





REGULATIONS
FOR THE
MANAGEMENT OF ARMY HOSPITALS,
AT HOME AND ABROAD,
AND FOR THE
Rendering of Hospital Accounts:
ALSO,
INSTRUCTIONS TO MEDICAL OFFICERS
REGARDING THE
EXAMINATION OF RECRUITS AND INVALIDS,
&c. &c.;
WITH
A FORMULARY OF PRESCRIPTIONS,
AND
AN APPENDIX OF FORMS,
&c.

War Office, 1845.



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REGULATIONS.

HER MAJESTY having been pleased to approve of the following Regulations for the Management of Regimental Hospitals, all Commanding Officers of Regiments, and all Medical Officers, and other persons concerned in the care of sick Soldiers and in the management of Regimental Hospitals, are accordingly enjoined to act in strict conformity to the said Regulations; which, though framed principally with a view to Home Service, should be also observed on Foreign Service whenever it may be practicable.

1. Medical Officers are to perform their respective professional duties under the instructions and control of the Director-General of the Army Medical Department, subject, of course, to the orders of their respective Commanding Officers; who cannot but be aware that Medical Officers must necessarily require considerable relaxation as to the routine duties of Parade. The Commanding Officer will still possess, and should exercise, an effective control, in order to enforce due attention to the general health of the men and to their kind treatment in Hospital.

2. The Regimental Surgeon, on joining, is forthwith to make himself acquainted with the constituent parts of his Corps, by personal examination, and by reference to the Regimental Returns.

Assistant-Surgeon.

In order to ensure the most effective aid to the Surgeon, he should allot to the Assistant-Surgeon specific duties, such as making Health Inspections weekly, bandaging and dressing sores and ulcers, filling up the Diet Tables, preparing the medicines prescribed for the Patients, and seeing the same invariably administered twice a day; as no part of these duties are, upon any account, to be delegated to Non-commissioned Officers or Servants; the Assistant-Surgeon is also, when required, to make out the Surgeon's periodical Returns, in order to familiarise himself with this branch of duty.

Station of Medical Officers.

3. When a regiment is divided and stationed in different cantonments, the Medical Officers are to be so distributed that the requisite aid may be afforded to as many Detachments as possible.

The Regimental Surgeon is in general to be stationed at the Head-Quarters, and the Assistant-Surgeon with the largest Detachment; but if, from any circumstance the temporary presence of the Surgeon with a Detachment shall be necessary, the Commanding Officer will give directions accordingly, and explain the arrangements to the Director-General.

As the spirit of this Regulation extends to the divisions of a Regiment on its march, the Surgeon should accompany the last Division, as well to ascertain the diligence of the Assistant-Surgeon as to make the necessary arrangements for the care of the Sick who cannot be removed, or who may be left behind on the route.

Forage for the Surgeon's Horse.

4. In order to enable the Surgeon to visit Outposts and Detachments with greater facility, he is allowed Forage for a Horse, the charge for which is to be made in the Paymaster's Accounts.

5. When a Regiment is ordered to change Quarters, the Surgeon is to transmit to the Director-General a copy of the Sick on a change of Quarters, or on removal of Invalids from one Hospital to another. the route, together with a List of the Sick, showing their state and distribution. On the termination of the march, a similar List is in like manner to be transmitted to the Director-General, distinguishing the names of the Sick, if any, who may have been unavoidably left behind at the late Head-Quarters, or at places on the route, and specifying the nature of their complaints, how long they have been ill, and where, and under whose medical care, they are placed. No man, however, who can be removed without risk in a baggage-waggon, should be left behind.

Any Patient necessarily left behind is to be entrusted by the Regimental Surgeon to some other Medical Officer, or, if this be impracticable, to a private Practitioner, who should be furnished with an accurate and minute statement of the man's case, period of illness, and previous treatment. The same course should be followed, if a Patient be transferred to another Hospital at any other time. This applies especially to the removal of Invalids to Chatham, from whatever cause, when a statement of each case is required by the principal Medical Officer there, perfectly distinct from the Discharge Documents. See also page 21, Article 41.

The sick man, if left under the care of a Medical Officer of another Regiment, should be placed in the Hospital thereof, under the sanction of the Commanding Officer, and be included, as usual, in the Returns of such Hospital.

Any Medical Officer, or private Practitioner, who may be put in charge of a sick man, without the prescribed statement of his case and previous treatment, is to report the circumstances to the Director-General, through whom all correspondence respecting the man is to be transmitted.

Expense of
Removing the
Sick.

6. If any expense shall be necessarily incurred for the conveyance of a Sick Man from one Station to another, the same may be charged in the Paymaster's Accounts, in the mode prescribed by the War Office Circular Letter of the 16th July, 1833, No. 751.

Arrangements
when a Regi-
ment proceeds
upon Foreign
service.

7. When a Regiment leaves the Kingdom, a Distribution of the Sick at the date of Embarkation, specifying where, and under whose care, those left behind are placed, and showing the changes from the previous Monthly Return, is to be transmitted to the Director-General, together with the Annual Report and Return, and the Half-Yearly Return of Medicines and of Professional Books and Forms, in duplicate, as pointed out in the Appendix, pages 89 and 108, completed to the first of the month in which the embarkation takes place.

On the arrival of a Regiment at its destination abroad, the Surgeon will present to the principal Medical Officer upon the station a copy of his last Yearly Report, or, if for a broken period, his last Report of the diseases of the Corps, or a copy of the Historical Register in which such Report is entered, together with the Journal of Medical Occurrences kept during the voyage; the Return of Medical Comforts expended; also a List of Casualties, with the diseases and dates, which may have taken place since embarkation. The same rules to be observed on the homeward voyage from all Foreign Stations, in accordance with the Instructions furnished by the principal Medical Officer on the Station.

Supply of Me-
dicines, &c. for
troops embark-
ing on Foreign
service.

8. In every instance of a supply of Medicines or Instruments for the use of Troops embarking on Foreign Service, the principal Medical Officer will procure from the Medical Officer in charge, a receipt, in triplicate, for such supply, in the Form, Appendix, page 98, submitting the

same for the approval of the Director-General, who will return one of those receipts to the principal Medical Officer as his voucher for the issue.

9. On the removal of any Medical Officer, in charge of a Regimental Dépôt or Detachment Hospital, to another Station or Service, he is to furnish the Director-General with a similar Distribution of the Sick, made up to the date of relinquishing such charge, and is to deliver over the Medical Stores, Hospital Books, Records, &c., taking receipts for the same from the Officer receiving them, and forthwith transmitting those receipts to the Director-General, together with the Returns of the Stores, &c., made up (in the printed Forms, Appendix, pages 89 and 108), from the date of the last Returns to the date of giving over the charge: but such Stores, &c., are not to be transferred to any other Regiment, without the express sanction of the Officer commanding on the Station, nor without reporting the same to the Director-General.

10. Each Medical Officer, under whatever circumstances either of duty or otherwise he may embark for a Foreign Station, or disembark in this country, will immediately report the date thereof, in writing, to the Director-General, stating the circumstances under which he is proceeding abroad or returning home.

11. Medical Officers must regularly visit the Hospital twice a day; in the morning, at nine o'clock, in the summer, and at ten in the winter; and in the evening, between eight and nine throughout the year: at which hours the Patients are to be prescribed for, and those newly admitted, after having had their persons cleaned, and clothes purified or changed, are to be examined, and allotted to their proper Divisions in the Hospital.

Prior to the Surgeon's second visit, the Assistant-Surgeon if present, otherwise the Surgeon himself, must, at the bedside of the Patient, enter in the Register Book the previous history of the complaint, under its proper head, and in the manner prescribed in the Instructions on this head, page 67. The Evening Reports in the Register should give every change in the symptoms since the morning visit, as likewise a statement of the effects of the medicine prescribed in the morning.

Prevention of Disease.

12. It is a very important point of duty, and of great consequence to medical science, to prevent disease by prophylatic measures, and by reference to predisposing causes; since age, temperament, trade, and climate, materially influence the rareness or frequency of particular complaints.

Periodical Inspection for detection of Disease.

13. The Medical Officer in charge is weekly to inspect the whole Regiment, for the detection of itch, venereal complaints, ocular disease, ulcers, and any ailments indicated by the countenance or skin, as fever, marasmus, small-pox, &c.

Capital Operations.

14. Except under urgent circumstances, not admitting of time for consultation, no capital Operation is to be performed in a Regimental Hospital in Great Britain, without the previous consent of the Director-General or Staff or District Surgeon; to whom the state of the Patient, the history of the disease, and the reasons for the operation are to be described.

Vaccine Inoculation or Small-pox.

15. The Surgeon is responsible, and is required to report yearly on the subject, that every man, woman, and child, belonging to the Regiment, bears unequivocal marks of either Small or Cow-pox; and is to keep a Register of the names and appearances, on the days of examination, of all Patients vaccinated. In all stations where fresh virus

can be procured, every doubtful case, not only of soldiers, but of their wives and children, should undergo vaccination. If any one, who has not had the Small-pox, shall be unwilling to be vaccinated, the Surgeon should endeavour to remove the prejudice, by representing the harmless nature of the operation, and its probable advantages. Any cases of Small-pox are to be immediately communicated to the Director-General in a special Report, specifying the name and age of each individual, and whether bearing previous satisfactory marks of vaccination, and by whom vaccinated.

If the Patient be a Soldier, and no marks of vaccination exist, such fact should be mentioned in the said Report, with a statement showing the date of his joining the Corps, by what Medical Officer examined on enlistment, and with a copy of any Note or Memorandum transmitted by that officer to the Regimental Surgeon. The Surgeon, with his Yearly Report, is to transmit a List of the men, women, and children, who have had neither Small-pox nor Cow-pox, and who, through ignorance or prejudice, have objected to vaccination. See page 50.

16. From the first establishment of a Regimental or Depôt Hospital, the Medical Officer in charge is to make a proper classification of Diseases, in the respective wards, and to treat similar diseases in contiguous beds.

Classification of Diseases.

17. Patients with infectious diseases, as, fevers, fluxes, small-pox, or measles, should be kept separate from Patients with other complaints. The whole of their bedding, before it is used again, or put into Store, is to be steeped in water frequently; and then to be thoroughly dried and exposed to the air, and afterwards washed with soap and water.

Infectious Diseases.

The straw of the beds is to be burnt, and the places or bedsteads where the Patients lay are to be well scoured with soap and hot water. If Barrack Bedding, it must,

immediately on being taken from the Patient, be put into and remain in water until delivered over to the proper Officer of the Barrack Department.

In all infectious cases, especially after the removal of a corpse, the apartment is to be well fumigated and ventilated.

Itch.

18. Men with Itch are, if possible, to be placed in a separate room, or in a tent when the season will permit.

Reports on
extraordinary
Sickness.

19. When a Regiment is sickly, or when Cholera or any other formidable disease appears, either at Headquarters or in a cantonment, the Surgeon is immediately to report his opinion thereof by letter to the Director-General, stating, if the disease is contagious, how it was introduced; if epidemic, whether common in the neighbourhood, or originating among the Soldiers from severe duty, long exposure to cold and fatigue, imperfect clothing, bad weather, or foul and noxious air in unventilated, crowded, and close Barracks, or from what other cause, together with a full detail of the medical treatment adopted.

Detailed Medical
Reports of
Fatal Cases.

20. Detailed Medical Reports of Fatal Cases are invariably to be transmitted to the Director-General under the following circumstances:—

1st. When a Patient dies, on or immediately after his transfer either from one Hospital to another or from a Foreign Station to England (as in the case of Invalids), and *vice versa*.

2nd. When such Report is specially required by the Director-general, or by the principal Medical Officer of the Station.

3rd. When necessary to illustrate a Morbid Preparation.

4th. When, from the peculiarity and rare occurrence of the case, such report may appear to the attending Medical Officer to be interesting and valuable.

21. Phlebotomy and Cupping are to be performed either by the Surgeon or Assistant at the time of prescription, or as soon after as possible. Bleeding and
Cupping.

22. The Commander-in-Chief's General Orders are always to be referred to on the subject of leave of absence to Medical Officers. Leave of
Absence.

23. When a Detachment is without a Regimental Assistant-Surgeon, and is not within the reach of any Military Medical Officer, a Private Practitioner may be engaged by the Commanding Officer of the Detachment, at the undermentioned rates for each person belonging to the Detachment, including any Recruiting Parties on the same station, viz.— Detachments
without a Me-
dical Officer.

If he supply Medicines.		If he does not supply Medicines.	
1½d.	-	1d.	per week, if 50 or upwards.
2d.	-	1½d.	per week, if under 50.

Private Prac-
titioners re-
ceiving Con-
tract Rates.

All charges for these allowances are to be made according to the Form, Appendix, page 101, and are to be settled quarterly, if the Practitioner shall have had the medical charge during an entire quarter, or immediately on the termination of the service, if during less than a quarter.

[Blank forms for these charges are supplied by the War Office.]

24. Bills, in the form prescribed in the Appendix page 102, are to be submitted to the Director-General in London or Dublin, as the case may be, for approval (care being taken that the Certificate in the margin of the Form be properly filled up and signed); on the receipt of which approval the amount may be charged, if supported by proof of payment, without reference to the War Office. Bills of Private
Practitioners
not receiving
Contract rates.

[Blank forms of these Bills may be obtained from the Director-General, on requisition, in duplicate.]

Men on Sick
Furlough.

25. The names and diseases of men sent on Sick Furlough are to be specified in the ensuing Monthly Report, which should also specify the places to which the men are sent, with the date of commencement of each Furlough, and the period for which granted.

Inspection of
Recruits.

26. The Regimental Surgeon or Medical Officer in charge of the Regiment is to inspect and examine Recruits before final approval, agreeably to the Instructions on this head, page 43.

Inspection of
Barracks.

27. When a Regiment is in Barracks, the Medical Officer present is frequently to examine into the state of the Barracks and of their environs, in order to ascertain that due cleanliness and ventilation be preserved within, and that no nuisances exist without, and that the cooking room be not used for washing or drying linen. Any improvements that may appear necessary are to be suggested to the Commanding Officer, and copies of such suggestions are invariably to be forwarded to the Director-General with the next Monthly Return.

Inspection of
Quarters.

28. When the Regiment is billeted, it is the Medical Officer's duty to visit the men's quarters frequently, to ascertain that they are free from infectious diseases, &c., and that the men's apartments and bedding are clean and dry.

Sick Soldiers
of other Corps
and Sick
Sailors.

29. Medical Officers are, under the sanction of their Commanding Officers, to take care of, and, if necessary, to receive into the Regimental Hospital any Soldiers or Sailors who may be on Sick Furlough, or too far detached from their respective Regiments or Ships to be attended by their own Medical Officers. Soldiers or Sailors, however, whilst absent on Ordinary Furlough, are not entitled to

Medical treatment at the Public expense; unless they shall be duly certified to have been taken Sick whilst on the journey to rejoin their Regiments or Ships.

30. The Wives and Children of Soldiers are not to be admitted into Hospital, except under special circumstances and with the express sanction of the Officer commanding. The facts and grounds of admission are to be stated to the Director-General in the next Monthly Sick Report.

Medicines and
Attendance for
Sick Women
and Children,
and for Officers'
Servants.

The Wives, Children, and Servants of Officers, and the Wives and Children of Soldiers, are allowed medicine from the Chest, and Medical Officers are to visit and prescribe for them, under the sanction of the Commanding Officer.

31. Medical attendance and medicines are allowed for the Staff Officers who pay and superintend the Out-Pensioners, and for the Non-commissioned Officers employed on the said Staff, as well as for their families, in the same way as for Officers and Non-commissioned Officers on the general Staff.

Medical Aid for
Staff Officers of
Pensioners, &c.

Attendance and medicines are in like manner allowed for the Civil Assistants and others employed on the Trigonometrical Survey in Great Britain and Ireland.

Any Pensioners brought before a Medical Officer for inspection, at the request of a Staff Officer of Pensioners, are to be carefully examined; and such certificates furnished, regarding their health and efficiency, as the nature of the case and the purposes for which they are required may demand. Arrangements should be made by the Staff Officer and Medical Officer so as to make these examinations at the most convenient times and places.

When a private Practitioner is employed on this service, care is to be taken to include in the Contract (*see* Art. 23)

such of the Officers and others before mentioned as may have claimed attendance, &c.

When Pensioners are called out on duty, they are, while so employed, to be considered, as to medical attendance and hospital accommodation, in all respects as soldiers in Her Majesty's Service; and the usual stoppages will be received from the Staff Officers in charge of such Pensioners, and credited by the Paymaster of the Regiment or Depôt, in the Hospital of which the men are treated.

Hospital in Barracks.

32. When a Regiment or Depôt is in Barracks, a Hospital is to be provided, and supplied with furniture, bedding, and utensils, by the Barrack Department (*see* Appendix, page 81).

Hospital in Quarters.

33. When a Regiment or Depôt is in Quarters, if the establishment of a Hospital shall have been authorized by the Director-General, the Surgeon is to provide a suitable house, in a dry situation, and with good water. No Hospital is to be engaged except by the week, unless with the special sanction of the Director-General; and to prevent any unnecessary increase of hospital-baggage, the fire-irons, tables, and forms, must be provided by the landlord, or hired at a weekly charge.

Charges made in the accounts for rent, or hire of furniture, should invariably be supported by proper authority.

Hospital Tent Camp.

