Officer that any duty subjecting the men to wet clothes or wet feet should be avoided when possible. When exposure is unavoidable, the men should be directed to change the wet articles of clothing as speedily as possible.

12. Medical officers will make frequent inquiry as to the existence of diarrhœa amongst the men; and in the event of affections of the bowels being prevalent will enjoin an immediate application to hospital for medicine, not necessarily with the view of the men being detained in hospital.

INSTRUCTIONS, &c.-continued.

II.—Additional measures to be adopted when the Disease has appeared among the inhabitants in the vicinity of a Military Station, or among the Military of the Station.

13. The occurrence of Cholera in places where troops are stationed will be immediately reported to the Director-General by the principal or senior medical officer, without waiting for its appearance being officially announced by the local board of health.

14. A daily report, as accurate as can be obtained, of the progress of Cholera amongst the civil population of places where troops are stationed will also be required from the principal or Senior Medical Officer.

15. The men will be prohibited going into infected districts, and pickets will be placed to prevent them. Under exceptional circumstances it may be advisable to confine the troops to barracks, and prohibit any but the most necessary intercourse with persons outside.

16. Where there is reason to apprehend that the health of families living out of barracks would be endangered, such families may be brought into barracks, if it be possible to do so without overcrowding. If the season permit they will be encamped, or, if there be danger of overcrowding, houses in healthy positions will be hired. Families of men married without leave will not be brought into barracks without special sanction. When the senior Medical Officer thinks it necessary to bring such families into barracks he will apply to the Officer Commanding, who will forward his report, with that of the Barrack-master to the General Officer Commanding. by whom it will be transmitted with the opinion of the Principal Medical Officer and District Barrackmaster, and his own recommendation, for the consideration of H. R. H. the Field-Marshal Commanding-in-Chief, and the Secretary of State for War. In case of emergency the General Officer Commanding may order such married people at once into barracks and apply for covering instead of previous authority; but no expense is to fall on the public without previous authority.

17. Good fires will be provided in the barrack rooms to increase ventilation and to diffuse cheerfulness, which last should be promoted in every way.

The intermediate allowance of fuel will be issued during the Summer months, and the Winter allowance during the intermediate months, on the weekly certificate of the Principal Medical Officer and Officer Commanding, that from the prevalence of Cholera among the troops at the station or in its vicinity such increased allowance is necessary.

18. In old and defective barrack or hospital buildings, where there is reason to suspect that injurious emanations proceed from the sewers at a time when cholera has appeared in the vicinity and where sinks, waste-water pipes from tanks, or waterclosets, communicate direct with such sewers or drains, application will be made to the proper authority to have the drain connexion broken externally, so that the drain or sewer may have full means for ventilation into the open air, at a safe distance from and to leeward of the buildings.

19. Disinfectants, such as chloride of lime, preparations of carbolic acid, perchloride of iron, or other approved preparations, will be used twice each day in latrines, urinals, sewers, ash-bins, and other similar

INSTRUCTIONS, &c.-continued.

places, on certificate of necessity by the Principal Medical Officer. A non-commissioned officer with a fatigue party will be instructed in the performance of this duty, which will be rigorously carried out, and either the Quartermaster or Orderly Officer will be responsible for its execution. Disinfectants will be issued from the Barrack department on the spot, on the Principal Medical Officer's certificate.

When time permits, the Barrack-master will apply in the usual manner for previous authority before incurring expense for disinfectants; but in case of emergency, he will obtain such a supply as may be necessary for immediate use, and apply for covering authority, and for such further supplies as may be required.

It is to be observed, however, that if barracks are kept in proper sanitary condition, they are the last places in which special disinfectants are required, and disinfectants must never be used as substitutes for cleanliness in barracks. The lavish purchase of disinfectants on the ground that isolated cases of Cholera have appeared in the Country will not be sanctioned.

The best means of applying the disinfectants are explained at pages 9 and 10.

20. Married men (if out of mess) will each be provided with a ration the same as the single men.

21. The men will be cautioned against intemperance, and every means adopted to repress it; with which view, night passes will be prohibited.

22. Tea or coffee will be issued to the men before going on morning or night duties, on a weekly certificate by the Principal Medical Officer that the issue would be beneficial to health; and every man will have his breakfast, if possible, before leaving his barrack room for parades or other duties.

23. On the occurrence of a case of Cholera among the troops, a report will be forwarded by the Senior Medical Officer to the Director-General, and continued daily until further orders.

24. Questions of importance not admitting of delay may be telegraphed to the Director-General by the Principal Medical Officer.

25. On any appearance of Cholera in a corps, the troops will be camped out when practicable, provided the season of the year will permit of it; good ground being selected beforehand, and arrangements made by the Quartermaster General's department.

