

AWM4
**Australian Imperial Force unit war diaries,
1914-18 War**

Medical, Dental & Nursing

Item number: 26/30/13

Title: Assistant Director of Medical
Services, AIF Depots in United
Kingdom

August 1918



AWM4-26/30/13

WAR DIARY

Army Form C. 2118.



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or
INTELLIGENCE SUMMARY.

(Erase heading not required.)

Place	Date	Hour	Summary of Events and Information	Remarks and references to Appendices
			<p><u>WAR DIARY, MEDICAL SECTION, HEADQUARTERS A.I.F. DEPOTS IN U.K., FOR THE MONTH OF AUGUST 1918.</u></p>	
			<p>During the month of August the Strength of A.I.F. Depots has decreased from</p>	
			<p>36087 to 35729.</p>	
			<p><u>MEDICAL OFFICERS.</u> - The strength of Medical Officers in this Command was 85 on both 1.7.18., and 31.7.18. During the month seven reinforcement officers have arrived from Australia, and eleven, who have served in France, have reported from the D.M.S. 15 Officers marched out to report to the D.M.S. for passage overseas, and three have embarked for return to Australia. The staff of Medical Officers is at present adequate for all requirements.</p>	
			<p>At No. 1 A.D.H., Bulford, nine Officers are posted for duty, but two or three of these are being specially trained for duty at one of the R.A.M.C. Hospitals (Venereal) in France, to which they will be transferred in due course.</p>	
			<p>Lt.Col. J.K. Adey OBE., late S.M.O. Hurdcott Area, marched out from this</p>	
			<p>Command on 1.8.18.</p>	
			<p>Major J. Fogarty MC. resumed duty as S.M.O. Overseas Training Brigade on</p>	
			<p>7.8.18.</p>	
			<p>Major F. Macky has been transferred from A.I.F. Detention Barracks, Lewes, to No. 1 A.D.H. Bulford. Capt. G.F. DeLacy has assumed duty as Medical Officer at Lewes.</p>	
			<p>Appendix "A" (attached) shows the weekly distribution and posting of Medical Officers for</p>	Appendix A
			<p>the month of August.</p>	
			<p><u>HEALTH OF TROOPS.</u> - General.- The General Health of the troops is still satisfactory, although the figures indicating the numbers of soldiers in Hospital show a slight increase as compared with last month. During the five weeks which for statistical purposes constitute this month, 88 soldiers have been admitted to hospital suffering from Diarrhoea; of these 39 came from the R.B.A.A., where it was found flies were extremely prevalent. This is believed to have been mainly due to the fact that the tan employed in and round the horse lines had not been changed sufficiently and had in consequence become a most prolific breeding ground. This matter has now been rectified.</p>	
			<p>The incidence of Influenza has fallen to within normal limits.</p>	
			<p>For full statistical details as to health of troops see Appendix "B", which</p>	B
			<p>consists of the weekly reports on this subject submitted to the D.M.S.</p>	
			<p>These Reports show that for five weeks ending 1.8.18., 8.8.18., 15.8.18.,</p>	
			<p>22.8.18., and 29.8.18., the total number of soldiers in hospital were respectively, 1661, 1698.,</p>	

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Summary of Events and Information

Remarks and references to Appendices

Place	Date	Hour	Summary of Events and Information	Remarks and references to Appendices																																			
			<p>WAR DIARY, MEDICAL SECTION, HEADQUARTERS A. I. F. DEBOTS IN U.K. FOR THE MONTH OF AUGUST 1918</p> <p>HEALTH OF TROOPS (CONT'D)</p> <p>1848, 1868, and 1817., the corresponding percentages being 4.52., 4.70., 5.23., 5.17., and 5.06 of the total strength of the Command. Of these totals the following numbers, viz., 685, 715, 825, 780 and 684 represent patients in the Group Clearing Hospitals, i.e. are not true statistical hospitals.</p> <p>The amount of serious disease during the month has been small, there only being 6 cases of Pneumonia or Broncho Pneumonia, one case of Cerebro-Spinal Meningitis (which proved fatal) and six (6) deaths from all causes.</p> <p>INFECTIOUS DISEASE: - The incidence of Infectious disease which last month was noted as being low, almost touched zero, in the week ending 8.8.18., when only one fresh case of Infectious Disease (other than Scabies) developed, and only 172 soldiers in the whole Command were isolated as Contacts of Infectious disease.</p> <p>On 12.8.18 the Transport "Orontes" arrived in England with about 1034 reinforcements, all contacts of Mumps and Measles, and since then the number of fresh cases of both these diseases has considerably increased. The cases that have occurred have almost without exception been amongst these new arrivals, all of whom were isolated till 5.9.18.</p> <p>On 26.8.18 the Transport "Feldmarschal" arrived. This is believed to be a clean ship, but as a precautionary measure, the troops are being isolated until 4.9.18.</p> <p>The following Table indicates the amount of Infectious Disease during the month:-</p> <table border="1"> <thead> <tr> <th>Week Ending.</th> <th>Infectious Cases in Hosp. Excluding Scabies.</th> <th>No. of soldiers isolated as Contacts.</th> <th>No. of Fresh Cases of Mumps.</th> <th>No. of Fresh Cases of Measles.</th> </tr> </thead> <tbody> <tr> <td>1.8.18</td> <td>16</td> <td>300</td> <td>3</td> <td>5</td> </tr> <tr> <td>8.8.18</td> <td>16</td> <td>172</td> <td>1</td> <td>-</td> </tr> <tr> <td>15.8.18</td> <td>14</td> <td>1197</td> <td>6</td> <td>-</td> </tr> <tr> <td>22.8.18</td> <td>16</td> <td>1209</td> <td>2</td> <td>9</td> </tr> <tr> <td>29.8.18</td> <td>39</td> <td>2321</td> <td>17</td> <td>3</td> </tr> <tr> <td colspan="3" style="text-align: right;">TOTAL.</td> <td>29</td> <td>Total. 17</td> </tr> </tbody> </table> <p>During July there were 25 fresh cases of mumps and 27 of measles.</p>	Week Ending.	Infectious Cases in Hosp. Excluding Scabies.	No. of soldiers isolated as Contacts.	No. of Fresh Cases of Mumps.	No. of Fresh Cases of Measles.	1.8.18	16	300	3	5	8.8.18	16	172	1	-	15.8.18	14	1197	6	-	22.8.18	16	1209	2	9	29.8.18	39	2321	17	3	TOTAL.			29	Total. 17	
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			<p>A6945 Wt. W11422/M1160 350,000 12/16 D. D. & L. Forms/C./2118/14.</p>																																				

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Army Form C. 2118.

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Place	Date	Hour	Summary of Events and Information	Remarks and references to Appendices
			<p><u>WAR DIARY, MEDICAL SECTION, HEADQUARTERS A.I.F. DEPOTS IN U.K. FOR THE MONTH OF AUGUST, 1918.</u></p>	
			<p><u>VENEREAL DISEASE:</u> The incidence of venereal disease has shown a steady increase throughout the month. For the three months of May, June, and July, the average number of soldiers in hospital in England on account of venereal disease varied from 424 - 450 (approximately); for the week ending 1.8.18, the number was 451, and for the four succeeding weeks of August the numbers have been 483, 515, 544 and 578. This increase is the result of an increased number of admissions from</p>	
			<p>(a) B.E.F. soldiers on leave from France - of these an average of 29.4 per cent per week were admitted in August as compared with 17.5 in July. (b) Soldiers ^{from} in British Australian Auxiliary hospitals or on sick furlough - of these an average of 45.4 per week were admitted this month as compared with 35.25 in July.</p>	
			<p>No doubt the total numbers of soldiers on leave from France or in hospitals ex France have increased: No information is available as to whether the proportion of such soldiers who have acquired V.D. has increased or not.</p>	
			<p>118 cases of Gonorrhoea were discharged to the Convalescent Training Depot during the five weeks ending 29.8.18; 32 such cases relapsed and were returned to No. 1 A.D.H. for further treatment.</p>	
			<p><u>EARLY TREATMENT:</u> 12,267 soldiers attended the E.T. depot of A.I.F. depots during the 5 weeks ending 29.8.18; of these 865 showing signs of disease were sealed up and 839 such cases were aborted. Vide Appendix "C" which consists of the consolidated Weekly Early Treatment returns.</p>	Appendix C
			<p><u>C. A.A.M.C. TRAINING DEPOT:</u> During the month the total strength of A.A.M.C., T.D., has decreased from 447 to 421: 97 other ranks have arrived as reinforcements from Australia, 44 men have marched in from the Overseas Training Brigade. 29 casuals were returned to France and 87 General Reinforcements also proceeded Overseas, the large proportion of the latter being due to the new system of despatching reinforcements which was described in last month's report. Practically all other matters of interest with regard to this depot are given in the A.A.M.C., T.D., War Diary, which is forwarded to War Records independently of this report, and which this month is a great improvement on its predecessors.</p>	
			<p>19 A class men have during the month been transferred at their own request to combatant arms of the service. In view of the very adequate supply of A class men, available for service in France, it has been decided that no more men, who are "C" class for</p>	
			<p>A6945 Wt. W11422/M1160 350,000 12/16 D. D. & L. Forms/C.2118/14.</p>	

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Summary of Events and Information

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WAR DIARY, MEDICAL SERVICE, HEADQUARTERS A.I.F. DEPOTS IN U.K. FOR THE MONTH OF AUGUST, 1918.

A.A.M.C., TRAINING DEPOT (CONT'D.):

infantry but "A" class for the A.A.M.C. will be transferred; where possible such men will be allotted to A.A.S.C., pioneers, or Railway Operating units.

Nothing further has been heard of the recommended increased establishment for the A.A.M.C., T.D., which was forwarded to the D.M.S. on 15.7.18.

D. COMMAND DEPOTS:

GENERAL - The strength of the four command depots has remained practically constant throughout the month, the numbers being 16,511 on 1.8.18, and 16,473 on 31.8.18.

The following table shows the number of soldiers reporting to each depot direct from Australian Auxiliary Hospitals or from hospitals after furlough:-

WEEK ENDING	No. 1 Command Depot	No. 4 Command Depot	No. 3 Command Depot	No. 2 Command Depot	Aux. Hosp. Furlough	Aux. Hosp. Furlough
1. 8. 18	117	11	191	204	67	173
8. 8. 18	152	15	195	208	50	148
15. 8. 18	75	12	138	235	63	190
22. 8. 18	81	11	233	302	66	220
29. 8. 18	84	12	229	116	73	433
TOTALS:	509		1047		1384	1707

It will be noticed that the admissions to No. 3 Command Depot show a marked fall, and to No. 2 Command Depot a corresponding rise, during the last week of the month; this is due to the reception at the latter depot 20 soldiers of "Blb" class as described more fully later.

The above figures show that for the five weekly month of August 4,647 soldiers reported to Command Depots from hospitals (either direct or after furlough); the corresponding figures for July (4 weekly month) were 4233. For detailed Command Depot statistics, vide see Appendix "D" which consists of the consolidated Weekly Command Depot returns.

21. DISBANDMENT OF NO. 3 COMMAND DEPOT:

The outstanding feature of the medical work during the month has been connected with soldiers of "Blb" category. These are the men who are unfit for discharge from the Auxiliary Hospitals, but who are still unfit to commence home service duties or graduated training, except

of a very mild nature. Though they are expected to be fit for general service again within

appendix D

99-1160-1259600 12/16 D. D. & I. Forms C./118/14

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			<p><u>WAR DIARY, MEDICAL SERVICE, HEADQUARTERS, A.I.F. DEPOTS IN U.K. FOR THE MONTH OF AUGUST, 1918.</u></p> <p><u>DISBANDMENT OF NO. 3 COMMAND DEPOT (CONT'D.):</u> six months. Many of these men are suffering from unhealed wounds, many require massage and remedial exercise treatment, while of the medical cases many are war-worn and debilitated, in other words, the men of this category are in the majority of cases in need of a good deal of attention and treatment.</p> <p>Since October 1917, these men have all been ^{received} reviewed at No. 3 Command Depot, Hurdcott, and for some time, in spite of (a) the provision of beds for most of the men, (b) the opening of special wards in the Group Clearing Hospital for the reception of men with unhealed ^{leg} wounds, and (c) the inauguration of a massage and remedial gymnastic department, it has been realised that these men were not being as comfortably accommodated as might be desired.</p> <p>About the same time as the A.D.M.S. decided that "Blb" men should be <u>regarded definitely</u> as invalid convalescents, and accordingly treated in a "convalescent" camp rather than a command depot camp; in fact, <u>if not in name</u>, a request came from Southern Command that A.I.F. depots should vacate the camps occupied by the 3rd Training Brigade at Codford.</p> <p>There two objects it was decided could both be attained by a redistribution of certain A.I.F. camps; these changes, which have already commenced, and will be completed early in September are as follows:-</p> <p>No. 3 Command Depot is to be disbanded; it should be explained that although this depot ^{receives men of Blb category only, the strength of the depot} is made up approximately of 1200 "Blb" classmen, 1800 "Bla" men, the latter of course having entered the depot as "Blb" class and having been subsequently raised to higher categories.</p> <p>Now when No. 3 Command Depots is disbanded, men of "Blb" category will be transferred to Littlemoor sub-depot of No. 2 Command Depot, Weymouth, while the "Bla" men are to be sent to No. 1 Command Depot; the accommodation of the latter depot has been ^{enlarged} delayed by the taking over of the camp formerly occupied by the Pioneer Training Battalion (this latter unit has moved into a camp adjoining that of the 1st Training Battalion which has been vacant for some months), which camp has an accommodation of about 1700. No. 1 Command Depot will now have a total accommodation of approximately 5,800 and will be entirely devoted to men of "Bla" category.</p> <p>When this move has been completed the 3rd Training Brigade is to move from Codford to the camp vacated by No. 3 Command Depot.</p> <p>It may be noted here that the position of S.M.O. 3rd Training Brigade will cease to exist, as the 3rd Training Brigade will now come under the medical administration of S.M.O. Hurdcott Area. Incidentally these moves mean that the work of both S.M.O. Sutton Veny Area and S.M.O. Weymouth, will be increased.</p>	
			<p>A6945 Wt. W11422/M1160 350,000 12/16 D. D. & L. Forms/C./2118/14.</p>	<p>et</p>

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			<p><u>WAR DIARY, MEDICAL SERVICE HEADQUARTERS, A.I.F. DEPOTS IN U.K. FOR THE MONTH OF AUGUST, 1918.</u></p> <p><u>DISBAN DMENT OF NO. 3 COMMAND DEPOT (CONT'D):</u> As stated earlier, these moves have already commenced, for, on 28.8.18, "Blb" cases were sent from London, not to Hurdcott but direct to Weymouth - they detrained at Upwey Station, which is almost four miles from Weymouth itself. Littlemoor sub-depot, situated near this Upwey Station is being entirely given off to these men, who will thus be kept entirely separate from the Australia-bound men accommodated in Monte Video and Westham sub-depots.</p> <p>Every effort is being made to make Littlemoor a congenial camp for these men. Thus every hut is being calcomined inside, just like a Group Clearing Hospital Ward, every man will have a bed with sheets, pillowslip, and counterpanes, and it is hoped that linoleum will be provided in all huts.</p> <p>In addition a camp hospital of 200 beds is being fitted up, and a massage and remedial gymnastic department is being inaugurated. Arrangements have already been made for the staff, the equipment, and the Red Cross accessories at No. 3 Command Depot to be devided between the two sections into which the depot is being split, in proportion to their requirements.</p> <p>Mainly in connection with this move, and partly with reference to the whole question of remedial treatment of the wounded soldier, the D.M.S. visited this command on 8/8/18 and with the A.D.M.S. inspected a large number of soldiers undergoing massage and remedial treatment at Nos. 1 and 3 Command Depot, and the A.D.M.S. has subsequently again examined a very large number of men in Nos. 1, 3 & 4 Command Depots. On both occasions a comparatively high number of men were discovered at Nos. 3 and 4 Command Depots who should have been in Weymouth awaiting return to Australia. This indicates bad classification, in the first place at the auxiliary hospitals for sending them to the wrong depot, and in the second place at the depots for ^{returning} training them. With a view to preventing a continuance of this, the staff of Medical Officers at the new sub-depot at Littlemoor is being carefully selected.</p>	
			<p><u>3. NO. 2 COMMAND DEPOT:</u> Following on the move outlined in the preceding para, the main activity at Weymouth has of course consisted of preparations for the reception at Littlemoor of "Blb" cases. The cases formerly accommodated there have been moved into Westham sub-depot; Monte Video is at present quite full and the orthopaedic department has been working at top pressure, a state of affairs which has been aggravated by the postponement for a couple of weeks of the departure of a transport carrying orthopaedic cases.</p>	
			<p>A6945 Wt. W11422/M1160 350,000 12/16 D. D. & L. Forms/C./2118/14.</p>	

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			<p><u>WAR DIARY, MEDICAL SERVICE HEADQUARTERS, A.I.F. DEPOTS IN U.K. FOR THE MONTH OF AUGUST, 1918.</u></p>											
			<p><u>/3. NO. 2 COMMAND DEPOT (CONT'D.):</u> The strength of the depot during the month has increased from 4300 to 4649, in spite of the fact that 2,728 soldiers marched out from Weymouth to the port of embarkation for return to Australia.</p>											
			<p>The A.A.M.C. establishment at No. 2 Command Depot has in A.I.F. Orders of 20.8.18 been increased by the following:-</p>											
			<p style="padding-left: 40px;"><u>Massage and Electrical Staff.</u></p> <table style="margin-left: 80px;"> <tr><td>Warrant Officer (Class 1)</td><td style="text-align: right;">1.</td></tr> <tr><td>Staff Sergeants</td><td style="text-align: right;">2.</td></tr> <tr><td>Sergeants</td><td style="text-align: right;">2.</td></tr> <tr><td>Corporals</td><td style="text-align: right;">2.</td></tr> <tr><td>Privates</td><td style="text-align: right;">12.</td></tr> </table>	Warrant Officer (Class 1)	1.	Staff Sergeants	2.	Sergeants	2.	Corporals	2.	Privates	12.	
Warrant Officer (Class 1)	1.													
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			<p>This is the establishment recommended some time ago by the A.D.M.S. for the orthopaedic department at Monte Video.</p>											
			<p>Incidentally it may be mentioned that the imminent redistribution of command depots will necessitate the authorization of new establishments, and recommendations are being prepared for submission to the D.M.S. early in September.</p>											
			<p><u>E. TRAINING UNITS:</u></p>											
			<p>2116 reinforcements ex transports "Orontes" and "Fieldmarshal" have arrived from Australia during the month. The physical condition of these is good. The number of these found to be unfit for service is not yet available.</p>											
			<p>Attached as Appendix "E", is a report submitted to the D.M.S. on forty soldiers arriving in May, ex transports "Persic", "Ormonde" and "Runic", and found to be unfit for service; a nominal roll is included giving brief remarks on each case by the A.D.M.S.</p>	<p>appendix E</p>										
			<p>Appendix "F" is a similar report on soldiers arriving in July, ex transports "Euripiades", "Osterly", and "Port Darwin".</p>	<p>or 2</p>										
			<p>In the May Diary reference was made to the method of allotment of general service reinforcements to the various branches of the service; in accordance with A.A.M.C. Order No. 611 of 29.5.18, the following allotment of these men to other than infantry units have been made for medical reasons:-</p>											
			<p>A6945 Wt. W11422/M1160 350,000 12/16 D. D. & L. Forms/C./2118/14.</p>											

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			<p><u>WAR DIARY, MEDICAL SERVICES, A.I.F. DEPOTS IN U.K., FOR THE MONTH OF AUGUST, 1918.</u></p> <p>E. TRAINING UNITS (CONT'D.):</p> <table border="0"> <tr> <td></td> <td style="text-align: center;"><u>Transfers recommended:</u></td> <td style="text-align: center;"><u>Transfers effected:</u></td> </tr> <tr> <td>To A.S.C.</td> <td style="text-align: center;">6</td> <td style="text-align: center;">6</td> </tr> <tr> <td>To A.A.M.C.</td> <td style="text-align: center;">4</td> <td style="text-align: center;">4</td> </tr> <tr> <td>To A.A.V.C.</td> <td style="text-align: center;">1</td> <td style="text-align: center;">1</td> </tr> <tr> <td>To Tunnelling Corps</td> <td style="text-align: center;">2</td> <td style="text-align: center;">1</td> </tr> <tr> <td>To Engineers</td> <td style="text-align: center;">1</td> <td style="text-align: center;">1</td> </tr> <tr> <td>To A.M.T.S.</td> <td style="text-align: center;">2</td> <td style="text-align: center;">1</td> </tr> <tr> <td></td> <td style="text-align: center;"><u>Totals: 16</u></td> <td style="text-align: center;"><u>14</u></td> </tr> </table> <p>Apart from the above, the following table indicates the numbers of men, other than general service reinforcements, and of whom the majority have previously served overseas with the infantry, who have been or are being transferred to other branches, on the recommendation of Area Medical Boards: most of these men have previously been boarded "B2a" or "C1":-</p> <table border="0"> <tr> <td></td> <td style="text-align: center;"><u>Transfers recommended:</u></td> <td style="text-align: center;"><u>Transfers already approved:</u></td> </tr> <tr> <td>To A.A.S.C.</td> <td style="text-align: center;">26</td> <td style="text-align: center;">16</td> </tr> <tr> <td>To A.M.T.S.</td> <td style="text-align: center;">5</td> <td style="text-align: center;">3</td> </tr> <tr> <td>To Pioneers</td> <td style="text-align: center;">2</td> <td style="text-align: center;">2</td> </tr> <tr> <td>To A.A.M.C.</td> <td style="text-align: center;">2</td> <td style="text-align: center;">2</td> </tr> <tr> <td>To A.R.O.D.</td> <td style="text-align: center;">2</td> <td style="text-align: center;">1</td> </tr> <tr> <td></td> <td style="text-align: center;"><u>Totals: 37</u></td> <td style="text-align: center;"><u>24</u></td> </tr> </table>		<u>Transfers recommended:</u>	<u>Transfers effected:</u>	To A.S.C.	6	6	To A.A.M.C.	4	4	To A.A.V.C.	1	1	To Tunnelling Corps	2	1	To Engineers	1	1	To A.M.T.S.	2	1		<u>Totals: 16</u>	<u>14</u>		<u>Transfers recommended:</u>	<u>Transfers already approved:</u>	To A.A.S.C.	26	16	To A.M.T.S.	5	3	To Pioneers	2	2	To A.A.M.C.	2	2	To A.R.O.D.	2	1		<u>Totals: 37</u>	<u>24</u>	
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	<u>Transfers recommended:</u>	<u>Transfers already approved:</u>																																															
To A.A.S.C.	26	16																																															
To A.M.T.S.	5	3																																															
To Pioneers	2	2																																															
To A.A.M.C.	2	2																																															
To A.R.O.D.	2	1																																															
	<u>Totals: 37</u>	<u>24</u>																																															
			<p>F. OVERSEAS TRAINING BRIGADE:</p> <p>The work of this unit has progressed satisfactorily; no innovations in policy have been made.</p> <p>The return of soldiers retrograded from "A" class to lower medical categories for the month of August is as follows:-</p> <table border="0"> <tr> <td style="text-align: center;"><u>No. marching in:</u></td> <td colspan="4" style="text-align: center;"><u>Number retrograded:</u></td> <td style="text-align: center;"><u>Total</u></td> </tr> <tr> <td></td> <td style="text-align: center;">To "B1a"</td> <td style="text-align: center;">"B1b"</td> <td style="text-align: center;">"B2a" or "C1"</td> <td style="text-align: center;">"C2" or "C3"</td> <td></td> </tr> <tr> <td style="text-align: center;">2775</td> <td style="text-align: center;">7</td> <td style="text-align: center;">1</td> <td style="text-align: center;">16</td> <td style="text-align: center;">3</td> <td style="text-align: center;">27</td> </tr> </table> <p>The total last month of "retrogressions" was 13, but even 27 is a quite satisfactory low figure.</p>	<u>No. marching in:</u>	<u>Number retrograded:</u>				<u>Total</u>		To "B1a"	"B1b"	"B2a" or "C1"	"C2" or "C3"		2775	7	1	16	3	27																												
<u>No. marching in:</u>	<u>Number retrograded:</u>				<u>Total</u>																																												
	To "B1a"	"B1b"	"B2a" or "C1"	"C2" or "C3"																																													
2775	7	1	16	3	27																																												
			<p>A6945 Wt. W11422/M1160 350,000 12/16 D. D. & L. Forms/C./2118/14.</p>																																														

8

Instructions regarding War Diaries and Intelligence Summaries are contained in F. S. Regs., Part II, and the Staff Manual respectively. Title pages will be prepared in manuscript.

INTELLIGENCE SUMMARY.

(Erase heading not required.)



43

Place	Date	Hour	Summary of Events and Information	Remarks and references to Appendices
			<p>WAR DIARY, MEDICAL SERVICES, A.I.F. DEPOTS IN U.K., FOR THE MONTH OF AUGUST, 1918.</p>	
			<p><u>GENERAL MATTERS:</u></p>	
			<p><u>1. D.A.H. OR EFFORT SYNDROME:</u> At various times, e.g., under the heading of Command Depots in the May report, reference has been made to the large number of soldiers suffering from the condition of D.A.H. At Colchester Military Hospital (R.A.M.C.) special attention is paid to patients with this condition.</p>	
			<p>A nominal roll of 49 A.I.F. men who had been thus treated was obtained from Colchester and their subsequent histories investigated. The result of this investigation is contained in Appendix (G), which is a copy of a report submitted to the D.M.S. on 19.8.18.</p>	<p>Appendix G</p>
			<p>It will be seen that the results are not very favourable; of the 49, only 19 have become "A" class, eight more being classed "B1a" at present, while 15 have been invalided to Australia.</p>	
			<p>The policy pursued in our command depots in dealing with these cases is to give the men graduated training, and to, so far as possible, disillusion the men as to their having any heart condition. Naturally this latter object could not be attained at Colchester where the men know they are under special observation as "Heart" cases, and where their progress and treatment is to a large extent controlled by estimation of their pulse rates and other cardiac examinations. Even admitting that the soldiers treated at Colchester present this condition to a fairly marked degree, the results of the cases, investigated, though few in number, are not such as to encourage any departure from the present system employed in A.I.F. Depots.</p>	
			<p><u>2. EARLY TREATMENT:</u> In the monthly diary submitted for July by C.O., No. 1 A.D.H., Bulford, special reference was made to the large number of soldiers who, on being admitted to Bulford after failure of Early Treatment, state they have been kept in E.T. Depots for lengthy periods, and the high proportion of complications found in such cases. In view of this, A.A.M.C. Order No. 693 was issued on 28.8.18, forbidding the retention of any soldiers for more than 8 days early treatment. Further investigations are to be made next month by an Officer to be selected from No. 1 A.D.H. staff.</p>	
			<p><u>3. HANDING OVER OF PART OF NO. 1 A.D.H. BULFORD TO NEW ZEALAND MEDICAL CORPS:</u> The negotiations in connection with this matter have continued, but nothing has been finalized in the matter. We have stated what we can hand over, but Southern Command have not yet agreed to the erection of certain new buildings which are required by the New Zealanders.</p>	
			<p>A6945 Wt. W11422/M1160 350,000 12/16 D.D. & L. Forms/C./2118/14.</p>	<p>9</p>



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Instructions regarding War Diaries and Intelligence Summaries are contained in F. S. Regs., Part II. and the Staff Manual respectively. Title pages will be prepared in manuscript.