34. When a Regiment is encamped, if a convenient house for a Hospital cannot be procured in the vicinity, a Hospital tent will be allowed; and in such case, a hut for a cooking and mess-room must be constructed by a fatigue party of the Regiment.

The tent should be surrounded by a trench for carrying

off the water; and be floored with planks, either hired or purchased under the sanction of the Director-General.

35. Every Soldier, on admission into Hospital, should bring with him at least two shirts, and two pairs of stockings; and if the Hospital be stationed in Barracks, he is to be provided by the Barrack Department with the undermentioned Hospital dress, viz.—

A Gown, of Cotton or Flannel.
A Waistcoat, ditto.
A pair of Trowsers, ditto.
A Night-cap, ditto
A pair of Slippers.

36. Every Patient is to be provided with a clean shirt, and (if he can sit up) with a clean pair of stockings, twice a week, or oftener if necessary; and with clean paillasses once a month, and clean sheets once a fortnight, or oftener if necessary. The Patients are to be shaved at least thrice a week, and every possible attention is to be paid to their personal cleanliness.

37. The Patient's personal linen is to be washed out of the Hospital, by contract or other agreement; for which service a sum not exceeding four-pence per man per week will be allowed. No extra charge will be admitted, unless the same shall have been previously sanctioned by the War Office.

38. Hospital utensils, if not supplied by the Barrack Department, may be provided on temporary emergencies, under the orders of the Director-General, for each Regiment in the proportion prescribed in Appendix, page 82; and, for their more ready conveyance and better preservation,

are to be packed in one or two canteens, suitable to the strength of the Regiment, and to the exigencies of Detachments. The expenses for the carriage of the said canteens, of the medicine chest, and of the other Hospital stores, are to be defrayed out of the commuted allowance for the carriage of Regimental baggage on a march.

Bedsteads and
straw.

39. In Barrack Hospitals, Bedsteads and Straw are to be provided by the Barrack Department. In hired Hospitals, the straw is to be purchased by the Surgeon, and charged as a contingency in the Hospital Account; and if he cannot hire bedsteads, upon application to the Director-General, they will, if thought advisable, be supplied from the public Stores, as the Sick are not to be placed on the floor, more especially of any room on the basement of a building, when not boarded; if unavoidably placed on the floor, a mat or pailasse should be placed, in the first instance, under each Patient: and he should be raised from the floor on a bedstead, or some temporary prop, as soon as possible.

Insane Officers
and Soldiers.

40. An insane Officer or Soldier, whether at home or abroad, should, under ordinary circumstances, be attended by the Medical Officers of the Corps to which he belongs, for one month at least; as those Officers, from knowing the probable origin and causes of the complaint, may be most competent to its treatment in the earliest stages. But if, after a reasonable time, the Patient shall not recover, he should be sent to Chatham, and at the same time a detailed history of the case is to be transmitted to the Commandant at that station, and to the Director-General, in order that the Secretary at War's permission may be obtained for the removal of the Patient to the Government Lunatic Asylum, if such removal shall be deemed advisable.

In every such case, the Patient should be sent in charge of a careful Non-commissioned Officer. And at the same time, a minute history of the disorder, its origin, causes, and treatment, must be transmitted to the Asylum, not only from the Regimental Medical Officer, but from any Detachment, Garrison, or General Hospital, where the Patient may have been under treatment.

A complete statement of the service of any Soldier so transferred, together with the fullest information relative to his place of settlement, and nearest of kin, should also be sent to the Commandant at Chatham.—See Instructions on this head, page 58.

41. No man is to be discharged from the Service on account of disability, except under the Rules laid down in the General Military Regulations, and in the Instructions on this head, page 51; and when a man is reported unfit for service from epileptic or other fits, a Certificate is to accompany him to Chatham from the Medical Officer in attendance, to the effect that he has actually seen the man in such fit.

Discharge of
Soldiers for
Disability.

42. The Regimental Surgeon is to see that the Hospital stores and instruments be kept in good order, and that the Hospital bedding be frequently aired and kept in a dry and compact state, so as to be ready for use at the shortest notice: and his best attention is enjoined to an economical expenditure of the medical stores; many of these being of a durable material, demands for them may be greatly limited by due care in their preservation from accident or damage, as for instance, syringes, blood pumpers, spatulas, bolus knives, scissors, corkscrews, scales, glass and pewter measures, bolus tiles, mortars and pestles, panakins, funnels, &c.

Care of Hospital
Stores, &c.

Appointment
and Allow-
ances to, Hos-
pital Servants.

43. Besides the Hospital Sergeant borne upon the establishment of each regiment of Cavalry and battalion of Infantry, Orderly-men are to be employed, according to the number and wants of the Sick. For a number not exceeding ten, one Orderly-man; and for any greater number, an additional Orderly for every ten Patients. A Nurse shall not be employed in lieu of an Orderly, except under special circumstances, nor unless with the previous sanction of the Secretary at War; but if a Nurse be allowed, a Soldier's wife, of sober, careful, cleanly, and active habits, should be selected, and when not otherwise occupied, she is to wash and mend the Hospital bedding and towels, if this be not done by the Barrack Department.

Servants' Wages.

44. The Hospital Sergeant and Orderlies shall each be allowed wages at 4*d.* a-day, in addition to their Military pay; and the Hospital Sergeant, after completing ten years' *approved* service in that capacity, shall also receive an addition of 6*d.* to his daily pay as Sergeant.

Duties of the Hospital Sergeant.

45. The Sergeant's duties are, to take charge of the bedding and utensils and other Hospital stores, for which he is answerable to the Surgeon, who is responsible to the Public for any damage or loss;

To take charge of, and be responsible for, the necessaries of every Patient admitted into the Hospital;

To ticket the pack thereof, and to prevent the Patient's access to it without his permission;

To superintend the cleaning of the wards early every morning, and oftener when necessary, taking care that every nuisance be removed as soon as possible;

To see that every Patient has his face and hands washed and his hair combed before the Surgeon visits the Hos-

pital; that those Patients, who are able to sit up, fold up their beds every morning by six o'clock in summer, and by eight in winter; that they separate the bedding, and air it every day for two hours in fine weather; and that they render any assistance to their sick comrades which the attending Medical Officer may think compatible with their state. By due attention to this Rule, the extreme number of Servants allowed by Regulation need not be employed on all occasions.

To go round, at hours fixed by the Surgeon for administering medicine and nourishment, to see that the Patients punctually receive the same;

To go every morning and evening round the wards, to call the roll, and report to the attending Medical Officer, at his first visit, such men as were absent, and whether regularity and good order have been preserved. He is further to assist the Medical Officer in making up the Accounts and Returns required by Regulation, for the accuracy of which, however, the Medical Officer is alone to be responsible.

These orders regarding the Hospital Sergeant are to be strictly enforced.

46. If a Soldier under the rank of a Sergeant be employed as Acting Hospital Sergeant in a Reserve or Detachment Hospital, no allowance beyond the ordinary Wages of 4*d.* a-day is admissible for him.

47. The duties of an Orderly-man are to attend on the Sick, administer their medicines and comforts, keep the wards clean, and make himself generally useful.

48. As quietness is indispensable in Hospitals, every duty should be performed with the least possible noise, more especially at night.

Every Patient must be in bed by eight o'clock in winter, and nine in summer; and no conversation must be permitted after that time.

Ventilation of
the Wards.

49. The wards are to be ventilated according to the state of the weather and the diseases of the Patients: for this duty the Surgeon is responsible, injudicious ventilation being hurtful.

Dry-rubbing
the Floors.

50. The custom of washing floors and covering them with sand or saw-dust is positively forbidden. Dry-rubbing with a brush, mounted on a heavy block, is to be substituted; as the floor is never to be washed unless under the special direction of the Medical Officer; the sides of the room, if of wood, may, however, be cleaned with soap and water.

Fumigation.

51. The wards, whenever the Surgeon may think it necessary, are to be fumigated, and, with the approbation of the Commanding Officer, the plastered walls may be white-washed; for which purpose, in a Barrack Hospital, a requisition is to be made to the Barrack-master.

Ventilation of
Hospital Tent.

52. The windows of the Hospital tent are to be opened, and the sides lowered every day to admit fresh air; at which time the beds of convalescent Patients, and of others able to sit up, are to be made.

The paillasses are to be occasionally scoured with soap and water, under the special direction of the Surgeon. Rugs, blankets, &c., in fine weather, are, after being beaten and shaken, to be hung out on lines or bushes, or spread in the sun on the dry ground.

Hospital not to
be crowded.

53. In order to prevent the Hospital being crowded, every man is to have a separate bed, with a space of five

feet at least allotted to it, and of two feet between each bed, and, if the apartment be less than ten feet high, a greater space is to be allowed.

54. The duties of the Hospital Sentries are, not to admit any person except the Medical Officer, the Officers of the Regiment, and the Persons employed in the Hospital; to prevent liquor or any other article being carried into the Hospital without the Surgeon's permission; and not to allow any Patient to go beyond the prescribed boundaries, without a Ticket of Leave from the attending Surgeon. No venereal Patient is to be indulged with such ticket.

55. Medical Officers are to be guided by the Diet Table in the Appendix, page 109, as to the kind and quantity of food for the Sick. This Diet Table has been so arranged as to prevent the necessity of any extras beyond wine, porter, or spirits, being ordered, except with milk and spoon diets, and in special cases. In order to establish a check on the Hospital Servants entrusted with the distribution of the Diets, Medical Officers should frequently inspect the Diets immediately after the issue thereof, and at times when such visits are unexpected by the Servants. No deviation from this Scale can be admitted, without a full statement of the reasons for such deviation being annexed to the Hospital account; and if these reasons are not deemed satisfactory, the expense must fall upon the prescribing Medical Officer.

A fair copy of the Diet Table is to be pasted on a Board, and hung up in a conspicuous place in every ward of the Hospital.

56. Monthly Rolls for ordinary Diets and Daily Rolls for Extras, agreeably to forms supplied periodically by the War Office, are to be filled up daily, and hung up in a

conspicuous part of the Hospital. The totals of each roll, besides being specified in figures, are invariably to be stated in words also, by the Medical Officer who signs the said rolls; he being responsible for the accuracy of the said totals. The rolls are to be so kept as to admit of being conveniently referred to, and forwarded to the War Office, if required. Monthly Abstracts of the Daily Rolls for Extras, agreeably to forms to be supplied by the War Office, are to be prepared, the totals of which are to be specified in words as well as figures, by the Medical Officer himself, and the said Abstracts are to be transmitted to the War Office as vouchers to his Quarterly Accounts. To prevent Extras, not duly ordered, being inserted in the Rolls, by the Sergeants or others, the attending Medical Officer is *immediately on completing the List*, to cast up the columns, and state the amounts in words.

It behoves Medical Officers to be very particular in the details of the Rolls and Abstracts, as any charges in their Quarterly Accounts which may not be borne out by the said documents, will be disallowed.

Equal attention is necessary to the insertion of Diets and Extras in the Medical Registers.

Diet, how to be provided.

57. On stations where a Deputy Purveyor of Hospitals is employed, every article of Diet for the Sick in Hospitals on Home Service is to be provided under his immediate superintendence; but on other Stations the Surgeon or other Medical Officer in charge is to provide the supplies, and to see that the same be delivered and paid for, and duly charged in the Quarterly Accounts, vouched by the tradesmen's bills; which bills the Medical Officer will certify to be in accordance with his requisitions and with the supplies delivered.

Whenever a Regimental or Dépôt Hospital is furnished with provisions from a Purveyor's store, the Medical Officer in charge of the Hospital will place himself in direct

communication with the Purveyor, as the best means of ensuring prompt attention to the wants of the Sick, and of securing the accurate arrangement of the Public accounts.

58. On the arrival of a Regiment or Detachment at a Station where a Hospital is to be established, if there be no Deputy Purveyor, the Medical Officer in charge will take the proper steps for procuring the supplies, in the following manner, viz., Bread and Meat, from the Contractors for the Troops, unless he can procure the same on better terms from other parties; the bread to be of the best household sort, and the meat of good quality, and of pieces best suited to the Sick. If any charge beyond the Contract price of meat for the Troops shall be found necessary, such extra charge, not exceeding one penny per pound, will be allowed. For all other articles the Medical Officer shall require tenders from respectable tradesmen, and accept such as may be deemed most advantageous. The Medical Officer is to give written requisitions for all supplies, and to require that the said requisitions be annexed as vouchers to the tradesmen's bills, which are to be settled monthly by the Medical Officer himself.

59. On Foreign Stations, fresh Meat, Bread, Wine, and Supplies of all other articles required for the use of Hospitals and of the Sick, which can be provided by the Commissariat, are to be obtained from that Department, upon requisitions signed by the Medical Officer in charge of each Hospital, who will settle with the Commissary for the same every month.

No deviation from this Rule is to be permitted, unless with the express sanction of the principal Medical Officer on the Station, who is immediately to report the cause thereof to the Secretary at War for his approval.

Those supplies which cannot be obtained through the Commissariat, the Medical Officer is to purchase, taking care to substantiate, by satisfactory vouchers, his charges for such supplies.

Articles of Diet to be weighed in presence of Patients.

60. In order that the Patients may be satisfied that justice is done to them, and that no undue preference is shown, one or two from each ward should be present at the weighing of the articles of ordinary diet.

Wine, Spirits, and Malt Liquor.

61. Wine or Spirits, if indispensably necessary in any case, may be administered, but under the vigilant superintendence of the Medical Officers, who will be held responsible for the due custody of these, as well as of all other articles in store, such as tea, sugar, &c.

Good Malt Liquor may, in many cases, be substituted for Wine.

Instruments for the Surgeon.

62. The Regimental Surgeon, as well as the Second Class Staff Surgeon is, at his own expense, to provide and keep up a complete set of Capital Instruments, agreeably to the List in Appendix, page 83, besides a pocket-case of Instruments and Lancets. Both officers will, however, be supplied by the Public with a set of Cupping Instruments; but if lost or damaged, they must replace or repair them at their own charge. The Surgical Instruments are to be always kept in the Surgery, and in the most perfect order.

Instruments for the Assistant-Surgeon.

63. Assistant-Surgeons of Cavalry, as being frequently detached from Head Quarters, and Assistant-Surgeons of Infantry, when in charge of Regiments or Reserves, shall be provided, at the Public expense, with a complete set of Capital Instruments; but every Assistant-Surgeon is, at his own expense, to provide himself with a pocket-case of Instruments and Lancets.

Every charge preferred by Assistant-Surgeons, exceeding five shillings, for grinding or repairing the Capital Instruments, is to be supported by the approval of the Director-General.

64. On Foreign Service, Surgical Instruments may, in case of loss or damage, be replaced from the Public Stores, at the regulated prices, viz.—

	£	s.	d.
Full set of Capital Instruments	-	13	15 0
Portable set of ditto	-	7	3 0
Full set of Pocket Instruments	-	2	2 0
Small set of ditto	-	1	1 0
Case of Six Lancets	-	0	11 0
Case of Cupping Instruments	-	3	3 0

Loss or Damage of Surgical Instruments; and Sale of Steel Trusses on Foreign Stations.

These prices of Full and Portable sets of Capital Instruments apply only to the old stock on hand; but if new Capital Instruments be hereafter supplied and sold, advanced prices may be requisite.

Commissioned Officers of the Army, and persons employed under the Government, have the privilege, subject to the approval of the Commanding Officer and of the principal Medical Officer, of purchasing from the public Medical Stores such Steel Trusses, at the prices specified below, as may be required for their personal use; viz.—

Single Steel Truss	-	5s. 6d.
Double ditto	-	10s. 6d.

The proceeds of these sales are to be immediately paid into the Military Chest, and duly reported to the Secretary at War; forwarding to the Director-General Half-yearly Returns of the articles, showing the prices thereof, and the names and ranks of the purchasers; and duly accounting for these issues in a separate column of the Half-yearly Returns of Medicines and Surgical Stores.

Medicine Chest. 65. Regiments are furnished, according to their establishment, with one or more Medicine Chests, agreeably to the Invoices in the Appendix, pages 84 and 87, to which invoices Medical Officers are expected generally to confine their practice. And although many additional medicines, as various tinctures, &c., are now included in these invoices, Medical Officers must bear in mind that the said medicines are only for particular cases, and should not be indiscriminately or lavishly used, the art of Military prescription being simplicity and limitation to certain few and well-known medicines. The utmost care is to be taken of the medicines in store.

Purchase of
Medicines, &c.

66. Medicines not in the Chest are not allowable at the Public expense, without the previous sanction of the Director-General, unless the circumstances are so urgent as not to admit of a reference to him. In such case, however, medicines may be purchased, provided the total expense thereof do not exceed twenty shillings during a quarter.

If a further purchase be deemed necessary, the Medical Officer will submit to the Director-General a statement of the circumstances creating such necessity, together with a bill, in duplicate, of the purchases made during the quarter, and an estimate, in duplicate, of the additional purchases, and expense proposed; one of each of which documents will be returned with the Director-General's decision on the estimate.

All such charges are to be supported by a declaration of the Medical Officer, that the medicines were necessarily purchased, and on the best and cheapest terms; and the articles purchased are to be accounted for in the next Return of Medicines.

If a Medical Officer shall purchase Spirits of Wine, &c. or a Preparation for the Museum at Chatham, he will

apply for the Director-General's authority for such expense before charging it in the public Accounts.