26. Health inspections will be made at morning and evening parades, and a daily inspection of every individual attached to the regiment, but the avoidance of all unnecessary alarm cannot be too strongly enjoined.

27. Each soldier will be provided with two cholera belts as part of his necessaries. Flannel shirts ought also to be worn.

28. It is very desirable, during the prevalence of Cholera, to boil all drinking water, and to filter it through charcoal when a filter is available.

29. The minds of the men will as much as possible be occupied and amused. Every game or employment tending to recreation, or to induce healthy exercise, should be promoted, Occasional marches for short distances into the country, without arms, may be advisable.

30. Diarrhœa will be most carefully attended to during the prevalence of Cholera, and non-commissioned officers will be instructed to

INSTRUCTIONS, &c .- continued.

order all men to hospital whom they may detect suffering from looseness of the bowels. Sentries will be placed in the vicinity of latrines, and men found going twice in quick succession to the rear will be sent to hospital immediately. For the better detection of this usually painless affection, tickets will be provided for the men, and every time a man goes to the rear he will hand one of them to the sentry ; but a man not having his ticket will be allowed to pass, and his name will be reported to the orderly serjeant. A room for observation in hospital will be provided for such men, and their motions treated as in the case of Cholera patients. Medicine will be kept prepared for issue to such cases, day and night, and, to avoid delay, a supply will be placed in the hands of non-commissioned officers in barracks to be administered to men while preparing to go to hospital.

31. The place whence a patient is taken from barracks will be thoroughly washed, and, if deemed necessary, fumigation will be made by chlorine or nitrous acid gas, in accordance with instructions at page 111. When suspicious cases, or cases of Cholera, are removed to hospital, their barrack bedding will be taken with them for use in hospital; each such case being reported to the Barrack-master in order that the bedding may be properly changed.

32. It it be found that any preponderance of cases of Cholera or diarrhœa occurs in any building or room, the medical officers will carefully examine the locality, with a view to detecting and remedying if practicable any insanitary condition. The building or room will be vacated, and fumigated with chlorine, nitrous, or sulphurous acid gas. (See instruction at pages 111.) The walls, ceilings, and floors will be scraped and cleansed, and the two former limewashed before re-occupation.

The fumigation of rooms on account of Cholera will be specially conducted under a medical officer with the assistance of the barrack department.

33. When cases occur in camp, the ground will, if possible, be changed, as so successfully practised in India, but where this may be impracticable, as will usually be the case at home, the tents should be struck, and the ground cleansed and aired before re-pitching them.

34. If the troops are not camped out, the regimental hospital will be appropriated to the treatment of Cholera, and the ordinary cases of sickness accommodated in barracks, in rooms set apart and equipped for the purpose; or where this cannot be done, in a hired house. An application for carrying out the latter arrangement will be previously submitted to the Director-General. Should the troops be encamped, all the sick will be treated in tents, the tents for Cholera patients being placed in an isolated position.

35. Medical officers will visit their hospitals frequently. They will be required to be always available for any sudden call on their services, and when Cholera prevails in the corps, they will not leave the barracks, except under imperative necessity.

36. Cases among the wives and children of soldiers will be treated in the female hospital, where such institutions exist, provided the regiment is not camped out. In stations where there is no female hospital, application will be made to the proper authorities for a room to be provided for the accommodation of such cases.

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Р

INSTRUCTIONS, &c .- continued.

37. The women will be warned that if they or their children are attacked with diarrhœa they must at once go to hospital. 38. The patients' barrack bedding will be used in hospital. The

purveyor will provide palliasses and pillows with straw in the event of a change being requisite. All the hair mattresses and pillows will be removed from the hospital, to equip the rooms set apart for the treatment of the ordinary cases of sickness when Cholera attacks the troops.

39. When the barrack bedding is no longer required for use, the straw will be burnt, and the bedding disinfected before being removed from the hospital enclosure, and treated in accordance with paragraph 655, page 110, Medical Regulations (boiling water being used). The foregoing is applicable to hospital sheets, blankets, clothing, and other such articles of hospital equipment as may be used. But such portions of the soldier's kit as cannot be so treated will be exposed to the air and sun, fumigated, and beaten.

40. The stools and vomit will be passed into vessels and deodorized, at once removed, and carefully buried deep at a distance from any source of water supply, or thrown into a latrine set apart for the purpose, which should not for the time being be used for any other purpose. Care will be taken that no other latrine or watercloset is so used.

41. The attendants upon Cholera patients will not be taken from this special work to attend on other cases of disease so long as Cholera may exist in the barracks or hospital. They will be enjoined to wash their hands well whenever they have been in contact with the discharges of the sick.

42. Corpses will be removed to the dead-house without delay, and buried as soon as possible, but never conveyed to the graveyard on men's shoulders.