INTELLIGENCE SUMMARY.

(Erase heading not required.)

Place	Date	Hour	Summary of Events and Information	Remarks and references to Appendices
			<u>WAR DIARY, MEDICAL SERVICES, A.I.F. DEPOTS IN U.K., FOR THE MONTH OF AUGUST, 1918.</u>	
			<p>4. <u>TREATMENT AND AFTER-CARE OF DISABLED SOLDIERS:</u> During August the A.D.M.S. made extensive inquiries into the methods adopted by the Canadian Medical Corps in the after treatment of disabled soldiers, and he also investigated several aspects of this work as carried out by the R.A.M.C. The results of these investigations are embodied in ^{three} these reports to the D.M.S., which are herewith attached as Appendix (H).</p>	APPENDIX (H)
			<p>5. <u>HURDCOTT AREA:</u> Attached as Appendix (I) is the monthly report from the S.M.O., Hurdcott Area.</p>	APPENDIX (I) (J)
			<p>6. <u>CONVALESCENT TRAINING DEPOT:</u> Attached as Appendix (J) is the <u>six</u> monthly report of the S.M.O. Parkhouse, on the work of the Convalescent Training Depot.</p>	APPENDIX (K)
			<p>7. ^{S/Sgt} <u>SMITH SANITARY SECTION:</u> Attached as Appendix (K) is the monthly report from the O.C. of this section.</p>	
			<p>8. <u>DENTAL SERVICES:</u> A special report from the S.O.A.D.S. is herewith attached.</p>	

Handwritten note: 1-0151

APPENDIX A

Headquarters, Tidworth Barracks, Tidworth, 6th August, 1918.

D.M.S. A.I.F.,
Administrative Headquarters,
130 Horseferry Road,
London, S.W.1.

DISTRIBUTION AND POSTING OF A.A.M.C. OFFICERS AND DENTAL UNITS.

<u>HEAD QUARTERS.</u>		<u>A. I. F. DEPOTS IN U.K.</u>		<u>TID WORTH.</u>	
1.	Colonel	McWhae	D.M.	(C.M.G.)	A.D.M.S.
2.	Major	Beamish	F.T.		D.A.D.M.S.
3.	"	Grieve	E.H.	(M.C.)	O.C., 6th. San. Sec.
4.	"	Down	J.E.		S.O.A.D.S.
5.	Captain	De Lacy	G.F.		Temp. Duty.

PARKHOUSE

1.	Major	Cook	A.	Convalescent Training Depot.
2.	Captain	Kirkland	H.S.	Group Clearing Hospital.
3.	"	Matters	R.F.	Hos. 2 and 4 Camps.

SUTTON VENNY AREA.

S.M.O. Lieut. Col. Williams H.J. (DSO) Sutton Venny.

<u>No. 1 Command Depot.</u>			
1.	Major	Maplestone	F.A. (DSO)
2.	"	Mayo	J.C.
3.	"	McPherson	J.
4.	"	Hagen	H.A.
5.	Captain	Fethers	B.D.
6.	"	Robinson	A.T.R.
7.	"	Glassford	J.C.G. (MC)

<u>Overseas Training Brigade.</u>			
1.	Major	Guymer	B.A. A/S.M.O.
2.	Captain	Cosgrove	C. (MC)
3.	"	Brookes	G.A.
4.	"	Hankervis	A.G.
5.	"	Glassford	B.G. (MC)

Longbridge
Deverell.

1.	<u>R.B.A.A.</u> Captain	Holland	R.F.
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Haytesbury.

<u>1st. Training Brigade.</u>			
1st. Trng. Bn.	Camps	2, 3, 4, and 5.	1. Capt. Hawthorne J.S.
Pioneer "	"	6 and R.E.	2. " Holmes C.G.G.

Sutton Venny.

NO. 2 COMMAND DEPOT

1.	Lieut. Colonel	Betts	L.G.	(OBE) S.M.O.
2.	Captain	Thomas	E.E.	
3.	"	Badeck	A.	
4.	"	Paget	O.F.	

5.	<u>Littlemoor Detachment</u> Major	Moodie	C.G.G.
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6.	<u>Westham Detachment.</u> Major	Kenny	J.F.
7.	Captain	Seton	M.C.C.
8.	"	McKenzie	E.

Weymouth.

1st. Training Brigade, Sutton Veny.

S.D.O.	Major. Hayley,	F.W.	
No. 78.	Capt. Harbeck,	L.	O.T.B.
47	Lieut. Bell,	G.A.	1st. T.B.
82	Capt. Christiansen,	F.E.	R.B.A.A.
63	Lieut. Huet,	F.P.Y.	Pioneers.

End. TRAINING BRIGADE & A.A.M.C.
TRAINING DEPOT, FOVANT.

No. 38.	Lieut. Hunter,	M.D.	AAMC. TD.
84.	Capt. Satchell,	G.K.	5th. T.B.
36	" Donovan,	G.T.	5th. T.B.
51	" Dunn,	F.C.	9th. T.B.
92	Lieut. Hobson,	E.S.	9th. T.B.

3rd. TRAINING BRIGADE, GODFORD.

No. 62.	Capt. Amphlett,	W.M.	12th. T.B.
30	" Wright,	H.	14th. T.B.

MACHINE GUN TRAINING DEPOT, PARKHOUSE.

No. 60.	H/Cpt. Lucadou-Wells,	D.P.
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ENGINEERS TRAINING DEPOT, BRIGHTLINGSEA.

No. 15.	Capt. McIntosh,	A.M.
---------	-----------------	------

ENGINEERS TRAINING DEPOT, CLIFTON, BEDS.

No. 77.	Lieut. Chapman,	G.B.
---------	-----------------	------

1st. A. D. H. BULFORD.

No. 68.	Lieut. Gatehouse,	R.
---------	-------------------	----

A.I.F. HEADQUARTERS, TIDWORTH.

No. 81.	Lieut. Broughton,	F.W.W.
---------	-------------------	--------

A.I.F. DETENTION BARRACKS, LEWES.

No. 13.	Capt. Taunton,	H.C.D.
---------	----------------	--------

SICK LIST.

Major. Hayley,	F.W.
" Blogg,	K.V.
Lieut. Done,	H.J.

No. 1 COMMAND DEPOT
SUTTON VENY.

	Capt. Marshall,	W.H.
	(S.D.O.)	
	Super Eq.	
	1 Capt. Austin,	D.M.
	" 2 " Prior,	A.S.
No. 87.	" Watts,	H.N.
83	" Jennens,	V.C.
12	Lieut. Scott,	E.S.
91	" Adam,	W.
72	" Payne,	G.A.
75	" Seymour-Wells,	F de M.
58	" Done,	H.J.
93	" Binns,	J.S.
95	" Adam,	E.J.
48	" Hines,	A.P.
76	" Barnes,	A.E.B.
20	" Lumsden,	W.J.

No. 2 COMMAND DEPOT.
WEYMOUTH.

No. 43.	Capt. McDougall,	E.J.
---------	------------------	------

No. 3 COMMAND DEPOT.
HURDCOTT.

	Major. Vernon,	R.E.H.
	(S.D.O)	
No. 85.	Capt. Fraser,	R.
14	" Henderson,	A.R.P.
53	" Willis,	C.B.
70	H/Cpt. Harris,	C.G.
39	Lieut. Storey,	E.
49	" Arnold,	H.R.
57	" Herbert,	F.T.
64	" Wilson,	T.A.M.
65	" Cooper,	C.M.
79	" Freeman,	L.A.
61	" Newman,	A.H.
8	" Hogue,	J.S.

No. 4 COMMAND DEPOT,
HURDCOTT.

	Major. Riley,	E.B.G.
	(S.D.O)	
No. 42.	Capt. Ponsford,	C.H.S.
69	" Ferguson,	H.D.
94	" Hall,	D. S.
21	" Bennett,	G.B.
88	" Stevens,	H.E.
85	" Fraser,	R.
28	Lieut. Wills,	E.W.
54	" McGregor,	L.R.
67	" Donkin,	G.D.
74	" Maclean,	J.B.
80	" Paterson,	S.E.

Supernumerary to Establishment.
Lieut. Maloney, A.A.

McIntosh
Colonel.
A.D.M.S. A.I.F. Depots.

435 HURDCOTT AREA.

S.M.O. Lt.Colonel Kennedy B.C.

A.A.M.C. Training Depot.

Fovant.

- | | | | | |
|----|---------------|-----------|--------|-----------|
| 1. | Major | Fraser | A.C. | O.C. |
| 2. | Captain | Green | R.A.R. | Adjutant. |
| 3. | " | Oakeley | W.G. | R.M.O. |
| 4. | Q.M.& Hon.Lt. | Eddington | W.J. | |

Available at A.A.M.C. Training Depot.

- | | | | | |
|----|---------|--------|------|--|
| 1. | Captain | Lister | C.R. | |
|----|---------|--------|------|--|

2nd Training Brigade.

Fovant.

- | | | | | |
|------------------------|--------------------|----------|---------|------|
| 5th Training Battalion | Camps 2, 3, and 4. | 1. Capt. | Langan | A.M. |
| 9th Training Battalion | " 13. | 2. " | Allport | R.M. |

No 3 Command Depot.

Camps 5, 6, 7, and 8.

Hurdcott.

- | | | | | |
|-----|---------|-----------|--------|--------|
| 1. | Major | McKenzie | J.B.F. | S.M.O. |
| 2. | " | Irving | H.A.C. | |
| 3. | " | Lewis | J.B. | |
| 4. | " | Kelly | W.R. | |
| 5. | Captain | Rosenthal | C.P. | |
| 6. | " | Crombie | D. | |
| 7. | " | Fergie | A.J. | |
| 8. | " | Wilton | A.C. | |
| 9. | " | Badham | C. | |
| 10. | " | Nankervis | A.W. | |

No 4 Command Depot.

Hurdcott.

- | | | | | |
|----|---------|------------|------|----------|
| 1. | Major | McDonald | J. | S.M.O. |
| 2. | " | Tofft | W.H. | (M.B.E.) |
| 3. | " | McWilliams | H.H. | |
| 4. | Captain | Dawson | J. | |
| 5. | " | Streeter | J.E. | |
| 6. | " | Ross-Soden | J.L. | |

CODFORD AREA.

A/S.M.O. Captain McLennan S.

3rd Training Brigade.

Brigade Clearing Hospital.

1. Captain O'Sullivan M.H.

12th Training Battalion. Camps 3, 4, & 14. 2. " Liggins W.F.A.

14th Training Battalion. " 6 and 7. 3. " Luke W.A.

1st AUSTRALIAN DERMATOLOGICAL HOSPITAL.

(Estab. 12)

Bulford.

- | | | | | | |
|-----|-------------------|-----------|--------|----------------|------|
| 1. | Colonel | Stewart | J.M.Y. | (D.S.O., V.D.) | C.O. |
| 2. | Lt. Colonel. | Grigor | W.E. | (O.B.E.) | |
| 3. | Major | Gibson | N.M. | | |
| 4. | " | Goldstein | A. | | |
| 5. | " | Strachan | J.C.P. | | |
| 6. | " | Wiley | C.J. | | |
| 7. | T/Major. | Young | W.R. | | |
| 8. | Captain | Warne | J. | | |
| 9. | " | Beveridge | W.J. | | |
| 10. | " | Smith | J.A. | | |
| 11. | " | Willis | V.N.B. | | |
| 12. | Hon. Capt. & Q.M. | Armstrong | T.deC. | | |
| 13. | Hon. Lieut. | Ramsey | A.M. | | |

AUSTRALIAN ENGINEERS TRAINING DEPOT.

BRIGHTLINGSEA.

- | | | | | |
|----|---------|-----------|----|--|
| 1. | Captain | Dinwoodie | C. | |
|----|---------|-----------|----|--|

AUSTRALIAN MACHINE GUN TRAINING DEPOT.

PARKHOUSE.

- | | | | | |
|----|---------|-----------|--------|--|
| 1. | Captain | La Touche | W.F.D. | |
|----|---------|-----------|--------|--|

A.I.F. DETENTION BARRACKS.

LEWES.

- | | | | | |
|----|---------|---------|------|--|
| 1. | Major | Macky | F. | |
| 2. | Captain | De Lacy | O.F. | |

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SPECIAL DUTY.

1. Major Rosenfeld R.L. With Sutton Veny Military Hospital from 14.1.18.

14

1st. Training Brigade, Sutton Veny.

	Major. Hayley,	F.W.
S.D.O.	1st. & 3rd. Trng. Bgds.	
No. 78.	Capt. Harbeck,	L. O.T.B.
47	Lieut. Bell,	G.A. 1st. T.B.
82	Capt. Christiansen,	F.E. R.B.A.A.
63	Lieut. Huet,	F.P.Y. Pioneers.

No. 1 Command Depot, Sutton Veny.

	Capt. Marshall,	W.H.
	(S.D.O).	
	Super Eq.	
	1. Capt. Austin,	D.M.
	" 2 " Prior,	A.S.
No. 87	" Watts,	N.N.
83	" Jennens,	V.C.
12	" Scott,	E.S.
91	Lieut. Adam,	W.
72	" Payne,	G.A.
75	" Seymour-Wells,	P de M
58	" Done,	H.J.
93	" Binns,	J.S.
95	" Adam,	E.J.
48	" Hines,	A.P.
76	" Barnes,	A.E.B.
20	" Lumsden,	W.J.

2nd. TRAINING BRIGADE & A.A.M.C. TRAINING DEPOT, FOVANT.

No. 38.	Lieut. Hunter,	M.D. AAMC. T.D.
84	Capt. Satchell,	G.K. 5th. T.B.
36	" Donovan,	G.T. 5th. T.B.
51	" Dunn,	F.C. 9th. T.B.
92.	Lieut. Hobson,	E.S. 9th. T.B.

3rd. TRAINING BRIGADE, CODFORD.

No. 62.	Capt. Amphlett,	W.M. 12th. T.B.
30	" Wright,	H. 14th. T.B.

No. 2 COMMAND DEPOT. WEYMOUTH.

No. 43. Capt. McDougall, E.J.

MACHINE GUN TRAINING DEPOT, PARKHOUSE.

No. 60. H/Cpt. Lucadou-Wells, D.P.

No. 3 COMMAND DEPOT. HURDCOTT.

ENGINEERS TRAINING DEPOT, BRIGHTLINGSSEA.

No. 15. Capt. McIntosh, A.M.

	Major. Vernon,	R.E.H.
	(S.D.O).	
No. 85.	Capt. Fraser,	R.
14	" Henderson,	A.R.P.
53	" Willis,	C.B.
70	H/Cpt. Harris,	C.G.
39	Lieut. Storey,	E.
49	" Arnold,	H.R.
57	" Herbert,	F.T.
64	" Wilson,	T.A.M.
65	" Cooper,	C.M.
79	" Freeman,	L.A.
61	" Newman,	A.H.
8	" Hogue,	J.S.
	<i>Capt Bailey</i>	<i>W.R.</i>

ENGINEERS TRAINING DEPOT, GLIFTON, BEDS.

No. 77. Lieut. Chapman, G.B.

1st. A. D. H. BULFORD.

No. 68. Capt. Gatehouse, R.

A.I.F. HEADQUARTERS, TIDWORTH.

No. 81. Lieut. Broughton, F.W.W.

A.I.F. DETENTION BARRACKS, LEWES.

No. 13. Capt. Taunton, H.C.D.

No. 4 COMMAND DEPOT. HURDCOTT.

	Major. Riley,	E.B.G.
	(S.D.O).	
No. 42.	Capt. Ponsford,	C.H.S.
69	" Ferguson,	H.D.
94	" Hall,	D.S.
21	" Bennett,	G.B.
88	" Stevens,	H.E.
85	" Fraser,	R.
28	Lieut. Wills,	E.W.
54	" McGregor,	L.R.
67	" Donkin,	C.D.
74	" Maclean,	J.B.
80	" Maloney,	A.A.
	Supernumerary to Establishment.	
	Lieut. Paterson,	S.E.

SICK LIST.

Major. Blogg,	K.V.
Lieut. Done,	H.J.

W.B.
Colonel.
A.D.M.S. A.I.F. Depots.

WCR

Headquarters. A.I.F.
Bhurtapore Barracks.
Tidworth.
12th August 1918.

D.M.S. A.I.F.
Administrative Headquarters.
130 Horseferry Road.
London S.W.1.

DISTRIBUTION AND POSTING OF A.A.M.C. OFFICERS AND DENTAL
UNITS.

HEADQUARTERS		A.I.F. DEPOTS IN U.K.		TIDWORTH.	
1.	Colonel	McWhae	D.M.	(C.M.G.)	A.D.M.S.
2.	Major	Beamish	F.T.		D.A.D.M.S.
3.	"	Grieve	K.H.	(M.C.)	O.C. 6th San. Sec.
4.	"	Down	J.E.		S.O.A.D.S.

PARKHOUSE.

1.	Major	Cook	A.	Convalescent Training Depot.
2.	Captain	Kirkland	H.S.	Group Clearing Hospital.
3.	"	Matters	R.F.	Nos 2 and 4 Camps.

SUTTON VENY AREA.

No 1 Command Depot.		S.M.O. Lieut. Col. Williams		H.J. (D.S.O.) Sutton Veny.	
1.	Major	Maplestone	P.A.	(D.S.O.)	
2.	"	Mayo	J.C.		
3.	"	McPherson	J.		
4.	"	Hagen	H.A.		
5.	Captain	Fethers	B.D.		
6.	"	Robinson	A.T.R.		
7.	"	Glassford	J.C.G.	(M.C.)	

Overseas Training Brigade.

				<u>Longbridge Deverill.</u>	
1.	Major	Fogarty	J.P.	(M.C.)	S.M.O.
2.	"	Guymer	E.A.		
3.	Captain	Cosgrove	C.	(M.C.)	
4.	"	Brookes	G.A.		
5.	"	Glassford	E.G.	(M.C.)	

R.B.A.A.

1.	Captain	Holland.	E.P.	<u>Heytesbury.</u>
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1st Training Brigade.

				<u>Sutton Veny.</u>	
1st Trng. Bn.	Camps 2, 3, 4, & 5.	1.	Captain	Hawthorne	W.S.
Pioneer Trng. Bn.	" 6 and R.E.	2.	"	Holmes	C.W.G.

No 2 Command Depot.

				<u>Weymouth.</u>	
1.	Lieut. Col.	Betts	L.O.	(O.B.E.)	S.M.O.
2.	Captain	Thomas	E.B.		
3.	"	Badock	A.		
4.	"	Paget	O.F.		

Littlemoor Detachment.

5.	Major	Moodie	C.G.G.
6.	Captain	Van Someren	B.

Westham Detachment.

7.	Major	Kenny	J.P.
8.	Captain	Seton	M.C.C.
9.	"	McKenzie	E.

S.M.O. Lt. Colonel Kennedy B.C.

- A.A.M.C. Training Depot Fovant.
- | | | | |
|--------------------|-----------|--------|----------|
| 1. Major | Fraser | A.C. | O.C. |
| 2. Captain | Green | R.A.R. | Adjutant |
| 3. " | Downer | H.G. | R.M.O. |
| 4. Q.M. & Hon. Lt. | Eddington | J.J. | |

- Available at A.A.M.C. Training Depot
- | | | |
|------------|---------------|--------|
| 1. Captain | McCallum | F. |
| 2. " | Burke-Gaffney | A.E. |
| 3. " | Britten | E.H. |
| 4. " | Clatworthy | C.H. |
| 5. " | Shaw | R.M. |
| 6. " | Le Souef | R.F. |
| 7. " | O'Sullivan | M.H. |
| 8. " | Robertson | J.R. |
| 9. " | Baldwin | A.H. |
| 10. " | Oakley | H.G. |
| 11. " | Hayes | H.I. |
| 12. " | Lister | C.R. |
| 13. " | Broadbent | E.E. |
| 14. " | La Touche | H.F.D. |

- 2nd. Training Brigade.
- | | | | |
|-------------------------|--------------------|----------------------|----------------|
| 5th. Training Battalion | Camps 2, 3, and 4. | 1. Capt. Langan A.M. | <u>Fovant.</u> |
| 9th. " " | " 13. | 2. " Allport R.M. | |

- No. 3 Command Depot. Hurdcott.
- | | | |
|------------|-----------|--------|
| 1. Major | McKenzie | J.B.F. |
| 2. " | Irving | H.A.C. |
| 3. " | Lewis | J.B. |
| 4. Captain | Rosenthal | C.P. |
| 5. " | Crombie | D. |
| 6. " | Fergie | A.J. |
| 7. " | Wilton | A.C. |
| 8. " | Badham | C. |

- No. 4 Command Depot. Hurdcott.
- | | | |
|------------|------------|------|
| 1. Major | McDonald | J. |
| 2. " | Tofft | H.H. |
| 3. " | McWilliams | H.H. |
| 4. Captain | Dawson | J. |
| 5. " | Streeter | J.E. |
| 6. " | Ross-Soden | J.L. |

CODFORD AREA. A/S.M.O. Captain McLennan B.

- 3rd. Training Brigade.
- | | | |
|--------------------|---------------------|---------------------------|
| 12th. Training Bn. | Camps 3, 4, and 14. | 1. Captain Liggins H.F.L. |
| 14th. " " | " 6 and 7. | 2. " Luke H.A. |

1st. AUSTRALIAN DERMATOLOGICAL HOSPITAL. (Estab. 12) Bulford.

- | | | | | |
|-----------------------|-----------|---------|-------------|------|
| 1. Colonel | Stewart | J.M.Y. | (D.S.O. VD) | C.O. |
| 2. Lt. Colonel | Grigor | H.E. | (OBE) | |
| 3. Major | Gibson | H.M. | | |
| 4. " | Goldstein | A. | | |
| 5. " | Strachan | J.C.P. | | |
| 6. " | Wiley | C.J. | | |
| 7. Captain | Warne | J. | | |
| 8. T/Major | Young | H.R. | | |
| 9. Captain | Beveridge | H.J. | | |
| 10. Hon. Capt. & Q.M. | Armstrong | T de C. | | |
| 11. Hon. Lieut. | Ramsay | A.M. | | |
| 12. Captain | Smith | J.A. | | |

AUSTRALIAN ENGINEERS TRAINING DEPOTBRIGHTLINGSEA

1. Captain Dinwoodie C.

AUSTRALIAN MACHINE GUN TRAINING DEPOTPARKHOUSE.

1. Captain de Crespigny F.C.

A.I.F. DETENTION BARRACKS.LEWES.

1. Major Macky F.

SPECIAL DUTY1. Major Rosenfield R.L. With Sutton Veny Military Hospital from
14.1.18.

W.R.

Headquarters. A.I.F.
Bhurtore Barracks.
Tidworth.
19th August 1918.

D.M.S.

Administrative Headquarters.
Australian Imperial Force.
130 Horseferry Road.
London S.W.1.

DISTRIBUTION AND POSTINGS OF A.A.M.C. OFFICERS AND DENTAL UNITS.

HEAD QUARTERS A.I.F. DEPOTS IN UNITED KINGDOM.

<u>HEAD QUARTERS A.I.F. DEPOTS IN UNITED KINGDOM.</u>				<u>TIDWORTH.</u>
1.	Colonel	McWhee	D.M. (C.M.G.)	A.D.M.S.
2.	Major	Bermish	F.T.	D.A.D.M.S.
3.	"	Grieve	K.H. (M.C.)	O.C. 6th San. Sec.
4.	"	Down	J.E.	H.O.A.D.S.

PARKHOUSE.

1.	Major	Cook	A.	Convalescent Training Depot.
2.	Captain	Kirkland	H.S.	Group Clearing Hospital.
3.	"	Matters	R.F.	Nos 2 and 4 Camps.

SUTTON VONY AREA.

<u>SUTTON VONY AREA.</u>				<u>SUTTON VONY.</u>
S.M.C. Lieut. Col. Williams H.J. (D.S.O.)				
<u>No 1 Command Depot.</u>				
1.	Major	Maplestone	F.A. (D.S.O.)	
2.	"	Huge	J.G.	
3.	"	McPherson	H.	
4.	"	Hogan	H.A.	
5.	Captain	Peppers	B.D.	
6.	"	Robinson	A.T.R. (Wounded Overseas)	
7.	"	Glassford	J.C.G. (M.C.)	
8.	"	Lister	C.R.	

Overseas Training Brigade.

<u>Overseas Training Brigade.</u>				<u>Longbridge Deversell.</u>
1.	Major	Fogarty	J.F. (M.C.)	S.M.O.
2.	"	Gayner	E.A.	
3.	Captain	Cosgrove	J. (M.C.)	
4.	"	Brookes	G.A.	
5.	"	Glassford	E.G. (M.C.)	

R.B.A.A.

1.	Captain	Holland	E.F.	<u>Haytesbury.</u>
----	---------	---------	------	--------------------

1st Training Brigade.

<u>1st Training Brigade.</u>				<u>Sutton Vony.</u>
1st Training Batta.	Camps 2, 3, 4, & 5.	1.	Captain Hawthorne	H.S.
Pioneer Training Batta.	Camps 6 and R.R.	2.	" Holmes	O.C.G.

NO 2 COMMAND DEPOT.

<u>NO 2 COMMAND DEPOT.</u>				<u>WIMBORNE.</u>
1.	Lieut. Col.	Fotts	L.O. (O.B.M.)	S.M.O.
2.	Major	Smith	J.H.	
3.	Captain	Thomas	E.B.	
4.	"	Badock	A.	
5.	"	Page	O.F.	

Littlemoor Detachment.

6.	Major	Koodie	C.C.G.
7.	"	Kenny	J.F.
8.	Captain	Van Someren	B.

NO 2 COMMAND DEPOT.

REYMOUTH.

17

Western Detachment.

- 435
- | | | | |
|-----|---------|----------|--------|
| 9. | Captain | Seton | H.C.C. |
| 10. | " | McKenzie | H. |

HURDCOTT AREA.

S.M.O. Lt.Col. Kennedy B.C.

A.A.M.C. Training Depot.

Fovant.

- | | | | | |
|----|-------------|-----------|--------|-----------|
| 1. | Major | Fraser | A.C. | O.B. |
| 2. | Captain | Green | H.A.R. | Adjutant. |
| 3. | " | Cakelay | W.G. | R.M.C. |
| 4. | M. & Hon. | | | |
| | Lieutenant. | Eddington | W.J. | |

Available at A.A.M.C. Training Depot.

- | | | | | |
|----|---------|----------|------|-------------|
| 1. | Captain | Dawson | F. | ex "Crests" |
| 2. | " | Sear | H.R. | do. |
| 3. | " | Lindeman | G.B. | do. |

2nd Training Brigade.

Fovant.

- | | | |
|-------------------------|--------------------|------------------------|
| 5th Training Battalion. | Camps 2, 3, and 4. | 1. Captain Langan A.M. |
| 8th Training Battalion. | Camp 13. | 2. " Allport R.M. |

No 3 Command Depot.

Camps 5, 6, 7 & 8.

Hurdcott.