67. Supplies of Medicines, and Medicine Chests, are to be drawn by Half-yearly Returns and Requisitions made to the Director-General by the Medical Officer in charge, on the 1st April and 1st October, on the printed forms, Appendix, pages 89, 94, and 96. If an intermediate supply be unavoidably necessary, a requisition, in duplicate, should be sent to the Director-General; unless the articles wanted can be drawn from the Medical Store of a neighbouring Regiment, in which case a voucher signed by the Officers borrowing and lending respectively, must be transmitted by the latter with his next Return of Medicines. In a district where a superior Staff Medical Officer is acting, these Returns and Requisitions should be sent through him. From Foreign Stations the *Requisitions* are to be annual, dated 1st April, and the *Returns of Medicines* half-yearly, dated 1st April, and 1st October, for the periods ending 31st March and 30th September.

Medicines and Surgical Stores, for Home or Foreign Stations, are to be drawn upon distinct Requisitions, in the forms in Appendix, pages 94 and 96: care being taken not to blend Medicines and Stores in the same Requisition. The Invoices and Receipts will be divided in a similar manner, as no intermixture of articles can be allowed. The names of the parties supplying the Medicines and Surgical Stores will be affixed to the various articles, which must not be mixed with any previously received; in order that if objections shall be made as to their quantity or quality, the party that supplied them may be readily applied to. The bottles, jars, &c., containing the medicines supplied by different parties, may be kept in the Surgery at one time; but the Medicines supplied by different persons must not be mixed together in the same jar or bottle.

Mode of obtaining supplies of Medicine, and Annual Reports on their Qualities, &c.

On the 1st of October of each year, a Report is to be transmitted to the Director-General on all the said supplies. Any objections, therefore, as to the age, adulteration, or chemical defects of the medicines, should be noted from time to time, that the Report may be fully substantiated. All losses or casualties resulting from bad packing, leakage, or accident, must be stated at the time of receiving the Stores, in the usual manner.

On a change of Station being ordered between the transmission of a requisition and the receipt of the supply, such change is to be immediately reported to the Director-General; adding to what Station the supply should be forwarded.

Disposal of
empty Bottles
and Packages
on Home
Service.

68. All empty bottles and packages, in which supplies of Medical Stores were received, are to be carefully preserved from damage; and such as will not probably be wanted for further Hospital use, are to be reported annually to the Director-General, either on the 1st of April or the 1st of October, in a List, in duplicate, specifying the number and description of each article, and the highest sum obtainable for the same by private sale, on the spot. A similar Report is also required, at any intermediate period, when from a change of station, or on any other account, it may be deemed expedient to dispose of such articles. The proposed sales, when approved of by the Director-General, are to be forthwith effected, and the proceeds thereof duly accounted for in the next Hospital Accounts.

On Foreign
Service.

Sales of empty bottles and packages on Foreign Service, are to be made under the orders of the principal Medical Officer on each Station annually, or more frequently, if deemed expedient; and the proceeds of such sales are to be immediately paid into the Military Chest, to be duly reported to the Secretary at War.

69. In cases requiring the use of Leeches, the names ^{Leeches.} and diseases of the Patients are to be specified: and the charge is to be vouched by the Medical Officer's declaration that the leeches were purchased on the best and cheapest terms; under ordinary circumstances, venesection and cupping should be resorted to.

70. In cases requiring Steel Trusses, requisitions, in ^{Steel Trusses.} duplicate, are to be transmitted to the Director-General, specifying the dimensions and description of the trusses, and the names of the men for whom required. See Form, Appendix, page 97.

ACCOUNTS AND RETURNS.

71. All sums necessary to meet the expenditure of a ^{Receipts and Expenditure.} Regimental Hospital are to be drawn from the Paymaster, upon the estimates of the Medical Officer in charge, who is to balance his accounts with the Paymaster at the termination of every quarter; as the Medical Officer will be held strictly responsible for the due appropriation of the money so drawn, as well as for the general superintendence of the Hospital and Servants, he should himself make all the disbursements, and also pay all bills, for the service of the Hospital, having first duly examined the same.

72. The Medical Officer in charge of a Hospital at ^{Quarterly Account.} home, at Stations where there is not a Deputy Purveyor, is to render a Quarterly Account of his expenditure, agreeably to the forms furnished by the War Office.

73. Monthly Returns of men in the Hospital of another ^{Men in the Hospital of another Regiment.} Regiment are to be rendered in the manner pointed out by Article 323 of the Explanatory Directions to Paymasters and others.

Postage and
Stationery.

74. No charge for Postage and Stationery is admissible in the Hospital Accounts, the expenses necessarily incurred being liable to be defrayed out of the commuted allowances for Regimental Postage and Stationery. See the Circular Letters from the War Office, dated 25th July and 30th October 1833.

Contingent
Charges.

75. Before any charge is made in the Hospital Contingent Accounts for miscellaneous expenses, such as medicines, leeches, articles for cleaning the Hospital, soap,* or any other contingent expenses not provided for by Regulation, nor admissible as extras, a statement thereof, supported by sufficient vouchers and explanations is to be submitted to the War Office in the usual form, on or immediately after the last day of every quarter, when the same will be returned with an authority to charge the whole amount, or such part as may be approved.

Account to be
charged in the
Regimental
Pay List.

76. On the receipt of such War Office authority, the Medical Officer will close his Quarterly Account, in order that the same, after being certified by the Commanding Officer, may be annexed to, and charged in, the Regimental Pay List by the Paymaster.

Settlement of
Accounts for a
broken period.

77. Every Medical Officer in charge of a Hospital for which the supplies are not provided by a Deputy Purveyor, before he quits his station, or leaves the kingdom, must make up his Accounts to the date when the Hospital ceased to be under his charge.

Accounts from
Foreign Sta-
tions.

78. The Accounts of Regimental Hospital expenditure abroad are to be made up quarterly and in duplicate, but the supplies are, notwithstanding, to be paid for monthly.

* The quantity of Soap for Washing Bandages, and Cleaning the Hospital, and for personal use, is not to exceed together one pound per hundred Diets.

79. An Abstract of each Quarterly Account is to be filled up by the Medical Officer in charge of a Hospital, and submitted with a copy of the said Quarterly Account to the principal Medical Officer on the Station, who will retain the said Abstract, and return the Account approved, in order to be annexed as a voucher to the Regimental Pay List.

80. The principal Medical Officer at each Station will transmit to the War Office Quarterly Statements of the Expenditure of the several Hospitals subject to his superintendence, and Quarterly Returns of the sums paid to the Commissariat Department; and likewise, a Return of Seamen and Marines under treatment in the Military Hospitals, in the Form, Appendix, page 110; a duplicate of which is to be forwarded to the Admiralty.

81. The undermentioned Annual Returns are to be rendered by the principal Medical Officer on each Foreign Station, as soon as possible after the 31st of March in each year, viz. :—

1st. A General Abstract of the Expense incurred for Regimental and Detachment Hospitals on the Station, including the Pay and Allowances of the Staff and Regimental Medical Officers.

2nd. A Manuscript Statement of the receipt, value, and appropriation of Articles supplied to Hospitals from the Army Stores, but not paid for by the Surgeons.

3rd. A Statement of the Pay and Allowances of the Medical Staff, and of the contingent Disbursements connected therewith, including allowances to Private Practitioners.

4th. A Return of the Regimental Medical Officers on the Station.

5th. A Return of the receipt and appropriation of Stationery sent from England.

Hospital Books
and Returns.

82. The Hospital Books and Returns required are as follow, viz.—

Letter Book.

1st. A Letter Book, in which all official letters, either written or received by the Medical Officer in charge, are to be entered for the inspection of the Regimental Commanding Officer, the Director-General, or any other superior Medical Officer.

This Book is to be provided out of the Regimental allowance for Stationery.

Monthly Sick
Return.

2nd. A Monthly Sick Return, in the Form (Appendix, page 105), commencing from the 1st of each month, is to be transmitted to the Director-General. This Return, which is to specify the total number of Sick, distinguishing those at Head Quarters from those on Detachment or Furlough, or in General Hospital, and which should contain any other information not of sufficient importance for a special report to the Director-General, is to be regularly dispatched on the 1st day of every month, whether a Hospital be established or not, or whether a Regiment be stationary or on a march. See Instructions on this point, page 60. The nomenclature is to be strictly in accordance with the Table of Diseases (Appendix, page 103).

If the Hospital be in a District in which a superior Medical Staff Officer is acting, the Return should be sent through him.

Yearly Return
and Report of
Sick, &c.

3rd. A Yearly Return, and Report of Sick, and Medical transactions, to be made out to the 31st March, and to be transmitted, within fourteen days from that date, to the Director-General; together with a Return of Phthisis Pulmonalis. See Instructions on this point, page 62.

Half-yearly
Return of
Medicines.

4th. A Half-yearly Return of Medicines (Appendix, page 89) to be transmitted to the Director-General at the sametime with the requisitions for Medicines, &c. the latter to be in duplicate. See Appendix, pages 94 and 96.

5th. A Half-yearly Return, in duplicate, of Books and Forms. See Appendix, page 108. Half-yearly
Return of
Books, &c.

6th. An Annual Report on the qualities of the Medicines and Surgical Stores. See Article 67. Annual Report
on Medicines,
&c.

7th. A Register Book for cases of Vaccination and Small-pox, and for Reports on Recruits. Register of
Vaccination
Cases, &c.

8th. A Historical Register, for copies of the Yearly Returns and Reports of the Surgeon and his Assistant, in order that the Medical History of the Corps may be kept complete, and in a connected and consecutive form. Historical
Register.

9th. A Medical Register, to contain a detailed history of every case of Disease (Itch excepted), with the Treatment employed, and a daily entry of Diets and Extras. Medical Re-
gister of Cases
of Diseases.

Regimental Surgeons will be held responsible for the accuracy of their Medical Registers; and the principal Medical Officers, in their superintending visits, should be especially careful in their examinations, and in their Reports, as to the manner in which the Registers are kept. Every case (Itch excepted) is to be fully, legibly, and scientifically entered therein; so as to afford a ready opportunity of obtaining the requisite information at all times.

The junior Medical Officers should be accustomed to conduct the Register, both for the purpose of abridging the labour of the Surgeon, and in order to acquire a facility in drawing up these Statements; but the responsibility rests with the Officer in charge, who of course can correct and enlarge them when and where he sees fit.

For instructions regarding the mode of keeping the Register, see page 67.

10th. A Defaulter Book, to be kept in the manner prescribed at page 68. Defaulter Book

All the before mentioned Returns and Books, except the Letter Book, will be supplied upon periodical requisitions to the Director-General. See Appendix, page 108.

Guard Book. 11th. A Guard Book, to be provided by the War Office, for keeping together, in a regular series, duplicate Accounts and Returns, and other documents.

Diet Rolls. 12th. Forms of Diet Rolls, namely, Monthly for Ordinary Diets, and daily for Extras, to be furnished periodically by the War Office.

Custody and subsequent disposal of the Books. 83. These Books, &c., are to be kept carefully, and in good condition, as public documents; and, while in use, all the Books should be covered either with canvas or cartridge paper. They are always to be deposited in the Surgery for inspection, in order that the Commanding Officer may judge, by his own occasional visits, and by the daily Reports of the Visiting Officer and Surgeon, how far the several duties of the Hospital are properly performed.

If the Books shall accumulate to an unwieldly bulk, a representation is to be made to the Director-General, who will give orders for their disposal; and, in the event of the Regiment leaving the kingdom, all books which have ceased to be in use more than one year are to be left in the hands of the principal Medical Officer where the Regiment embarks, and the circumstance is to be reported to the Director-General.

Correspondence. 84. Medical Officers should correspond direct with the Secretary at War on all financial points, and with the Director-General in London or Dublin, as the case may be, upon all professional points.

85. The following Rules are to be observed in corresponding with the Army Medical Department:—

Mode of corresponding with the Army Medical Department.

1st. The *Number under the date* on each Letter from the Director-General is to be quoted in the reply, as well as on all subsequent letters upon the same subject.

2nd. The Date of each Letter is to be quoted in the reply thereto.

3rd. The Christian Names of the writer, his Rank, if an Officer, and his Address, are always to be stated in full.

4th. No Letter is to contain more than *one* distinct head of correspondence.

5th. All Letters and Returns for the Director-General are to be addressed to him, under cover to the Right Honourable the Secretary at War, War Office, London, with the words "Medical Department" in the left-hand corner; and to be sent unsealed, unless confidential Reports, in which case the word "confidential," and the writer's signature, should be added to the left-hand corner.

6th. Envelopes are to be used *only* when indispensable.

7th. Enclosures are to be described in the margin of the letter transmitting them.

THO^s. F. FREEMANTLE.

WAR OFFICE,
1st February, 1845.

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INSTRUCTIONS
TO
MEDICAL OFFICERS
REGARDING

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WITH A
FORMULARY OF PRESCRIPTIONS.

THE following further Instructions for the guidance of Medical Officers, in regard to details connected with the foregoing Regulations, are issued by the Director-General of the Army Medical Department.

I. Instructions regarding the Surgical Inspection of Recruits.

I. The first object is, to guard against the approval of ineligible Recruits.

II. The external characters of a sound constitution and efficient limbs may be briefly stated as follows, viz., a due proportion between the trunk and members of the body—a countenance expressive of health, with a lively eye—skin firm and elastic—lips red—teeth sound—voice strong—chest capacious and well formed—belly lank—limbs muscular—feet arched and of a moderate length—hands large rather than small. The reverse of these marks may be considered to indicate infirm health and inefficiency.

III. The question of fitness or unfitness of a recruit must, in a great measure, be determined by the discretion and experience of the officer who inspects him; for no rule can be formed so definite as to dispense with the exercise of such discretion.

IV. As Soldiers are liable to serve in every variety of climate, to be exposed to frequent vicissitudes of temperature and weather, to undergo much fatigue and danger, and often to sustain considerable privations, no Recruit who is not vigorous ought to be approved.

V. The more common causes of rejection are enumerated below:—

- 1.—Feeble Constitution—Unsound Health, indications of former Disease, as leech bites, traces of blisters, Nodes, Glandular Swellings, or other symptoms of Scrofula, &c. &c.
- 2.—Weak or disordered Intellect.
- 3.—Chronic Cutaneous Affections, especially of the Scalp.
- 4.—Severe injuries of the Bones of the Head.

- 5.—Impaired Vision, Inflammatory Affections of the Eyelids, immobility, or irregularity of the Iris, Fistula Lachrymalis, &c. &c.
- 6.—Deafness, copious Discharge from the Ears.
- 7.—Loss of many Teeth, or the Teeth generally unsound.
- 8.—Impediment of Speech.
- 9.—Want of due capacity of the Chest, or any other indication of liability to Pulmonic Disease.
- 10.—Debility of the Hands or Arms caused by Palsy, old Fractures, especially of the Clavicle, Contraction of a Joint, Mutilation, Extenuation, Deformity, Ganglions, &c. &c.
- 11.—An unnatural excurvature or incurvature of the Spine.
- 12.—Hernia, or a tendency to that disability from preternatural enlargement of the abdominal ring.
- 13.—A varicose state of the Veins of the Scrotum or Spermatic Chord, Sarcocoele, Hydrocele, Hemorrhoids, Fistula in perineo.
- 14.—Debility of the Feet or Legs caused by Varicose Veins, old Fractures, Malformation -(flat Feet, &c.), Palsy, or Lameness, Contraction, Mutilation, Extenuation, Enlargement, unequal Length, Bunions, overlaying or supernumerary Toes, Ganglions, &c. &c.
- 15.—Ulcers, or unsound Cicatrices of Ulcers likely to break out afresh.
- 16.—Diseases, whether Acute or Chronic, for which Medical treatment is required.
- 17.—Traces of Corporal Punishment are an unqualified cause of rejection.

VI. Every Recruit is to be undressed before inspection, in order to detect any blemishes, and his examination is to be conducted as follows :—

VII. Upon entering the Inspection Room, the Recruit is to walk across it several times pretty smartly, to show whether he has the perfect use of his legs. He is then to be halted and set up in the position of a Soldier under Arms, with the knees

about an inch apart, and examined both in front and rear, from head to foot. Should no material defect be discovered, the Recruit is next to perform, in imitation of the Hospital Serjeant, the following evolutions :—to extend the arms at right angles with the trunk of the body, to touch the shoulders with the fingers, to place the backs of the hands together above the head—and in this position he is to cough, while the Examiner's hand is applied to the rings of the external oblique muscles, The Spermatic Chord and Testes are to be examined, and the Medical Officer is to pass his hands over the bones of the legs. The Recruit is then to stand upon one foot, and to move the ankle joint of each extremity alternately; and if any doubt is entertained respecting the efficiency of this joint, or any part of the leg or foot, the Recruit is to hop upon the suspected limb for a short period, and its size and aspect are to be compared with those of the corresponding joint or part of the opposite limb. He is next to kneel on one knee, then on the other, and subsequently on both knees. Then to stoop forwards and place his hands on the ground, and while in this position it ought to be ascertained whether he be affected with hemorrhoids.

He is then to extend his arms and hands forward for examination, and to bend and extend the fingers, and to rotate the fore-arm.

The head is next to be examined, including the scalp, ears, eyes, nose, mouth: the faculties of hearing and of distinct enunciation are to be ascertained. In regard to the mental faculties, the Inspecting Medical Officer should invariably ask the Recruit a few short questions, such as to what Corps he belongs, what occupation he has previously followed, &c. &c., with a view to ascertain the condition of the intellect.