43. Post-mortem examinations will be performed in such cases and under such modifications as may be necessary.

III .- Disinfectants recommended for use in Barracks.

Quick Lime.

Carbolic Acid.

Chloride of Lime.

Common Commercial Perchloride of Iron.

Quick Lime, fresh burnt, to be used either in powder, or mixed with water in the proportion of about twelve times its bulk.

Carbolic Acid, in the proportion of 1 gallon of acid to 50 gallons of water, or to 100 gallons of water.

Chloride of Lime, mixed with water in the proportion of about a pound to the gallon. Or of the solution ordinarily sold, from a pint and a half to two pints, in a gallon of water.

The common commercial liquid Perchloride of Iron, in dilution, with water, in the proportion of one part to 10. It is considered that any of the foregoing are well adapted for the

INSTRUCTIONS, &c .- continued.

above purpose; many other disinfectants are also valuable, but the expense of most of them would preclude their use on a large scale. Solutions of Carbolic Acid or Perchloride of Iron are only to be used

for sewers, latrines, and urinals after these have been flushed with water.

It is considered that about 160 gallons of a solution of Carbolic Acid, of the strength given above, would be sufficient for disinfecting purposes in a barrack containing one or two regiments, for a day.

From half to one gallon of the solution of the liquid Perchloride of Iron, of the strength proposed, would be sufficient for a latrine.

Sanitary Report.

APPENDIX No. 15.

SANITARY REPORT.

In the preparation of annual or special Sanitary Reports Medical Officers will be guided by the following outline of subjects :---

The geological formation.

The physical geography and medical topography of the surrounding country.

Its features, mountains, valleys, rivers, lakes, marshes, vegetation, natural history, the diseases, particularly those of the preventable class, prevalent amongst its population.

Also its vegetable and animal products, their nature and amount, and their adaptation for furnishing supplies for troops; the sources, quality, and quantity of the water supply, and whether it is wholesome, and what means of purification are in use, if such be necessary.

At all stations he should describe the buildings in use for barracks or hospitals, guard-rooms, and cells, as regards their position, exposure, elevation above the sea level, or above neighbouring low ground, or lake, or river banks; their distance from sea, lakes, or rivers; the number of men they are capable of containing according to regulation, and the numbers in them; their structure, drainage, means, and sufficiency of ventilation; materials of which they are built; the number, length, breadth, and height of rooms and wards; the numbers and position of windows and doors; the average monthly cubic space each man has had in barracks, guard-rooms, cells, and hospitals; state of cleanliness within and without the buildings; and whether the walls are sufficiently limewashed.

Means of lighting and warming ; nature and amount of fuel.

Baths and lavatories, their condition, and if sufficient for cleanliness for troops and sick; whether there are bathing parades, and how often a week.

Kitchen and cooking utensils for barracks and hospitals, whether sufficient for a variety of cooking. The amount and sufficiency of barrack accommodation for married

soldiers, and the state of their quarters.

The sanitary state of latrines and urinals, whether they are flushed or emptied by hand, and at what interval of time, also of water-closets, ashpits, stables, &c.

The nature and composition of rations, whether sufficient and sufficiently varied, and what facilities are afforded by the station for varying them; what fresh or preserved vegetables are used, and their average daily amount; whether the ration includes tea, coffee, or cocoa.

No. 15.

Sanitary Report.

SANITARY REPORT-continued.

The nature and qualities of fruits and vegetables obtainable and in use, and their effects on health.

Whether rations and diets are properly cooked by roasting, boiling, baking, &c.

The quality of bread or of biscuit, and the amount of either in the rations.

The spirits, beer, or other liquors used by the troops, their quality and effect on health;

Similar information as to hospital diets, and a statement of any changes made in them on account of the character or kind of supplies available.

Whether the clothing of the troops is sufficient and adapted for the climate, and if not, to state what improvements might be made.

The nature of the bedding and whether sufficient.

The nature and amount of duty or labour performed by troops, and their influence on health; drills how often, and at what hours they take place; length of marches and at what hours.

The proportion of nights in bed to those on duty.

Gymnastics, amusements, and recreations in use, and if conducive to health.

State of canteens, size and state of ventilation of rooms, and quality of provisions and liquors sold in them; whether the canteens are under proper regulations; whether disease is traceable to articles sold in them.

Amount of intemperance and of crime and disease directly or indirectly traceable to its effects, also the means in use for repressing intemperance.

State of vaccination in the corps and the extent to which it is a preservative against small-pox; whether re-vaccination has been carried out, and the results.

General defects in position of station on low ground near marshes requiring drainage.

Overcrowding in camps, barracks, huts, tents, or hospitals.