- | | | | | |
|-----|---------|-----------|--------|-------------------|
| 1. | Major | McKenzie | J.B.F. | S.M.O. |
| 2. | " | Irving | H.A.C. | |
| 3. | " | Lewis | J.B. | |
| 4. | " | Kelly | W.R. | |
| 5. | Captain | Rosenthal | C.F. | (Earned Overseas) |
| 6. | " | Crombie | D. | |
| 7. | " | Fergie | A.J. | |
| 8. | " | Wilton | A.C. | |
| 9. | " | Badham | C. | |
| 10. | " | Nankervis | A.W. | |

No 4 Command Depot.

Hurdcott.

- | | | | | |
|----|---------|------------|------|----------|
| 1. | Major | McDonald | J. | S.M.O. |
| 2. | " | Toft | S.H. | (M.B.E.) |
| 3. | " | McWilliams | H.H. | |
| 4. | Captain | Dawson | J. | |
| 5. | " | Streeter | J.E. | |
| 6. | " | Ross-Soden | J.L. | |

CODFORD AREA.

A/S.M.O. Captain McLennan H.

3rd Training Brigade.

- | | | |
|----------------------------|-------------------|----------------------------|
| Brigade Clearing Hospital. | | 1. Captain O'Sullivan M.H. |
| 12th Training Battn. | Camps 3, 4, & 14. | " Liggins W.F.L. |
| 14th Training Battn. | " 6 and 7. | " Luke W.A. |

1st AUSTRALIAN DERMATOLOGICAL HOSPITAL. (Estab. 12) BULFORD.

1.	Colonel	Stewart	J. M. Y.	(D.S.O., V.D.)	C.O.
2.	Lt. Colonel.	Grigor	A. E.	(C.B.E.)	
3.	Major	Gibson	H. M.		
4.	"	Goldstein	A.		
5.	"	Strachen	J. O. R.		
6.	"	Wiley	O. J.		
7.	"	McMahon	F.		
8.	"	Mecky	F.	(To report 26.3.18)	
9.	T/Major.	Young	H. R.		
10.	Captain	Warne	J.		
11.	"	Beveridge	H. J.		
12.	"	Smith	J. A.		
13.	"	Hillis	V. H. B.		
14.	Hon. Capt. & M.	Armstrong	T. de G.		
15.	Hon. Lieut.	Ramsay	A. H.		

AUSTRALIAN ENGINEERS TRAINING DEPOT.BRIGHTLINGSEA.

1.	Captain	Dinwoodie	C.
----	---------	-----------	----

AUSTRALIAN MACHINE GUN TRAINING DEPOT.FARMHOUSE.

1.	Captain	La Touche	W. F. D.
----	---------	-----------	----------

A. I. F. DETENTION BARRACKS.

1.	Captain	De Lacy	C. F.
----	---------	---------	-------

SPECIAL DUTY.

1.	Major	Rosenfield	R. L.	With Sutton Vaux Military H Hospital from 14.1.18.
----	-------	------------	-------	---

WARNED OVERSEAS.

1.	Captain	Rosenthal	C. E.	No 3 Command Depot.
2.	"	Robinson	A. F. R.	No 1 Command Depot.

1st. TRAINING BRIGADE, SUTTON VENNY.

Major. Hayley, F.W.
 S.D.O. 1st & 3rd Trng. Bgds.
 No. 78. Capt. Harbeck, L. O.T.B.
 47. Lieut. Bell, G.A. 1st. T.B.
 82. Capt. Bennett, G.B. R.B.A.A.
 63. Lieut. Huet, F.P.Y. Pioneers.

2nd. TRAINING BRIGADE & A.A.M.C. TRAINING DEPOT, FOVANT.

No. 38. Lieut. Hunter, M.D. AAMC.T.D.
 84. Capt. Satchell, G.K. 5th. T.B.
 36. " Donovan, G.T. 5th. T.B.
 51. " Dunn, F.C. 9th. T.B.
 92. Lieut. Hobson, E.S. 9th. T.B.

3rd. TRAINING BRIGADE, GODFORD.

No. 62. Capt. Amphlett, W.M. 12th. T.B.
 30. " Wright, H. 14th. T.B.

MACHINE GUN TRAINING DEPOT, PARKHOUSE.

No. 60. H/Cpt. Lucaden-Wells, D.P.

ENGINEERS TRAINING DEPOT, BRIGHTLINGSSEA.

No. 15. Capt. McIntosh, A.M.

ENGINEERS TRAINING DEPOT, CLIFTON, BEDS.

No. 77. Lieut. Chapman, G.B.

1st. A. D. H. BULFORD.

No. 68. Capt. Gatehouse, R.

A.I.F. HEADQUARTERS, TIDWORTH.

No. 81. Lieut. Broughton, F.W.W.

A.I.F. DETENTION BARRACKS, LEWES.

No. 13. Capt. Taunton, H.C.D.

SICK LIST.

Major. Blogg, K.V.
 Lieut. Done, H.J.

WARNED OVERSEAS.

Capt.
 Lieut. Christiansen, F.E.

AAMC.TD FOVANT.
 v. M^cNAIR, G.B.

No. 1 COMMAND DEPOT, SUTTON VENNY.

Capt. Marshall, W.H.
 (S.D.O.)
 No. 110. Capt. Austin, D.M.
 112 " Prior, A.S.
 87 " Watts, H.H.
 83 " Jennens, V.C.
 12 " Scott, E.S.
 91 Lieut. Adam, W.
 72 " Payne, G.A.
 75 " Seymour-Wells, P de M
 58 " Done, H.J.
 93 " Binns, J.S.
 95 " Adam, E.J.
 48 " Hines, A.P.
 76 " Barnes, A.E.B.
 20 " Lamsden, W.J.
 61 " Newman, A.H.

No. 2 COMMAND DEPOT, WEYMOUTH.

No. 43. Capt. McDougall, E.J.

No. 3 COMMAND DEPOT, HURDCOTT.

Major. Vernon, R.E.H.
 (S.D.O.)
 No. 14. Capt. Henderson, A.R.P.
 111 " Bailey, W.R.
 53 " Willis, C.B.
 70 H/Cpt. Harris, C.G.
 39 Lieut. Storey, E.
 49 " Arnold, H.R.
 57 " Herbert, F.T.
 64 " Wilson, T.A.M.
 65 " Cooper, C.M.
 79 " Freeman, L.A.

No. 4 COMMAND DEPOT, HURDCOTT.

Major. Riley, B.B.G.
 (S.D.O.)
 No. 42. Capt. Ponsford, C.H.S.
 69 " Ferguson, H.D.
 94 " Hall, D.S.
 88 " Stevens, H.E.
 85 " Fraser, R.
 28 Lieut. Wills, E.W.
 54 " McGregor, L.R.
 67 " Donkin, C.D.
 74 " Maclean, J.B.
 80 " Maloney, A.A.
 113 " Paterson, S.E.
 8 " Hogue, J.S.

21.

Colonel.
 A.D.M.S. A.I.F. Depots.

Headquarters. A.I.F.
Bhurtore Barracks.
Tidworth.
26th August 1918.

20

435

D.M.S.

Administrative Headquarters.
Australian Imperial Force.
130 Horseferry Road.
London. S.W.1.

DISTRIBUTION AND POSTINGS OF A. A. M. C. OFFICERS AND DENTAL UNITS.

HEADQUARTERS A. I. F. DEPOTS IN UNITED KINGDOM.

TID WORTH.

1.	Colonel.	McWhae	D.M.	(C.M.G.)	A.D.M.S.
2.	Major	Beamish	F.T.		D.A.D.M.S.
3.	"	Grieve	K.H.	(M.C.)	O.C. 5th San. Sect.
4.	"	Down	J.E.		S.O.A.D.S.

PARKHOUSE.

1.	Major	Cook	A.	Convalescent Training Depot.
2.	Captain	Kirkland	H.S.	Group Clearing Hospital.
3.	"	Matters	R.F.	Nos 2 and 4 Camps.

SUTTON VENY AREA.

S.M.O. Lieut. Col. Williams H. J. (D.S.O.)

No 1 Command Depot.

1.	Major	Maplestone	P.A.	(D.S.O.)
2.	"	Mayo	J.C.	
3.	"	McPherson	J.	
4.	"	Hagen	H.A.	
5.	Captain	Fethers	B.D.	
6.	"	Glassford	J.C.G.	(M.C.)
7.	"	Lister	C.R.	

sutton Veny.

Overseas Training Brigade.

Longbridge Deverell.

1.	Major	Fogarty	J.P.	(M.C.)	S.M.O.
2.	"	Guymer	E.A.		
3.	Captain	Cosgrove	C.	(M.C.)	
4.	"	Brookes	G.A.		
5.	"	Glassford	E.G.	(M.C.)	

R.B.A.A.

Heytesbury.

1.	Captain	Holland	E.F.	
----	---------	---------	------	--

1st Training Brigade.

sutton Veny.

1st Training Battalion.	Camps 2, 3, 4 & 5.	1. Captain Hawthorne	W.S.
Pioneer Training Battn.	Camps 6 and R.E.	2. " Holmes	C.W.G.

No 2 COMMAND DEPOT.

PLYMOUTH.

1.	Lieut. Col.	Betts	L.O.	(O.B.E.)	S.M.O.
2.	"	Quick	B.		
3.	Major	Smith	C.H.		
4.	"	Carlisle	H.S.		
5.	"	Kelly	W.R.		
6.	Captain	Thomas	E.B.		
7.	"	Badcock	A.		
8.	"	Page	O.F.		
9.	"	Bowman	A.		

Littlemoor Detachment.

10.	Major	Moodie	C.G.G.	(Warned Overseas)
11.	"	Kenny	J.E.	
12.	Captain	Van Someren	B.	

Westham Detachment.

13.	Captain	Seton	M.C.C.
14.	"	McKenzie	E.

HURDCOTT AREA.

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S.M.O. Lt.Col. Kennedy B.C.

A.A.M.C. Training Depot.Fovant.

1.	Major	Fraser	A.C.	O.C.
2.	Captain	Green	R.A.R.	Adjutant.
3.	"	Oakeley	W.C.	R.M.O.
4.	Q.M. & Hon. Lieut.	Eddington	W.J.	

Available at A.A.M.C. Training Depot.

1.	Captain	Sear	H.R.
2.	"	Lindeman	G.B.

2nd Training Brigade.Fovant.

5th Training Battalion.	Camps 2,3 and 4.	1. Captain	Dawson	F.
		"	Langen	A.M. (Leave)
9th Training Battalion.	Camp 13.	2. "	Allport	R.M.

No 3 Command Depot.

Camps 5,6,7 and 8.

Hurdcott.

1.	Major	McKenzie	J.B.F.	S.M.O.
2.	"	Irving	H.A.C.	
3.	"	Lewis	J.B.	
4.	Captain	Rosenthal	C.P.	(Warned Overseas & Sick)
5.	"	Crombie	D.	
6.	"	Fergie	A.J.	
7.	"	Wilton	A.C.	
8.	"	Badham	U.	
9.	"	Hankervis	A.W.	

No 4 Command Depot.Hurdcott.

1.	Major	McDonald	J.	S.M.O.
2.	"	Tofft	H.H.	(M.B.E.)
3.	"	McWilliams	H.H.	
4.	Captain	Dawson	J.	
5.	"	Streeter	J.E.	
6.	"	Ress-Soden	J.L.	

CODFORD AREA.

A/S.M.O. Captain McLennan 3.

3rd Training Brigade.

Brigade Clearing Hospital.		1. Captain	O'Sullivan	M.H.
12th Training Battalion.	Camps 3,4 & 14.	2. "	Liggins	W.F.L.
14th Training Battalion.	" 6 and 7.	3. "	Luke	W.A.

1st AUSTRALIAN DERMATOLOGICAL HOSPITAL.

(Estab. 12)

BULFORD.

435

27

1.	Colonel.	Stewart	J.M.Y.	(D.S.O., V.D.)	G.O.
2.	Lt. Colonel.	Grigor	W.E.	(O.B.E.)	
3.	Major	Gibson	N.M.		
4.	"	Goldstein	A.		
5.	"	Strachan	J.C.P.		
6.	"	Wiley	C.J.		
7.	"	McMahon	F.F.		
8.	"	Mackay	F.		
9.	T/Major.	Young	W.R.		
10.	Captain	Warne	J.		
11.	"	Beveridge	W.J.		
12.	"	Smith	J.A.		
13.	"	Willis	V.N.B.		
14.	Hon. Capt. & M.	Armstrong	T. de G.		
15.	Hon. Lieut.	Ramsey	A.M.		

AUSTRALIAN ENGINEERS TRAINING DEPOT.BRIGHTLINGSEA.

1.	Captain	Dinwoodie	C.
----	---------	-----------	----

AUSTRALIAN MACHINE GUN TRAINING DEPOT.PARKHOUSE.

1.	Captain	La Touche	W.F.D.
----	---------	-----------	--------

A.I.F. DETENTION BARRACKS.LEES.

1.	Captain	De Lacy	O.F.
----	---------	---------	------

SPECIAL DUTY.

1.	Major	Rosenfield	R.L.	With Sutton Vary Military Hospital from 14.1.18.
----	-------	------------	------	---

WARNED OVERSEAS.

1.	Captain	Rosenthal	C.P. No 3 C.D. (sick list 20.8.18)
2.	Major	Moodie	C.G.G. No 2 Command Depot.

DENTAL UNITS.

1st. TRAINING BRIGADE, BUTTON VERNY.

Major. Hayley, F.W.
 S.D.O. 1st & 3rd Trng. Bgds.
 No. 78. Capt. Harbeck, L. O.T.B.
 47. Lieut. Bell, G.A. 1st. T.B.
 82. Capt. Bennett, G.B. R.B.A.A.
 63. Lieut. Huet, F.P.Y. Pioneers.

2nd. TRAINING BRIGADE & A.A.M.C.
 TRAINING DEPOT, FOVANT.

No. 38. Lieut. Hunter, M.D. AAMC. T.D.
 84. Capt. Satchell, G.K. 5th. T.B.
 36. " Donovan, G.T. 5th. T.B.
 51. " Dunn, F.C. 9th. T.B.
 92. Lieut. Hobson, E.S. 9th. T.B.

3rd. TRAINING BRIGADE, GODFORD.

No. 62. Capt. Amphlett, W.M. 12th. T.B.
 30. " Wright, H. 14th. T.B.

MACHINE GUN TRAINING DEPOT, PARKHOUSE.

No. 60. H/Cpt. Lucadou-Wells, D.P.

ENGINEERS TRAINING DEPOT, BRIGHTLINGSEA.

No. 15. Capt. McIntosh, A.M.

ENGINEERS TRAINING DEPOT, CLIFTON, BEDS.

No. 77. Lieut. Chapman, G.B.

1st. A. D. H. BULFORD.

No. 68. Capt. Gatehouse, R.

A.I.F. HEADQUARTERS, TIDWORTH.

No. 81. Lieut. Broughton, F.W.W.

A.I.F. DETENTION BARRACKS, LEWES.

No. 13. Capt. Taunton, H.C.D.

SICK LIST.

Major. Blagg, K.V.
 Lieut. Done, H.J.

No. 1 COMMAND DEPOT,
 BUTTON VERNY.

23

Capt. Marshall, W.H.
 (S.D.O).
 No. 110. Capt. Austin, D.M.
 112. " Prior, A.S.
 87. " Jennens, V.C.
 83. " Watts, H.H.
 12. " Scott, E.S.
 91. Lieut. Adam, W.
 72. " Payne, G.A.
 75. " Seymour-Wells, P de I
 58.
 93. Lieut. Binns, J.S.
 95. " Adam, E.J.
 48. " Hines, A.F.
 76. " Barnes, A.E.B.
 20. " Lumsden, W.J.
 61. " Newman, A.H.

No. 2 COMMAND DEPOT,
 WEYMOUTH.

No. 42. Capt. Ponsford, C.H.S.
 70 H/Cpt. Harris, C.G.
 57 Lieut. Herbert, F.T.
 64 " Wilson, T.A.M.
 65 " Cooper, C.M.

No. 3 COMMAND DEPOT,
 HURDCOTT.

Major. Vernon, R.E.H.
 (S.D.O).
 No. 14. Capt. Henderson, A.R.P.
 111. " Bailey, W.R.
 53 " Willis, C.B.
 39 Lieut. Storey, E.
 49 " Arnold, H.R.
 79 " Freeman, L.A.

No. 4 COMMAND DEPOT,
 HURDCOTT.

Major. Riley, E.B.G.
 (S.D.O).
 No. 69. Capt. Ferguson, H.D.
 94 " Hall, D.S.
 88 " Stevens, H.E.
 85 " Fraser, R.
 28 Lieut. Wills, E.W.
 54 " McGregor, L.R.
 67 " Donkin, C.D.
 74 " Maclean, J.B.
 80 " Maloney, A.A.
 113 " Paterson, S.E.
 8 " Hogue, J.S.
 21 " McNair, G.B.

Colonel.
 A.D.M.S. A.I.F. Depots.

War Records

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APPENDIX B

GR. AIF.

5th. August, 1918.

H.M.S. A.I.F.,
Administrative Headquarters,
150 Horseferry Road,
London, S.W.1.

Weekly Report of Health of A.I.F. Troops for week ending 31st. Aug. 1918.

Statistical Report attached.

GENERAL HEALTH.

The General Health of the Troops continues to be satisfactory. The total number of soldiers in Hospital has increased from 1635 (4.58%) to 1661 (4.52%) of this No. ⁶⁸⁵ are in retention Hospitals only, and the remainder, ⁹⁷⁶ being in true Statistical Hospitals. The No. of admissions to Hospital has decreased from 612 (1.69%) to 579 (1.54%). The No. of General Cases in Hospital has increased from 1133 (3.17%) to 1139 (3.19%) and the number of admissions to Hospital has decreased from 437 (1.21%) to 372 (.99%). The average number attending daily Sick Parade has increased from 595 to 633.

RESPIRATORY DISEASE

The number of cases admitted to Hospital has decreased from 142 ~~thirty~~ to 135, of these 102 were on account of Influenza, as compared with 114 last week. Of these ¹⁰² 64 were admitted from the two Training ^{units} battalions as described last week recently received reinforcements affected with this Disease from Australia. There have been no cases of Pneumonia and no deaths from this Disease.

INFECTIOUS DISEASE

The number of cases of Infectious Disease in Hospital, excluding Scabies, has decreased from 19 to 16, and the number of contacts has decreased from 310 to 300.

Mumps: The number of cases of Mumps admitted to Hospital has increased from 2 to 3, two of whom were segregated and one was not. The number of cases in Hospital has decreased from 8 to 6.

Measles: The number of cases admitted to Hospital has increased from 4 to 5. Four of these occurred amongst troops segregated and one amongst unisolated Troops.

C. S. M.: No cases have occurred.

Scabies: The number of cases under treatment has increased from 118 to 155

VENEREAL DISEASE

The number of cases in Hospital has increased from 450 (1.26%) to 451 (1.27%) and the number of admissions has increased from 133 less 2 readmissions from the C.T.D. - 131 to 140 less 5 readmissions from the C.T.D. - 135

VENEREAL DISEASE (Cont)

435

Infection was acquired as follows:-

25

Before reporting to the Command.

The number is 51 the same as last week, of whom 10 were on Furlough from Administrative Headquarters.

After reporting to the Command

The number has increased from 56 to 58.

The number of cases amongst B.E.F. Troops on leave from France has reased from 21 to 25.

The number of cases occurring amongst soldiers on the strength of Administrative Headquarters, other than those on furlough, was three, the same as last week.

The number of cases discharged during the week has increased from 118 to 139.

EARLY TREATMENT.

2418 soldier reported for Early Treatment during the week, of these 181 showing signs of Disease were sealed up and 145 such cases were aborted.

W. D. M. S.
Colonel,
A.D.M.S. A.I.F. Depots.

CONFIDENTIAL
WEEKLY RETURN OF HEALTH OF A.I.F. TROOPS
FOR THE WEEK ENDING 1.8.18.

TABLE 1 - PROPORTION IN HOSPITAL - ALL UNITS.

	<u>Total</u>	<u>%age.</u>
Total strength at week end	36700	
Total in Hospital at week end.....	1661	4.52
Of these Syphilis.....	50	.14
Other Venereal.....	401	1.09
(Mumps 6)		
Infect- (Scabies..... 55).....	71	.19
ious. (Others 10)		
General.....	1139	3.10

TABLE 2 - PROPORTION OF SICK IN TRAINING UNITS.

Average Daily Strength.....	37300	
Average Daily Sick Parade.....	633	1.68
Sent to Hospital for the week.....	579	1.54
Of these Mumps (Already segregated 2 Ex.Depots 1) ..	3	
Scabies.....	58	.15
A.I.F. Depots, prior to being taken on the strength		
..... 41)		
After being taken on the strength		
but before reporting... 10)...	109	.29
After reporting... 58)		
Readmissions from C.T.D.....	5	
Administrative Headquarters.....	3	
B.E.F.....	23	
C.S.M. Positive	-	
Carriers & suspects.....	-	
Measles (Already segregated 4 Ex.Depots 1).....	5	
Diphtheria	-	
Others	1	
General(Including Respiratory Disease 135).....	372	.99

TABLE 3 - INCIDENCE OF RESPIRATORY DISEASE

Sent to Hospital for the week.....	135
Of these Influenza	102
Bronchitis & Asthma	7
Pneumonia & Br. Pneumonia.....	-
Pleurisy.....	5
T.B. (Phthisis)..... 19 suspects 2... 21	

TABLE 4 - DEATHS

1. FROM RESPIRATORY DISEASE

Bronchitis	NONE
Pneumonia & Br. Pneumonia	
Tubercle of Lung	<u>NIL.</u>

2. FROM OTHER CAUSES.....

TABLE 5 - UNIT TREATMENT IN UNIT LINES

Venereal; Undergoing Early Treatment.....	168	
Awaiting evacuation to Hospital.....	8	176
Mumps	-	
Scabies.....	100	

TABLE 6 - CEREBRO SPINAL MENINGITIS

Positive	
Suspect (Not Yet Confirmed).....	<u>NIL.</u>
Deaths.....	

TABLE 7 - CONTACTS IN LINES

of Infectious Disease.....	<u>300</u>
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435

26

CR. Aif.

11th. August, 1918.

D.M.S. A.I.F.,
 Administrative Headquarters,
 130 Horseferry Road,
 London, S.W.1.

Weekly Report of Health of A.I.F. Troops,
for Week Ending, 8.8.18.

Statistical Report attached.

GENERAL HEALTH.

The General Health of the Troops is satisfactory. The total number of soldiers in Hospital has increased from 1661 (4.52%) to 1698 (4.70%). Of this number 715 are in Retention Hospitals only and the remainder 983 are in true Statistical Hospitals.

The number of admissions to Hospital has decreased from 579 (1.54%) to 464 (1.29%). The number of General Cases in Hospital has increased from 1139 (3.10%) to 1168 (3.24%) and the number of admissions to Hospital has decreased from 372 (.99%) to 317 (.88%).

The average number attending Daily Sick Parade has decreased from 633 to 522.

RESPIRATORY DISEASE

The number of cases admitted to Hospital has decreased from 135 to 76. Of these 44 were on account of Influenza as compared with 102 last week.

There have been 2 cases of Pneumonia but no deaths from this Disease.

INFECTIOUS DISEASE

The number of cases of Infectious Disease in Hospital excluding Scabies was 16 the same as last week, and the number of contacts has decreased from 300 to 172, a satisfactorily low figure.

Measles: Mumps: Only one case of ~~Measles~~ ^{Mumps} has been admitted to Hospital during the week. This soldier had not been segregated as a contact of any former case. The number of cases in Hospital has decreased from 6 to 5.

Measles: There have been no admissions to Hospital for Measles during the week.

C.S.M. No cases have occurred.

Scabies. The number of cases under treatment has decreased from 155 to 88.

VENEREAL DISEASE

The number of cases in Hospital has increased from 451 (1.23%) to 483 (1.33%) and the number of admissions has ^{decreased} from

	140 less 5 readmissions from C.T.D.	-	135
to	120 less 7 readmissions from C.T.D.	-	113

Infection was acquired as follows:-

VENEREAL DISEASE (Cont)

27

435

Before reporting to the Command. The number has decreased from 51 to 43; of whom 14 were on furlough from Administrative Headquarters.

After reporting to the Command. The number has decreased from 58 to 51.

The number of cases occurring amongst B.E.F. troops on leave from France decreased from 23 to 18.

The number of cases occurring amongst soldiers on the strength of Administrative Headquarters, other than those on furlough, has decreased from 3 to 1.

The number of cases discharged during the week has decreased from

139 to 88.

EARLY TREATMENT.

2458 soldiers reported for Early Treatment during the week. Of these 219 showing signs of disease were sealed up and 213 such cases were aborted.

J. O. P.
J. S. Pennington
 Colonel,
 A. D. M. S. A. I. F. Depots.

CONFIDENTIAL.
WEEKLY RETURN OF HEALTH OF A.I.F. TROOPS.
FOR THE WEEK ENDING 8/8/1918.

28

TABLE 1. PROPORTION IN HOSPITAL - ALL UNITS.

	<u>Total.</u>	<u>Percentage</u>
Total strength at Week End.....	36100	
Total in Hospital at Week End.....	1698	4.70
Of these Syphilis.....	62	.17
Other Venereal.....	421	1.16
Infect- (Mumps..... 5)		
ious. (Scabies..... 31)	47	.13
(Others..... 11)		
General.....	1168	3.24

TABLE 2.- PROPORTION OF SICK IN TRAINING ~~UNITS~~ Units.

Average Daily Strength.....	35806	
Average Daily Sick Parade.....	m 522	1.45
Sent to Hospital for the week.....	464	1.29
Of these mumps (Already segregated _____ Ex Depots 1)	1	
Scabies.....	23	.06
A.I.F. Depots, prior to being taken on the strength..... 29)		
After being taken on the strength but before reporting..... 14)	94	.26
<u>VENEREAL.</u> After reporting..... 51)		
Readmissions from C.T.D.....	7	
Administrative Headquarters.....	1	
B.E.F.....	18	
C.S.M. Positive.....		
Carriers and suspects.....		
Measles (Already segregated..... Ex Depots.....)		
Diphtheria.....		
Others.....	3	
General (Including Respiratory Disease 76).....	317	.88

TABLE 3. INCIDENCE OF RESPIRATORY DISEASE.

Sent to hospital for the week.....	76	
Of these Influenza.....	44	
Bronchitis & Asthma.....	12	
Pneumonia & Br. Pneumonia.....	2	
Pleurisy.....	1	
T.B. (Phthisis).. 17 Suspects.....	17	

TABLE 4 - DEATHS.

1. FROM RESPIRATORY DISEASE.

Bronchitis.....		
Pneumonia & Br. Pneumonia.....		
Tubercle of Lung.....		
2. FROM OTHER CAUSES..... (Asthma).....	1	TOTAL
		1

TABLE 5. UNDER TREATMENT IN UNIT LINES.

Venereal: Undergoing Early Treatment.....	171	
Awaiting evacuation to Hospital.....	2	173
Mumps.....		
Scabies.....		57

TABLE 6 - CEREBRO SPINAL MENINGITIS.

Positive.....		
Suspect (Not yet confirmed).....		
Deaths.....		

TABLE 7 - CONTACTS IN LINES.

Of Infectious Disease.....	172
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W R

CR.AIF.