VIII. The next point is to learn whether a Recruit has had Small-pox or been vaccinated.

IX. When a Recruit is approved, the attestation is to be filled up and signed by the Inspecting Medical Officer.

X. Under the head, "Remarks and Observations" in the Register for Recruits, all incidental facts of importance are to

be recorded, including the causes for which Recruits are rejected, blemishes, peculiar marks, &c.

XI. Should a Medical Officer, or a private Medical Practitioner, intermediately approve of a Recruit who has a trivial blemish, such as a slight cicatrix on the leg, the Surgeon of the Corps to which the man belongs is to be duly apprised thereof; and if he detects a Recruit previously examined simulating disabilities, he is to inform the Surgeon of the fact, by attaching a slip of paper to the man's attestation. District Surgeons are also directed to conform with this rule.

XII. The Signature of a Medical Officer to an attestation will be considered tantamount to a declaration that he had personally examined the Recruit in question according to the routine above directed, and that the man had no blemish except that affixed to the Attestation.

XIII. The Certificate of Surgeons or Assistant-Surgeons of Regiments, when they approve of Recruits for the Corps to which they themselves belong, is considered final.

XIV. Recruits intermediately approved by a Regimental Medical Officer, or by a Medical Officer on the Staff under the rank of Staff Surgeon, or by a private Practitioner, are to be re-examined by a District Staff Surgeon, or by a Medical Officer of the Regiment to which they belong. Should a District Surgeon consider an intermediately approved Recruit ineligible for the Service, the man in question is to be reported to the Inspecting Field Officer, for the purpose of being brought before a board of Medical Officers, whose decision in regard to his eligibility or ineligibility shall be final. Whenever a Medical Board cannot be assembled, a reference shall be made by order of the Director-General to any Army Medical Officer whom he may appoint, or he will, on the Reports received, decide upon the case himself.

XV. A similar course will be adopted with respect to intermediately approved Recruits who may be deemed ineligible by a Regimental Medical Officer of the Corps to which the Recruits belong. *Vide* Forms of Return, Nos. 1 and 2, pages 48 and 49.

XVI. The Certificate of a District Staff Surgeon, as to the fitness of a Recruit, will be deemed a final approval, in as far as respects Medical examination, except in the case of Recruits for the Honourable East India Company's Service. "A Recruit, passed by a District Staff Surgeon, as fit, shall not, on arrival at his Regiment, be discharged for any medical cause, unless expressly sanctioned by the Adjutant-General."

XVII. To entitle any one who secures a Deserter to the usual reward, a Certificate of his fitness for the Service must be produced to the Magistrate who commits him. In the examination of a Deserter, it is to be borne in mind by Medical Officers that he is already in the Service, and consequently should not be pronounced unfit for military duty unless he suffers under a serious disability, such as would render it necessary to discharge a Soldier from the Army.

XVIII. Every Recruit who has not passed through Small-pox, or the Vaccine Disease, is, if possible, to be vaccinated by the Inspecting Medical Officer; and if the exigencies of the Service will not permit this being done, the circumstance is to be reported to the Surgeon of the Corps to which the man belongs.

XIX. The Books required to be kept in regard to this branch of the duty of a Medical Officer, are—

1. A Register of Recruits, and Record of Vaccination, which is to be ruled so as to contain the following heads:—

- A.—Date of Examination.
- B.—Regiment.
- C.—Name of each Recruit.
- D.—Age.
- E.—Country of Birth (as England, Ireland, or Scotland).
- F.—Previous Occupation, or Station in Life.
- G.—Small Pox or Cow Pox.
- H.—Remarks and Observations.

2. A Letter Book.

XX. Medical Officers attached to Recruiting Districts are to forward to the Director-General a numerical Return, dated on the 1st of each month, of the Recruits examined, with the numbers rejected and approved during the preceding month; and also, the Annual Return called for in the Circular Letter of 3d March 1843.

XXI. Regimental Medical Officers are to transmit to the Director-General an Annual Return of the Recruits they examine. *Vide* Form of Return No. 3, page 49.

XXII. District Surgeons, when in charge of Sick, are to obey the Regulations issued for the guidance of Regimental Medical Officers in the exercise of their duty, and to forward similar Returns.

No. 1.

RETURN of one or more Recruits who have joined the — Re-
cruiting Depôt or Regiment, and who upon examination
have been considered ineligible for Her Majesty's Service.

Name.	Date of Enlistment.	Intermediately approved by	Cause of Ineligibility.

Signatures.

Surgeon.

Commanding Officer.

No. 2.

PROCEEDINGS of a Board of Medical Officers, assembled by
Order of _____ for the purpose of reporting
upon the state of A. B., a Recruit who has been considered
ineligible for Service, by

} Members of the Board.

The Board having carefully examined A.B., a Recruit belong-
ing to _____ Regiment, who was originally passed by
_____ and has been deemed ineligible for the Service
by _____ in consequence of [*here insert the cause
of the alleged disability*], and finding that he [*here describe the
kind and degree of whatever disability he may labour under,*] we
are of opinion that the above-named Recruit is unfit for the
Service.

Signatures of the Members
of the Board.

No. 3.

RETURN of Recruits inspected at the Recruiting Depôt
or _____ Regiment, from the 1st April, 184 , to the 31st
March, 184 , inclusive.

Approved	*	-	-	-	-
Rejected	-	-	-	-	-
Total Inspected	-	-	-	-	-

CAUSES OF REJECTION.

	No.
Unsound Health	- - - - -
Weak Intellect	- - - - -
Traces of Scrofula	- - - - -
Muscular Tenuity	- - - - -
Chronic Cutaneous Affections	- - - - -
Specks on the Cornea	- - - - -
Cataract	- - - - -
Deafness	- - - - -
Loss of many Teeth	- - - - -
Defective condition of the Hands or Arms, from Old Fractures, Contractions, &c. &c.	- - - - -

Deformed Spine	-	-	-	No.
Hernia, Inguinal	-	-	{ Right side	-
			{ Left side	-
Laxity of the Ring of the external oblique Muscles	-	-	{ Both sides	-
			{ Right side	-
			{ Left side	-
Varicose Veins, left Spermatic Chord	-	-	-	-
Ditto right ditto	-	-	-	-
Disease of the left Testicle	-	-	-	-
Ditto of the right ditto	-	-	-	-
Hydrocele, both Testicles	-	-	-	-
Ditto right	-	-	-	-
Ditto left	-	-	-	-
Defective condition of the Feet or Legs from Old Fractures, &c.	-	-	-	-
Malformation, &c. &c.	-	-	-	-
Varicose Veins of both Legs	-	-	-	-
Ditto of the right Leg	-	-	-	-
Ditto of the left	-	-	-	-
Ulcers, Wounds, Cicatrices of ditto	-	-	-	-
Traces of Corporal Punishment	-	-	-	-
&c. &c. &c.	-	-	-	-

I certify that of the above Recruits, I carefully ascertained that had had Small-Pox, that of them had been satisfactorily Vaccinated, and that I have Vaccinated the remaining ; of this number I am satisfied with the Vaccination of , but after times repeating the process on the others, I do not feel satisfied, and have accordingly sent such Statement to the Surgeons of their Corps, with Extracts of their Cases from my Vaccination Register.

Of Women and Children, who accompanied the approved Recruits, I have satisfactorily Vaccinated Women and Children, and I have sent the Extracts from my Vaccination Register, of the Women and Children, to the Corps they went to.

A. B. Surgeon.

II.—Instructions regarding the examination of Soldiers brought forward for Discharge as unfit for further Service.

When a man is to be brought forward for discharge, the Regimental Medical Officer is to draw up an abstract of the history of the disease. In this document the probable origin or cause of the disability must be stated. In all his statements the Medical Officer should carefully distinguish between testimony, whether of the soldier or others, and the facts which have come under his own knowledge. He should detail the progress of the disability, and give a specific account of the nature of the disease, with his reasons for considering the man as thereby incapacitated for military duty, as also why he believes the disability to be incurable or permanent. The circumstances of the case should be clearly and consecutively stated, so as to enable the Regimental Board to trace the process of reasoning by which the Surgeon arrives at his conclusion.

A clear account of the origin of a man's disability is especially necessary in cases of wounds or accidents; and when an infirmity may confer a claim for a Pension, it ought to be carefully reported whether the cause of unfitness is likely to be temporary or permanent. The *degree* of a disability is an important feature in a man's case, and hence the account should contain a short notice of the duties for which he is unfit.

The length of time a Soldier has been in Hospital on account of a disability will form a prominent feature in the history of the case; and hence this time is to be clearly distinguished from the period the man may have been permitted to reside in Barracks without being subject to Hospital discipline.

The Form subjoined will serve to point out the chief heads of information required in the Medical Officer's Report. It is intended to apply to all Invalids, whether sent from Regiments

at Home, or from Foreign Stations, and whether sent for change of climate, or to be discharged; and inasmuch as the cases of all Soldiers should be fully detailed in the Medical Registers, want of information is never to be alleged by Medical Officers as a reason for defective Reports.

Detailed Medical Report on the Case of——, Invalided and sent to Chatham.

- 1st. Name, ——
- 2nd. Age, — years — months.
- 3rd. Total Service, — years — months; of which, in the East or West Indies ——; China ——; America ——; Mediterranean ——.
- 4th. Nature of Disability.
- 5th. When first apparent.
- 6th. Where was the man then stationed?
- 7th. To what cause attributable?
- 8th. Has the Disability been aggravated by vice or misconduct?
- 9th. How often, and for what length of time on each occasion, has the Soldier been in Hospital since the Disability became apparent?
- 10th. In what respects does it disqualify him for Military Duty?
- 11th. What was his Trade or Calling before he entered the Army?

Medical Staff Officers are to make themselves intimately acquainted with the Royal Warrant of the 14th November, 1829, and with the General Orders of the 1st January, 1830.

They are carefully to examine each man who may be brought forward for inspection; and will direct their especial attention to the following points:—whether an alleged disability actually exists,—how far the man's infirmity disables him for the Service,—and if it be probable the disability will permanently disqualify him for military duty.

The duty of examining a Soldier and deciding upon his fitness or unfitness for the Service, being one of great importance, and sometimes of considerable difficulty, much care should be bestowed upon it. In the execution of this duty, no pains should be spared to verify the reasons assigned for each man's unfitness. The Examining Medical Officer's conclusions will be chiefly derived from personal examination, professional knowledge, and the Hospital documents. The observations should be brief, but sufficiently copious to convey the grounds which induce him to arrive at the conclusions conveyed in his remarks.

Medical Staff Officers are to be very cautious in recommending a man to be discharged, who is fit for the performance of any duty. Men, who from length of Service, or impaired health during a residence in a foreign climate, or other causes, are disqualified for joining the Service Companies of a Regiment, may still be capable of performing the duties required of the Reserve Companies at home.

The 51st Article of the Warrant of the 14th November, 1829, directs, that no Soldier be discharged from the Service on account of a disability, unless its alleged existence is satisfactorily ascertained, and is calculated to render a man immediately, and, in all probability, permanently unfit for military Service.

It is impossible to specify particularly the diseases or disabilities on account of which Soldiers should be discharged. The disabling degree of an infirmity, and not its mere name, should at all times influence Medical Officers in respect to the men whom they bring forward for discharge.

Great care ought to be taken by Medical Officers not to mistake sympathetic morbid phenomena for symptoms indicative of organic disease. There are few important diseases that are not accompanied by an alteration of the structure of some organ essential to the due exercise of the functions of life; and until a Medical Officer is satisfied that a viscus has become disorganized, he should rarely consider himself warranted in bringing forward a man for discharge. But even a certain degree of structural change in an organ does not invariably render it

necessary to discharge a Soldier ; as the altered structure may admit of recovery, or may not disqualify him for military service.

In illustration of these general observations, a few remarks on the kinds of disabilities for which Soldiers are commonly discharged may be useful.

Return of the Number of Soldiers who were invalided at Chatham, and finally discharged from the Service, between the 1st of January 1825 and 24th of October 1828, in consequence of the Disabilities undermentioned, viz. :—

	Number.
Cachexies - - - - -	98
Dropsies - - - - -	207
Dysentery and Hepatic - - - - -	845
Epilepsy and Palsy - - - - -	286
Mental Diseases - - - - -	62
Pulmonic - - - - -	1126
Rheumatism, &c. - - - - -	822
Diseases of the Eye - - - - -	450
Fractures, Dislocations, Wounds, Hernia - - - - -	1420
Ulcers and Varices - - - - -	439
Venereal - - - - -	13
Worn Out - - - - -	2195
	<hr/>
	7963

Cachexies.

Diseases of this class are invariably a result of the disorganization or altered structure of some internal organ. Emaciation and weakness are the effects of disease, the nature of which should, if possible, be stated, instead of the obvious consequences only.

Dropsies.

This generic term includes a variety of diseases. When the collection of water is the consequence of the morbid condition of some internal viscus, no great hope of recovery can be entertained. As the particular diseases (of which Dropsy is very frequently only a symptom) are rarely long protracted, it becomes the duty of a Medical Officer to deliberate whether a

man thus affected should not be accommodated in Hospital, until the issue of his case be determined.

The existence of Dysentery may commonly be ascertained, but the diagnosis of organic Disease of the Liver is frequently very difficult, and the utmost caution should be exercised before a man be discharged on this account. In regard to cases of decided Dysentery, it may perhaps be in general advisable to accommodate the Soldier in Hospital until the disease terminates either by recovery or death.

These disabilities are very frequently simulated. This circumstance should therefore induce Medical Officers to devote the most scrupulous attention to the investigation of each case that may come under their care, as a man should not be brought forward for discharge until no doubt be entertained of the existence of Palsy or Epilepsy.

In regard to alleged Mental Diseases, two very important points are to be considered.

1st. Whether the mental affection is of that degree to completely disqualify the man for being a useful Soldier.

2nd. Whether his mental alienation or weakness is sufficiently conspicuous at all times, to prevent his being approved by a Medical Officer should he be discharged and re-enlist.

This term is frequently employed to include a variety of Pulmonic diseases of every different degrees of importance, which affect the lungs. In the diagnosis of Diseases of the Chest, the utmost care ought to be taken not to confound affections of a comparatively trivial nature with others of the most fatal tendency. By a skilful application of the Stethoscope, Medical Officers will commonly be able to distinguish mere bronchial affections that admit of recovery, from tubercular degeneration of the Lungs, which affords a sufficient reason for discharging a man. The Stethoscope is highly useful in detecting the simulators of Consumption—a class of imposters found in almost all Military Hospitals.

These affections are a fertile source of fraud, and, so long as men are discharged for Rheumatism, imposition will frequently occur. That a degree of Chronic Rheumatism may exist with-

Dysentery and Hepatic.

Epilepsy and Palsy.

Mental Diseases.

Rheumatism, &c.

out sensible appearances cannot be denied; but this is a disability which is greatly under the influence of medicine, and the natural restorative powers of the constitution. The allegation of wandering pains, unsupported by physical changes, should almost invariably be rejected as a cause for discharge. There is one qualifying circumstance attending the management of cases of alleged Rheumatism, namely, that military exercise seldom aggravates this complaint, and sometimes contributes to remove it.

Diseases of
the Eye.

Impaired vision is the cause assigned for the annual discharge of a number of soldiers. As inflammation of the organ of vision and consequent blindness are sometimes artificially excited by Soldiers, the greatest care is required by Surgeons not to become the tools of unprincipled individuals, who voluntarily mutilate themselves. The 15th and 19th Articles, however, of the Warrant of the 14th November 1829, will no doubt have a tendency to discourage all tampering with the eyes.

Fractures,
Dislocations,
Wounds,
Hernia.

The degree of disqualifying effect of Fractures, Dislocations, or Wounds, is very frequently exaggerated and sometimes entirely feigned. Too much care cannot be taken to counteract the measures adopted by designing individuals to render the recovery of an injury incomplete. The 25th and 51st Articles of the Warrant confer a power on Medical Officers to deter men from protracting their recovery, or rendering the cure of an injury imperfect.

Ulcers and
Varices.

Ulcers of the Legs are frequently artificially excited; and even when there is no satisfactory evidence of artificial means having been employed to excite Ulceration, this disability should rarely, except when accompanied by Varices, induce a Surgeon to bring a man forward for discharge.

Venereal.

Since Mercury has been less liberally exhibited for the cure of this disease, the proportion of men rendered unfit for the Service by this class of diseases has been comparatively small.

Worn out.

If the term "worn out" were confined to men alleged to be disabled by service during fifteen, twenty, or twenty-five years, it would convey some specific meaning; but as the title, as a

cause for discharge has not hitherto been strictly limited to a particular age or period of service, the kind of disability is left quite indefinite; but in every case the disease or cause from whence "worn out," must be distinctly stated.

These observations are intended chiefly to show the importance of the duties connected with the discharge of Soldiers, and the skill and attention required of Medical Officers to distinguish between alleged diseases and infirmities which permanently disqualify a man for military duty, and those that do not incapacitate him for further service. It is impossible to define rules for the sole guidance of Medical Officers on this important branch of duty, as they must be chiefly directed by their own discretion, professional skill, and practical experience.

Men under three years' service, who from constitutional infirmities are never likely to become useful and efficient Soldiers, and are therefore recommended to be discharged, are to be reported according to the Form, Appendix, page 111, specifying by what Medical Officer the Recruit was approved, the time and place, and the other particulars therein required. Medical Staff Officers must be particularly careful not to encourage the practice of malingering, by seeming to recommend men to be discharged on slight grounds, or whose alleged disabilities are of doubtful existence. Great care must likewise be taken not to recommend men to be discharged where suspicion may be entertained with regard to the origin of a disability, as in cases of mutilation, and particularly in cases of impaired vision.