Defective drainage and ventilation of camps, barracks, huts, tents, or hospitals.

Marshes or wet ground, watercourses, or works of irrigation to windward.

River banks.

Nuisances, defective cleansing.

Want of cleanliness in barracks, huts, or hospitals, and want of limewashing.

Defective drainage of ground near barracks, hospitals, &c.

Defective sanitary condition of privies, latrines, water-closets, stables, &c.

Monotonous diet, defective diet, salt provisions.

Defective clothing.

Bad water, especially if polluted by putrescent organic matter.

Drunkenness, or use of unwholesome liquors.

Nature and description of duties.

Heavy rains, or unusual heats, calms.

Climatic peculiarities.

Prevalence of epidemics, and at what season. Wherever meteoro-

Sanitary Report.

SANITARY REPORT-continued.

logical observations have been taken, their relation, if any be traced, to prevailing or epidemic disease should be stated.

The medical officer should endeavour to form an estimate of the relative value of each class of causes which have predisposed the troops to these diseases. He should give a minute account of them, together with a statement of what precautionary measures he recommended, either verbally or in writing, to his Commanding Officer, and the result of his recommendation.

If any diseases have become epidemic or prevailed in the district, he should examine carefully into the history of the disease, and its predisposing causes, and report on these as well as the steps he recommended to protect the troops from an invasion of the disease, with the results.

He should state to what extent new arrivals at the station have suffered from disease; also the proportion of acclimatized troops who have been affected, and whether the proportion of attacks and deaths have been greater in young soldiers or in those of more mature age.

If cholera has prevailed he should state the measures adopted by him for discovering and treating the disease in its premonitory stages, and the results.

If any such diseases as fever, erysipelas, or hospital gangrene, have appeared among the sick *after* they have been admitted into hospital, he should report the history of the occurrence, its causes, the measures adopted to arrest these diseases, and the results.

No. 16.

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APPENDIX No. 16.

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APPENDIX.

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APPENDIX.

No. 16.

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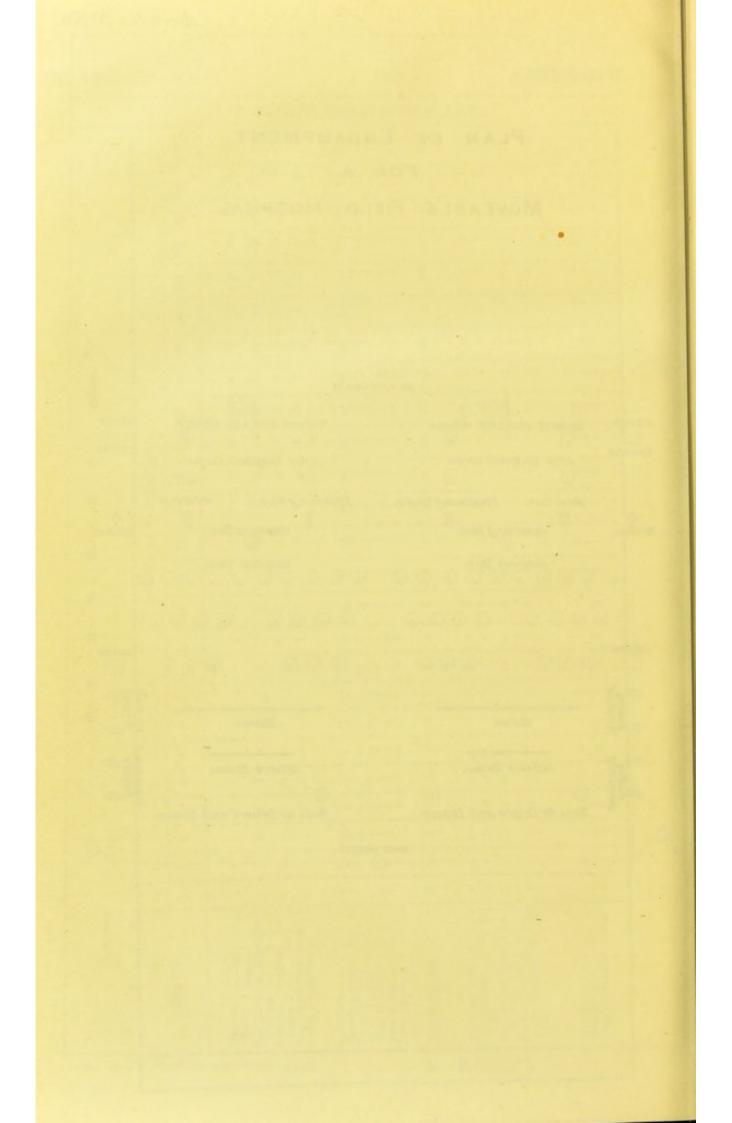
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