17th August 1918.

D.M.S. A.I.F.
Administrative Headquarters,
130 Horseferry Road, S.W.

Weekly Report of Health of A.I.F. Troops
For Week Ending 15. 8. 18.

Statistical Report attached.

GENERAL HEALTH:

The number of soldiers in hospital shows a definite increase as compared with last week; this is accounted for mainly by the arrival ex "Orontes" of reinforcements from Australia, infected with Mumps, and a widely spread epidemic of Influenza. These troops have been placed in isolation until 5.9.18. In addition, the number of soldiers in hospital with Venereal Disease is gradually increasing; this is almost entirely due to the increased number of admissions of B.E.F. soldiers on leave from France, or on furlough.

The total number of soldiers in hospital has increased from 1698 (4.70%) to 1848 (5.23%). Of this number 825 are in Retention Hospitals only, and the remainder 1023., are in true Statistical Hospitals.

The number of admissions to hospital has increased from 464 (1.29%) to 656 (1.85%).

The number of General cases in hospital has increased from 1168 (3.24%) to 1276 (3.61%) and the number of admissions to hospital has increased from 317 (.88%) to 463 (1.31%).

The average number attending Daily Sick Parade has increased from 522 to 569.

RESPIRATORY DISEASE:

The number of cases admitted to hospital has increased from 76 to 172; the increase in the Influenza admissions being from 44 last week to 127. Of these 95 were admitted from three Training Battalions who received reinforcements ex Transport "Orontes" and 12 were admitted direct to hospital from the Transport.

There have been 2 cases of Pneumonia but no deaths from this disease.

INFECTIOUS DISEASE:

The number of cases of Infectious Disease in this Command, excluding Scabies, has decreased from 16 to 14, and the number of Contacts has increased from 172 to 1197, this increase being of course due to the fact that the newly arrived reinforcements have all been isolated.

Mumps: Number of admissions to hospital has increased from 1 to 6., 4 of whom were admitted direct to hospital in Liverpool ex Transport "Orontes". Of these 6 cases only 1 occurred amongst unisolated troops.

Number of cases in hospital, exclusive of those in Liverpool hospital, was 5 the same as last week.

Measles: There have been no admissions to hospital for Measles during the week.

G. S. M.: 1 case occurred which proved fatal.

Scabies: Number of cases undergoing treatment has increased from 88 to 108.

2.

435

VENEREAL DISEASE :

Number of cases in hospital has increased from 483 (1.33%) to 515 (1.45%).

Number of admissions has increased from
 120 less 7 Readmissions from C.T.D. = 113 to
 142 less 8 Readmissions from C.T.D. = 134

Infection was acquired as follows:-

Before Reporting to the Command:

The number has increased from 43 to 54
 Of whom 16 were on furlough from Administrative Headquarters.

After Reporting to the Command:

The number has decreased from 51 to 40

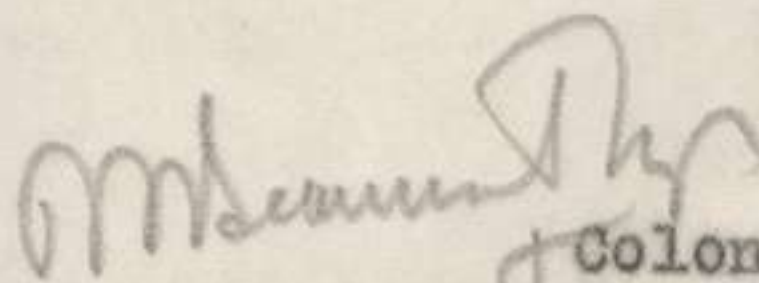
The number of cases occurring amongst B.E.F. Troops on leave from France has increased from 18 to 40.

Number of cases occurring amongst soldiers on the strength of Administrative Headquarters other than those on furlough, has decreased from 1 to Nil.

Number of cases discharged during the week has increased from 88 to 110.

Early Treatment:

2434 soldiers reported for Early Treatment during the week. Of these 185 showing signs of disease were "sealed up" and 167 such cases were aborted.


 Colonel.
 A.D.M.S. A.I.F. Depots in U.K.

WEEKLY RETURN OF HEALTH OF A. I. F. TROOPS.
FOR THE WEEK ENDING 15/8/18.

435

TABLE 1.- PROPORTION IN HOSPITAL - ALLUNITS.

	Total.	Percentage.
Total strength at the Week End.....	36000	
Total in Hospital at Week End.....	1848	5.23
Of these Syphilis.....	77	.21
Other Venereal.....	438	1.24
Infect- (Mumps..... 5)		
ious. (Scabies..... 43)	57	.16
(Others..... 9)		
General.....	1276	3.61

TABLE 2.- PROPORTION OF SICK IN TRAINING UNITS.

Average Daily Strength.....	35300	
Average Daily Sick Parade.....	569	1.61
Sent to Hospital for the week.....	656	1.85
Of these mumps (Already segregated 5 Ex Depots 1)	6	.01
Scabies.....	42	.11
A. I. F. Depots, prior to being taken on the		
Strength..... 38)		
After being taken on the strength but		
before reporting..... 16)	94	.26
VENEREAL. After reporting..... 40)		
Readmissions from C. T. D.	8	
Administrative Headquarters.....		
B. R. F.	40	
S. M. Positive.....	1	
Carriers and suspects.....		
Measles (Already segregated..... Ex Depots.....)		
Diphtheria.....		
Others.....	2	
General (Including Respiratory Disease 172).....	463	1.31

TABLE 3.- INCIDENCE OF RESPIRATORY DISEASE.

Sent to Hospital for the week.....	172	
Of these Influenza.....	127	
Bronchitis & Asthma.....	14	
Pneumonia & Br. Pneumonia.....	1	
Pleurisy.....	1	
T. B. (Phthisis).. 29 Suspects ..	29	

TABLE 4.- DEATHS.

1. FROM RESPIRATORY DISEASE.		
Bronchitis.....	1	
Pneumonia & Br. Pneumonia.....		
Tubercle of Lung.....	1	
2. FROM OTHER CAUSES..... (C. S. M.)	1	TOTAL

TABLE 5.- UNDER TREATMENT IN UNIT LINES.

Venereal: Undergoing Early Treatment.....	184	
Awaiting evacuation to Hospital....	2	186
Mumps.....		
Scabies.....		65

TABLE 6.- CEREBRO SPINAL MENINGITIS.

Positive.....	1	
Suspect (Not yet confirmed).....		1
Deaths.....	1	

TABLE 7.- CONTACTS IN LINES.

Of Infectious Disease.....	1197
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435

CR. AIF.

24th August 1918.

D.M.S. A.I.F.
Administrative Headquarters,
130 Horseferry Road, S.W.

Weekly Report of Health of A.I.F. Troops
For Week ending 22.8.18.

Statistical Report attached.

GENERAL HEALTH.

The Influenza Epidemic amongst reinforcements ex Transport "Orontes" is abating.

The number of soldiers in hospital on account of Venereal Disease continues to increase, but otherwise there is little change in the health of the troops as compared with last week.

The total number of troops in hospital has increased from 1848 (5.23%) to 1868 (5.17%). Of this number 780 are in retention hospitals only and the remainder 1088, are in true statistical hospitals.

The number of admissions to hospital has decreased from 756 (1.85%) to 622 (1.74%).

Number of General cases in hospital has increased from 1276 (3.61%) to 1280 (3.55%) and the number of admissions to hospital has decreased from 463 (1.31%) to 434 (1.21%).

Average number attending Daily Sick Parade has increased from 569 to 586.

RESPIRATORY DISEASE.

Number of cases admitted to hospital has decreased from 172 to 113. Of these 78 were on account of Influenza as compared with 127 last week.

There has been 1 case of Pneumonia but no deaths from this disease.

INFECTIOUS DISEASE.

Number of cases of Infectious Disease in hospital, excluding Scabies, has increased from 14 to 16 and the number of Contacts has increased from 1197 to 1209.

Mumps: Number of admissions to hospital has decreased from 6 to 2. Both these cases occurred amongst segregated troops.

Measles: Number of cases in hospital was 5 the same as last week. Number of admissions to hospital for Measles has increased from nil last week to 9 this week; all of which occurred amongst isolated troops.

C. S. M.: No cases have occurred.

Scabies: Number of cases undergoing treatment has decreased from 108 to 81.

VENEREAL DISEASE:

Number of cases in hospital has increased from 515 (1.45%) to 544 (1.5%). This figure includes 13 Officers.

Number of admissions to hospital has decreased from 142 less 8 readmissions from C.T.D. = 134 to 137 less 8 readmissions from C.T.D. = 129

2.

VENEREAL DISEASE (CONTINUED)

Infection was acquired as follows:-

<u>Before Reporting to the Command</u>	The number decreased from
54 to 40. Of whom 11 were on furlough from	
<u>Administrative Headquarters.</u>	
<u>After Reporting to the Command</u>	The number has increased
from 40 to 53.	

Number of cases occurring among B.E.F. Troops on leave from France has decreased from 40 to 34

Number of cases occurring amongst soldiers on the strength of Administrative Headquarters other than those on furlough has increased from nil to 2.

Number of cases discharged has decreased from 110 to 108.

Early Treatment:

2537 soldiers reported for Early Treatment during the week. Of these 149 showing signs of disease were "sealed up" and 174 such cases were aborted.

W. H. A. E. Colonel.
A.D.M.S. A.I.F. Depots in U.K.

CONFIDENTIAL.
WEEKLY RETURN OF HEALTH OF A. I. F. TROOPS.
FOR THE WEEK ENDING 22/8/18.

TABLE 1. PROPORTION IN HOSPITAL - ALL UNITS.

	Total.	Percentage.
Total Strength at Week End.	36100	
Total in Hospital at Week End.	1368	5.17
Of these Syphilis.	70	.19
Other Venereal.	474	1.31
(Mumps. 5)		
Infect- (Scabies. 28)	44	.12
ious, (Others. 11)		
General.	1280	3.55

TABLE 2. PROPORTION OF SICK IN TRAINING UNITS.

Average Daily Strength.	35600	
Average Daily Sick Parade.	586	1.64
Sent to Hospital for the week.	622	1.74
Of these Mumps (Already segregated 2. Ex Depots nil.	2	
Scabies	34	.09
A. I. F. Depots, prior to being taken on the Strength. 29)		
After being taken on the Strength but before reporting.)	93	.25
<u>VENEREAL.</u> After reporting. 11)		
Readmissions from C. T. D. 53)	8	
Administrative Headquarters.	2	
B. E. F.	54	
C. S. M. Positive.		
Carriers and suspects.		
Measles (Already segregated 9. Ex Depots. Nil	9	
Diphtheria.	1 ?	
Others.	5	
General (Including Respiratory Disease 15)	434	1.21

TABLE 3. INCIDENCE OF RESPIRATORY DISEASE.

Sent to Hospital for the week	113
Of these Influenza	78
Bronchitis & Asthma	10
Pneumonia & Br. Pneumonia	1
Pleurisy	6
T. B. (Phthisis 7. Suspects 11.	18

TABLE 4. DEATHS.

1. <u>From RESPIRATORY DISEASE.</u>			
Bronchitis.			
Pneumonia & Br. Pneumonia.			
Tubercle of Lung.			
2. <u>FROM OTHER CAUSES.</u>	2	TOTAL.	2

TABLE 5. UNDER TREATMENT IN UNIT LINES.

Venereal: Undergoing Early Treatment.	146)	
Awaiting evacuation to Hospital.	4)	150
Mumps.		1
Scabies.		53

TABLE 6. CEREBRO SPINAL MENINGITIS.

Positive.	
Suspect (Not yet Confirmed).	
Deaths.	

TABLE 7. CONTACTS IN LINES.

Of Infectious Disease.	1209
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435

GR. AIF.

3rd September 1918.

D.M.S. A.I.F.
Administrative Headquarters,
130 Horseferry Road, S.W.

Weekly Report of Health of A.I.F. Troops
For week ending 29.8.18.

Statistical Report attached.

GENERAL HEALTH.

The General Health of the Troops shows little change as compared with last week. The amount of Infectious Disease, viz., Mumps has increased; the increase occurring in Training Bns., which received reinforcements from Australia ex Transport "Orontes".

The Total number of troops in hospital has decreased from 1868 (5.17%) to 1817 (5.06). Of this number 684 in retention Hospitals only and the remainder, 1133 are in true statistical hospitals.

The number of admissions to hospital has decreased from 622 (1.74%) to 590 (1.66%).

The number of General cases in hospital has decreased from 1280 (3.55%) to 1175 (3.27%) and the number of admissions to hospital has decreased from 434 (1.21%) to 402 (1.13%).

The average number attending daily sick parade has decrease from 536 to 558.

RESPIRATORY DISEASE.

Number of cases admitted to hospital has decreased from 113 to 108. Of these 62 were on account of Influenza as compared with 78 last week.

There have been 2 cases of Pneumonia but no deaths from this disease.

INFECTIOUS DISEASE.

Number of cases of Infectious Disease in hospital, excluding Scabies, has increased from 16 to 39 and the number of Contacts has increased from 1209 to 2321.

Mumps: Number of admissions to hospital has increased from 2 to 17, all of which occurred amongst troops already isolated.

Number of cases in hospital has increased from 5 to 20.

Measles: Number of admissions to hospital for Measles has decreased from 9 to 3, of which 1 occurred amongst troops already segregated, and 2 amongst unisolated troops.

G. S. M: No cases have occurred.

Scabies: Number of cases undergoing treatment has decreased from 81 to 72.

VENEREAL DISEASE.

Number of cases in hospital has increased from 544 (1.5%) to 578 (1.61%). This figure includes 13 Officers.

Number of admissions to hospital has increased

from 137 less 8 Readmissions from C.T.D. = 129

to 137 less 5 Readmissions from C.T.D. = 132

Infection was acquired as follows:-

Before reporting to the Command: The number has decreased from 40 to 3 of whom 13 were on furlough from Administrative Headquarter.

After reporting to the Command: The number has increased from 53 to 61.

2.

VENEREAL DISEASE: (Cont'd).

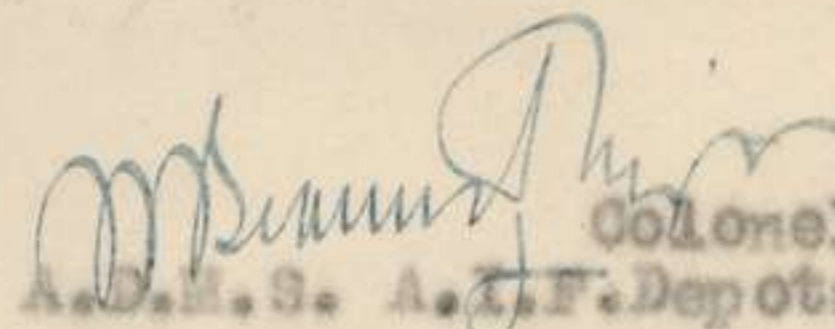
Number of cases among B.M.F. Troops on leave from France has decreased from 34 to 32.

Number of cases occurring among soldiers on the strength of Administrative Headquarters, other than those on furlough has decreased from 2 to nil.

Number of cases discharged has decreased from 108 to 103.

Early Treatment:

2420 soldiers reported for Early Treatment during the week. Of these 151 showing signs of disease were "sealed up" and 140 such cases were aborted.


Colonel.
A.D.M.S. A.I.F. Depots in U.K.

WEEKLY RETURN OF HEALTH OF A. I. F. TROOPS.
FOR THE WEEK ENDING 29/ 8/ 1918.

37

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TABLE 1:- PROPORTION IN HOSPITAL - ALL UNITS.

	Total	Percentage
Total strength at week end	35900	
Total in Hospital at week end	1817	5.06
Of these syphilis	67	.19
Other Venereal	511	1.42
Infectious (Mumps)	64	.18
(Scabies)		
(Others)		
General	1175	3.27

TABLE 2.- PROPOSITION OF SICK IN TRAINING UNITS.

	Total	Percentage
Average Daily strength	35400	
Average Daily Sick Parade	558	1.57
Sent to Hospital for the week	590	1.66
Of these mumps (Already segregated 17 ex Depots -)	17	.04
Scabies	29	.08
A.I.F. Depots, prior to being taken on the strength	26)	
After being taken on the strength but before reporting	13)	
After reporting	61)	
Readmissions from C.S.D. Administrative Headquarters	5	
B.E.F.	32	
C.S.M. Positive Carriers and suspects	5	
Measles (Already segregated 1. Ex Depots 2) (1 positive) (17)	2	
Diphtheria	2	
Others	402	1.13
General (Including Respiratory Disease 108)		

TABLE 3 - INCIDENCE OF RESPIRATORY DISEASE

Sent to hospital for the week	108
Of these	
Influenza	62
Bronchitis & Asthma	10
Pneumonia & Br. Pneumonia	2
Fleurisy	7
T.B. (Phthisis) 17 suspects	10
	27

TABLE 4 - DEATHS.

1. FROM RESPIRATORY DISEASE		
Bronchitis		
Pneumonia & Br. Pneumonia		
Tubercle of lung		
2. FROM OTHER CAUSES		
	TOTAL	111

TABLE 5 - UNDER TREATMENT IN UNIT LINES.

Venereal:	Undergoing Early Treatment	117)	
	Awaiting evacuation to Hospital	4)	121
Mumps			-
Scabies			47

TABLE 6 - CEREBRO SPINAL MENINGITIS

Positive		
suspect (Not yet confirmed)		111
Deaths		

TABLE 7 - CONTACTS IN LINES

Of Infectious Disease		2327
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CONSOLIDATED PROPHYLACTIC & EARLY TREATMENT VENEREAL REPORT FOR WEEK ENDING 1/8/18.

UNIT.	Strength.	No. on Leave.	No. of F.L. Bought.	No. of B.L. Outfits accepted.	No. reporting for Treatment.				Method of Prophylaxis	ABORTIVE TREATMENT.					REMARKS.	Number sent to Bulford.					
					Prephyl	Abert.	With Sores	Total.		No. reptg and how early.						No. Cured.	No. still under ET	Abortive mgthg	Gomery	Sores	Total.
										within 6 hrs	7-12	13-24	over 24 hrs	Total							
No. 1 Cmd. Depot	3185	260	50	360	57	50							39	42				19			
OTB. No. 1 Bn.	509	85	6	7	9	11							5	13				1			
" 2 Bn.	708	50	24	35	18	9							8	9				4			
" 3 Bn.	694	80	40	80	25	6							4	15				4			
" 4 Bn.	730	78	20	68	4	11							3	18				2			
1st Trng. Bn.	918	45	48	30	24	3							2	3				3			
Vars. Trng. Bn.	372	21	59	45	49	3							2	1				—			
R.B.A.A.	1643	106	54	106	57	11							6	10				4			
AASC. Det. Wmster	273	12	6	4	50	—							—	—				—			
No. 2 Cmd. Dep.	1382	100	60	150	299	8							8	8				2			
Verne Detachment																					
Westham "	1449	204	48	93	488	—							—	—				—			
Littlemoor "	1330	74	22	47	195	—							—	—				—			
No. 3 Cmd. Depot	3377	486	34	380	484	24							23	6				6			
No. 4 Cmd. Depot	3453	547	88	130	175	30							19	29				19			
5th Trng. Bn.	949	20	30	20	10	1							2	1				1			
9th Trng. Bn.	1186	228	85	208	9	—							1	1				3			
12th Trng. Bn.	1391	54	100	50	20	4							4	3				1			
14th Trng. Bn.	994	61	47	50	35	3							3	2				4			
Hdqs. Tidworth	624	43	113	—	28	—							1	—				1			
P'House AAMC. TD	409	47	24	30	19	1							—	1				1			
" Details	88	6	—	2	13	1							—	—				—			
" AASC. TD	453	48	12	—	14	—							—	—				—			
ABTD. Bright'sea	1005	68	51	50	72	3							2	3				2			
M.G.S. Grantham	931	51	30	51	13	3							5	3				—			
AHA. TD. Devonport	112	2	36	12	8	—							4	—				—			
Eng. Sig. Sec. C'tn	193	20	24	10	24	—							—	5				—			
ARCD. Longmoor	84	2	4	3	2	—							—	—				—			
No. 1 A.D.H.																					
TOTALS.	28421	2899	1124	2021	2137	185							137	173				76			

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APPENDIX C

38

CONSOLIDATED PROPHYLACTIC & EARLY TREATMENT VENEREAL REPORT FOR WEEK ENDING 8/18/18

UNIT.	Strength.	No. on Leaves.	No. of F.L. Bought.	No. of E.L. Outfits accepted.	No. reporting for Treatment.			Method of Prophylaxis	ABORTIVE TREATMENT.					Number sent to Bulford.							
					Prophyl	Abort.	With Sores		Total.	No. repts and how early.					No. Cured.	No. still under ET	Abortive method used	REMARKS.	Gonor.	Sores	Total.
										Within 6 hrs	from 6-12	12-24	over 24 hrs	Total							
No. 1 Cmd. Depot	365	40	365	95	46							41	34					13			
OTB. No. 1 Bn.	499	76	4	24	8	4						9	8					nil			
" 2 Bn.	700	58	48	2	32	9						6	12					—			
" 3 Bn.	652	84	36	84	30	3						9	9					—			
" 4 Bn.	719	87	24	60	26	12						16	14					—			
1st Trng. Bn.	849	175	84	100	30	5						3	5					—			
Nurs. Trng. Bn.	362	26	67	42	67	—						1	—					—			
R.B.A.A.	1607	134	84	4	64	134						3	10					1			
AASC. Det. Wmster	271	16	3	7	40	—						—	—					—			
No. 2 Cmd. Depot	1145	114	20	154	310	5						3	10					—			
Verne Detachment																					
Westham "	1345	67	46	80	398	—						—	—					—			
Littlemoor "	1242	132	46	53	187	—						—	—					—			
No. 3 Cmd. Depot	3196	418	52	250	310	22						19	9					4			
No. 4 Cmd. Depot	3318	737	100	110	350	26						22	33					10			
5th Trng. Bn.	914	24	20	24	6	2						1	2					1			
9th Trng. Bn.	1105	463	55	440	11	5						1	5					1			
12th Trng. Bn.	1274	25	40	20	17	9						3	6					5			
14th Trng. Bn.	960	140	104	140	34	—						2	—					2			
Hqrs. Tidworth	603	57	120	—	—	—						—	—					1			
P House AAMG. TD	360	33	46	—	30	—						1	—					—			
" Details	58	2	—	2	22	—						—	—					—			
" AASC. TD	395	18	6	12	14	—						—	—					—			
ABTD. Brightsea	904	148	142	110	48	4						1	6					—			
M.G.S. Grantham	918	80	35	80	32	8						3	8					—			
AHA. TD. Devonport	116	1	24	8	9	—						—	—					—			
Eng. Sig. Sec. (1st)	179	70	49	70	24	—						—	6					—			
AROD. Longmoor	85	8	1	3	1	—						—	—					—			
No. 1 A.D.H.												—	—					—			
TOTALS.	23,776	3,558	1,296	2,344	2,195	294						144	177					38			

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APPENDIX C.

39

UNCONSOLIDATED PROPHYLACTIC & EARLY TREATMENT VENEREAL REPORT FOR WEEK ENDING 15/2/18

UNIT.	Strength.	No. on Leave.	No. of F.L. Bought.	No. of B.L. Outfits accepted.	No. reporting for Treatment.				Method of Prophylaxis	ABORTIVE TREATMENT.					Number sent to Bulford.						
					Prephyl	Abort.	With Sores	Total.		No. repts and how early.					No. Cured.	No. still under ET	Abortive method used	REMARKS.	Gomery	Sores	Total.
										within 6 hrs	from 6-12	12-24	24-48	Total							
No. 1 Cmd. Depot	3403	385	25	285	59	62							44	52				28			
OTB. No. 1 Bn.	478	79	20	26	4	9							5	12				1			
" 2 Bn.	688	85	24	85	24	7							4	12				—			
" 3 Bn.	762	58	72	25	28	12							10	13				2			
" 4 Bn.	428	78	30	50	20	13							8	19				4			
1st Trng. Bn.	820	164	48	100	18	2							2	4				—			
Mars. Trng. Bn.	364	135	60	98	75	3							2	1				1			
R.B.A.A.	1354	320	240	320	91	1							5	11				4			
AASO. Det. Wmster	275	10	18	6	30	—							—	—				—			
No. 2 Cmd. Dep.	1246	140	—	140	304	6							7	9				13			
Verne Detachment																					
Westham "	1193	72	41	86	399	—							—	—				—			
Littlemoor. "	1125	46	40	56	193	—							—	—				—			
No. 3 Cmd. Depot	2094	386	68	361	482	19							19	8				9			
No. 4 Cmd. Depot	3366	637	110	341	200	22							29	25				9			
5th Trng. Bn.	909	50	25	50	12	6							2	6				2			
9th Trng. Bn.	943	166	—	124	7	2							5	2				5			
12th Trng. Bn.	1089	148	160	144	15	7							6	7				4			
14th Trng. Bn.	922	65	42	60	36	2							—	2				2			
Hqrs. Tidworth	599	42	80	—	16	1							—	1				2			
P'House AAMD. TD	374	28	—	22	29	—							—	—				—			
" Details	50	—	—	1	4	1							—	1				—			
" AASO. TD	362	60	8	20	10	—							—	—				—			
ABTD. Bright'sea	946	49	4	38	48	—							—	6				1			
M.G.S. Grantham	940	68	35	68	26	2							8	2				—			
AHA. TD. Devonport	724	1	16	20	9	—							—	—				—			
Eng. Sig. Sec. C'tn	225	10	12	15	30	—							—	5				—			
ARCD. Longmoor	96	3	17	3	—	—							—	—				—			
No. 1 A.D.H.																					
TOTALS.	36188	3309	1143	2645	2145	173							152	197				76			

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CONSOLIDATED PROPHYLACTIC & EARLY TREATMENT VENEREAL REPORT FOR WEEK ENDING 22/8/18.