III.—*Instructions regarding the Treatment of Men suffering under Mental Diseases.*

Especial attention is to given to the subject of Amentia, Mania, Melancholia, and Idiocy; and on every occurrence of these diseases the following directions are to be strictly observed.

The name, age, general appearance, and temperament of the Patient are to be entered in the Register. Every endeavour is to be made to ascertain the probable causes of the malady, whether moral or physical, or both, the probability of hereditary predisposition ; the previous diseases to which subject, for at least the two preceding years (if the man was with his Regiment), must be noticed ; and if mercury has been employed for the treatment of any one of them, the quantities are to be as accurately ascertained as possible, and the opinion of the attending Medical Officer is to be stated, as to the effect the mercury may have had in producing the present disease ; the character which the man bore in the Regiment, his length of service, and on what stations employed ; the nature of his wounds, if any, are also to be specified ; the species and general leading features of the malady are to be fully described, and the causes and circumstances that appear to excite exacerbations, or to soothe the patient's mind, must be sedulously marked ; the remedies employed during the month's probation, directed by Regulations, Art. 40, their doses and effects, must be stated.

When a fatal termination occurs, the most complete post-mortem investigation is to be instituted for the detection of morbid appearances, including the brain, spinal marrow, thoracic and abdominal cavities.

The detailed history of the case is invariably to be sent with the man to the Military Insane Establishment, and is to be accurately given with reference to each point above alluded to. The date and mode of the transfer, and the names of the persons in charge, are to be stated in the Annual Return.

A separate Certificate of the Insanity of the Patient, in the annexed Form, with the approving signature of the Officer commanding the Regiment, in addition to those of the Medical Officers of the Corps (if both be present), must invariably accompany him, or precede his arrival at the Asylum.

When cases of this disease are successfully treated with the Regiment to which they belong, whether at home or abroad, it is equally necessary that the above points be detailed in the succeeding Annual Reports.

When men are sent home from abroad, labouring under such diseases, the name of the Vessel, and of the Medical Officer in charge, as well as the date of Embarkation, are to be stated in the succeeding Annual Return.

Form of Certificate.

Station

Date _____

We do hereby certify to have carefully examined
of the

Regiment of _____ and find
that he is afflicted with _____ to such
a degree as to render him unfit for service. We do therefore
recommend him as a fit subject to be received into the Insane
Establishment.

Medical Officers' }
Signatures. }

Approved,
Commanding Officer.

IV.—Instructions regarding Monthly Returns of Sick.

The Monthly Return of Sick, prescribed in Article 82, is to be made in the Form, Appendix, page 105, and the different diseases are to be inserted therein according to the prescribed nomenclature.

Medical Officers will pay particular attention to a correct discrimination of diseases, and to classing them in due nosological arrangement, particularly the Acute Diseases. In Diseases of the Skin, the arrangement of Dr. Willan is preferable.

The specific affections of the Eye and Skin, and of Tumours, must be stated in each Weekly and Monthly Sick Return, when such are required. In the Foreign Quarterly and in the Annual Sick Returns, both at home and abroad, specific minor Returns are appropriated to this purpose.

The part affected must be added to all those terms that leave the seat or nature of the disease undefined, as *Aneurisma*, *Hernia*, *Fractura*, *Luxatio*, &c.

The classification of the late Mr. Abernethy is to be attended to in Tumours.

A Table of the Diseases to be specified in the Medical Returns will be found in Appendix, page 103.

Any deviations that may be made from this Table are to be supported by the most respectable Medical Authorities.

Sick in Barracks or Quarters must be included in the "Admission and Discharges," as well as those in Hospital.

The Returns are always to be filled up by a Medical Officer, and are to be signed by the Senior Medical Officer present, and the names of the other Medical Officers are to be inserted at the bottom, stating whether they be present or absent; and if absent, by whose authority, and on what account. Requisitions for Blank Forms of Returns are to be sent to the Army Medical

Department half-yearly, viz., on the 1st of April and the 1st of October.

In the Report of the Medical Occurrences which is to accompany every Return, such information on individual cases or prevailing sickness as may be useful for the elucidation of their number, nature, and cause, is to be given. In cases of Variola, the name and age of the Patient are to be stated; also, whether he had previously been vaccinated or inoculated.

Distinct notice must be taken of every printed item of this Return, and when on any particular point no information can be given, it is to be so stated.

V. *Instructions for Annual Reports of Sick, and of Phthisis Pulmonalis.*

While the Director-General cannot too strongly impress on Medical Officers the importance which he attaches to the preparation of the Annual Reports, it is impossible to lay down any fixed rules for their formation, which shall be applicable to all Stations and circumstances. It is, however, expected that the following points meet with due attention:—

1. Topographical description of Station, its Vicinity, nature of the Climate, Atmospheric Phenomena, &c.
2. Position of Barracks and Hospitals, with the extent and nature of accommodation they afford; to include a short account of the particular site, materials of which built, number and size of Rooms and Wards, and of the Out-houses, means of Ventilation, &c.
3. Rations and Diet; detailing the nature of the Soldier's Meals, and what facilities the Station offers for improvement in this respect, especially on Foreign Stations.
4. Duty and Employment; specifying whether they are in any respect so severe as to be likely to prove prejudicial to the health of the Troops.
5. Internal Economy; particularly as regards the measures for the repression of Intemperance, the prevalence or rarity of Crime and Punishment among the Troops, and the means employed to furnish them with healthy exercise and amusement.
The means and facilities for personal ablution require particular specification.
6. The average strength of the Regiment throughout the year, distinguishing (on Foreign Stations) the White from Black Troops, and showing any changes in its composition; stating, also, the Stations and Strength of each Detachment.
7. Remarks as to the principal Classes of Diseases by which Sickness and Mortality has been occasioned, and any pecu-

liarity, either as regards the forms in which they present themselves, or their prevalence or rarity, as compared with former years, or other Stations, at which the Regiment had been previously quartered, to be carefully noted.

8. A detailed notice of any Epidemic which may have visited the Station in the course of the year, stating the circumstances under which it appeared, its subsequent progress, and if it was attended by any atmospheric phenomena.

9. If sufficiently extensive materials be possessed, show whether the Sickness and Mortality at the Station has most affected the young Soldiers or those more advanced in life, and whether it has fallen in a higher proportion on those recently arrived, than on the long resident.

This will be ascertained by comparing the number alive at each age and each period of residence in the Command, with the numbers of the same class who have died in the course of the year. These calculations, however, are not required, unless at least 500 men have been under observation.

Presuming the ratio of mortality to increase with the advance of age, give the ratio in a tabular form.

It is also necessary to state whether Salted Provisions have acted, and if so, in what degree, as causes of Dysentery or of Diarrhoea, or of disease of the Stomach or Intestines.

10. The state of Vaccination in the Corps, and its effects as regards Small-pox; and the prevalence of Ocular and Venereal Disease; as also the treatment of the latter, with reference to the employment of Mercury, are to be noticed.

11. Detailed histories of such cases as have been particularly worthy of observation (with the symptoms, Diagnosis, mode of treatment pursued); and, in fatal cases, of the Post-Mortem Examinations, will be expected under each head of disease.

12. As a most important and interesting point of investigation, connected with the subject of Phthisis Pulmonalis, the attention of Medical Officers is specially called to the existence of Tubercles; to their nature and extent, whether in a latent

state, or connected with obvious symptoms, more especially in the Lungs, but generally in any of the other larger Viscera, as the Liver, Spleen, &c. ; for which purpose, the use of the Stethoscope is particularly enjoined.

In each case, the portion of either Lung, or both Lungs, or other organs, and the extent occupied by Tubercles, as well as the state of the remaining portion, and whether complicated with Vomicæ, or otherwise, should be carefully noted.

An Annual Report is the proper place for giving such information on this and all other diseases ; but for the special elucidation of the subject of Phthisis Pulmonalis, an Annual Return of this disease, as called for by Circular of 20th August 1840, is to be transmitted from every Corps and Depôt, exhibiting, in every fatal case, the particulars specified in the annexed form.

In the event of no fatal case having occurred during the year, a return is notwithstanding to be forwarded, containing a remark to that effect.

FORM of ANNUAL RETURN of *Phthisis Pulmonalis*.

Name and Age.	Period of Service.	Period on the Station.	Disease which has proved Fatal.	Tubercles of Lungs.	Tubercles of

VI.—Instructions regarding Returns and Accounts of Medical Comforts.

The rule to be observed in regard to the expenditure of Medical Comforts furnished for the use of Troops or Invalids on board Ship, and the disposal of the remainder on arrival in England, is as follows :—

All supplies furnished by the Victualling Department are to be placed in the sole custody of the Master of the Ship, and to be issued by him, from time to time, during the voyage, on the requisition of the Medical Officer in charge.

All further supplies which it may be necessary for the principal Medical Officers on Foreign Stations to put on board, are, in like manner, to be received and issued by the Master of the Ship ; who, on his Arrival in England, will hand over the residue to the Naval Victualling Stores.

For this purpose, it will be necessary for the principal Medical Officer to obtain Receipts, in quadruplicate, from the Master of the Ship, for the Medical Comforts put on board by him, retaining one of these Receipts, and transmitting another, immediately, to the Director-General, together with the Inspection Report of the Ship, and the List (No. 1) of Medical Comforts (Appendix, page 99) ; in which Receipts and List are to be distinctly enumerated the quantities provided from each of the following sources, viz.—the Naval Victualling Stores, the Commissariat, the Ordnance Stores, and the Army Medical Department of the Station. The two remaining Receipts are to be given to the Medical Officer in charge, who will deliver them, together with a Statement, in duplicate, of the quantities received, expended, and remaining, in the Form, No. 2, (Appendix, page 100,) to the principal Medical Officer at the Station where the Men disembark, by whom the Expenditure column of the List must be examined, and compared with the Medical Register kept on board. The

principal Medical Officer will then certify the Lists, both as regards the expenditure on board ship, and the disposal of the remainder : the List thus completed and certified is to be sent to the War Office, with one of the Receipts ; and the duplicate List and the other Receipt are to be forwarded to the Army Medical Department.

The Medical Officer in charge is to enter daily in his Medical Register, such issues of Medical Comforts as he may judge it necessary to administer, as this Register will be considered as his Voucher for the expenditure, and will be strictly examined at the Port where the men may land.

If any issue of lime juice and sugar is ordered for men in health, as a means of averting Scurvy, such issue is to be recorded in a Note at the end of the Register and Return, stating the quantity of each per man ; for what length of time used, and the total of each (in words at length, and not in figures) issued during the voyage : in such cases a detail of names is not required.

Principal Medical Officers will be careful to see that the Medical Officer is duly provided on each voyage, both with the means of keeping his Medical Register, and with a proper supply of Blank Forms for the Returns of Medical Comforts, for which the necessary requisitions must be made by them.

VII.—*Instructions regarding the mode of keeping the Medical Register, and Hospital Defaulter Book.*

The following directions for keeping the Medical Register are to be particularly attended to.

The Christian and Surname of each Patient, with his rank, Regiment, age, disease, and date of admission, should be first entered ; and next his place of birth, trade, general appearance, and peculiar temperament, with his previous diseases and their dates and places : if a Recruit, it is to be stated whether he has been previously vaccinated or inoculated. Should mercury have been exhibited in large quantities for previous complaints, the diseases for which given, its effects at the time, and its apparent connexion with his present disease, are to be stated. To these should succeed a full detail of the symptoms, from the nature of which the character of the present disease, inserted at the heading of the case, is considered to be established. Among the appearances to be noted at this place, should be the state of the animal and vital functions in all Acute, and in several Chronic Diseases ; the countenance and posture of the Patient are likewise on many occasions important to be noted, as affording diagnostic marks ; the state of the pulse, skin, tongue, stomach, and bowels, seat and degree of local affections, and the probable causes, complete the history of the case on first admission. The prescriptions are to be in Latin, and at full length. In the proper column are to be inserted the rate of Diet and the Extras ordered daily.

Each subsequent Report should refer to the symptoms of the preceding day, and the action of the remedies prescribed should be specially noticed.

When the case is carried from one folio or Register to another, the folio or N^o to or from which the case is transferred should be marked.

A short statement should close the case on the day of the Patient's discharge, reporting the improvements resulting from

the treatment, on the disease for which admitted, as well as on concomitant symptoms; and if complete recovery has not taken place, the reasons should be stated why further treatment is discontinued, or that induce the Medical Officer to consider the Patient as not likely to be benefited by further treatment. The destination of the Patient should be stated,—whether discharged for duty, for sick-furlough, for embarkation and removal to another station to be invalided, for change of air, or for removal from the Service, and by what authority.

In fatal cases the appearances on dissection, correctly and minutely made and described, should terminate the case. These post-mortem examinations are for the purpose of elucidating the cause of death, and for guidance in future similar cases. No opportunity should be lost of preserving morbid alterations of structure.

In addition to the Medical Register, a Hospital Defaulter Book is to be kept in each Hospital, agreeable to the Form, Appendix, page 107.

The Surgeon will, in the first Quarter of every Year, review the Hospital Defaulter Book of the past year, and apply to the Commanding Officer of the Regiment, for the insertion into the permanent Regimental Defaulter Book of the names of those men who, from the frequency or nature of their crimes, deserve to be thus permanently recorded.

In the Medical Register are to be daily inserted in red ink, as they occur, such instances of malingering, exciting disease, retarding recovery, drunkenness, or other irregularities as the Patients may be guilty of.

When invalids for the recovery of health, or men for discharge, are sent home from Foreign Stations, or men proposed for discharge from Corps at home are sent to Chatham, the paragraph relating to each from the Defaulter Book is to be sent with the Returns of Invalids, in duplicate.

As the Hospital Defaulter Book may be required to be laid before the Regimental Board of Inquiry, on the Soldier being brought forward for discharge, it is to be kept with great exactness, as a public document of importance.

FORMULARY.

In giving the following Formulary, the principal object in view has been to combine simplicity with efficiency in the mode of prescription; but whilst deviations from this Formulary are discouraged, it is not intended to preclude Medical Officers, in cases of emergency, from having recourse to other Medicines.

1. ABSORBENTIA.

A. MISTURÆ.

- No. 1. R Magnesiæ carbonatis . . . 3 ij.
Sodæ carbonatis . . . Gr. xv.
Zingiberis contri . . . Gr. x.
Aquæ menthæ piperit . . . 3 vi.
Fiat mistura.—Dosis 3 ij. ter in die.

2. R Pulv. cretæ c. c. opio . . . 3 j.
Pulv. catechu . . . 3 ij.
Mistur. acaciæ . . . 3 jss.
Aq. puræ . . . 3 iiii.
Misce.—Fiat mistura, cujus capiat coch. iij.
larg. post singulas sedes liquidas.

2. ALTERANTIA.

A. DECOCTA.

3. R Decocti sarzæ comp. . . 3 v.
Hydrargyri bichlorid. . . Gr. 1/8.
Misce, bis de die sumend.

B. MISTURÆ.

4. R Decoct. sarzæ . . . 3 vij.
Acidi nitrici diluti . . . 3 i.
Aquæ octarium.
Sacchari . . . 3 ij.
Misce, in die sumenda partitis vicibus.

5. R Hydrargyri bichlorid. . . . Gr. vi.
 Spiritus rectificati 3 xij.
 Fiat solutio.—Dosis 3 ij. ad 3 fs.—Ex. cyatho
 decoct. sarzæ comp.

C. PILULÆ.

6. R Hydrargyri chloridi Gr. vi.
 Extracti conii 3 fs.
 Misce et divide in pilulas xij.—Dosis pilula bis
 terve de die.
7. R Hydrargyri chloridi Gr. vi.
 Pulveris antimon. comp. . . . Gr. xij.
 Confectionis rosæ gallic. . . . q. s.
 Divide massam in pilulas sex.—Dosis pilula bis
 vel ter de die pro re optata.
8. R Hydrargyri chloridi 3 fs.
 Extracti opii purif. . . . Gr. xv.
 Antimonii potassio-tartr. . . . Gr. v.
 Misturæ acaciæ quantum satis sit.
 Divide massam in pilulas xxx.
9. R Extracti colocynthidis compositi.
 Saponis singulorum 3 i.
 Rhæi contriti 3 fs.
 Antimonii potassio-tartr. . . . Gr. x.
 Misce et divide in pilulas lx. Sumt. unam bis
 terve de die pro re optata.

3. ANTISPASMODICA.

A. HAUSTUS.

10. R Tincturæ opii m. xxx.
 Spiritus ætheris nitrici 3 i.
 Tinct. lavandulæ compositi 3 fs.
 Aquæ 3 i fs.
 Fiat haustus statim sumendus.
11. R Ol. menth. piperit gtt. ij.
 Magnesiae carbon. . . . gr. xxv.
 Tinct. sennæ comp. . . . 3 fs.
 Aq. menth. piperit 3 i fs.
 Misce—Fiat haustus.

4. ASTRINGENTIA.

A. MISTURÆ.

12. R Acaciæ contrit. 3 ij.
 Aquæ 3 viij.
 Pulveris cretæ compositi cum opio 3 i.
 Tincturæ catechu 3 fs.
 Misce.—Dosis cochleare ij. singulis horis.
13. R Acaciæ contrit. 3 iv.
 Sacchari 3 ij.
 Aquæ tepidæ 3 viij.
 Misce et cola, dein adde
 Tincturæ catechu 3 i.
 Dosis 3 i. pro re nata.
14. R Plumbi acetat. Gr. i.
 Extract. opii pur. Gr. fs. ad i.
 Mistur. acaciæ q. s.
 Misce.—Fiat pilula bis quotidie sumenda.

5. CATHARTICA.

A. MISTURÆ.

15. R Magnesiae vel sodæ sulphatis . . . 3 i fs.
 Infusi sennæ comp. 3 viij.
 Misce.—Dosis 3 ij. secunda quaque hora donec
 alvus respondeat.
16. R Olei ricini 3 i fs.
 Mistur. acaciæ 3 i.
 Misce et adde gradatim
 Aquæ menthæ piperit 3 v.
 Sacchari 3 ij.
 Fiat mistura dosis 3 i fs.

B. PULVERES.

17. R Jalapæ contrit. 3 i.
 Potassæ bitartratis 3 ij.
 Pulveris cinnamomi comp. . . . Gr. viij.
 Misce.
18. R Hydrargyri chloridi Gr. v.
 Jalapæ contrit. 3 i.
 Misce.

19. R Magnes sulphat. 3 iv.
 Infus. ros. 3 iij.
 Acid. sulphuric. dilut. gtt. x.
 Misc.—Fiat haustus.

C. PILULÆ.

20. R Hydrargyri chloridi Gr. v.
 Extracti colocynthidis comp. Gr. x.
 Fiat pilulæ duæ, quarta vel sexta quaque hora
 sumendæ, donec alvus respondeat.
21. R Aloes contrit. 3 ij.
 Saponis albi 3 i.
 Olei menthæ piperit m. vi.
 Misturæ acaciæ q. s. ad massam formandum
 in pilulas xxxvi. dividendam.

6. DIAPHORETICA.

A. MISTURÆ.

22. R Liquoris ammoniæ acetatis 3 ij.
 Sacchari 3 ij.
 Aquæ menthæ piperit 3 vi.
 Misc.—Dosis 3 i. tertia quaque hora.
23. R Misturæ, No. 22. 3 viij.
 Vini antimonii potassio-tartr. 3 ij.
 Misc.—Dosis 3 i. tertia quaque hora.
24. R Guaiaci resinæ contritæ 3 ij.
 Misturæ acaciæ 3 i.
 Aquæ menthæ piper. 3 iij.
 Tincturæ lavandulæ comp. 3 ij.
 Misc.—Dosis cochlearium unum tertia quaque
 hora.

B. BOLI.

25. R Pulveris guaiaci resinæ 3 i.
 ——— ipecacuanhæ comp. Gr. x.
 Confectionis rosæ gallicæ q. s.
 Fiat bolus singulis noctibus sumendus.

C. PILULÆ.

26. R Hydrargyri chloridi Gr. iv.
 Pulveris antimon. c. Gr. xxiv.
 Confectionis rosæ gallicæ q. s.
 Fiat massa in pilulas viij. dividenda, quarum
 sumat unam quarta quaque hora.

7. DIURETICA.

A. MISTURÆ.

27. R Tincturæ digitalis 3 i.
 Tincturæ lavandulæ comp. 3 i.
 Aquæ 3 x.
 Misc.—Dosis cochlearia tria magna sextis horis.
28. R Misturæ camphoræ 3 vi.
 Spiritus ætheris nitrici 3 ij.
 Tinct. scillæ 3 ij.
 Misc.—Dosis cochlearia duo. mag. ter in die.
29. R Tincturæ scillæ m. xx.
 ——— lavandulæ comp. 3 i.
 Aquæ menthæ piperitæ 3 iij.
 Fiat haustus ter quaterve in die sumendus.
30. R Tincturæ digitalis m. x.
 Spiritus ætheris nitrici m. xx.
 Potassæ nitratis Gr. xij.
 Aquæ menthæ piperit. 3 iij.
 Fiat haustus ter in die sumendus.
31. R Aquæ menthæ piperit.
 Liquor. ammoniæ acetat. aa 3 vi.
 Potassæ acetat. 3 ij.
 Syrup. 3 i.
 Fiat haustus ter quaterve de die sumendus.
32. R Potassæ bitartratis contr. 3 i.
 Scillæ contrit. Gr. iij.
 Zingiber. contrit. Gr. v.
 Fiat pulvis octava quaque hora sumendus.

8. EMETICA.

A. MISTURÆ.

33. R Antimonii potassio-tartr. . . Gr. iv.
 Aquæ ferventis . . . 3 iv.
 Fiat solutio.—Dosis 3 i. omni horæ quadrante
 donec superveniat vomitus.

B. HAUSTUS.

34. R Cupri sulphatis . . . Gr. x. vel Gr. xx.
 Aquæ puræ . . . 3 ij.
 Misce.—Fiat haustus emeticus.
35. R Ipecacuanhæ contrit. . . 3 ß.
 Aquæ . . . 3 iß.
 Fiat haustus statim sumendus.

9. EXPECTORANTIA.

A. MISTURÆ.

36. R Potassæ nitratis . . . 3 iß.
 Antimonii potassio-tartr. . Gr. i.
 Aquæ . . . 3 ij.
 Misturæ acaciæ . . . 3 iv.
 Misce.—Dosis 3 i. urgenti tusse.
37. R Olei olivæ . . . 3 iß.
 Tinct. scillæ . . . 3 ij.
 Aquæ . . . 3 xij.
 Liquor ammoniæ . . . 3 ij.
 Fiat emulsio.—Dosis cochlearia duo secunda
 quaque hora.

B. PILULÆ.

38. R Scillæ contritæ.
 Zingiberis contritæ.
 Saponis singulorum . . . 3 i.
 Ammoniaci contriti . . . 3 ij.
 Aquæ q. s. ut fiant pilulæ . LX.
39. R Ipecacuanhæ contritæ . . Gr. 1/2.
 Pulveris antimo. comp. . . Gr. ij.
 Extracti conii . . . Gr. iij.
 Misce.—Fiat pilula.

10. NARCOTICA.

A. HAUSTUS.

40. R Tincturæ opii m. xxv.
 Spiritus ætheris sulphurici comp. m. xxx.
 Aquæ 3 iß.
 Fiat haustus.

B. PILULÆ.

41. R Extracti conii Gr. xij.
 Pulv. ipecac. Gr. vi.
 ——— cinnamoni comp. . . . Gr. vi.
 Fiat massa in pilulas sex dividenda.—Dosis
 pilula ter quaterve in die.
42. R Camphor Gr. xij.
 Extract. hyoscyam Gr. xvij.
 vel
 Extracti opii purif. . . . Gr. vi.
 Misce.—Fiant pilulæ xij.

11. TONICA.

A. INFUSA.

43. R Calumbæ cont. 3 iij.
 Aquæ ferventis octarium cum semisse.
 Macera per horas duas, in vase leviter clauso
 tum cola et adde
 Confectionis aromaticæ . . . 3 iß.
 Tincturæ lavandulæ comp. . . 3 ij.
 Dosis 3ß. secunda quaque hora.
44. R Infus. gentian comp. . . . 3 viij.
 Tinct. cinchon comp. . . . 3 iv.
 Potassæ bicarbon : 3 ß fiat mistura.

B. PILULÆ.

45. R Zinci sulphatis 3 i.
 Zingiberis contritæ 3 ß.
 Confectio. rosæ gallicæ . . . q. s.
 Misce optime et divide in pilulas 60.—Dosis
 pilula ter quaterve in die.

C. PULVERES.

46. R Pulveris cinchonæ 3 i.
 ——— cinnam. comp. . . . Gr. v.
 Fiat pulvis.

D. MISTURÆ.

47. R Decocti cinchonæ, octarium.
 Extracti ejusdem. 3 j.
 Acidi nitrici diluti 3 iſs.
 Misce.—Dosis cochlearia tria tertia quaque hora.

48. R Liquoris potassæ arsenit 3 iſs.
 Tincturæ lavandulæ comp. 3 iv.
 Aquæ octarium.
 Misce.—Dosis cochleria tria ter in die.

12. VARIA.

A. COLLYRIA.

49. R Liquoris ammoniæ acetatis.
 Aquæ singulorum 3 ij.
 Spiritus rectificati 3 iſs.
 Fiat collyrium.

- 50 R Zinci sulphatis Gr. x.
 Aq. fontan. 3 iij.
 Aq. rosæ 3 ij. M.

B. LOTIONES.

51. R Ammoniæ hydrochlor. 3 iv.
 Spiritus rectificati 3 iv.
 Aceti 3 xij.
 Aquæ 3 viij.
 Fiat lotio.

52. R Plumbi acetat. 3 i.
 Aq. puræ lb i.
 Spt. rectificat. 3 i. M.

C. ENEMATA.

53. R Decocti anthemidis 3 x.
 Sodæ sulphatis.
 Olei olivæ āā 3 i.
 Fiat enema.
54. R Amyli. 3 ij.
 Aquæ tepidæ 3 xii.
 Fiat enema adde pro re nata.
 Tincturæ opii m. xl.

D. GARGARISMATA.

- 55 R Decocti cinchonæ 3 v viij.
 Aluminis 3 i.
 Fiat gargarisma.

- 56 R Potassæ nitratis 3 ij.
 Aq. ros.
 Aq. font. āā. 3 iij. M.
 Fiat gargarisma.

13. COMMON DRINKS AND EXTRAS.

IMPERIAL DRINK.

- R Potassæ bitartratis 3 ij.
 ——— nitratis 3 i.
 Decocti hordei octarios duos.
 Misce pro potu ordinario.

RICE WATER.

- Rice 5 ounces.
 Cinnamon 1½ drachm.
 Sugar 2½ ounces.
 Water 20 pints.
 To be boiled down to two gallons.

BARLEY WATER.

- Barley 5 ounces.
 Ginger (bruised) ¼ of an ounce.
 Sugar 2½ ounces
 Water 20 pints.
 To be boiled down to two gallons.

RICE PUDDING.

Each to contain,

- Rice 2 ounces.
 Sugar 1 ounce.
 Milk 3 gills.
 Eggs 1.
 Cinnamon 1 blade.

FLOUR PUDDING.

Each to contain,

Flour	. . . . .	4 ounces.
Sugar	. . . . .	1 ounce.
Milk	. . . . .	3 gills.
Eggs	. . . . .	1.
Ginger	. . . . .	a few grains.

SAGO ALLOWANCE.

Of sago, boiled in a sufficient quantity of water down to a jelly	. . . . .	2 ounces.
Sugar	. . . . .	$\frac{1}{4}$ of an ounce.
Wine	. . . . .	1 gill.

A little grated nutmeg or cinnamon.

RICE AND SAGO JELLY.

Rice	. . . . .	1 ounce
Sago	. . . . .	1 ounce.
Barley	. . . . .	1 ounce.
Water	. . . . .	6 pounds.

Boil down to three pounds, and add

Milk 1 pint,
and a sufficient quantity of sugar to make agreeably sweet.

FOR FUMIGATION.

Take Common salt	. . . . .	$\bar{3}$ iv.
Oxide of manganese, in powder	. . . . .	$\bar{3}$ i.
Sulphuric Acid	. . . . .	f. $\bar{3}$ i.
Water	. . . . .	f. $\bar{3}$ ij.

The water and acid must be mixed together, and then poured over the other ingredients in a china basin, which should be placed in a pipkin of hot sand. The doors and windows of the room to be fumigated must be kept closely shut for two hours, after the charged basin has been placed in it ; then thrown open and a current of air allowed to pass through the room.

APPENDIX

or

FORMS,

&c.

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APPENDIX I.

*List of Articles to be furnished by the Barrack Department,
for the Use of Regimental Hospitals in Barracks.*

KITCHEN.	SURGERY.	WARDS.
A set of Scales and Weights for weighing the Diets of the Sick	Grate - - 1	Bedstead - - 1
Grate or Range - - 1	Shovel - - 1	Sacking Bottom 1
Shovel - - - - 1	Poker - - 1	" Cord - 1
Poker - - - - 1	Tongs - - 1	Paillasse - - 1
Tongs - - - - 1	Fender - - 1	Bolster - - 1
Fender - - - - 1	Coal Scuttle - 1	Blankets - - 2
Table - - - - 1	Table - - 1	Sheets - - 2
Forms - - - - 2	Chairs - - 2	Rug - - 1
Coal Box - - - 1	Candlestick - 1	Chamber Pot - 1
Coal Tray - - - 1	Round Towel - 1	Round Towel - 1
Water Pails - - 6	Baths { Slipper 1	Gown - - 1
Meat Dishes - - 4	Shower 1	Waistcoat - - 1
Porringer - - } For each { 1	Forms	Trowsers - - 1
Plate - - - } Patient { 1	Cupboard or	Cap - - 1
Candlestick - - 1	Shelves.	Slippers, pair - 1
Washing Tubs - - 2		Table - - 1
Saucepans - - - 6		Form - - 1
Tea Kettles - - 2		Coal Tray - - 1
Quart Pot - - - 1		Grate - - 1
Pint Pot - - - 1		Shovel - - 1
Tin Lantern - - 1		Poker - - 1
Ladle - - - - 1		Tongs - - 1
Flesh Fork - - 1		Fender - - 1
Trivet - - - - 1		Candlestick - 1
Boiler and Lid - - 1		Close Stool } 1
Mops - - - - 2		and Pan - }
Hair Broom - - 1		Bed Pan - - 1
Hand Scrubbing Brush - 1		Urinal - - 1
Heath or Birch } per week 1		Spitting Cups - 3
Broom - - - }		Hair Broom - 1
Round Towel - - 1		Dry Rubber, or
		Long Scrub-
		bing Brush } 1
		Window Blinds,
		as necessary.

APPENDIX II.

Canteen of Hospital Utensils for 250 Men.

1 Flesh Fork	3 Yards of Flannel
2 Iron Block-Tin Soup Ladles	1 Hand Scrubbing Brush
12 Trenchers	1 Whitewashing Brush
12 Iron Spoons	2 Sponges
2 Tin Saucepans, one of Four Quarts, and one of Three Quarts, to shut in each other	2 Large Wooden Platters
12 Tin Cups, of One Pint each	2 Pewter Wash-hand Basins
1 Horn Lantern	1 Tinder-box and Steel
1 Iron Tea-Kettle, Seven Quarts	2 Packing Needles
1 Tea Pot, Five Pints	1 Trivet
2 Tin Candlesticks, with Snuffers chained	1 Pair of Wooden Scales and Weights, 2 oz. to 2 lb.
1 Pewter Bed-Pan	
1 Pewter Urinal	
6 Knives and Forks	
1 Pair of Steelyards	
2 Pint Tin Pots with Handles	
12 Cotton Nightcaps	
3 Yards of Osnaburgh	
3 Round Towels	
2 Rollers and 2 pairs of Brackets	

Separate.

1 Water Bucket
1 Close-stool Bucket, with Pan
1 Iron Kettle, of Six Gallons

Articles to be purchased by the Surgeon.

1 Long Scrubbing Brush, with heavy block leaded
1 Hair Broom
1 Rag Mop
8 Earthen Chamber-pots

N.B. With each Canteen is issued one Medicine Chest and twelve Sets of Bedding, packed in two bales of water-proof cloth, as an equipment for each Medical Officer of a Regiment, to be ready on the shortest notice for detached duty. A triplicate issue is only granted to Regiments of the greatest strength, as the *established equipment*; but on special emergency, duly stated to the Director-General, an additional supply of Bedding would be ordered, as a *temporary aid* from the nearest store.

APPENDIX III.

A complete Set of Instruments, with the Modern Improvements, for Regimental Hospitals.

1 Amputating Saw, with spare blade	1 Tooth key
1 Metacarpal saw	2 Tooth forceps
1 Finger saw	1 Punch
24 Curved Needles	1 Gum lancet
3 Amputating knives	1 Bell's elevator
1 Long double edged ditto	5 Scalpels
1 Catlin	1 Long ditto
2 Tenaculums	2 Silver catheters
2 Assalini's ditto	1 Female ditto
1 Bullet forceps	3 Elastic gum ditto
1 Artery ditto	2 Trocars
1 Bone ditto	1 Ditto, for Hydrocele
2 Screw tourniquets	1 Introductory canula
4 Spare tapes for ditto	2 Probangs
4 Spare pads	1 Long silver probe
2 Field tourniquets	2 Hey's saws
2 Trephines	2 Seton needles
1 Trephine forceps	1 Aneurismal needle
2 Elevators	1 Bistoury, for Fistula
1 Lenticular	1 Probe bistoury
1 Brush	1 Sharp ditto
	4 Reels of Silk

APPENDIX IV.