UNIT.	Strength.	No. on Leave.	No. of P.L. Bought.	No. of A.L. Outfits accepted.	No. reporting for Treatment.				No. of Prophylaxis returned to depot.	ABORTIVE TREATMENT.					REMARKS.	Number sent to Sulford.					
					Prephyl.	Abort.	With Sores.	Total.		No. reptg and how early.						No. Cured.	No. still under IT.	Abortive treated by other means.	Gonorrh.	Sores.	Total.
										6 hrs.	6-12	12-24	24 hrs.	Total.							
No. 1 Cmd. Depot	3286	357	25	357	51	54							53	41				19			
Off. No. 1 Bn.	459	54	2	11	7	8							10	10				3			
" 2 Bn.	746	51	-	20	22	10							15	4				7			
" 3 Bn.	629	63	38	63	31	4							9	6				3			
" 4 Bn.	689	59	22	50	23	5							16	8				1			
1st Trng. Bn.	886	40	-	50	28	4							3	5				-			
2nd Trng. Bn.	320	43	85	48	41	4							3	2				1			
R.B.A.A.	1612	340	290	340	161	5							1	5				4			
AASO. Det. W'mster	286	9	6	3	35	-							-	-				-			
No. 2 Cnd. Dep.	1411	100	35	115	306	5							9	5				1			
Verne Detachment																					
Watham "	1358	399	37	46	399	-							-	-				-			
Littlemoor. "	1284	58	28	62	218	-							-	-				-			
No. 3 Cnd. Depot	3450	445	68	386	483	25							22	11				13			
No. 4 Cnd. Depot	3268	580	112	340	260	22							18	25				9			
5th Trng. Bn.	886	30	20	30	6	2							3	5				2			
9th Trng. Bn.	1231	45	40	66	9	5							2	5				-			
12th Trng. Bn.	1006	97	80	97	40	3							4	5				4			
14th Trng. Bn.	1194	58	88	58	48	-							2	-				3			
Hqrs. Tidworth	607	37	106	4	10	-							-	1				-			
F' House AASO. TD	393	37	-	32	35	-							-	-				-			
" Details	44	-	-	-	1	1							1	-				-			
" AASO. TD	413	20	2	7	16	-							-	-				-			
AWED. Bright's sea	808	47	36	47	54	-							2	4				2			
M.G.S. Grantham	891	66	35	66	24	4							1	1				3			
ARA. TD. Devonport	149	2	12	18	9	-							-	-				-			
Eng. Sig. Sec. O'za	227	20	38	17	27	-							-	7				-			
AROD. Longmoor	54	40	14	40	-	-							-	1				-			
No. 1 A.D.H.																					
TOTALS.	27578	3187	1219	2438	2376	161							174	153				72			

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CONSOLIDATED PROPHYLACTIC & EARLY TREATMENT VENEREAL REPORT FOR WEEK ENDING 29/8/18.

UNIT.	Strength.	No. on Leave.	No. of F.L. Bought.	No. of B.L. Outfits accepted.	No. reporting for Treatment.			Method of Prophylaxis	ABORTIVE TREATMENT.					REMARKS.	Number sent to Bulford.						
					Prophyl.	Abort.	With Sores		Total.	No. reptg and how early.					No. Cured.	No. still under ET	Abortive method used	Gonorr.	Sores	Total.	
										Within 6 hrs	From 6-12	12-24	Over 24 hrs								Total
No. 1 Cmd. Depot	3048	370	150	200	47	40							39	30				31			
OTB. No. 1 Bn.	456	45	12	22	5	5							17	4				-			
" 2 Bn.	716	68	48	46	10	11							10	8				2			
" 3 Bn.	620	84	42	84	25	8							7	7				-			
" 4 Bn.	726	67	6	57	18	8							17	5				1			
1st Trng. Bn.	945	77	54	100	32	3							3	4				4			
2nd Trng. Bn.	361	31	20	15	65	4							3	2				3			
R.B.A.A.	1775	117	63	117	78	11							1	2				4			
AASO. Det. Wimster	271	10	6	2	40	-							-	-				2			
No. 2 Cmd. Dep.	1747	41	55	51	308	5							5	-				2			
Verne Detachment	1309	91	53	96	459	-							-	-				-			
Westham "																					
Littlemoor "	797	18	22	30	140	-							-	-				-			
No. 3 Cmd. Depot	3326	477	19	334	502	12							20	2				10			
No. 4 Cmd. Depot	3278	849	105	306	267	22							17	17				15			
5th Trng. Bn.	998	30	12	30	6	-							-	5				3			
9th Trng. Bn.	1368	95	34	40	10	6							5	6				5			
12th Trng. Bn.	949	46	80	44	20	2							4	2				2			
14th Trng. Bn.	1275	33	84	40	48	3							-	3				3			
HdQRS. Fildworth	594	41	102	2	21	-							1	-				2			
P' House AASC. TD	375	28	41	25	71	-							-	-				1			
" Details	-	-	-	-	-	-							-	-				-			
" AASC. TD	434	24	-	10	18	-							-	-				1			
AMTD. Bright'sea	795	51	36	50	49	-							3	1				-			
M.G.S. Grantham	805	71	40	71	20	3							-	3				1			
AHA. TD. Devonport	162	3	24	18	11	-							-	-				-			
Eng. Sig. Sec. C'tn	231	25	10	15	29	-							-	-				-			
ARCD. Longmoor	83	6	23	7	-	-							-	-				-			
No. 1 A.D.H.																					
TOTALS.	27444	2826	1141	1806	2299	143							140	101				92			

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War Records

WEEKLY COMMAND DEPOT RETURN.

APPENDIX D

Week ending, Saturday m/n...../...../.....

43

	No. 1 C.D.	No. 2 C.D.	No. 3 C.D.	No. 4 C.D.	TOTAL	GRAND TOTAL
Accommodation	4100	7646	3500	3740		18986
No. in Depot, Saturday, midnight	3233	3693	3708	3833		14467
ADMISSIONS.						
Number reporting from Admin. Headquarters after Furlough	117	98	67	191	473	
Number reporting direct from Australian Auxiliary Hospitals		173	204	11	388	
Number of Permanent Base men reporting direct from France		138			138	138
Number of men reporting from Training Battalions	10	50	11	10	81	
Number of men reporting from other Sources	210	24	16	11	261	
Number of men reporting from other Command Depôts ...	293	3	6	25		317
DISCHARGES.						
Number of returned Expeditionary Force discharged for General Service to Overseas T.B. and elsewhere	303	1	86	240	630	
Number of men discharged to Training Units	37	1	6	5	49	
Number of men discharged for Home Service	7	10			17	1709
Discharged as Invalids—to Australia		747			747	
in England		1			1	
Discharged elsewhere—Hospitals, A.W.L., etc.	197	34	10	24	265	
Number of men discharged to other Command Depôts... ..	1	31	2022 202	1		315

Classe in Depot	No. 1 C.D.	No. 2 C.D.	No. 3 C.D.	No. 4 C.D.	TOTAL	GRAND TOTAL
A 3	170	101	179	323	773	821
A 4	18	16	2	12	48	
Bia 4	1243	31	61	872	2207	
Bia 3	665	21	285	1163	2134	
Bia 2	161	32	574	732	1499	6064
Bia 1	27	12	821	244	1104	
Bib	16	94	1096	10		1216
Home service personnel } B 2a	61	212	60	77	410	
} C i	258	965	197	103	1523	
Invalids to return to Australia } B 2b	5	523	26	5	559	
} C 2	11	760	2		773	3644
} C 3	10	362	3	4	379	
Training Battalions	8				8	
Unclassified	57	60		1	118	1022
Staff	523	504	382	297	1696	
TOTALS	3233	3693	3708	3833		14467

As from 6 a.m. Thursday 1.8.1

AVAILABLE FOR RETURN TO AUSTRALIA FROM No. 2 COMMAND DEPOT.

	Hammock (including P.B.)	Berth	Cot	T.B.	Mental	TOTALS
Revised	1943	294		39	18	2294
Unrevised	305	77		41		503
TOTALS	2328	371		80	18	2797

J. J. Bennett Colonel
A.D.M.S., A.I.F.

WEEKLY COMMAND DEPÔT RETURN.

Week ending, Saturday m/n ¹⁰ / ⁸ / ¹⁸

	No. 1 C.D.	No. 2 C.D.	No. 3 C.D.	No. 4 C.D.	Total	Grand Total
Accommodation	4100	7846	3500	3740		18986
No. in Depôt, Saturday, midnight	3540	3579	3709	3787		14615
ADMISSIONS.						
Number reporting from Admin. Headquarters after Furlough	152	90	50	195	487	
Number reporting direct from Australian Auxiliary Hospitals		148	208	15	371	
Number of Permanent Base men reporting direct from France		136			136	
Number of men reporting from Other Sources ...	1	10	7	10	28	1324
Number of men reporting from Training Battalions ...	239	41	10	12	302	
Number of men reporting from other Command Depôts...	460	74	19	43		596
DISCHARGES.						
Number of returned Expeditionary Force discharged for General Service to Overseas T.B. and elsewhere ...	310		66	249	625	
Number of men discharged to Training Units ...	6	6	7	8	27	
Number of men discharged for Home Service ...	5	15			20	1570
Discharged as Invalids—to Australia		603			603	
in England						
Discharged elsewhere—Hospitals, A.W.L., etc. ...	190	17	65	23	295	
Number of men discharged to other Command Depôts ...	34	49	494	18		595

Classes in Depôt	No. 1 C.D.	No. 2 C.D.	No. 3 C.D.	No. 4 C.D.	Total	Grand Total
A 3	155	89	162	274	680	724
A 4	17	13	2	12	44	
Bia 4	1227	24	66	956	2273	
Bia 3	753	20	231	1180	2184	
Bia 2	141	27	354	631	1153	6707
Bia 1	23	11	829	234	1097	
Bib	14	91	1090	10		1205
Home Service Personnel } B 2a	62	179	74	79	394	
} C i	248	940	203	103	1494	1899
Invalid Cases to return to Australia } B 2b	2	519	9	2	532	
} C 2	2	737	2		741	1610
} C 3	6	330		1	337	
Training Battalions ...	7				7	
Unclassified	383	63	301	5	752	2481
Staff	500	536	386	300	1722	
TOTALS	3540	3579	3709	3787		14615

As from 6 a.m. Thursday, 8.8.18

AVAILABLE FOR RETURN TO AUSTRALIA FROM No. 2 COMMAND DEPOT.

	Hammock (including P.B.)	Berth	Cot	T.B.	Trenchona Mental	Totals
Revised	2296	360		48	20	2724
Unrevised	295	72		33	1	401
TOTALS	2591	432		81	21	3125

J.P.D.
Colonel,
A.D.M.S., A.I.F.
Depôts

435 WEEKLY COMMAND DEPÔT RETURN. 45

Week ending, Saturday m/n...../...../.....
17 8 18

	No. 1 C.D.	No. 2 C.D.	No. 3 C.D.	No. 4 C.D.	TOTAL	GRAND TOTAL
Accommodation	4100	7646	3500	3740	18986	18986
No. in Depôt, Saturday, midnight	3330	3905	3645	3735	14615	14615
ADMISSIONS.						
Number reporting from Admin. Headquarters after Furlough	75	85	63	138	361	
Number reporting direct from Australian Auxiliary Hospitals		190	235	12	437	
Number of Permanent Base men reporting direct from France	16	77			77	
Number of men reporting from Training Battalions	237	32	1	3	52	1226
Number of men reporting from other Sources		29	15	18	299	
Number of men reporting from other Command Depôts ...		8	34	45	87	174
DISCHARGES.						
Number of returned Expeditionary Force discharged for General Service to Overseas T.B. and elsewhere	275	1	72	232	580	
Number of men discharged to Training Units	35		7	3	45	
Number of men discharged for Home Service	7	21			28	969
Discharged as Invalids—to Australia						
in England		23			23	
Discharged elsewhere—Hospitals, A.W.L., etc.	220	20	25	28	293	
Number of men discharged to other Command Depôts... ..	1	66	8	10		85

Classe in Depôt	No. 1 C.D.	No. 2 C.D.	No. 3 C.D.	No. 4 C.D.	TOTAL	GRAND TOTAL
A 3	173	111	222	297	803	872
A 4	12	22	2	13	69	
Bia 4	1233	22	99	983	2337	
Bia 3	686	13	299	1072	2070	
Bia 2	255	13	475	593	1336	6630
Bia 1	33	11	681	162	887	
Bib	24	32	943	8		1007
Home service personnel } B 2a	71	137	99	103	410	
} C i	258	987	208	135	1588	1998
Invalids to return to Australia } B 2b	3	642	201	32	878	
} C 2	2	892	9	18	921	2264
} C 3	10	428	17	10	465	
Training Battalions						
Unclassified	66	41	-	6	113	
Staff	504	554	390	303	1751	1864
TOTALS	3330	3905	3645	3735		14615

AVAILABLE FOR RETURN TO AUSTRALIA FROM No. 2 COMMAND DEPOT.

As from 6 a.m. Thursday 15.8.18

	Hammock (including P.B.)	Berth	Cot	T.B.	Traction	TOTALS
Revised	2034	464		54	4	2556
Unrevised	351	94		30	1	476
TOTALS	2385	558		84	5	3032

Colonel
A.D.M.S., A.I.F. Depot:

WR

H. 435 WEEKLY COMMAND DEPÔT RETURN.

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Week ending, Saturday m/n 24 / 8 / 18

	No. 1 C.D.	No. 2 C.D.	No. 3 C.D.	No. 4 C.D.	TOTAL	GRAND TOTAL
Accommodation	4100	7646	3500	3740		18986
No. in Depôt, Saturday, midnight	3142	3400	3955	3768		14265
ADMISSIONS.						
Number reporting from Admin. Headquarters after Furlough	81	170	66	233	550	
Number reporting direct from Australian Auxiliary Hospitals		220	302	11	533	
Number of Permanent Base men reporting direct from France		68			68	1505
Number of men reporting from Training Battalions	18	65	3	2	88	
Number of men reporting from other Sources	219	24	14	9	266	
Number of men reporting from other Command Depôts	-	289	15	19		323
DISCHARGES.						
Number of returned Expeditionary Force discharged for General Service to Overseas T.B. and elsewhere	323		87	229	639	
Number of men discharged to Training Units	14	1	3	2	20	
Number of men discharged for Home Service	12	34			46	2280
Discharged as Invalids—to Australia		1378			1378	
in England		2			2	
Discharged elsewhere—Hospitals, A.W.L., etc.	144	10	11	30	195	
Number of men discharged to other Command Depôts... ..	13	14	288	5		320

Classe in Depôt	No. 1 C.D.	No. 2 C.D.	No. 3 C.D.	No. 4 C.D.	TOTAL	GRAND TOTAL
A 3	198	69	205	263	735	781
A 4	12	22	2	10	46	
Bia 4	1246	21	142	1059	2468	
Bia 3	598	15	367	1080	2060	6699
Bia 2	169	13	411	518	1111	
Bia 1	35	14	827	184	1060	
Bib	14	44	886	7		951
Home service personnel } B 2a	70	126	110	121	427	
} C i	233	651	203	142	1229	1656
Invalids to return to Australia } B 2b	4	727	27	40	798	
} C 2	4	625	7	20	656	
} C 3	12	359	6	10	387	1841
Training Battalions						
Unclassified	53	121	324	2	500	2337
Staff	494	593	438	312	1837	
TOTALS	3142	3400	3955	3768		14265

AVAILABLE FOR RETURN TO AUSTRALIA FROM No. 2 COMMAND DEPÔT *as from 6 a.m. Thursday 22.8.18*

	Hammock (including P.B.)	Berth	Cot	T.B.	Trachoma. Mental	TOTALS
Revised	2315	572		43	6	2936
Unrevised	376	101		32	1	510
TOTALS	2691	673		75	7	3446

William Thomas Colonel
A.D.M.S., A.I.F. Depôts.

435 WEEKLY COMMAND DEPÔT RETURN.

Week ending, Saturday m/n.31./8.../18

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	No. 1 C.D.	No. 2 C.D.	No. 3 C.D.	No. 4 C.D.	TOTAL	GRAND TOTAL	
Accommodation	4100	7646	3500	3740		18986	
No. in Depôt, Saturday, midnight	2964	4152	3977	3697		14790	
ADMISSIONS.							
Number reporting from Admin. Headquarters after Furlough	84	100	73	229	486		
Number reporting direct from Australian Auxiliary Hospitals		433	116	12	561		
Number of Permanent Base men reporting direct from France		164			164	1511	
Number of men reporting from Training Battalions	2	41	3	1	47		
Number of men reporting from other Sources	192	35	10	16	253		
Number of men reporting from other Command Depôts	30	77	10	24		141	
DISCHARGES.							
Number of returned Expeditionary Force discharged for General Service to Overseas T.B. and elsewhere	257	14	103	239	613		
Number of men discharged to Training Units	3		8		11		
Number of men discharged for Home Service	9	30			39	971	
Discharged as Invalids—to Australia ... <i>Nil</i>							
in England ... <i>Nil</i>	215	10	43	40	308		
Discharged elsewhere—Hospitals, A.W.L., etc.							
Number of men discharged to other Command Depôts... ..	2	24	36	65		127	
Classe in Depôt	No. 1 C.D.	No. 2 C.D.	No. 3 C.D.	No. 4 C.D.	TOTAL	GRAND TOTAL	
A 3	168	96	197	322	783	826	
A 4	9	21	2	11	43		
Bia 4	1130	14	131	1043	2318		
Bia 3	541	19	432	1023	2015	6409	
Bia 2	158	29	525	459	1171		
Bia 1	33	26	631	215	905		
Bib	21	220	831	4		1076	
Home service personnel	B 2a	80	151	163	135	529	
	C 1	245	641	245	148	1279	1808
Invalids to return to Australia	B 2b	5	960	103	11	1079	
	C 2	4	862	15	2	883	2420
	C 3	16	425	15	2	458	
Training Battalions							
Unclassified	46	41	298	6	391	2251	
Staff	508	647	389	316	1860		
TOTALS	2964	4152	3977	3697		14790	

AVAILABLE FOR RETURN TO AUSTRALIA FROM No. 2 COMMAND DEPÔT. at 6 a.m. Thursday, 29.8.18.

	Hammock (including P.B.)	Berth	Cot	T.B.	Tranahona	TOTALS
Revised	1668	675		55	7	2405
Unrevised	268	78		42	-	388
TOTALS	1936	753		97	7	2793


 Colonel
 A.D.M.S., A.I.F. Depôts

s/c

GR.AIF.24898/144/LMS

3rd September, 1918.

D.M.S., A.I.F.,
 Administrative Headquarters,
130, Horseferry Road, S.W.1.

I am forwarding herewith nominal roll showing particulars of 40 soldiers who have been found unfit on arrival in England, ex transports "Ormonde", "Persic" and "Runic" which arrived in May, 1918.

These soldiers have been classified as follows:-

Temporarily unfit for General Service for more than 6 months, unfit for Home Service	...	1
Permanently unfit for General Service, fit for Home Service (C1)		29
Permanently unfit for General Service, temporarily unfit Home Service (C2)		3
Permanently unfit General Service, Permanently unfit Home Service (C3)		7
Total	-	<u>40</u>

Their disabilities are summaried as follows:-

Premature Senility	3
Medical Disabilities	12
Surgical "	8
Foot Deformities	6
Inguinal Hernia	7
Defective Vision	2
Mental Deficiency	2
Total	- <u>40</u>

(Sgd.) K.H. Grieve, Major,
 for Colonel,
 A.D.M.S., A.I.F. Depots in U.K.

NOMINAL ROLL OF UNFIT MEN ARRIVING FROM AUSTRALIA.

CONVOY "G"

Reg. No.	Rank	Name	Unit	Disability	Date Enlistment.	Place Enlistment	Finding.
3753	Pte.	Lannery	R.J. 10/58th. Bn.	Lt. Inguinal Hernia Lt. Inguinal Hernia which he states just came down on troopship. Refuses operation unreasonably.	21.1.18	Malvern, Victoria	C1
5279	Pte.	Henry	W. 15/31st. Bn.	Premature Senility States his age is 45 but looks much older and is debilitated. He is short of breath on exertion and unable to carry on training.	27.10.17	Ipswich, Q'ld.	C1
5292	Pte.	Lockyer	A.E. 15/31st. Bn.	V.D.H. Old standing V.D.H. Heart apex beat in nipple line in fifth intercostal space and mitral systolic bruit present. Heart slightly irregular	19.4.17	Brisbane Q'ld.	C3
17	Pte.	Collins	H. 8/43rd. Bn.	Rt. Inguinal Hernia Operated on Sept 1917. Recurred on Transport on voyage from Australia	11.9.17	Adelaide S.A.	C1
15	Pte.	Gerarde	E. 9/41st Bn.	Loss of Middle Finger Lt. Hand Amputation middle finger L. hand, October 1917 due to septic Poisoning of Finger and Hand Since that date he states he has never closed his hand beyond half-way and that he was in camp for 3 months in Q'ld. and was not once asked to use a rifle. Inability to flex Lt. Hand. Grip weak, and has been found unfit to use a rifle.	6.12.17.	Townsville Q'ld.	C1.
13	Pte.	Daniel	J. 21/26th Bn.	Chr. Synovitis of Lt. Knee & both Ankles Two months ago on transport Lt. Knee became swollen and then both Ankles and Rt. Ankle definitely swollen and unable to do any training	3.1.18.	Brisbane Q'ld.	B2b Now Lt Knee
16	Pte.	Fisher	E.H. 22/28th Bn.	Lt. Inguinal Hernia He states this has existed for two years and that it was present while he was in Camp in Australia. He refuses Operation	1.8.17.	Perth S.A.	C1.
13	Pte.	Roberts	P. 9/41st Bn.	Old Fracture Rt. Elbow Joint Old Injury Rt. Elbow. 13 months ago. Only 40 Degrees of movement possible in Rt. Elbow quite unfit for bayonet fighting.	24.12.17.	Toowoomba Q'ld.	C1
570	Pte	Searle	S.G.T. 8/43rd Bn.	Old Impacted Fracture Neck of Femur Old Impacted Fracture neck of R. Femur shown by X'rays, occurred 14 months ago. Ever since injury states he has never been able to march on account of pain. Walks with a limp and cannot do route marches.	19.6.17.	Walkenl S.A.	C1
3648	Pte.	Hill	R.D. 10/58th. Bn.	Cyst. of Spermatic Cord	1.1.18	Melbourne	C1(Unreviewed)

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APPENDIX E

NOMINAL ROLL OF UNFITS ARRIVING FROM AUSTRALIA.

CONVOY "G" 1

Reg.No.	Rank	Name	Unit	Disability	Date Enlistment.	Place Enlistment	A.D.H.S. Finding.
3753	Pte.	Flannery	E.J. 10/58th.Bn.	Lt. Inguinal Hernia Lt. Inguinal Hernia which he states just came down on troopship. unreasonably.	21.1.18	Malvern, Victoria	Cl 3 Cl
5279	Pte.	Henry	W. 15/31st.Bn.	Premature Senility States his age is 45 but looks much older and is debilitated. He is short of breath on exertion and unable to carry on training.	27.10.17	Ipswich, Q'ld.	Cl
5292	Pte.	Lockyer	A.E. 15/31st.Bn.	V.D.H. Old standing V.D.H. Heart apex beat in nipple line in fifth intercostal space and mitral systolic bruit present. Heart slightly irregular	19.4.17	Brisbane Q'ld.	C3
3287	Pte.	Collins	H. 8/43rd.Bn.	Rt. Inguinal Hernia Operated on Sept 1917. Recurred on Transport on voyage from Australia	11.9.17	Adelaide S.A.	Cl
3545	Pte.	Gerarde	E. 9/41st Bn.	Loss of Middle Finger Lt. Hand Amputation middle finger L.hand, October 1917 due to septic Poisoning of Finger and Hand Since that date he states he has never closed his hand beyond half-way and that he was in camp for 3 months in Q'ld. and was not once asked to use a rifle. Inability to flex Lt. Hand. gri grip weak, and has been found unfit to use a rifle.	6.12.17.	Townsville Q'ld.	Cl.
7173	Pte.	Daniel	J. 21/26th Bn.	Chr. Synovitis of Lt. Knee & both Ankles Two months ago on transport Lt. Knee became swollen and then both Ankles. Now Lt Knee and Rt. Ankle definitely swollen and unable to do any training	3.1.18.	Brisbane Q'ld.	B2b
7416	Pte.	Fisher	E.H. 22/28th Bn.	Lt. Inguinal Hernia He states this has existed for two years and that it was present while he was in Camp in Australia. He refuses Operation	1.8.17.	Perth S.A.	Cl.
3593	Pte.	Roberts	P. 9/41st Bn.	Old Fracture Rt. Elbow Joint Old Injury Rt. Elbow. 18 months ago. Only 40 Degrees of movement possible in Rt. Elbow quite unfit for bayonet fighting.	24.12.17.	Toowoomba Q'ld.	Cl
3370	Pte	Searle	S.G.T. 8/43rd Bn.	Old Impacted Fracture Neck of Femur Old Impacted Fracture neck of R. Femur shown by X'rays, occurred 14 months ago. Ever since injury states he has never been able to march on account of pain. Walks with a limp and cannot do route marches.	19.6.17.	Walkenl S.A.	Cl
3648	Pte.	Hill	E.D. 10/58th Bn.	Cyst, of Spermatic Cord	1.1.18	Melbourne	Cl(Unreviewed)

NOMIN L ROLL OF UNFITS ARRIVING FROM AUSTRALIA

Reg No.	Rank	Name	Unit.	Disability.	Date Enlist.	Place Enlistment	A.D.M.S. Finding.
3567	Pte.	Kent	W.I. 9/41st Bn.	Pulmonary Tuberculosis ? Tuberculosis of Lungs - Debility weak and unfit for training	10.10.17	Queensland Sydney	C1 Thin and C1
19446	Pte.	Adams	J. A.A.M.C.	Flat Feet	25.7.17		C1
3654	Pte.	Iredale	D. 10/58th Bn.	Double Inguinal Hernia Double Inq. Hernia. Refuses operation, has had Hernia ten years.	21.11.17	Whittlesea, Vic.	C1
7063	Pte.	Franklan	T.J. 21/26th Bn.	Rt. Inq. Hernia Rt. Inq. Hernia for 18 months. marked for discharge on account of Rupture.	10.17.	Rockhampton, Q'ld.	C1 States he was examined in Australia and that he was there
7030	Pte.	Boyce	F.H. 20/26th Bn.	Hammer Toes Hammer Toes of marked degree.	12.17	Brisbane.	C1 Quite unfit to march and cannot wear heavy boots.
7193	Pte.	Stokes	W. 20/26th Bn.	Rt. Inq. Hernia Rt. Inq. Hernia (slight). refuses operation.	1.8.17	Brisbane	C1 Since October 1917, left Australia 28th. February, 1918.
3866	Pte.	Chandler	L. 11/48th Bn.	Old Frac. Rt. Wrist. Frac. Rt. Wrist. Bowing of rt. forearm in outer 1/3.	3.12.17	Adelaide	C1 Grip of hand weak.
3259	Pte.	Bray	A. 8/39th Bn.	Chr. Rheumatism Chr. Rheumatism. Age 43. for training. He complains of pains over the body and in metacarpal phalangeal joint of great toes. There is some stiffness in the joints and he walks on the outer margin of his feet. States that he has been subject to Sciatica for five years.	17.11.17	Brisbane	C2 Has been for 8 weeks in England and has been found quite unfit
3540	Pte.	Esvensen	M. 9/41st Bn.	Chr. Rheumatism Chr. Rheumatism and Debility. account of Debility and rheumatic pains.	2.8.16	Rockhampton	C2. Suffers from Rheumatism and quite for training on States he has had rheumatism for two years.
3504	Pte.	Barnes	F.P. 9/41st Bn.	Rheumatism Neurasthenia, Rheumatism, Debility. thoroughly tried on training and been found unfit to carry on. He is debilitated, aged 42 6/12, complains of Rheumatic Pains in shoulders and neck which cause him to limit the mobility of the arm at the left	2.12.17	Brisbane	C2 This soldier has been in England for six and has been

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NOMINAL ROLL OF UNFITS ARRIVING FRC AUSTRALIA

Reg No.	Rank	Name	Unit.	Disability.	Date Enlist.	Place Enlistment	A.D.M.S. Finding.
3567	Pte.	✓ Kent	W.I. 9/41st Bn.	Pulmonary Tuberculosis ? Tuberculosis of Lungs - Debility weak and unfit for training	10.10.17	Queensland	C1 Thin and
19446	Pte.	✓ Adams	J. A.A.M.C.	Flat Feet	28.8.17	Sydney	C1
3654	Pte.	✓ Iredale	D. 10/53th. Bn.	Double Inguinal Hernia Double Inq. Hernia. Refuses operation, has had Hernia ten years.	21.11.17	Whittlesea, Vic.	C1
7063	Pte.	✓ Franklan	T.J. 21/26th. Bn.	Rt. Inq. Hernia Rt. Inq. Hernia for 18 months. States he was examined in Australia and that he was there marked for discharge on account of Rupture. Refuses operation.	10.17.	Rockhampton, Q'ld.	C1
7030	Pte.	✓ Boyce	F.H. 20/26th. Bn.	Hammer Toes Hammer Toes of marked degree. Quite unfit to march and cannot wear heavy boots.	12.17	Brisbane.	C1
7193	Pte.	✓ Stokes	W. 20/26th. Bn.	Rt. Inq. Hernia Rt. Inq. Hernia (slight). Since October 1917, left Australia 28th. February, 1918. refuses operation.	1.8.17	Brisbane	C1
3866	Pte.	✓ Chandler	L. 11/48th. Bn.	Old Frac. Rt. Wrist. Frac. Rt. Wrist. Bowing of rt. forearm in outer 1/3. Grip of hand weak.	3.12.17	Adelaide	C1
3259	Pte.	✓ Bray	A. 8/39th. Bn.	Chr. Rheumatism Chr. Rheumatism. Age 43. Has been for 8 weeks in England and has been found quite unfit for training. He complains of pains over the body and in metacarpal phalangeal joint of great toes. There is some stiffness in the joints and he walks on the outer margin of his feet. States that he has been subject to Sciatica for five years.	17.11.17	Brisbane	C2
3540	Pte.	✓ Evensen	M. 9/41st. Bn.	Chr. Rheumatism Chr. Rheumatism and Debility. Age 43; account of Debility and rheumatic pains. States he has had rheumatism for two years.	2.8.16	Rockhampton	C2.
3504	Pte.	✓ Barnes	F.P. 9/41st. Bn.	Rheumatism Neurasthenia, Rheumatism, Debility. This soldier has been in England for six and has been thoroughly tried on training and been found unfit to carry on. He is debilitated, aged 42 6/12, complains of Rheumatic Pains in shoulders and neck which cause him to limit the mobility of the arm at the left	2.12.17	Brisbane	C2

NOMINAL ROLL OF UPFITS ARRIVING FROM AUSTRALIA.