Invoice of a Regimental Chest of Medicines, &c.

	lb. oz.		lb. oz.
Acaciæ	1 0	Cupri Sulph.	0 2
— contrit.	0 8	Emplastr. Cantharidis	3 0
Acid. Acetic	0 8	— Resinæ	1 0
— Hydrochlor.	0 8	Extract. Belladonnæ . .	0 2
— Nitric	0 6	— Colchic. Acetic . . .	0 1
— Sulphuric	0 4	— Colocyn. Comp. . . .	0 8
— Tartar. Contr. . . .	0 4	— Conii	0 2
Aloes	0 4	— Hyosiami	0 2
Alum	0 8	— Opii purif.	0 2
Ammoniac	0 4	— Sarzæ	0 8
Ammonia Hydrochlor. .	0 4	Ferri Iodid.	0 1
— Sesquicarb.	0 4	— Sulph.	0 2
Antimon. Oxysulphur. .	0 2	Glycyrrhizæ exsicc. . .	0 8
— Potassio-tartr. . . .	0 4	Guaiaci Lign. Ras. . . .	0 8
Aq. Rosæ	1 0	— Resin. Contrit. . . .	0 2
Argenti Nitrat.	0 1	Hydrarg. Bichlorid. . .	0 1
Calumb. contrit.	0 8	— Chlorid	0 8
Camphor	0 4	— Cum Cretâ	0 2
Cerat. Calaminæ	2 0	— Nitrico-oxyd.	0 1
— Resinæ	1 0	Iodin.	0 1
Cinchon. Lanc. Contr. .	2 0	Ipecacuanhæ contr. . . .	0 8
Confect. Aromatic. . . .	0 4	Jalapæ contr.	1 0
— Opii	0 4	Liniment. Saponis . . .	1 0
— Rosæ gallicæ	0 8	Liquor. Ammonia	1 0
Copaib.	1 0	— Plumbi Diacetat. . . .	1 0
Cubeb. Contrit.	2 0	— Sodæ chlorinat.	1 0

	lb. oz.		lb. oz.
Magnesia Carbon. . . .	0 4	Sodæ Sesquicarb.	0 4
— Sulphat.	21 0	— Sulph.	7 0
Mezerei (Rad. Cort.) . .	0 4	Spirit. Æther. Nitric. . .	0 8
Morph. Hydrochlor. . . .	0 1	— Sulph. C.	0 8
Ol. Menthæ piperitæ . .	0 1	— Rectificat., imp. pts. .	2 0
— Olivæ	1 8	Sulphur	0 8
— Ricini	4 0	Tinct. Camphor. Comp. . .	0 8
— Terebinthinæ	1 0	— Cantharid.	0 4
— Tiglli	0 0½	Cardam. Comp.	0 4
Pilul. Hydrargyri	0 8	— Catechu.	0 4
Plumbi Acet.	0 8	— Cinchon. Comp.	0 8
Potass. Bicarbon.	0 4	— Colchici	0 4
— Bitartr. Contr.	2 0	— Digitalis	0 4
— Carbon.	0 4	— Ferri Sesquichlor. . . .	0 4
— Hydrat.	0 1	— Gentian. Comp.	0 8
— Nitrat.	1 0	— Hyosiami	0 4
Potassi Iodid.	0 4	— Lavand. Comp.	0 4
Pulv. Antimonii comp. . .	0 4	— Myrrh.	0 8
— Jacobi	0 1	— Opii	0 8
— Cinnamoni comp. . . .	0 2	— Rhei comp.	0 8
— Cret. comp. c. Opio . .	0 4	— Scillæ	0 4
— Ipecacuan. comp. . . .	0 8	— Sennæ comp.	0 8
Quassia Concis.	0 8	Vin. Antim. Potassio-tart. .	0 8
Quinæ Disulph.	0 3	— Colchici	0 4
Rhei contrit.	0 8	— Ipecac.	0 4
Sarzæ concis.	2 0	— Opii	0 4
Sassafras concis.	0 8	Ung. Cetacei	4 0
Scammon. Contrit.	0 1	— Hydrarg. Fort.	2 0
Scillæ recens exs. Contr. .	0 2	— Nitrat.	0 8
Sennæ	1 0	— Sulphur. Comp.	10 0
Sodæ Carbon	0 4	Zinci Sulph.	0 4
— Potassio-tart. Contr. . .	0 8	Zingiber. Contrit.	0 4

MATERIALS.

Bougies, common	No. 16	Pins	paper 1
— armed with Caustic	4	Common Splints	sets 1
Syringes, Urethra	6	Grain Scales & Weights „	1
— Clyster and Pipes	1	Ounce ditto ditto	„ 1
Spare Pipes for ditto	2	Pewter Ounce Measure No. 1	
Counter Scissors	1	Graduated Glass Measure	1
Corkscrew	1	Minim ditto	1
Lint, Fine	lb. 3	Spreading Spatula	1
Surgeon's Tow	„ 6	Pot ditto	1
— Sponges	No. 6	Bolus Knives	2
Skins of Leather	2	— Tile	1
Old Linen Sheets	2	Composition Mortar and }	1
New Linens spread with }	yds. 8	Pestle	
Adhesive Plaster		Tin Panakins	2
Ditto with Soap Cerate „	2	— Funnel	2
Oiled Cloth	„ 1	Pill Boxes	papers 2
Bandages, Calico	No. 24	Vials, in Sorts	doz. 3
— Flannel	8	Gallipots, in ditto „	2
— Linen	8	Vial Corks	gross 1
— 18-tailed	4	Pint ditto	„ 0½
Bag Trusses	6	Flannel for Fomen- }	yds. 2
Blood Porringers	2	tations	
Broad Tape (pieces)	1	Packthread	oz. 4
Thread for Ligatures	oz. 0½		

APPENDIX V.

Invoice of a Detachment Chest of Medicines, &c.

	lb. oz.		lb. oz.
Acaciæ contrit.	1 0	Liquor. Ammonia	0 8
Acid. Acetic	0 4	— Plumbi Diacetat.	0 8
— Sulphuric	0 4	Magnesia Sulphat.	10 8
Alum	0 4	Morph. Hydrochlor	0 0½
Ammonia Sesquicarb.	0 4	Ol. Menthae piperitæ	0 0½
Antimon. Potassio-tartr.	0 2	— Olivæ	0 8
Argenti Nitrat.	0 0½	— Ricini	2 0
Camphor.	0 2	— Tiglii	0 0¼
Cerat. Calaminae	1 0	Pilul. Hydrargyri	0 4
Cinchon. Lanc. Contr.	1 0	Plumbi Acet.	0 4
Confect. Aromatic.	0 2	Potass. Bitartr. Contr.	1 0
— Rosæ gallicæ	0 4	— Carbon.	0 4
Copaib.	0 8	— Nitrat.	1 0
Cubeb. Contrit.	1 0	Potassii Iodid.	0 2
Cupri Sulph.	0 2	Pulv. Antimonii Jacobi	0 1
Emplastr. Cantharidis	1 8	— Cinnamomi comp.	0 2
— Resinae	1 0	— Cretæ comp. Cum.	
Extract. Colocynth. Com	0 4	Opio	0 4
— Opii purif.	0 1	— Ipecacuanhæ comp.	0 4
— Sarzæ	0 4	Quinae Disulph.	0 1½
Ferri Sulph.	0 2	Rhei contrit.	0 2
Hydrarg. Bichlorid.	0 0½	Scammon. Contrit.	0 1
— Chlorid.	0 4	Scilla Recens. exs.	
— Nitrico-oxyd.	0 0½	Cont.	0 1
Iodin.	0 0½	Sennæ	0 8
Ipecacuanhæ contr.	0 4	Sodæ Sesquicarb.	0 4
Jalapæ contr.	0 8	Spirit. Æther. Nitric.	0 4

	lb. oz.	
Spirit. Rectificat. imp. pint	$\frac{1}{2}$	
Tinct. Camphor. Comp.	0 4	
— Myrrh.	0 4	
— Opii	0 4	
— Rhei comp.	0 4	
Vin. Colchici	0 4	
— Opii	0 2	
Ung. Cetacei	2 0	
— Hydrarg. Fort.	0 8	
— Nitrat.	0 4	
— Sulphur. Comp.	4 0	
Zinci Sulph.	0 2	
Zingiber. Contrit.	0 2	

MATERIALS.

Elastic Gum Catheter	No. 1	
Bougies, common	„ 8	
Syringes, Urethra	„ 3	
— Clyster and Pipes	„ 1	
Spare Pipes for ditto	„ 2	
Counter Scissors	„ 1	
Corkscrew	„ 1	
Lint, Fine	lb. $1\frac{1}{2}$	
Surgeon's Tow	„ 3	
— Sponges	No. 3	
Old Linen Sheets	„ 1	
Skins of Leather	„ 1	
Linen spread with Ad-		
hesive Plaster	yds. 3	
Bandages, Calico	No. 12	
— Flannel	„ 4	
— 18-tailed	„ 2	
Trusses, Bag	No. 3	
— Steel, sliding Pads	„ 2	
Blood Porrhers	„ 2	
Broad Tape	„ piece 1	
Thread for Ligatures	oz. $0\frac{1}{2}$	
Pins	„ paper 1	
Common Splints, Pott's. set	1	
Grain Scales and Weights	„ 1	
Ounce ditto ditto	„ 1	
Graduated Glass	} No. 1	
Measure		
Minim ditto	„ 1	
Pewter Ounce Measure	„ 1	
Spreading Spatula	„ 1	
Pot ditto	„ 1	
Bolus Knife	„ 1	
Bolus Tile	„ 1	
Composition Mortar	} „ 1	
and Pestle		
Tin Panakin	„ 1	
— Funnel	„ 1	
Pill Boxes	„ paper 1	
Vials, in Sorts	„ doz. 1	
Gallipots, in ditto	„ 1	
Vial Corks	„ gross $0\frac{1}{2}$	
Packthread	„ oz. 2	
Pint Corks	„ gross $0\frac{1}{4}$	
Writing Paper	„ quires 2	
Wrapping ditto	„ 1	
Pens	„ No. 12	
Ink Powder	„ 1	
Wafers	„ oz. 1	
Hospital Book	„ No. 1	

APPENDIX VI.

RETURN OF MEDICINES. of _____ Station _____	Of 184, as per last Return.	Since received from		TOTAL.	Expended.	Remaining 184.	day of	Required for the Half-Year ending 184, as per accompany- ing Requisition, in Duplicate.	Form _____ 184. To _____ 184. Strength _____ No. of sick now in Hospital } No. of Hospital Diets consumed during the pe- riod of this Re- turn. }
		as per Invoice, dated 184.							
	lb. oz.	lb. oz.		lb. oz.	lb. oz.	lb. oz.	lb. oz.		
Acaciæ	-	-							
— contrit.	-	-							
Acid. acetic.	-	-							
— hydrochlor.	-	-							
— nitric.	-	-							
— sulphuric.	-	-							
— tartar. contr.	-	-							
Aloes	-	-							
Alum	-	-							
Ammoniac.	-	-							
Ammoniac hydrochlor.	-	-							
— sesquicarb.	-	-							
Anthemidis	-	-							
Antimon. oxysulphur.	-	-							
— potassio-tartr.	-	-							
Aq. rosæ	-	-							
Argenti nitrat.	-	-							
Calumb. contrit.	-	-							
Camphor.	-	-							
Cerat. calaminæ	-	-							
— resinæ	-	-							
— saponis	-	-							
Cinchon. lanc. contr.	-	-							
Confect. aromatic.	-	-							
— opii	-	-							
— rosæ gallicæ	-	-							
Copaib.	-	-							
Cubeb. contrit.	-	-							
Cupri sulph.	-	-							
Digitalis fol. contrit.	-	-							
Emplastr. cantharidis	-	-							
— resinæ	-	-							
Extract. belladonnæ	-	-							
— colchic. acet.	-	-							
— colocynth. co.	-	-							
— conii	-	-							
— hyosciami	-	-							
— opii purif.	-	-							
— sarzæ	-	-							
Ferri iodid.	-	-							
— sesquioxyd.	-	-							
— sulph.	-	-							

APPENDIX VI.—continued.

ARTICLES.	Remained of 184, as per last Return.	Since received from		TOTAL.	Expended.	Remaining 184.	day of Required for the Half-Year ending 184, as per accompany- ing Requisition, in Duplicate.	REMARKS.
		as per Invoice, dated 184.						
Glycyrrhiza -	lb. oz.	lb. oz.		lb. oz.	lb. oz.	lb. oz.	lb. oz.	
Guaiaci lign. ras.								
— resin. -								
Hydrarg. bichlorid.								
— chlorid. -								
— nitrico-oxyd.								
— cum cretâ								
Iodin. -								
Ipecacuanhæ contr.								
Jalapæ contr. -								
Liniment. saponis								
Liquor. ammoniæ								
— plumbi diaceta								
— potass. arsenit.								
— sod. chlorin.								
Magnesiæ carbon.								
— sulphat. -								
Mezerei -								
Morph. acetat. -								
— hydrochlor.								
Ol. carni -								
— menthæ piperitæ								
— olivæ -								
— ricini -								
— terebinthinæ								
— tiglii. -								
Opii duri contrit.								
Picis abietin -								
Pilul. hydrargyri								
Plumbi acet. -								
Potass. acet. -								
— bicarbon.								
— bitartr. contr.								
— carbon.								
— hydrat. -								
— nitrat. -								
Potassii iodid. -								
Pulv. antimonii comp.								
— jacobii -								
— cinnamoni comp.								
— cretæ comp. -								
— ipecacuanhæ comp.								
Quassia concis. -								

APPENDIX VI.—continued.

ARTICLES.	Remained of 184, as per last Return.	Since received from		TOTAL.	Expended.	Remaining 184.	day of Required for the Half-Year ending 184, as per accompany- ing Requisition, in Duplicate.	REMARKS.
		as per Invoice, dated 184.						
Quinæ disulph. -	lb. oz.	lb. oz.		lb. oz.	lb. oz.	lb. oz.	lb. oz.	
Rhei contrit. -								
Sarzæ concis. -								
Sassafras concis. -								
Scammon. contrit. -								
Scillæ recens exs. contr.								
Sennæ -								
Sodæ carbon. -								
— potassio-tart. con.								
— sesquicarb. -								
— sulph. -								
Spirit. æther. nitric.-								
— sulph. c. -								
— rectificat -								
Sulphur. -								
Tinct. camphor. comp.								
— cantharid. -								
— cardam. comp. -								
— catechu -								
— cinchon. comp.								
— colchici -								
— digitalis -								
— ferri sesquichlor.								
— gentian. comp.								
— hyosciami. -								
— lavand. comp.								
— myrrh. -								
— opii -								
— rhei comp. -								
— scillæ -								
— sennæ comp. -								
Vin. antim. potassio-t.								
— colchici -								
— ipecac. -								
— opii -								
Ung. cetacei -								
— hydrarg. fort. -								
— nitrat. -								
— sulphur. comp. -								
Zinci sulph. -								
Zingiber. contrit. -								

APPENDIX VI.—continued.

ARTICLES.	Remained of 184 , as per last Return.	Since received from		TOTAL.	Expended.	Remaining 184 . day of	Required for the Half-Year ending 184 , as per accompany- ing Requisition, in Duplicate.	REMARKS.
		as per Invoice dated 184 .						
MEDICINE CHESTS.								
Regimental - - -								
Detachment - - -								
The Condition of the Public Instruments must be stated under "Remarks."	{	Full sets of capital in- struments - - -	sets.					
		Portable sets of ditto - - -						
		Cupping instru- ments, - - -	}	sets.				
		scarifi- cators - - -			}	No.		
		Elastic gum ca- theter - - -	}	No.				
		Stomach Pumps - - -			}	"		
		Stethoscopes - - -	}	"				
		Bougies, com- mon - - -			}	No.		
		Ditto, armed with caustic - - -	}	"				
		Syringes urethra - - - clyster			}	"		
		and pipes - - -	}	"				
		Spare pipes for ditto - - -			}	"		
		Flannel for fomenting, yd.						
		Surgeons' sponges -	No.					
		Bandages, calico -	"					
flannel -	"							
linen -	"							
18-tailed -	"							
Bag trusses -	"							
Steel Trusses -	"							
Ditto, double -	"							
Blood Porringers -	"							
Broad Tape -	pieces							
Thread for ligatures -	oz.							
Common splints -	sets.							
Spreading spatula -	No.							
Pot ditto -	"							

The Condition of the Public Instruments must be stated under "Remarks."

APPENDIX VI.—continued.

ARTICLES.	Remained of 184, as per last Return.	Since received from		TOTAL.	Expended.	Remaining 184.	day of Required for the Half-Year ending 184, as per accompany- ing Requisition, in Duplicate.	REMARKS.
		as per Invoice, dated 184.						
Bolus knife - - -	No.							
Counter scissors - - -	"							
Corkscrews - - -	"							
Lint, fine - - -	lb.							
— 2nd - - -	"							
Surgeon's tow - - -	"							
Skins of leather - - -	No.							
Old linen sheets - - -	"							
New linen spread with adhesive plaster - - -	yds.							
Ditto ditto, soap cerate - - -	"							
Oiled cloth - - -	"							
Pins - - -	papers							
Grain scales and weights - - -	sets							
Ounce ditto and ditto - - -	"							
Graduated glass mea- sure - - -	No.							
Minim ditto - - -	"							
Ounce measures - - -	"							
Bolus tile - - -	"							
Composition mortar and pestle - - -	"							
Tin panakin - - -	"							
— funnel - - -	"							
Pill Boxes - - -	"							
Vials, in sorts - - -	doz.							
Gallipots, in ditto - - -	"							
Vial corks - - -	gross.							
Pint and quart corks - - -	doz.							
Packthread - - -	oz.							
Dressing trays - - -	No.							

Note 1. This Return is to be transmitted, in duplicate, at an intermediate period, when a Regiment or Depot proceeds from Great Britain to Ireland.

Note 2. If any of the Public Instruments are unserviceable, or in an incomplete state, the causes and extent of such defects, and under whose charge they occurred, must be stated in this Return.

APPENDIX VII.

REQUISITION for MEDICINES, &c., for the use of
stationed at from to

MEDICINES.	OBSERVATIONS.	MEDICINES.	OBSERVATIONS.
Acaciæ - lb. oz.		Ferri iodid. - lb. oz.	
— contrit. -		— sesquiox. -	
Acid. acetic. -		— sulph. -	
— hydrochlor. -		Glycyrrhizæ -	
— nitric. -		Guaiaci lign. ras. -	
— sulphuric. -		— resin. -	
— tartar. contr. -		Hydrarg. bichlorid. -	
Aloes - -		— chlorid. -	
Alum. - -		— nitrico-ox. -	
Ammoniac - -		Iodin - -	
Ammoniac hydrochlor. -		Ipecacuanhæ contr. -	
— sesquicarb. -		Jalapæ contr. -	
Anthemidis - -		Liniment. saponis -	
Antimon. oxysulphur. -		Liquor. ammoniac -	
— potassio-tartr. -		— plumbi diacet. -	
Aq. rosæ. - -		— potas. arsenit. -	
Argenti nitrat. -		Magnesiæ carbon. -	
Calumb. contrit. -		— sulphat. -	
Camphor - -		Mezerei - -	
Cerat. calaminæ -		Ol. carui - -	
— resinæ - -		— menthæ piperitæ -	
— saponis - -		— olivæ - -	
Cinchon. lanc. contr. -		— ricini - -	
Confect. aromatic. -		— terebinthinæ -	
— opii - -		— tigllii - -	
— rosæ gallicæ -		Opil duri contrit. -	
Copaib. - -		Picis abietin. -	
Cubeb. contrit. -		Pilul. hydrargyri -	
Cupri sulph. - -		Plumbi acet. - -	
Digitalis fol. contrit. -		Potass. acet. - -	
Emplastr. cantharidis -		— bicarbon. -	
— resinæ - -		— bitartr. contr. -	
Extract. belladonnæ -		— carbon. -	
— colchic. acetic -		— hydrat. -	
— colocynth. comp. -		— nitrat. - -	
— conii - -		Potassii iodid. - -	
— hyosciami - -		Pulv. antimonii comp. -	
— opii purif - -		— Jacobi - -	
— sarzæ - -		— cinnamoni comp. -	

APPENDIX VII.—continued.

MEDICINES.	OBSERVATIONS.	MEDICINES.	OBSERVATIONS.
Pulv. cretæ comp. - lb. oz.		Vin. colchici - - lb. oz.	
— ipecacuan. comp. -		— opii - -	
Quassia concis. -		Ung. cetacei - -	
Quina disulph. -		— hydrarg. fort. -	
Rhei contrit. -		— nitrat. -	
Sarzæ concis. -		— sulphur comp. -	
Sassafras concis. -		Zinci sulph. - -	
Scammon. contrit. -		Zingiber. contrit. -	
Scillæ recen. exs. cont. -			
Sennæ - -		Lint, fine - - lb.	
Sodæ carbon. - -		— 2nd - - "	
— potassio-tar. con. -		Surgeon's tow - - "	
— sesquicarb. -		Skins of leather - - No.	
— sulph. - -		Old linen sheets - - "	
Spirit æther. nitric. -		New linen, spread with } yds	
— sulph. c. -		adhesive plaster - }	
— rectificat. -		Ditto ditto, soap cerate - "	
Sulphur. - -		Oiled cloth - - "	
Tinct. camphor. comp. -		Pins - - papers	
— cantharid. -		Grains, scales and } sets	
— cardam. comp. -		weights - - }	
— catechu - -		Ounce ditto and ditto - "	
— chinchon. comp. -		Graduated glass mea- } No.	
— colchici - -		sure - - }	
— digitalis - -		Minim ditto - - "	
— ferri sesquichlor. -		Ounce measures - - "	
— gentian. comp. -		Bolus tile - - "	
— hyosciami - -		Composition mortar } "	
— lavand. comp. -		and pestle - - }	
— myrrh. - -		Tin panakins - - "	
— opii - -		— funnels - - "	
— rhei comp. -		Pill boxes - - papers	
— scillæ - -		Vials, in sorts - - doz.	
— sennæ comp. -		Gallipots, in ditto - - "	
Vin. antim. potassio- tart. - -		Vial corks - - gross	
		Packthread - - oz.	

Army Medical Department,

184 .

Approved to be supplied by

Director-General.

The above-named Medical Stores were received on the day of 184 ;
they were unpacked in presence, and carefully examined by and
certify that they are of good qualities, well conditioned, and correspond with the Invoice.

APPENDIX VIII.

REQUISITION for INSTRUMENTS, &c., for the use of
from 184 , to 184 .

ARTICLES.		REMARKS.
Bougies, common - - No.		
Ditto, armed with caustic - - "		
Syringes, urethra - - "		
----- clyster and pipes - - "		
Spare pipes for ditto - - "		
Surgeon's sponges - - "		
Bandages, calico - - "		
----- flannel - - "		
----- linen - - "		
----- 18-tailed - - "		
Bag trusses - - "		
Blood porringers - - "		
Broad tape - - pieces.		
Thread for ligatures - - oz.		
Common splints - - sets		
Spreading spatula - - No.		
Pot ditto - - "		
Bolus knife - - "		
Counter scissors - - "		

Army Medical Department

184 .

Approved to be supplied by

Director-General.

The above-named Medical Stores were received on the
184 ; they were unpacked in presence, and
carefully examined by and certify that they
are of good qualities, well conditioned, and correspond with the Invoice.

APPENDIX IX.

No.

REQUISITION for STEEL TRUSSES, for the use of the
stationed at

Description.	Number required.	Dimensions in Inches.	For whom required.	Estimated Price if purchased on the spot.
Right Side -				
Left Side -				
Double - -				

Surgeon

185 .

Army Medical Department, day of

185 .

Approved to be supplied by

Director-General.

certify that the above-named Truss received
on the day of 185 , and found,
on careful examination, to be of good quality, well conditioned,
and correspondent with the Invoice.

N.B. If Trusses are required for Services 50 miles or
upwards from London, the price at which each Truss can be
purchased on the spot is to be stated in the last column; and
if approved, to be so purchased, the amount is to be charged in
the next Hospital Account.

G

APPENDIX X.

MEDICAL STORES for the use of

ARTICLES.	lb.	oz.	ARTICLES.	lb.	oz.

Army Medical Department
Approved to be supplied by

185

Director-General.

The above-named Medical Stores were received on the day of 185 ; they were unpacked in presence, and carefully examined by and certify that they are of good qualities, well-conditioned, and correspond with the Invoice.

APPENDIX XI.

No. 1.—List of MEDICAL COMFORTS Shipped on Board the under-mentioned Transport, for the use of day of 18

Name of Transport.	Port Wine.	White Wine.	Preserved Meat.	Corned Beef.	Prepared Soup.	Soup & Bouillie.	Gravy Soup.	Concentrated Soup.	Lime Juice.	Sugar.	Tea.	Coffee.	Salt.	Sago.	Arrow Root.	Vinegar.	Soap.	Rice.	Barley.	Chloride of Lime.
	btls.	btls.	lbs.	lbs.		qts.	qts.	qts.		lbs.	lbs.	lbs.	lbs.	lbs.	lbs.	lbs.	lbs.	lbs.	sq.	

N.B.—Where the Weight or Measure is not expressed in the Heading, it is to be inserted by the Receiving or Issuing Officer. It is particularly requested that the Date of the Heading may be filled up, and the Name of the Medical Officer in charge stated.

No. 2.—List of MEDICAL COMFORTS Shipped on Board the under-mentioned Transport, for the use of
embarked for day of 185

[illegible]

I certify that, on due examination of the Returns kept by the Medical Officer in charge, the consumption of the above quantities of Medical Comforts appears to have been necessary and duly accounted for; and I further certify as to the correct disposal of the quantities remaining as above stated.

Principal Medical Officer,
day of 185

APPENDIX XII.

Regt. of

Detachment at.

To

Dr.

FOR MEDICINES and ATTENDANCE as expressed in the following
Return, viz:—

Period of Attendance.		Number of		Strength of the Detachment..						* Rate for each Person per Week.	Amount.		
From.	To.	Weeks.	Days.	Officers.	Men.	Women.	Children.	Total.	£		s.	d.	

I certify that the number of persons and the periods of attendance above-stated are correct; that the Sick were regularly attended by _____ and that there was no Military Medical Officer on the spot, or within a reasonable distance..

Commanding Detachment.

*Received from the _____ of the _____ Regiment:
of _____ the Sum of _____
in payment of the above Account.:*

* 1½d. per Week for 50 persons and upwards; when under 50, 2d. may be charged.

When the Medicines for a Reserve or Detachment shall be supplied: from the Regimental Medicine Chest, the allowance for *attendance* in such cases is 1*d.* for each person per week, when the Detachment amounts to 50; and 1½*d.* per week when below that number.

APPENDIX XIII.

Form of Bills of Private Practitioners. (See Article 24.)

Regiment.

Dr. to

185 .

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Patient's Name.	Date.	Disease.	Daily Prescriptions, Visit, &c.	Charges.			Certificate to be signed by the Commanding Officer.
				£	s.	d.	
							<p>I hereby certify, that</p> <p>Mr. _____ at _____ was attended by _____</p> <p>for the period from _____ to _____</p> <p>and that no Staff or Regimental Medical Officer could be procured on the spot, or within a reasonable distance; and further, that the distances charged in each Visit are correct.</p> <p>[Charges are not admitted for attendance on Officers; nor Women in Childbirth: neither for Soldiers on common Furlough, unless taken ill on the Route to rejoin their Corps, in which case particulars must be furnished]</p> <p>When charges are made for Visits, the distance must be stated, or the Bill will be sent back for correction.]</p>

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APPENDIX XIV.

TABLE of DISEASES for Medical Returns.

Febris Quotidiana Intermittens	Otitis
„ Tertianæ „	Rheumatismus Acutus
„ Quartana „	„ Chronicus
„ Remittens „	Lumbago
„ Continua Communis	Ischias
„ „ Icterodes	Odontalgia
„ Synochus	Arthritis
„ Typhus	Variola
Phlegmon et Abscessus	Varicella
Paronychia	Vaccina
_____	Rubeola
_____	Scarlatina
_____	Pestis
_____	Erysipelas
_____	Urticaria
_____	Epistaxis
Phrenitis	Hæmoptysis
Cynanche Tonsillaris	Hæmatemesis
„ Maligna	Phthisis Pulmonalis Tubercu-
„ Parotidæa	lata
„ Trachealis	„ prægressa Inflamma-
„ Pharyngea	tione Thoracis
Pneumonia	Phthisis à Vulnere
Bronchitis	Hæmorrhoids
Carditis	Catarrhus Acutus
Peritonitis	„ Chronicus
Gastritis	Dysenteria Acuta
Enteritis	„ Chronica
Hepatitis Acuta	Apoplexia
Hepatitis Chronica	Paralysis
Splenitis	Dyspepsia
Nephritis	Tetanus
„ Calculosa	Epilepsia.
Cystitis	

Regiment, Depôt, or

*Strength, including Sergeants, Trumpeters,
Drummers, and Rank and File.* }

to

185 .

TOTAL -	DISEASE.		REMAIN	
	Remained last Return.			
	Since Admitted.			
	Total Treated.			
	Discharged.			
	Died.			
	Total Discharged & Died.			
	In Regimental or De- tachment Hospital.			
	In Barracks.			
	In Quarters.			
	With Detachment at			
	In Civil Infirmary at			
On Sick-Furlough.				
In General Hospital at				
Total.				
Convalescents of the fore- going Diseases.				
Names of Men who have Died during the Month.				
Regiments.	Rank and Names.	Diseases.	Duration of Disease.	When and where Died.

Men of other Regiments who have been Admitted or Discharged since last Return, and who are included in the annexed.

Regiment.	Names.	Disease.	Admitted.	Discharged.	REMARKS.

REMARKS and OBSERVATIONS.

Names and Stations of the Medical Officers.

Rank and Name.	Station.	Date of Joining after Appointment.	Period on Leave, and by whom, and on what account, it was granted.	
			From	To

Number of Hospital Servants employed.

	No.
Sergeant - - -	
Orderlies - - -	

APPENDIX XVI.

HOSPITAL DEFAULTER BOOK of
Regiment.

Name.	Troop or Company.	Date of Crime.	Crime.	By whom Reported.	Punishment.	By whom Ordered.	Remarks.

APPENDIX XVII.

RETURN of PROFESSIONAL BOOKS and FORMS of the
 185 , to of 185 , stationed at
 Half-year, from the of 184 , to the
 Regiment, from
 and of the Books and Forms required for the

No.	Medical Register.	Historical Register.	Admission and Dis- charge Book.	Hospital Defaulter Book.	Registers of Recruits and Vaccination.	Bed-Head Tickets.	Monthly Sick Returns.	Annual Sick Returns.	Half-yearly Returns of Medicine.	Ditto Requi- sition for Medicines.	Ditto Requi- sition for Instruments.	Ditto Returns of Books and Forms.	Requisition for Steel Trusses.	Private Prac- titioners' Bills, Appendix, 13.
In hand the of 185														
Received from the Army Medical Department, the of 185 . . .														
TOTAL . . .														
Expended during the Half-year .														
Remain the of 185														
Required for the current Half-year														
<p>Regiments and their Detachments, and also Reserves of Infantry Regiments, are to be provided with Bed-head Tickets, and Letter Books, out of the Regimental Fund. Depot and District Hospitals are furnished half-yearly with Bed-head Tickets from the Army Medical Department Office. Private Practitioners' Bills for Professional Services, not remunerated under the established Contract rates, are to be made out and transmitted, in the printed Forms now adopted for the purpose.</p>														
Surgeon.														185 .

When filled-up Professional Books and Returns have accumulated so as to render a diminution of them necessary, a Report in duplicate, of their descriptions, quantities, and dates, is to be transmitted to the Director-General, stating the circumstances under which a transfer of them is sought for.

APPENDIX XVIII.

ARTICLES COMPOSING THE DIFFERENT DIETS FOR A DAY.

Full.	Half.	Low.	Spoon.	Milk.	Note.
12 oz. Meat. 16 oz. Bread. 16 oz. Potatoes. 1 1/2 oz. Barley. 1/2 oz. Salt. 4 drs. Tea. 1 1/2 oz. Sugar. 6 oz. Milk.	8 oz. Meat. 16 oz. Bread. 8 oz. Potatoes. 1 1/2 oz. Barley. 1/2 oz. Salt. 4 drs. Tea. 1 1/2 oz. Sugar. 6 oz. Milk.	4 oz. Meat. 12 oz. Bread. 8 oz. Potatoes. 1 1/2 oz. Barley. 1/2 oz. Salt. 4 drs. Tea. 1 1/2 oz. Sugar. 6 oz. Milk.	8 oz. Bread. 4 drs. Tea. 1 1/2 oz. Sugar. 6 oz. Milk.	14 oz. Bread. 2 oz. Rice. 3 pints Milk.	The Meat to be boiled, so as to make a pint of good Broth for the Dinner of each Patient, including small Vegetables and Pep- per, as usual.
DIET TABLE.					
Meal.	Full.	Half.	Low.	Spoon.	Milk.
Breakfast -	{ 1 pint Tea. 6 oz. Bread.	1 pint Tea. 6 oz. Bread.	1 pint Tea. 4 oz. Bread.	1 pint Tea. 4 oz. Bread.	1 pint Milk. 6 oz. Bread.
Dinner -	{ 12 oz. Meat. 4 oz. Bread. 16 oz. Potatoes.	8 oz. Meat. 4 oz. Bread. 8 oz. Potatoes.	4 oz. Meat. 4 oz. Bread. 8 oz. Potatoes.	Any article at the discretion of the Medical Officer, as Puddings.*	1 pint Milk. 2 oz. Rice. 4 oz. Bread.
Supper -	{ 1 pint Tea. 6 oz. Bread.	1 pint Tea. 6 oz. Bread.	1 pint Tea. 4 oz. Bread.	1 pint Tea. 4 oz. Bread.	1 pint Milk. 4 oz. Bread.
REMARKS.					
No extras are to be given on Full, Half, or Low Diets, except Wine, Porter, or Spirits—these to be given when required, in conformity with existing Regulations. * Puddings to consist of the following ingredients:— 3 oz. of Rice, or 2 oz. of Sago, or 8 oz. of Bread; 1 oz. of Sugar, 1/2 pint of Milk; 1 Egg; Ginger or Cinnamon, a few grains.					

N.B.—Average or commuted Charges are not to be made for any Articles of Diet used in Hospitals, such as Tea, Puddings, Drinks, &c.; but in every instance the quantities and prices of the several ingredients are to be stated.

APPENDIX XIX

QUARTERLY RETURN OF SICK and WOUNDED SEAMEN and MARINES received into the Hospital of the
at , between the and the .

Name.	Quality.	Disease.	Received.		Disposed of.		Number of Days under Treatment.
			When.	Whence.	How.	When.	

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APPENDIX XX

RETURN of Men belonging to the Regiment under Three Years' Service, who are proposed for Examination in consequence of being considered Permanently Disabled for the Performance of Military Duty.

Number.	RANK and NAME.	Age.		Size.		Service.			Name of the Medical Officer by whom originally approved as a Recruit.	Date on which approved as a Recruit.	Place at which approved as a Recruit.	Brief Account of the Cause and Degree of each Man's Disability.	OBSERVATIONS of the MEDICAL STAFF OFFICER.
		Years.	Months.	Feet.	Inches.	Years.	Months.	Corps.					

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Signature of the Surgeon.
Signature of the Commanding Officer.

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