Page - 3.

Reg.No.	Rank	Name	Unit	Disability	Date enlist.	Place Enlist.	A.D.M.S. Finding.
3623	Pte.	Voois	J.N. 9/41st.Bn.	^{CAVUS} Pes. Corns. Pes. Corns. ^{CAVUS} More marked on right side, Has been tried on training and found unfit, for marching as he walks with a limp, due he says to pain in right foot under ball of great toe and across the arch of the foot.	2.1.18	Brisbane	C1
3374	Pte.	Shea	J.P. 8/43rd.Bn.	Mentally Deficient Deficient Mentality. Although willing he has no memory and his intelligence is of so low a grade that he cannot carry on his training.	27.11.17	Adelaide	C3
3562	Pte.	James	F.A. 9/41st.Bn.	Loose Cartilage Rt.Knee	15.12.17	Winton, Q'ld.	C1.
3577	Pte	Murphy	G.H 9/41 . Bn	Rheumatism & Senility Senility: This Soldier looks between 50 & 60 years of age. He is quite unfit for military duties on account of age, weakness and chronic muscular rheumatism. Although he states he gave his age, on enlistment as 42 years 5 mnths, he is so obviously overage and unfit that he should never have been enlisted.	1. 1.18	Charters Towers Q'land	C.3.
7163	Pte	Pratt	F. 20/26 Bn	Tachy cardia Neurasthenia & Tachy cardia. Very tremulous & short of breath on exertion. Heart rate 140: has never been able to undergo severe exertion on account of shortness of breath, and has been found quite unfit for training.	9. 1.18	Brisbane Q'ld	C.1.
7179	Pte	MacNeill	E. 20/26 Bn	Premature Senility Premature Senility: Age 45-5/12th. States he told recruiting officer, Capt O'Brien in Rockhampton, that he was 45 years and that this officer put his age down as 44. He has been tried on training, and found unfit to carry on on account of shortness of breath.	Dec. 1917	Rockhampton Q'ld.	C.1.
5411	Pte	Ryan	M.P. 15/31 Bn	Varicose Veins Varicose Veins: Rt. Calf. Operation 18 months ago; veins recurred and there is a bunch of veins of moderate size on Rt Calf. He has been tried on training for 6 weeks, and persistently refuses to do route marching and physical training on account of - he says - pain in the vein, and walks with a slight limp.	30. 1.18	Toowoomba Q'ld.	C.1

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NOMINAL ROLL OF UNFIT MEN SERVING FROM AUSTRALIA.

Reg.No.	Rank	Name	Unit	Disability	Date enlist.	Place Enlist.	A.D.M.S. Finding.
3623	Pte.	Voois	J.H. 9/41st Bn.	Pes. ^{CAVVS} Corns. Morsemarked on right side, Has been tried on training and found unfit, for marching as he walks with a limp, due he says to pain in right foot under ball of great toe and across the arch of the foot.	2.1.18	Brisbane	C1
3374	Pte.	Shea	J.P. 8/43rd Bn.	Mentally Deficient Deficient Mentality. Although willing he has no memory and his intelligence is of so low a grade that he cannot carry on his training.	27.11.17	Adelaide	C3
3562	Pte.	James	F.A. 9/41st Bn.	Loose Cartilage Rt.Knee	15.12.17	Winton, Q'ld.	C1.
3577	Pte	Murphy	G.H 9/41 . Bn	Rheumatism & Senility Senility: This Soldier looks between 50 & 60 years of age. He is quite unfit for military duties on account of age, weakness and chronic muscular rheumatism. Although he states he gave his age, on enlistment as 42 years 5 mths, he is so obviously overage and unfit that he should never have been enlisted.	1. 1.18	Charters Towers Q'land	C.3.
7153	Pte	Pratt	F. 20/26 Bn	Tachy cardia Neurasthenia & Tachy cardia. Very tremulous & short of breath on exertion. Heart rate 140: has never been able to undergo severe exertion on account of shortness of breath, and has been found quite unfit for training.	9. 1.18	Brisbane Q'ld	C.1.
7179	Pte	MacNeill	E. 20/26 Bn	Premature Senility Premature Senility: Age 45-5/12th. States he told recruiting officer, Capt O'Brien in Rockhampton, that he was 45 years and that this officer put his age down as 44. He has been tried on training, and found unfit to carry on on account of shortness of breath.	Dec. 1917	Rockhampton Q'ld.	C.1.
5411	Pte	Ryan	M.P. 15/31 Bn	Varicose Veins Varicose Veins: Rt. Calf. Operation 18 months ago; veins recurred and there is a bunch of veins of moderate size on Rt Calf. He has been tried on training for 6 weeks, and persistently refuses to do route marching and physical training on account of - he says - pain in the vein, and walks with a slight limp.	30. 1.18	Toowoomba Q'ld.	C.1

NOMINAL ROLL OF UNFITS ARRIVING FROM AUSTRALIA

CONVOY "G".

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Reg. No.	Rank	Name	Unit	Disability	Date enlist.	Place Enlist.	A.D.M.S. Finding.
3666	Pte	KERR, S.A.	10/58th	Feeble mindedness	25/1/18	Wangaratta	"C3" (unrevei
3715	Pte.	ROBERTS, C.R.	10/58 th Bn.	Defective Vision Blepharospasm.	13/8/17	Melbourne, Vic.	"C1" do.
22007	Spr.	BALL, L.A.	Engrs.	Flat Feet	22/9/17	Sydney	"C1" do.
22003	Spr.	ANDERSON, B.	Engrs.	Flat Feet	23/8/17	Sydney	"C1" do.
22121	Spr.	McINNES, R.B.	Engrs.	Deformity G.T. Toe	19/11/17	Sydney	"C1" do.
5412	Pte.	WHITAKER, G.B.	15/31st	Diabetes Diabetes	29/1/18	Ipswich	"C3" do.
3737	Pte.	WILLIAMS, A.J.	10/58th	Defective Vision	4/1/18	Melbourne, Vic.	"C1" do.
7142	Pte.	KING, J.	49th Bn.	Rheumatism	1/1/18	Bundaberg	"C1" do.
3663	Pte.	SMITH, T.R.	9/41st	Senility	19/1/18	Charleville	"C3" do.
3568	Pte.	LYSAGHT, J.P.	9/41st	Malaria & Senility	11/11/17	Port Darwin	"C1"
3531	Pte.	DO WNS, J.	9/41st	Gen. Debility	27/10/17	Ipswich	"C3" do.
3640	Pte	WILSON, C.A.G.	9/41st	Rheumatism	15/12/17	Townsville	"C1" do.
3306	Pte.	POWERAKER, N.	50th Bn.	L. Inguinal Hernia	Aug. 1917	Adelaide	"C1" do.

Premature Senility and Debility. He has been unfound fit for training owing to weakness. He states is age is 45 but looks much older.

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NOMINAL ROLL OF UNFITS ARRIVING FROM AUSTRALIA

CONVOY "G".

Reg. No.	Rank	Name	Unit	Disability	Date enlist.	Place Enlist.	A.D.M.S. Finding.
3666	Pte	KERR, S.A.	10/58th	Feeble mindedness	25/1/18	Wangaratta	"C3" (unrevealed)
3715	Pte.	ROBERTS, C.R.	10/58 th Bn.	Defective Vision Blepharospasm.	13/8/17	Melbourne, Vic.	"C1" do.
22007	Spr.	BALL, L.A.	Engrs.	Flat Feet	22/9/17	Sydney	"C1" do.
22003	Spr.	ANDERSON, B.	Engrs.	Flat Feet	23/8/17	Sydney	"C1" do.
22121	Spr.	McINNES, R.B.	Engrs.	Deformity G.T. Toe	19/11/17	Sydney	"C1" do.
5412	Pte.	WHITTAKER, G.B.	15/31st	Diabetes Diabetes	29/1/18	Ipswich	"C3" do.
3737	Pte.	WILLIAMS, A.J.	10/58th	Defective Vision	4/1/18	Melbourne, Vic.	"C1" do.
7142	Pte.	KING, J.	49th Bn.	Rheumatism	1/1/18	Bundaberg	"C1" do.
3663	Pte.	SMITH, T.R.	9/41st	Senility	19/1/18	Charleville	"C3" do.
3568	Pte.	LYSAGHT, J.P.	9/41st	Malaria & Senility	11/11/17	Port Darwin	"C1"
Premature Senility and Debility. He has been unfound fit for training owing to weakness. He states his age is 45 but looks much older.							
3531	Pte.	DOANS, J.	9/41st	Gen. Debility	27/10/17	Ipswich	"C3" do.
3640	Pte	WILSON, C.A.G.	9/41st	Rheumatism	15/12/17	Townsville	"C1" do.
3306	Pte.	POWERAKER, A.	50th Bn.	L. Inguinal Hernia	Aug. 1917	Adelaide	"C1" do.

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s/c

CR.AIF.24898/144/LMS

2nd September, 1918.

D.M.S., A.I.F.,
 Administrative Headquarters,
130, Horseferry Road, S.W.1.

Herewith please find nominal roll shewing particulars of 12 soldiers who have been boarded as unfit on arrival from Australia ex "Euripides" (ex "Tuetonic") "Osterley" and "Port Darwin" in July, 1918.

These soldiers have been classified as follows:-

Permanently unfit General Service, but fit Home Service (C1).	- 9
Permanently unfit General Service,	
Permanently unfit Home Service.	- 3
Total	- 12

Of these, the disabilities are summarised as follows:-

Premature Senility	1
Medical Disabilities	1
Surgical do.	5
Foot Deformities	1
Inguinal Hernia	2
Defective Vision	2
	<hr/>
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(Sgd.) D.M.McWhae, Colonel,
 A.D.M.S., A.I.F. Depots in U.K.

NOMINAL ROLL OF UNFITS ARRIVING FROM AUSTRALIA

CONVOY H.

Reg.No.	Rank.	Name.	Unit.	Disability.	Date Enlisted.	Place Enlistment.	A.D.M.S. Finding.
53353	Pte.	HOUSE	C.M. 3rd Gen.Reinf. Q'land.	Deformed Feet	2.3.18	Rockhampton Q'land	C1.
				Infantile Paralysis in Infancy - Double Pes Corns of marked degree, wasting of legs more marked on left side and inability to march.			
50982	Pte.	McDOUGALL	R. 20th Bn.	Deformed R.Hand	Oct.1917.	Sydney N.S.W.	C3
				Old injury to R.Hand 9 years ago. Index finger is stiff and cannot be flexed. Middle finger can only be semiflexed. His hand grip therefore defective and he should never have been enlisted. There is no evidence on Medical History Sheet that a pre-embarkation examination was carried out.			
51463	Pte.	SMITH	W.J. 2nd G.S.Reinf. V.2.	Deafness	31.1.18	South Melbourne	C3
				Defective Hearing. - Cannot hear voice in left ear. Can hear ordinary voice at 7 feet in right ear. Is very slow mentally.			
50759	Pte.	RABIG	J. Q.1. 41st	Hæmorrhoids	19.4.18	Brisbane	C3
				Premature Senility and GSW.R.lung several years ago. States his age is 41 but looks over 50. Right lung is perforated by a bullet. There is marked diminution of air entry into the lung with dulness. He is short winded and has extensive external piles.			
53129	Pte.	SPADBROW	T.W. H.2.42	Old Frac.R.Tibia	17.4.18	Maryborough Q'land	C1
				Old Frac.R.leg 22 years ago. A sequestrum came away three years ago Limps slightly and is unfit for marching.			
52371	Pte.	TRINGROVE	G.A. 40th Bn.	Rheumatism	22.2.18	Hobart Tasmania	C1
				This soldier is 45 years of age and although of good physique has been found quite unfit to carry on training on account of Myalgia.			
50683	Pte.	ODELL	J. 41st Bn.	Premature Senility	17.2.18	Maryborough Q'land	C1
				States his age is 45 but looks older. He is debilitated and has been found quite unfit to carry on training on account of shortness of breathe and weakness.			
39406	Pte.	COFFEY	J.N.A.34thReinf. A.F.A.	Ch.Synovitis L. Ankle	28.1.18	Parkes N.S.W.	C1
				Old injury L. Ankle 8 years ago.External Condyle of Fibula has been fractured and there is a fragment of bone united by fibrous tissue only to the Out. surface of Condyle. This grates and moves with movements of ankle joint. Unfit for marching and should not have been enlisted.			
53245	Pte.	JACKSON	H.H. 3rd G.S.Reinf.Q.	Rt.Inguin.Hernia	17.10.17	Rockhampton Q.	C1
				Recurred on journey from Australia.			

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APPENDIX F

Reg. No.	Rank.	Name.	Unit.	Disability.	Date Enlisted.	Place Enlistment	ADMS Finding.
52053	Pte.	GUNNING	T. 28th Bn.	Inguin. Hernia. Left Inguinal Hernia for past three years.	7.12.17	Fremantle W.A.	CI
52124	"	WEST	W. 28th Bn.	Torticollis Torticollis of moderate degree. Face rotated to right. Should not have been enlisted for General Service.	4.3.18	Fremantle W.A.	CI
52344	"	OWEN	R.V. 40th Bn.	Deafness Chronic Otitis Media. Right Ear discharging. Hears ordinary voice in left ear 12 ft.	17.10.17	Tasmania	CI

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APPENDIX G

OR.AIF.

19th August 1918.

D.M.S.
 Administrative Headquarters.
 Australian Imperial Force.
 130 Horseferry Road.
 London S.W.1.

Herewith please find a detailed statement showing the result of an investigation into the after history of 49 soldiers who have been treated at Colchester Military Hospital for D.A.H. during the period October 1917 to June 1918.

The results may be summarized as follows.

- | | | |
|--|----|---|
| 1. Now medically fit for general service. | 19 | Of these 9 have already returned to France. |
| 2. Still temporarily unfit for General Service. | 8 | |
| (A.I.F. Depot classification B1a) | | |
| 3. Boarded as fit for Home Service only. | 7 | |
| 4. Boarded and invalided to Australia. | 12 | |
| 5. Invalided to Australia for other disabilities. (V.D.H.S.; Hepatitis 1.) | 3 | |

In all instances, except those specified under 5, the present disability, if any, is D.A.H.

J. J. Beaman Colonel.
 A.D.H.S. A.I.F. Depots in U.K.

APPENDIX H19th August 1918. 61

D.H.S. A.I.F.
Administrative Headquarters,
130 Horseferry Road, S.W.

REPORT ON THE TREATMENT AND AFTER CARE OF DISABLED SOLDIERS.

Herewith please find reports by Lt.Col. A.G. Butler, DSO., and myself on the methods adopted in England in connection with the above.

Since the policy of the A.I.F. in this matter consists in the evacuation of invalided soldiers to Australia as soon as possible, the greater portion of this work is thrown upon Medical Organisations in Australia.

The large number of Orthopaedic cases evacuated to Australia give an idea of the extent to which this occurs.

Thus, excluding Orthopaedic cases sent to Australia, among 2318 Officers and Other ranks returned on Hospital Ships, 2211 soldiers requiring Orthopaedic treatment were sent from Weymouth to Australia from 1st January 1918 to 30th June 1918.

With the following exceptions only, all disabled A.I.F. soldiers are evacuated to Australia;—in accordance with the abovementioned principle if they will not be fit for general service within 6 months:—

- (a). Soldiers of B2a class who, although unfit for general service for more than 6 months are fit for Home Service.
- (b). Cases of double amputations of lower extremities until supplied with artificial limbs.
- (c). Certain cases of injuries to jaw requiring plastic treatment.

Soldiers requiring Nerve suture and soldiers requiring Tendon transplantation often cannot be operated upon for several months until all septic infection has thoroughly disappeared. Therefore such cases in whom septic infection is present may well be returned to Australia unoperated upon. Except when it is necessary to delay operation for prolonged periods cases of this nature should be operated upon in England as this would lessen the period after treatment by approximately three months.

While disabled soldiers are waiting in England pending their evacuation to Australia the highest standard of medical treatment can be attained without interfering with the rapidity of evacuation.

In this connection, and with regard to medical arrangements in England and on Invalid Transports returning to Australia, I desire to make the following recommendations:—

- (1). At No. 2 Command Depot, Weymouth
The complete separation of soldiers requiring treatment from those who do not require it.
This is being done by concentrating in Monte Video Camp all soldiers under treatment. I suggest that the Camp be called an "Invalid Depot".
- (2). The Medical Staff at Monte Video Camp to be increased by
 - (a). A general Surgeon.
 - (b). A sound physician with knowledge of bacteriology and

experience of the methods of treatment of Functional Nervous cases.

- (c). Any additional medical staff found by experience to be necessary.

(3). The following alterations to Monte Video Camp:-

a) Convalescent wards are being fitted up for all soldiers under treatment at Monte Video Camp.

- (a). ~~The enlargement of the hospital by another 500 beds to accommodate all soldiers with unhealed wounds.~~
- (b). The establishment of a bacteriological laboratory.
- (c). The establishment of Curative Workshops employing and treating 100 Orthopaedic patients daily. In view of the possibility of establishing an Australian Orthopaedic Hospital, it is not recommended that these workshops be larger than the above. Suitable buildings have been made available for this purpose, a staff is being selected and the Commissioner for the Red Cross has undertaken to provide the necessary equipment. It is recommended that Carpentering, Engineering and Bootmaking shops be established. At these shops the work will be carried out for curative purposes only and will be in no sense of the word vocational. Any output will be regarded as a purely secondary consideration and no soldier employed therein other than the permanent instructors will be retained in England for the purpose of receiving workshop treatment. The treatment will be an invaluable adjunct to the Remedial Gymnastic treatment now used. The latter can only be given for a short period daily and during the rest of the day many soldiers, especially those with disabilities of the upper extremity, would benefit greatly by curative workshop treatment.
- (d). The establishment of an operating theatre with a waiting room and a sterilizing room. The work is now being carried out.

(4). Functional Nervous Cases to be collected in Monte Video Camp Hospital. A brief investigation of the methods of treatment of these cases has revealed the fact that the best adjunct to suggestive treatment is employment in Workshops, and when these are constructed the treatment can be carried out at Weymouth.

(5). The establishment of an Australian Orthopaedic Hospital of at least 500 beds for all Orthopaedic cases in Australian Auxiliary Hospitals and all cases in No. 2 Command Depot, except those who only require Remedial Gymnastic treatment. These latter cases could well be treated at Weymouth as is the case at present.

(6). The training of a Medical staff for an Orthopaedic Hospital to be commenced as soon as possible. It is recommended that the following staff be so trained, the duration of training to be 3 months:-

- (a). Officer in charge of Hospital to be trained in general methods of orthopaedic treatment and in administration of Orthopaedic Hospitals.
- (b). 2 Orthopaedic Surgeons, who should be chosen from Medical Officers with considerable surgical experience.
- (c). 2 Medical Officers to be trained in departmental orthopaedic treatment (Massage, Electrotherapy, Workshops, Remedial Gymnastics &c).
- (d). 1 Sister to be trained in plaster work and Theatre methods.
- (e). 1 Qualified Staff Sergeant Masseur or Masseuse, to be trained for the Electro-Therapeutic Department.
- (f). 1 man to be trained in plaster cast work and splint making.

From an inspection of Military Orthopaedic Hospital treatment it would appear that it is impossible to train any Surgeon to the highest standard of efficiency except by such a course of training in Orthopaedic Hospitals near the seat of War. American Surgeons of World-wide fame have done tours of duty in British Orthopaedic Hospitals.

I mention this in order to recommend that Medical Officers engaged in Military Orthopaedic treatment in Australia be given a course of training in British Military Orthopaedic Hospitals.

- (7). The training of a permanent staff for Orthopaedic work on Invalid Transports returning to Australia.

30 "A" class A.A.M.C. men are being specially selected for this purpose and will commence a thorough course of Training in Massage, Electrotherapy and possibly Remedial Gymnastics without delay. When trained these men will be used on Orthopaedic Transports, and it is requested that they be returned to England on completion of each tour of Orthopaedic Transport duty.

One Medical Officer with a sound knowledge of Orthopaedic departmental treatment should be placed on each Transport containing Orthopaedic cases.

If such Officers could be returned to England on completion of each voyage to Australia, I would recommend that they be given a 3 months course of training in an Orthopaedic Hospital and at Weymouth. If however, they are only detailed for temporary orthopaedic duty on the voyage to Australia they should receive at least 1 month's training before embarkation.

It is suggested that 12 permanent Sea Transport Sections be organised for this purpose, each section to contain

- 1 Medical Officer trained in departmental Orthopaedic treatment
- 1 Masseuse or S/Sgt. Masseur trained in Electrotherapy.
- 1 Masseuse or S/Sgt. Masseur.
- 1 S/Sgt. Remedial Gymnastic Instructor.

Additional Electrical Operators, Masseurs and Remedial Gymnastic Instructors will be trained at Weymouth on the following basis:-

- 1 Electrical Operator per 20 cases (not 50 as heretofore)
- 1 Masseur per 20 cases.
- 1 Remedial Gymnastic Instructor per 50 cases.

- (8). The removal of soldiers of B1b class from No. 3 Command Depot to Littlemoor Camp, Weymouth, and an increase of the staff of Medical Officers from 2 to 4.

This change is now being carried out and Convalescent hospital wards with accommodation for 200 patients are being fitted out ~~at Littlemoor for soldiers with unhealed leg wounds and for medical patients requiring convalescent hospital treatment.~~ ^{for} ~~at Littlemoor~~ ^{for} ~~patients requiring convalescent hospital treatment.~~

~~It is recommended that this type of accommodation be increased to approximately 400 beds, so that all cases of unhealed wounds may be placed in Convalescent Hospital Wards and treated as hospital patients.~~

- (9). The transfer to the A.A.M.C. of all Instructors in Remedial Gymnastic Training. This training is essentially of a Remedial ^{medical} nature, e.g. curative treatment for specific disabilities. It is carried out under medical supervision only and is no concern of Combatant Officers. It is entirely distinct from the Graduated Training carried out by the Combatant Staff in Command Depots.

The extent of the work is shown by the fact that from January to June 1918., 4,420 cases were given this treatment in Command Depots.

- (10). The following establishments to be approved for all Command Depots carrying on orthopaedic treatment:-

(a). Massage.

- 1 Warrant Officer Masseur - for each 200 patients under daily treatment.
 1 S/Sgt. Masseur) for each 100 patients under
 1 Sgt. Masseur) daily treatment.
 4 Private Masseurs)

(b). Electrotherapy.

- 1 Warrant Officer - Masseur & Electrical Operator for each 200 patients under daily treatment.
 1 S/Sgt. Masseur & Electrical Operator) for each 100
 1 Sergeant " " ") patients under
 4 Privates " " ") daily treatment.

(c). Curative Workshops.

- 1 Warrant Officer in Charge.
 1 S/Sgt. Mechanic as Instructor in Mechanical Department.
 1 S/Sgt. Bootmaker " " " Bootmaking "
 1 S/Sgt. Carpenter " " " Carpentering "

Until the Workshops have been thoroughly established it is recommended that the above N.C.Os. be 1 S/Sgt. and 3 Sgts instead of 1 W.O. and 3 S/Sgts.

(d). Remedial Gymnastic Instructors.

- 1 W.O. for each 400 patients under daily treatment.
 1 S/Sgt. " " 200 " " " "
 1 Sgt. " " 200 " " " "

It is recommended that the establishments for departmental Orthopaedic treatment on Invalid Transports be based on similar scale to the above.

All promotions should be to E.D.P. rank only.

Owing to the rapid evacuation to Australia of all disabled soldiers, a very large amount of treatment, including the bulk of the orthopaedic work, is being thrown upon the Medical service in Australia.

Approximately 6,000 Orthopaedic cases alone are returned to Australia each year and although I am unaware of the methods adopted in Australia, it is certain that the number of disabled soldiers in Australia under treatment, orthopaedic or otherwise, and the number and size of the institutions and medical organisation carrying out this treatment, must be large and increasing.

I venture to recommend for consideration the following:-

1. All cases under Orthopaedic treatment returned to Australia to be accompanied by complete clinical records; these records to consist of
 - (a). Clinical History of Disability.
 - (b). Remarks on Massage treatment including its duration and progress of the case.
 - (c). Remarks on Electrical treatment, including duration, electrical reaction and progress.
 - (d). Any remarks on Curative Workshop treatment. ~~This procedure~~
 This procedure is now being carried out, the records of Orthopaedic treatment while at Weymouth accompanying soldiers to Australia.
2. All soldiers under medical or surgical treatment on arrival in Australia to be examined by a Central Medical Board consisting of
 - (a). 1 Trained Orthopaedic Surgeon.
 - (b). 1 sound Physician with a knowledge of Functional Nervous cases.

- (c). Attached Specialists and Laboratory for any necessary clinical investigations.

It is very essential that before soldiers are distributed to their various States for treatment, a complete investigation of their disabilities should be carried out in this way by highly trained Specialists.

It is only by so doing that the highest standard of treatment and the best institution for that treatment can be prescribed for disabled soldiers.

It would probably be impracticable to have such highly trained Boards in each of the Australian States.

It is suggested that a Section of the "Australian Repatriation Department" be attached to the Board for investigation of matters connected with Vocational Training and that a preliminary inspection be made to ensure that all documents necessary for pension purposes, viz., A.F.B.178 (Medical History Sheet) A.F.B.179 (Medical Board Proceedings) A.F.B.103 (Field Casualty Return), Attestation Paper, Proceedings of Courts of Enquiry into Accidental Injuries, have been despatched to Australia, and are available for the Pension Board.

At this time it should be comparatively easy to decide whether the disability is "Attributable" or not ^{to War Service} that later any attempt in the direction of "Substitution of Origin" of disability by soldier may be detected.

Soldiers not under medical treatment might be Home Service personnel returned to Australia because they are in excess of requirements and a number of soldiers of B2b., C2 and C3 classes need not be examined by the Central Medical Board.

3. As in the Canadian System, all soldiers under treatment in Australia to be retained in the A.I.F. until treatment is finished and until the disability becomes finalized. This does not apply to cases of permanent and complete disablement of soldiers or to cases where the disability has reached a stage of finality in that it will not be improved by further treatment.
The Medical staff for carrying out this treatment to consist chiefly of whole-time A.I.F. Officers and other ranks.
4. The training of the portion of the staff concerned with Orthopaedic work to be on the lines described above as para 6. and physicians engaged in the treatment of Functional Nervous cases to have a personal experience of the effects of Active Service on soldiers and a knowledge of methods of treatment carried out in British Institutions for these cases.
5. The training in England of an Orthopaedic Unit for each State, each Unit to contain the personnel mentioned previously in para 6.
6. The establishment in Australia of a State factory for the manufacture of artificial limbs, limb makers being trained in England for this purpose. This method was adopted in Canada because
 - (a). the State factory is able to secure all up-to-date improvements by arrangement with various patentees and is in a position should any patentee refuse to lease his rights, to require him to do so and to submit the matter to arbitration,
 - (b). the limbs supplied will have to be kept in order and renewed for the next 40 years; and in order to preserve limbs they may require overhauling once a year for minor repairs and renewals,
 - (c). it is possible by this method to supply the best limbs available and to take advantage of all improvements as

they occur.

7. The establishment of Institutions for ~~Medical~~ ^{Mental} Cases. One for Shell Shock and Functional Nervous cases and one for the Insane.

The Shell Shock and Nervous cases to be placed, when they are fit for it, in suitable civilian occupation, and the Insane cases to be kept under observation for a time, and if prolonged treatment is necessary, or if no cure is likely to be effected, to be transferred to Hospitals for the Insane.

8. Tubercular cases to be given at least 6 months in Sanatoria before discharge from the Army.
9. The advisability or otherwise of establishing permanent Homes for the totally disabled. These cases consist of (i). Incurable Tubercular cases (ii). Paralytics & those unable to wait upon themselves. (iii). Mental cases.

The French policy consists in placing these cases under the care of relatives and friends, the pension being sufficient for the cost of maintenance.

10. The recognition of the fact that idleness in Convalescent Hospitals or similar Institutions is the worst possible thing for disabled soldiers. It leads to mental and physical slackness and increases self pity, and men who are occupied recover from their disabilities more quickly than those who are idle. In each such unit every patient except bed cases should be compulsorily employed from 9 a.m. to 12.30 p.m. and from 2 p.m. to 4 p.m. except while under treatment. The programme of work should include parades for physical training and walks, class room instruction, employment in a workshop or work in gardens or other duties.

11. Vocational Training.

(A). In Military Convalescent Hospitals. - Although it was found in Canada that it was both possible and desirable to carry on Vocational training to a certain extent while men were in Convalescent Military Hospitals, nevertheless the greater part of this work requires to be carried out after discharge from hospital. While men are in Convalescent Hospitals Vocational Training consists of

- (a). "Brush up" in general school subjects for men who would be employed on discharge;
(b). A preparatory course to the Main Course of Training which occurred after discharge.

Because In such hospitals however, workshops are necessary of their therapeutic value, but Vocational training is only an accessory matter.

(B). After discharge from Hospital Vocational training should be restricted to those who are unable to follow their previous occupation.

(C). The success of Vocational Training depends entirely upon the keenness of the disabled soldiers themselves and this is helped by the following:-

- (i). An appreciation of the fact that some men feel that as they have suffered for their Country they should not be expected to exert themselves for a livelihood because the Country owes them a livelihood. It should be realized that this is only partially true and that what the Country owes a disabled soldier is really an opportunity to obtain a livelihood. This should be brought instantly under the notice of disabled soldiers, who should be made to realize that their great objective is a return to productive citizenship.

- ii. Disabled soldiers should be informed that there will be an inevitable decline in public sympathy for the wounded as in all previous Wars, and that ^{the fate} ~~therefore~~ of the typical "old soldier" of other Wars will be theirs if they do not grasp the opportunity of Vocational ~~training~~ re-education which is now being given to them.
- (D). The chance of a vocation depends upon the following factors :-
- (a). The judgment of the Vocational Advisor.
 - (b). Economic questions touching the law of supply and demand.
 - (c). The disabled soldier's own wishes.
 - (d). Medical consideration.

In the British System Vocational Training is carried out by a civilian organisation - the Ministry of Pensions - the executive work being in the hands of Local Committees, on each of which is a Medical Referee. In this connection attention is directed to a series of reports on "The openings in Industry suitable for Disabled Soldiers and Sailors" prepared on behalf of the Ministry of ~~Labour~~ Labour and included in Appendix 9 of Lt. Col. Butler's Report.

The Ministry of Pensions is responsible for a large amount of the treatment of disabled soldiers, because these are discharged from the British Army when they are not likely to be fit again for Military duty.

Under the circumstances, after discharge from the Army, treatment and vocational training become entirely a voluntary matter, although pensioners who unreasonably refuse treatment lose by Royal Warrant a considerable part of their pensions and although attendance at Vocational Training Courses is encouraged by the provision of additional money for soldiers while they are being trained.

This system was rendered necessary in England because:-

- i. The Army had so much other work to do that it could not carry on this additional work.
- ii. It was practicable to discharge men early from hospital and from the Army because a National system of general practitioner treatment already existed for all men drawing under £160 a year and because the large number of hospitals and manufacturing centres scattered about England made it comparatively easy to arrange for necessary hospital treatment and vocational training near the homes of the disabled soldiers.

These conditions are inapplicable to Australia, and the great defect of this system is the lack of central and discipline over pensioners.

(E.) In Canada Vocational Training is carried out by the following organisations:-

- i. The Disabled Soldiers Training Board - consisting of a Vocational Officer, a Medical Man and a member of the Provincial Advisory Committee.
There is one such Board in each Province. Its duties are
 - (a) To consider all cases which from medical reports appear to require special training, and to report upon each case with suitable recommendations.
 - (b) To consider from time to time reports of progress of men under training, and to make recommendations as to change or discontinuance of training.
- ii. A body in each Province which has general advisory powers for the ^{coordination} ~~consideration~~ of local effort and for securing the co-operation of educational institutions.
- iii. A Vocational Officer in immediate charge of the work in each locality.

Vocational Training in private workshops was found to be unsatisfactory, because there was no guarantee that real

8.

instruction was afforded nor was the position of the disabled soldier always satisfactory in relation to unwounded workmen.

11. Pensions should be periodically reviewed until the disability reaches a stage at which it becomes finalized and will not improve.

In order to prevent men delaying their return to useful civilian occupations, the principle adopted both in England and Canada was, that the amount of a soldier's pension is decided solely upon the extent of the disability, and entirely independently of the amount of money he is able to earn.

W. H. ... Colonel.
A.D.M.S. A.I.F. Depots in U.K.

435

GR. AIF.

August 1918.

D.M.S. A.I.F.
 Administrative Headquarters,
 130 Horseferry Road, S.W.

REPORT NO. 2 ON THE TREATMENT AND AFTER CARE OF
 DISABLED SOLDIERS (CANADIAN).

INFORMATION RECEIVED FROM THE D.M.S. CANADIAN CONTINGENTS.

1. THE CANADIAN HOSPITAL ACCOMMODATION IN ENGLAND.

There is accommodation for 22,130 patients in Canadian Hospitals and Convalescent Hospitals in England.

There are 10 General Hospitals, one with 2,400 beds. One of these at Liverpool of 1100 beds is a Clearing Hospital for the return of Invalids to Canada.

In addition to these hospitals, two British Hospitals, the Kitchener War Hospital and Shornecliffe War Hospital are staffed by Canadians.

Four of the hospitals receive special cases, viz., Orthopaedic & Neurological Hospital, Buxton, Heart & Kidney Hospital Rushby Park, Pulmonary & Tuberculosis Hospital, Lenham. Rheumatic Hospital Buxton.

There are 7 Convalescent Military Hospitals, the largest at Epsom containing 4,000 beds, and one at Bexhill containing 2400 beds.

2. NUMBER OF CANADIAN PATIENTS IN HOSPITAL IN UNITED KINGDOM.

In British Hospitals	3000
In Canadian Hospitals	13500
Total.	<u>16500</u>

Thus 4/5ths of Canadian patients in England are in Canadian Hospitals.

These patients are directed into Canadian Hospitals as early as possible by the Inspection Branch of the D.M.S. Staff; but it has not been possible to arrange for Canadian patients in Convoys from France to go direct to Canadian Hospitals. These are however concentrated in the Southern, Western and Eastern Commands and then transferred to Canadian Hospitals as soon as possible.

3. CANADIAN CONVALESCENT MILITARY HOSPITALS AND CANADIAN COMMAND DEPOTS.

I have no information about these units except that cases received at Convalescent Hospitals are those who are likely to be fit for General Service within a month or two, and that the treatment carried out is similar to that carried out in Australian Command Depots.

4. EVACUATIONS TO CANADA.

(A). Direct from Hospital in England by Hospital Ship to Hospital in Canada.

The D.M.S. is responsible for the evacuation of these patients and they are next all sent through the Clearing Hospital at Liverpool, except cases of Tuberculosis, which go direct from Lenham Hospital and insane soldiers who go direct from Warrington War Hospital. Patients who will not be fit for General Service within 6 months are thus sent to Canada.

EVACUATIONS TO CANADA (Cont'd).

(B). Excess Home Service Soldiers.

Excess Home Service soldiers are returned to Canada entirely independently of the Medical Service, by Combatant Branches.

The Canadian Contingents use the British Classification. Soldiers of "B.1." and "B.2" class are retained for duty in England or France and the Man-Power Board is responsible for their distribution to these duties. Soldiers of "B.3" class if in excess of these requirements are sent to Canada largely on the recommendation of the Man-Power Board. The Unit responsible for the evacuation of these soldiers is the Canadian Discharge Depot at Buxton.

5. THE MEDICAL ORGANISATION IN CANADA.

No soldier is discharged from the care of the D.G.M.S. until the disability has reached a stage of finality. All medical treatment is given under the D.G.M.S. by C.A.M.C. Officers, the majority of whom have served with the Canadian Expeditionary Force.

It was stated that the reasons for retaining patients under the control of the D.G.M.S. until treatment had been finalised were as follows:-

- (1). That discipline cannot be maintained by Civilian organisation and that treatment therefore suffered.
- (2). That the men disliked and resented to be looked after by personnel who had never been out of Canada.
- (3). That the staff of selected C.E.F. Officers who had been trained specially in the treatment of War disabilities were more efficient than civilian medical officers, who had no experience of general service or of the methods adopted in England in connection with War injuries.

REPORT ON METHODS OF ORGANISATION ETC. OF GRANVILLE CANADIAN SPECIAL HOSPITAL, BUXTON, WHICH RECEIVES ORTHOPAEDIC, AMPUTATION AND FUNCTIONAL NERVES CASES.

This Hospital was visited on 31.7.18.

GENERAL DESCRIPTION:

Two large Hotels - the Palace Hotel, and the Hygro - were taken over and formed into the Hospital, and provide Accommodation of 1440 beds.

The approximate numbers of cases in hospital at the date of inspection were as follows:-

(a). Functional Nervous Cases.

Previously generally about 300 - now 100.

(b). Amputation Cases awaiting treatment of stump which are fitted with a peg leg before being sent to Canada.

Previously generally 300 - now 70.

(c). Orthopaedic Cases.

Approximately 1000.

GENERAL DESCRIPTION: (Cont'd)

The Hydro of 650 beds is divided into the following Sections:-

- Section A. For clean surgical cases.
Section B. For suppurative cases.
Section C. Functional cases and more acute medical cases.

Cases of Shellshock are not concentrated together in wards.

At the Hydro all treatment is carried out.

The Palace of 700 beds receiving more convalescent type of cases is divided as follows:-

- Section A. - Ground Floor. - For Ambulatory Amputation cases.
Section B. - First Floor. - For Officers.
Section C. - 2nd and 3rd Floors. - For soldiers of a more convalescent type who are able to get about and attend for treatment at the Hydro.

2. ESTABLISHMENT.

38 Officers and 106 Nurses are employed, the establishment being as per attached Table (Appendix 1).

3. EVACUATION FROM HOSPITAL.

40% of soldiers discharged go to some form of Military duty. 60% are evacuated to Canada.

All soldiers requiring more than 6 months treatment, if fit to travel, are sent to Canada, with the following exceptions:-

- (i). Nerve sutures who may wait for many months until ^{the}supuration stops and nerves are sutured.
- (ii). Tendon transplantations who similarly await operation often for many months.
- (iii). Shellshock and Nervous cases who are retained until they can be sent back to Canada in a comparatively good condition. These arrive from British Hospitals in a very bad state and ~~they~~ returned at once to Canada would be entirely unfit for return to ^{the}Civilian occupations. It was considered that the sooner vigorous treatment was commenced by Specialists the better the result and that therefore it was wiser to retain these soldiers in England until their condition had been improved.
- (iv). At the time of my visit 270 were being retained in hospital owing to lack of hospital ships. It appeared to me that a considerable number of patients could have been evacuated to Canada if the principle that every soldier requiring treatment for over 6 months excluding those mentioned in paras (i) (ii) and (iii) had been rigorously adhered to.
- (v). Departmental Treatment--(Massage, Electricity, Remedial Gymnastics and Arts and Crafts (Workshops)--. These Departments are under the control of two Medical Officers, the senior of whom is a trained Orthopaedic Surgeon.

Massage and Electrical Department.

25 Nurses who have qualified as Masseuses and who have been trained in Electrical treatment are employed in this Department; 22 in the Massage Section and 3 in the Electrical Section.

5 C.A.M.C. Other Ranks who have been similarly trained are also employed as Masseurs.

The average number of patients under treatment each day amounts to 360.

Remedial Gymnastic Department.

The staff consists of 4 Sergeants and 2 Corporals all of whom have received instruction in Remedial Gymnastic work.
Average number under treatment each day is 238.

Arts & Crafts Department (Workshops).

There are 10 workshops in this Department with a total capacity of 146.

The number of soldiers receiving treatment in this Department on the day of my visit was 143.

Attached is a statement showing nature of the workshops and daily record of patients receiving treatment on the 31st July 1918 (Appendix 2)

The staff of the Arts & Crafts Department consists of 27 N.C.Os. and men, all of whom are other than "A" class soldiers, are skilled tradesmen, and specially selected from the patients passing through the hospital, because they have been found to have the power to make other men work, the great difficulty in selecting instructors being that many skilled tradesmen are too anxious to do the work themselves.

A list of this personnel, showing the nature of their employment is attached as Appendix 3.

Soldiers are prescribed Workshop treatment by the Examining Board of the Hospital and no soldier is allowed to work in the Workshops unless the treatment has been definitely prescribed in this manner. The number of vacancies in the Department is notified daily to the Examining Board, who allot accordingly. The Board may or may not prescribe the nature of the Workshop to which a patient is to be allotted. A certain amount is left to the Medical Officer i/c of the Workshop. No effort whatsoever is made to render this treatment vocational, and no attention is paid to previous occupation.

I questioned many soldiers and did not find one case of a soldier employed on his previous occupation (Possibly one reason for this is that the big percentage of Canadian soldiers are farmers). I saw many patients doing skilled work, such as carpentering or turning, but ~~had~~ ^{but wife} had only been doing this work for a few days or a week or two, ~~and~~ had never done it in their lives before. They were using their disabled members and ~~who~~ were receiving marked neurotic benefit from the work they were engaged on. The work carried out by them was of course done under close and constant supervision of the instructors. No attempt whatsoever is made to run the Workshops on commercial lines. Any profit made are regarded as purely accidental. No Civilian and no Red Cross worker is engaged in any way with the Workshops.

During the month of June, the amount of work done which was to be paid for amounted to £319.

The Department appeared to me to be a very efficient one and the keynote of the efficiency was the high type of Instructor employed.

50% of the patients employed in the Workshops were Orthopaedic, and 50% were Functional Nervous cases.

The principle adopted with regard to these nervous cases was first to employ these men in shops which did not require much concentration and then to employ them on work requiring steadily increasing amount of concentration.

The effect of this employment on nervous cases is extremely good and it appeared to me to give better results than from any other form of treatment used for these cases.

All patients employed in this Department are examined at regular intervals by the Examining Medical Board of the Hospital when continuation or alteration of Workshop treatment is prescribed.

Nature of Treatment in Other Departments.(a). Remedial Gymnastics.

Approximately 50% of the Remedial Gymnastic classes have been classified as fit for games, - Croquet, Tennis and Indoor Base Ball - but this form of treatment seemed to have, to a certain extent, fallen into abeyance. Games can only be used for a comparatively slight type of Orthopaedic cases.

GENERAL DESCRIPTION (Cont'd).(b). Flat Foot Treatment.

The method of treatment which was stated to give good results was as follows:-

Two boards, approximately 6 yards long and 1 foot broad, raised longwise against each other, forming an angle of 45° with the horizontal plane. Patients walk along these boards ~~xxxxxxxx~~ and the resultant marked inversion of the feet strains the peronei and ligaments of the outer side of the foot and relaxes the structures of the inner side of the ankle.

This apparatus was also used to stretch the Tendo-Achillis, the patient walking sideways along one of the boards with the toes towards the ridge between them.

A form of apparatus new to me were "Tibial Foot-Bases" by which the lateral movements of the Plantar Extension of the foot were done against a strong resistance.

The Officer i/c of the Department pointed out the defects of the position of "Attention" in which the heels are together and the toes widely separated. In this position all strain is on the arch of the foot. He strongly recommended that the position of "Attention" should be with the feet parallel to each other and separated by a few inches and he considered that if this position of "Attention" were adopted the occurrence of Flat Feet among soldiers would be much diminished.

(c). Electrical Department.

The "Bristow's Coils" were not used. A combined Galvanic and Faradic machine manufactured by Alfred Dean was used.

The forms under which Gymnastic and Workshops are ordered and the use as a medical record of treatment, are attached as Appendix 4.

4. FUNCTIONAL NERVOUS CASES.

It was considered very necessary to place these under the care of a Nerve Specialist prior to evacuating them to Canada, as the earlier they are placed under treatment the sooner do they react to treatment. I could see no reason however, for placing them in the same hospital as Orthopaedic cases, except that similar forms of treatment as for Orthopaedic cases, viz., Workshop, Gymnastic and Electrical are used for these patients.

5. TRAINING.Orthopaedic Surgeon.

It was considered that a Surgeon with previous Orthopaedic knowledge and who had served for 3 months in a Military Orthopaedic Hospital would be satisfactory as the Senior Surgeon.

Departmental Orthopaedic Surgeon.

Similarly it was considered advisable to have as Departmental Orthopaedic Surgeon, a surgeon with previous Orthopaedic knowledge and with 3 months experience of these methods as used in the Military Orthopaedic Hospitals. A man of sound commonsense is required for such a Department and a specialist obsessed with the Therapeutic powers of his methods is useless.

Masseuse.

Nursing Sisters were used as Masseuses who had received a 3 months course of instruction in massage and electricity under a Sister who was a previously qualified masseuse and Swedish Drill Instructress.

The course consisted of a series of lectures by Medical Officers as per attached Appendix 5.

An examination is held at the termination of the course and Sisters who pass are given a diploma which is recognised in Canada, so that they become qualified masseuses.

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REMEDIAL GYMNASIUM. TRAINING (Cont'd).

A few soldiers have attended this course of instruction and have passed well.

The lectures given by the Instructors in Massage and Remedial Treatment are attached as Appendix 6.

Remedial Gymnastic Instructors.

Trained Physical Training Instructors were selected and put through an 8 week's course of Training, a program of lectures being described in Appendix 7. They carry out practical work in the Gymnasium and at the end of 2 weeks if likely to be inefficient are returned to their units.

6. EXAMINING MEDICAL BOARD.

This consists of a Senior Physician, a Senior Surgeon, 1 Neurologist, 1 Orthopaedic Surgeon and 1 General Surgeon.

All of them are not always present but 2 or 3 are always on duty from 9.30 a.m. to 12 noon daily.

All patients arriving at the hospital are seen within 48 hours of arrival. They come before the Board with their Medical Officer's recommendations re treatment, but the Board prescribes the treatment which is carried out. This was done in order to remedy the defects which resulted from the constantly changing Medical Staff.

7. WORK DONE.

The following Table shows the number of Admissions and Discharges of Orthopaedic Cases and Total number of Admissions and Discharges from January 1st to July 1st 1918:-

Orthopaedic Cases.

Admissions	1909	approx.
Discharges	1644	"

Total Admissions & Discharges.

Admissions	2625
Discharges	2508.

8. KHAKI COLLEGE.

A Branch of the Khaki College consisting of 1 Major, 2 Officer Secretaries, 1 Sergeant Instructor in Mechanical Drawing and 1 Private instructor in Typewriting and Shorthand were attached to the hospital and a large number of men were instructed daily.

9. CANADIAN DISCHARGE DEPOT, BUXTON.

This was visited on 31.7.18 also.

This Depot evacuates to Canada all soldiers other than those who are sent as hospital patients. It is entirely Combatant administration. Its accommodation varies from 1000 to 3000. The average strength during 1917 was 1096; the highest being 1361 and the lowest 552.

From January to June 11,330 soldiers were evacuated to Canada by this Depot.

The type of soldier evacuated is shown as follows:-

Of 700 in one ship 576 were soldiers of "B.3" class, i.e. Home Service personnel in excess of requirements, 209 of which had been weeded out by the Man-Power Board; 61 were being returned to Canada for discharge as permanently unfit all services; 28 were going back on furlough and 30 were being sent back for miscellaneous reasons.

No soldiers are sent direct to the Discharge Depot

CANADIAN DISCHARGE DEPOT, BUXTON (Cont'd).

from Command Depots or from hospitals. All are received from Reserve Training Units, which are the Regimental Depots for Records purposes of Canadian soldiers in England.

This system of evacuating all such units through the Reserve Training Units is more cumbersome and not so efficient as the Australian method.

The A.D.M.S. of the District informed me that he had two hospital ships accommodating 773 and 643 patients respectively each.

From January to June approximately 7,000 Canadian patients had been transferred to Canada as hospital patients in hospital ships independently of the Canadian Discharge Depot.

At the Hospital in Liverpool no electrical treatment is given, although patients may wait there 5 weeks or more prior to evacuation to Canada.

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REPORT NO. 5 ON THE TREATMENT, AFTER CARE AND DISCHARGE
OF DISABLED SOLDIERS (BRITISH) AS REVEALED BY INSPECTION
OF VARIOUS UNITS UNDER THE MINISTRY OF PENSIONS ON
I.S.B.

INFORMATION RECEIVED FROM MAJOR MITCHELL RE VOCATIONAL TRAINING

Vocational Training is given in England in hospital for ~~the~~ patients whom it is known must be discharged, viz., limbless patients at Rehampton, Brighton and Cardiff, facial cases at Sidcup, and Shellshock cases at Belfast.

An attempt is being made to guarantee Vocational Training with curative workshop treatment in some Military Hospitals for men whom it is known must be discharged.

If these patients after discharge from hospital continue training in a Training Centre approved by the Ministry of Pensions they receive 5/- per week for the training they previously carried out in hospital, which they get on completion of the course of training.

Apart from the above mentioned cases, all Vocational Training in England is carried out after discharge from hospitals.

Major Mitchell considers that if a patient is fit to do 2 hours Vocational Training he should be discharged to attend as an out-patient, but no ruling has been given to this ~~fact~~ effect to C.O.s. Hospitals, who largely use their own discretion. (The Workshops at Beckett's Park Hospital, Leeds, were considered by him to be the biggest and perhaps the best Workshops).

The Local Committees are responsible for arranging Vocational Training, and the Medical Referee tells very little in this connection, he simply advises if the Local Committee refer cases to him.

The Polytechnic, Regent Street, is a type of approved Training Institute at which approximately 200 men are under Vocational Training.

During the week ending 26th July 1918., 6566 soldiers were under training by the Ministry of Pensions and the total number trained up to that period amounted to 15,475.

The men discharged from the Army in England are disposed of approximately as follows:-

- 50% return to old occupations.
- 25% do not need training.
- 5% are too disabled to be trained.
- 20% require Vocational Training.

INFORMATION OBTAINED FROM DR. GOSSAGE, THE STAFF MEDICAL ASSESSOR
OF THE MEDICAL BRANCH OF THE MINISTRY OF PENSIONS.

This Branch does all the work which previous to this War was done by the Chelsea Pensions Board.

Approximately 70% of soldiers are discharged from hospitals, and 30% by National Service Medical Boards.

Soldiers are not seen personally by the Medical Branch of the Ministry of Pensions. The function of this Branch is to make all allotments of Pensions on a uniform basis, as it is considered that if assessment of pensions were not centralised in this way, great variations would occur in the amount of pensions allotted and many complaints would therefore be received from pensioners.

THE WORK DONE.

2,500 cases per day are placed before the Ministry of Pensions for assessment or re-assessment. Of these 1000 to 1500

WORK DONE (Cont'd).

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are renewals. 1000 per day only are referred to the Medical Section. The Staff consists of 20 Medical Officers, all whole-time Officers, with an Eye Specialist attached.

The Staff is organised as follows:-

The work of the Pension Branch is divided into 4 Divisions, each attending to certain Regiments. Each Division is again sub-divided into 5 Groups; each of these 20 Groups has its own Medical Officer. Medical Officers are moved between Groups by the Senior Medical Assessor according to local needs.

PROCEDURE:

Only soldiers who have suffered an impairment of health since enlisting (i.e. where the disability is attributable to or aggravated by service) are considered by the Pensions Branch, with the following exceptions:-

- (a). Grade 4 soldiers who, although they may not have suffered any impairment while in the service, are nevertheless unfit for any Military service and for Civilian occupation employment, and who therefore are by Royal Warrant entitled to something (if due presumable).
- (b). A soldier invalided for a "Non-Attributable" disability, who subsequent to his discharge develops some disease, e.g. Tuberculosis, which is probably attributable to War service.

As already explained only 50% of cases are referred to the Medical Branch. The cases so referred are as follows:-

Class W. Grade 3 men in excess of Home Service requirements discharged from the Army but fit for work, who have not been pensioned but who claim a pension.

Loss of Eye, Mental Disabilities, Cancer, Injuries to Head and Jaw, Drop Wrist and Foot.

Two or more disabilities requiring separate assessment.
All cases where a disability originates in England.
All doubtful cases.

The remaining 50% of cases are allotted by the Award Department without reference to the Medical Branch.

DOCUMENTS RECEIVED.

A.F.B.178 and A.F.B.179.

A.F.B.103.

The Field Casualty Record, which is absolutely essential if the history of the disability while in the B.E.F. is to be understood.

A.F.B.501 - Attestation Form. A statement of service with the Colours, which also gives reason for discharge, e.g. K.R. Para. 398 (16).

TABLE SHOWING PERCENTAGES OF DISABILITIES WHICH WAS PREPARED UPON THE SCALE LAID DOWN IN R.W. (Appendix 7).

The form attached is Appendix 7 as filled in.

~~XXXXXXXXXXXXXXXXXXXXXXXXXXXX~~

This form states whether the disability is attributable to or aggravated by service, whether it is permanent or stationary, and no pension is finalized until the disability is stationary. Practically only amputation cases are finalised, as in the majority of disabilities, it is better to wait a year or two until all improvement ceased.

The amount of pension depends solely upon the severity of the disability.

Any money which the pensioner may be able to earn, no matter what this may be, does not affect the pension rate.

The scale of pensions is liberal. For the loss of one eye a 50% pension is given. Other pensions are based upon this, except that the disability is then considered at 40%.

INFORMATION RECEIVED FROM DR. DICK, PRESIDENT OF THE LONDON DISTRICT ASSESSMENT AND RE-ASSESSMENT BOARD.

The functions of this Board are carried out in other Districts by the National Service Board, but owing to the amount of work in the London District, a special organisation Board is used for the purpose and is under the administration of the Ministry of Pensions.

This Board may be used by the Senior Medical Assessor at the Ministry of Pensions to investigate any special cases among pensioners, and there is an interchange of Officers between the members of this Board and the members of "M" Branch of the Ministry of Pensions.

The staff consists of 12 members - 2 Ophthalmic Surgeons and 2 Aural Surgeons, one of the Doctors is a Bacteriologist. The hours of the Board are from 10 to 12.30 and from 2 to 4.30.

For each session a doctor receives £1-1-0.

The members are not permanently employed, most are full-time however, and some are part time and attend 2, 3 or 4 days per week.

3 members constitute a Board. There are 4 Boards, each of which sees 20 cases per day, the total number dealt with being 80 per day or 12,000 during six months.

PROCEDURE.

When a pension is about to expire, papers are sent from the Ministry of Pensions to the Board, who file them and call up the pensioner when re-assessment becomes due. Absentees are rare, and when they occur the cases are deferred and an explanation obtained. After assessing the amount of the disability, the papers are returned to the Ministry of Pensions, who files them if finalised, but if the case is not finalised, returns them to the Board.

DOCUMENTS.

A.F.B.178., A.F.B.179 and A.F.B.268 containing a description of the pensioner, and all previous Board papers completed while the soldier has been a pensioner are essential.

TREATMENT.

Any treatment necessary for pensioners is recommended to the Local Committee by the Board, who arrange for this treatment in consultation with the Medical Referees.

In the case of surgical boots and appliances, this is not done as they are supplied direct by the Board.

The Board may require to write for X-Ray reports or get Specialists to examine cases.

Vocational Training is not dealt with in any way by the Re-Assessment Board, but is left to the Local Committees, who have local knowledge and who arrange for Vocational Training, subject to the approval of the Ministry of Pensions.

Exaggeration of disability was stated to practically be universal at this Board.

In many cases documentary evidence of the origin of the disability is not available. Thus I saw a discharged soldier with Sciatica who had been in the Army for 2 months, and who stated that the Sciatica had originated while in the Army. He had been discharged with a gratuity, therefore it is likely that the previous Board had not considered the disability to be attributable to service, nevertheless no evidence whatsoever was available to rebut the statement of the soldier with regard to the origin of the disability. In this case the only course open to the Board is to make it clear in their report that

435 there is no documentary evidence but that the soldier alleges the disability to have originated in Military service.

APPEAL TRIBUNAL.

This consists of a Judge, a Representative of the Army, a Representative of the Navy, and a Representative of the Medical Assessor and is held at 22 Abingdon Street, Westminster.

The pensioners who appeal against their assessment ~~are heard~~ ^{heard} at such a Court.

The following papers are attached as Appendices:-

- Appendix 8. - Report (Confidential) on the Ministry of Pensions for the period 20th July to 26th July 1918.
- " 9 - Instructions on the Training of Disabled men (for Official use of the Ministry of Pensions).
- " 10. - Maximum of all Local ~~Administrative~~ Technicalities.
- " 11 - Advisory Committees.
- " 12 - Supplementary Instructions for the Training of Disabled men.
- " 13 - Instructions re Appointment of a Deputy during the temporary absence of a Medical Referee.
- " 14. - Duties and Terms of Appointments of Medical Referees.
- " 15. - List of Course of Training in operation or sanctioned throughout the United Kingdom.
- " 16. - Report of Medical Referee on the present condition and earning capacity of discharged soldier (Alternative Pensions).
- " 17. - Form of Medical Report used by Assessment Medical Board and National Service Medical Boards in connection with assessments.
- " 18. - Form of Medical Certificate.
- " 19. - Medical Referee Claim Forms.

INFORMATION RECEIVED AT A VISIT TO THE SPECIAL MEDICAL BOARD, LANCASTER GATE, LONDON.

This Board is responsible for the preliminary boarding of all ~~Functional~~ Functional Nervous cases awaiting discharge from the British Army.

These cases are collected in a centre while in the Army. One such centre exists in each of 16 Districts in the United Kingdom.

The Board consists of 33 Medical men, 24 of whom are on duty in London and 8 of whom visit the Centres in the Districts just referred to.

Functional Nerve cases awaiting discharge are seen approximately once in three weeks by Travelling members of the Board. They attend the Board with A.F.B.179 completed by the Military Authorities.

In the London District all re-assessment of these Functional Nerve cases is done by the Special Medical Board, but outside the London District re-assessments of these cases are done by the ordinary National Service Boards.

This does not seem to me to be a logical procedure, because if it is good for certain cases, it is good for all.

TYPE OF CASES SEEN BY THE BOARD.

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Functional Nervous Cases; Cases of Organic Disease with Functional Nerve Trouble added; Cases of D.A.H., many of which are classed as Neuroses.

QUALIFICATIONS OF STAFF.

The Staff require sound neurological knowledge to be able to detect organic disease, but chiefly require good general knowledge of medicine and sound commonsense. They must know how to handle men. It is necessary for them to have some knowledge of hearts, so that they may correctly judge the effects of Cardiac Murmurs, e.g. - It is found that young inexperienced Officers tend to put cases of Cardiac Murmur to bed, whereas the correct procedure is to send them to work, and give them not more than 20% pension.

The London Board is divided into six separate Boards. 2 members sit on each.

The proceedings of the Board are entered up on attached cards (Appendix 20).

THE PRINCIPLE UNDERLYING ASSESSMENT FOR PENSIONS.

In the early days of the War it was the custom to grant gratuities for all Functional cases, in accordance with the procedure adopted in regard to Railway injuries, but it was found that the soldiers in a few months, had spent their gratuities and came before the Board again as bad as ever. The principle therefore has now been adopted to give these cases a high pension, say 100%, for short periods (not more than 3 months), then re-assess them, reducing the pension and re-assessed at short intervals until the pension is finalised.

The reason for the origin of this Special Medical Board was stated to be that Functional cases of Nervous disease were lost in Military Hospitals for many months or years and were discharged useless for Civilian occupation owing to lack of knowledge on the part of the ordinary Medical Officer.

Early discharge from Military Hospital is essential. The sooner these patients come under expert treatment, the better, and these objects were obtained by the formation of the Special Medical Board.

TREATMENT:

A Special Medical Board is responsible for the advising with regard to the treatment of the cases which come under their notice.

In London expert neurological treatment by suggestion, psycho analysis, gymnastics and electricity at an out-patient clinic is attached to Board.

The results of this treatment and the work done by the Special Medical Board are attached as Appendix 21.

Institutional Treatment was not considered to be as good as the clinic by the Doctors of the Board.

In Districts outside London similar out-patient clinics do not exist..

HOUSES OF RECOVERY FOR FUNCTIONAL NERVOUS CASES.

The success of these depends not only upon the efficiency of the Staff.

6 Army Hospitals and 3 Houses under the administration of the Ministry of Pensions exist for these cases.

Magull Hospital, Liverpool, under Major Rose was stated a type of what such a place should be.

There is a great difference of opinion as to the wisdom of segregating Functional Nervous cases, but the opinion of those men qualified to judge is that special hospitals and Houses are absolutely necessary for Functional Nerve cases.

HOME OF RECOVERY - GOLDNER'S GREEN.

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This was visited on 2nd August 1918., and is in charge of Dr. Fearnside.

Dr. Fearnside supplied the following information with regard to Functional Nerve cases:-

1. He considers that Army Neurological Hospitals for Functional Nerve cases are absolutely essential.

2. That in an ordinary Military Hospital, especially in Auxiliary and V.A.D. Hospitals, these cases do badly, remain for months becoming progressively worse and "hospitalised".

3. The success of these Hospitals depends entirely upon the Staff.

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The Medical Officers must have a good knowledge of neurology but must also be men of sound commonsense, with a knowledge of how to handle men.

4. It is necessary to differentiate between the following types of cases, so that they may be correctly treated and so that the rate of cure may be kept at the highest.

(a). Psychoses (Mental Disabilities).

Any cases of Psychosis who cannot be trusted by a Medical Officer, e.g. requires to be kept under lock and key, cannot be treated in a Home of this type.

All Psychoses tend to have a slow rate of cure and therefore delay the rate of recovery of other patients. They do not do well on institutional treatment.

(b). Neuroses

Neuroses must be separated into 2 classes:-

(i). Those with hysterical manifestations. These may do well under forced majeure, and the obsession may be bullied out of them by vigorous treatment.

(ii). Psychic without local hysterical manifestations. In these unlike say case of Aphonia, where the disability has become localised, there is general trouble. Forced majeure in these is useless and harmful as it "drives them into their shell". Such cases must be ~~driven~~ driven. They must be made to understand that the Medical Officer understands their case better than anybody else; that he has the power not to cure them but to show them how to cure themselves. The Medical Officer gets their confidence and trust often by referring to something with a local touch. The patient is encouraged to tell everything and thus works with the Medical Officer. The Medical Officer explains that in most human beings there are times when they become neurotic. A Neurotic is latent in all. After great strain or fatigue a normal man may speak with a slight impediment, the voice may become husky due to this Neurotic basis. The patient is therefore told that his case is nothing out of the ordinary and that it is useless for him to try and "pull himself together" as he has always been told to do by his friend, and very often his medical advisor. The more he decides the more strain he throws upon himself and the worse he becomes. - Thus if a normal person holds out his hand without strain it is steady, whereas if he strains hard it begins to tremble. The patient must be encouraged to tell of his troubles and to believe that the Medical Officer can show him how to become well.

- (c). Neurosis with Organic basis., e.g. Syphilitic Nerve Lesions, C.S.M. etc.
In these the rate of cure is slow and it delays the rate of cure of all in the Institution.

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Treatment:

The patient is first put to bed in a single ward.

The chief form of treatment is Suggestion.

Before going to his ward and before seeing any other patient, the soldier is seen by the Medical Officer and dealt with on the lines already described. This consultation may take from one to one and a half hours and continues until the patient knows that the Medical Officer is his friend and trusts him. He then goes to a single ward and ~~mixes~~ mixes with similar patients, who are like him but who have recovered to a certain extent. In the next stage he mixes with patients who have improved to a still greater extent. Thus an "Atmosphere of Cure" or an "Esprit de Corps" to try to get well is obtained. This action is of course entirely of a nature of suggestion. It will thus be seen how the case with a slow rate of cure, retards the rate of cure of all others.

There is no compulsion with regard to treatment, in that a patient can discharge himself when he likes in refusing treatment.

There is no Military discipline in the ordinary sense of the word, but there seems to be an extremely good feeling between the patients and the Medical Officer.

Only 5% refuse treatment, i.e. do not want to get well.

30% at first however have no confidence and resent treatment, but 25% are overcome by the "Atmosphere" and try to get well.

The Medical Officer tries to remove all local worries, e.g. by arranging for the care of children etc.

The Form of Treatment by Hypnotism.

This is not used.

As soon as a patient gets away from the Medical Officer and uses this treatment he becomes as bad as ever.

It appears to me that a certain number of cases ^{NOTIFIED TO ME AS} cured ~~would~~ would be likely to break down again when they were removed from the "Atmosphere" of the Home which was

ELECTRICAL, MASSAGE, GYMNASTIC AND WORKSHOP TREATMENT.

100. On the day of my visit the accommodation of the Home was

The principle is that when fit all patients shall get two forms of treatment.

60 were receiving Electrical Treatment, 25 in Workshops and 15 on gardening.

The workshops consisted of carpentering, Bat making and Basket making and machinery.

~~the staff consists of 2 Medical Officers~~

Work Done.

Men on Workshop treatment receive all profits according to the work they do and are given extra privileges of passes from 1-7 p.m. Saturdays and all day Sundays.

It is necessary to concentrate on soldiers who are lagging behind in their rate of cure, that very little leave except under very special circumstances is given.

Staff:

The staff consists of 2 Medical Officers.

One Sister is responsible for Electrical treatment and 4 skilled tradesmen are responsible for Workshop treatment. There is a Swedish Drill Instructor.

The staff is being specially selected and trained in the

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above methods by the Senior Medical Officer, who gives frequent lectures.

The rate of cure is slow where there are Organic lesions or where there is drugging.

Work Done.

Admissions and Discharges = 30.35 per month
Average Stay in Military Hospital = 10 months
In this Home = 40 days.

Results.

Greater than the cure, is that the patient has not only been discharged from the Home but has been placed in employment, which is approved by the Medical Officer and the Employer informed of the nature of the case.

The object is making neurotics into π National assets. It must be remembered that many of these were defective before the War and that in many cases, what is really done, is that these patients are raised to a higher level than their pre-War standard.

An index of the moral control is given by the fact that no cases of drunkenness or of soldiers becoming worse for liquor have occurred during 1918.

Relapses.

60 to 70% of discharges are known to be still carrying on at their work.

A Command Depot, under Military control, such as Weymouth, is stated to be bad for these cases because the Military "atmosphere" which existed ere the disability arose will tend to cause recurrence of the previous trouble.

Psychology of Shellshock.

All soldiers are of two classes.

- (i). Either individualists who do not re-act to crowds and to whom Military "atmosphere" is a constant source of irritation or
- (ii). Collectivists who re-act to crowds and do their best work in a crowd and to whom a Battalion is not a source of irritation.

Cold, Debility etc., tend to cause the irritation of environment to become more marked.

If a shell burst near a soldier and he is in this condition, he begins to think "Is Life worth Living?" and all Shellshock prior to breaking down reach the conclusion that it is not, and then when the shell bursts near them they break down absolutely.

In the case of an ordinary normal nervous system a soldier may be blown up by a shell and made unconscious and be quite normal again within a few days.

It was stated that cases of hysteria should be dealt with in France and returned to their units.

RECOMMENDED PROGRAMME.

Establish Military Hospitals for Functional Nervous cases and retain these men in the Army until they can be established in Civilian occupations.

The advantages of keeping them in the Army are

- (a). Can estimate condition which existed prior to the War while a soldier is in the Army and so can prevent substitution of origin of π disability.
This evidence is never got after discharge.
- (b). Civilians can do what they like about treatment. If they refuse treatment it is a source of great expense to the State.

435

(c). It is easier to get the right spirit into a Military Unit properly handled, than into a Civilian body.

Colonel.
A.D.M.S. A.I.F. Depots in U.K.



Headquarters. A.I.F.
Bhurtpore Barracks.
Tidworth.
2nd September 1918.

D.M.S.
Administrative Headquarters.
Australian Imperial Force.
130 Horseferry Road.
London S.W.1.

The following information is forwarded in furtherance of my report of the 19th ult as it is thought that it may possibly be of use:-

- 1. Estimated requirements for an orthopedic hospital of 1000 beds.
 - (a) Staff.
 - i Administrative. Officer i/c., registrar, quartermaster, = 3
 - ii Surgical. Two divisions of 500 beds each.

In each division Senior Surgeon 1. (In each division 1 surgical team consisting of the Senior Surgeon and two Assistant Surgeons.)

Senior Assistant Surgeon. 1.
Junior Assistant Surgeon. 3.

5 Total both divisions = 10.

iii Physiotherapy (electro-therapy, massage, remedial gymnastics, curative workshops, hydrotherapy.)

Senior Medical Officer. 1.
Junior Medical Officer. 1.

iv Radiologist.

2 2.
1.

16

v A Neurologist with a knowledge of psychotherapy to be also available.

(b) Structural arrangements etc.

Two operating theatres one aseptic, one septic with ample accommodation for anaesthesia, sterilization, dressing rooms for surgeons and nurses.

Associated with the Aseptic theatre and under the same roof if possible:-

X-ray room

Plastering Room.) Plaster department for

Modelling Room.) i. fixation of limbs in plaster - This is done by a surgeon.

- ii. taking of plaster casts as records.
- iii. making of casts for shaping splints.
- iv. making of plaster splints.

(This may be done by anyone who has been specially trained in the work).

Museum with records of models, drawings, paintings etc.

Massage Department,

with 20 beds, tables, stools, cabinets, sinks, tubs, hot and cold water supply, and consulting room for Medical Officer in Charge and with 20 Masseuses treating up to 400 patients daily.



b. Structural arrangements etc.

Electro-therapy Department.

Same size as Massage Department and with same number of beds and stools with consulting room for Medical Officer and with 20 Masseuses treating up to 400 patients daily.

Gymnasium.

A large room with 1 staff sergeant and 1 Sergeant as Remedial gymnastic instructors for 150-200 patients daily.

Curative Workshops

The following ^{Table} shows the nature and capacity of the Curative Workshops at the Canadian Orthopedic Hospital, Buxton.

<u>Department.</u>	<u>Total capacity.</u>	<u>Receiving</u>	
		<u>2 hours</u> <u>treatment.</u> <u>A.M.</u>	<u>2 hours</u> <u>treatment</u> <u>P.M.</u>
Mechanical.	40	20	20
Electrical.	6	3	3
Painting.	6	3	3
Carpentry.	30	15	15
Tailoring.	2	1	1
Printing.	8	4	4
Bootmaking.	10	5	5
Fretwork & Carving.	18	9	9
Artificial Limb.	18	9	9

With the exception of the artificial limb department it is suggested that departments similar to the above are suitable for a 1000 bed orthopedic hospital.

c. Scale of equipment.

Electro therapy department.

Electro-medical apparatus.

Combined galvanic and faradic tables, complete with metronome, electrodes and connecting cable. (or Bristow's coils 20 and Galvanic switch boards 20)	20
Theatre testing electrodes for use with one table.	1 set.
Portable faradic coils for use in wards with accumulators or dry cells.	4
Radiant Heat Apparatus.	
Limb Baths.	4
Trunk Baths.	4
Earthware Arm Baths.	8
" Leg Baths.	8
Wooden tables for arm baths.	8
Portable vibrators.	8
Diathermy apparatus, complete with electrode and high frequency fittings.	2
Tungsten arc lamp (in special cases only)	1
Couches, massage.	20

N.B. Four large sinks with hot and cold water supplies should be provided for the electrical department.

Massage Department.

Massage couches 20.

At Shepherds Bush Hospital one set of apparatus consisting of combined rib stool and peg post is supplied for each pair of workers.

c. Scale of equipment.

Remedial Gymnastic Equipment.

Lists can be supplied at any time.

Hydrotherapy Department.

Contrast baths and suitable leg and arm baths for warming limbs prior to massage and electro-therapy alone appear to be necessary

2. Estimated number of qualified Masseuses required.

- (a) ^{for an} Orthopedic hospital of 1000 beds; = 40
 (b) Although during the first six months of this year the number of orthopedic cases returning to Australia on an orthopedic transport averaged only 246, it is considered ^{that} this number can be increased to 400 per orthopedic transport.

The approximate number of orthopedic cases returned to Australia in a year is 6000 and this number could be accommodated on 15 ships.

Therefore, an additional 12-15 qualified Masseuses for permanent Orthopaedic Transport Service should be more than sufficient to enable 1 Masseuse to be placed on each Orthopaedic Transport.

(NOTE: This number is based on the assumption that the period of the absence of each Masseuse from England on duty would probably considerably exceed six months and allow to a certain extent for variations in the rate of return of Orthopaedic cases).

The estimated total number of Masseuses required is therefore 55. A Masseuse on an Orthopaedic Transport should not carry out Electrical or Massage work herself, but should supervise the work of the personnel referred to in para. 3.

3. Estimated number of Masseurs, Electrical Operators and Remedial Gymnastic Instructors which would suffice, if employed permanently on Orthopaedic Transport duty. (These are additional to the Masseuses referred to in para. 2 and to the S/Sgt. Masseurs on Sea Transport Sections)

Assuming that approximately 6000 Orthopaedic cases are returned to Australia in a year

Of these 3000 will require Remedial Gymnastic Treatment
 3000 will require Massage Treatment
 1200 will require Electrical Treatment.

The necessary treatment for these patients could be given by the following personnel:-

40 Remedial Gymnastic Instructors
 100 Masseurs
 40 Electrical Operators.

This number allows ~~62~~ 25% of the personnel failing to return to England after arrival in Australia.

Further, as no difficulty exists in the training of the Remedial Gymnastic Instructors, there is not such an urgent need for a permanent Orthopaedic Transport Staff of Remedial Gymnastic Instructors as is the case with Masseurs and Electrical Operators. Nevertheless better work could be done if at least one permanent Remedial Gymnastic Instructor were placed on each Orthopaedic Transport.

30-40 A.A.M.C. Personnel, chiefly A class, are now under training at Weymouth for permanent Massage and Electrical Orthopaedic Transport Service, and as the facilities for the training of such men allow, their numbers will be added to until 100 men are available for Massage duty and 40 men for Electro-Therapy and these numbers will be increased if it is found later that additional men are required.

4. A copy of further instructions to the S.M.O. No. 2 Command Depot with regard to the procedure to be adopted with reference to the

3.



return of Orthopaedic patients to Australia ^{is} attached.
I would advise the transfer to the A.A.M.C. of all soldiers
whose transfer is recommended in para. 1 of these
instructions, ^{like 5/10/11/2} and would recommend that the Australian Authorities
be asked to return to England all soldiers so recommended in
para. 3b. of these instructions.

5. It is suggested that temporary promotions to Sergeant and Corporal on the completion of stated periods of satisfactory service in Orthopaedic Transport duty or on Remedial Gymnastic, Massage, or Electrotherapy duty in England, would raise the efficiency of the staff employed on the work and would tend to encourage the return of such men to England after completion of their tour of duty to Australia. If this suggestion is favorably considered, I would submit recommendations for the establishments of the staff engaged in Orthopaedic work in continuation of and amending those made in my report to the D.M.S. of the 19th ultimo on the Treatment and Care of Disabled Soldiers.

Colonel.

A.D.M.S. A.I.F. Depots in U.K.

B/A
435
OR. A.I.F.

88

Headquarters, A.I.F. Depots,
Burrup Barracks,
Tidworth,
2nd September, 1918.

S.E.O., A.I.F.,
No. 2 Command Depot,
JERMOURE

Organisation connected with the return of Orthopaedic cases to Australia.

The following procedure will be carried out:-

- (1) A statement on the following pro forma showing the number of trainees under instruction will be forwarded to the D.M.S. and to this Office on the last day of each month. This information will also be forwarded on the receipt of these instructions.

REMEDIAL GYMNASTIC TRAINERS.

No.	Rank	Name	Unit	Medical Class'n	If trans-fer to A.A.M.C. recommended	Previous qualification	Period under training (dates)

MASSAGE TRAINERS.

--	--	--	--	--	--	--	--

ELECTROTHERAPY TRAINERS.

--	--	--	--	--	--	--	--

Note: Transfer to the A.A.M.C. will be recommended for "B2a" or "G1" personnel of other arms who are considered to be suitable for permanent duty on orthopaedic transports.

- (2) If patients and accommodation are available, the following will be the number of orthopaedic patients and staff placed on each orthopaedic transport.

No. of Patients		No. of Staff
Remedial Gymnastic	150 - 200	4 - 5
Massage	200	10
Electrical (also receiving massage)	80	4
Total number of patients		Total number of staff 18 - 19

(3) Whenever nominal rolls of orthopaedic patients ^{or} transports are submitted to the D.M.S., the information in the following pro forma will be forwarded to the D.M.S. and to this Office.

A. ORTHOPAEDIC TRANSPORT No.

<u>Patients:</u>				<u>Trainees:</u>
Treatment	Deck <u>Deck</u>	Berth	Total	No. required
Remedial Gymnastic				
Massage				
Electrical				
Totals				

B. NOMINAL ROLL OF TRAINEES.

No.	Rank	Name	Unit	Medical Class'n	If return to England for further orthopaedic duty is re- commended.	Previous qualific- ation.	Period of train- ing (dates)

Any Medical Officers who have reported at Plymouth for duty on orthopaedic transports will be included under this heading, and the information contained in the last two columns of the pro forma will be supplied.

C. Apparatus required on transport including number of tables for massage or electrical treatment.

- i. Remedial Gymnastic Apparatus
- ii. Massage Apparatus
- iii. Electrical Apparatus

D. Nominal roll of personnel recommended for embarkation at first port in accordance with para. 4.

(4) The D.M.S. is arranging to embark at the first port:

- 1 Remedial Gymnastic Instructor
- 1 Masseur and/Electrical Operator

Total 3

who will under the Medical Officer in charge of the transport fit up without delay the orthopaedic apparatus on the transport.

(5) Captain Thomas will accompany the invalids to the port of embarkation of the next orthopaedic transport, and after consultation with the D.M.S. representative and with Lt.Col. Quick, D.S.O., will make any recommendation he considers advisable with regard to the accommodation and apparatus necessary for the orthopaedic treatment of the number of patients referred to in para. (2), and if possible will standardize the accommodation and equipment necessary for the number of patients.

(6) While Medical Officers and Staff of orthopaedic transports are awaiting at Weymouth, they will be employed upon the treatment of the orthopaedic patients who are to embark on the same transport.

(7) A confidential report will be forwarded to this Office on any Medical Officer sent to Weymouth for orthopaedic duty, who, whether on account of lack of interest or otherwise, is not likely to be efficient in transport orthopaedic work.

(8) The instructions in para. 6. apply as far as possible to members of Sea Transport Sections.

(9) After the departure of an orthopaedic transport the A.D.M.S. will be notified -

- i. of the number of orthopaedic patients and orthopaedic staff who embarked from Weymouth; in a pro forma similar to that in para. 3.A. will be used except that qualified masseurs will also be shown.
- ii. Any alterations in the personnel previously notified has to be embarked in accordance with para. 3.B.

Stuart Whae Col. Col.,
A.D.M.S., A.I.F. Depots in U.K.

J.A.E. 435

In reply please quote:
HA/1126/138.

APPENDIX I



Headquarters,
2nd Training Brigade,
Fovant.
3rd September, 1918.

91

A.D.M.S., A.I.F.,
Bhurtapore Barracks,
TIDWORTH.

Report for War Diary for month ending 31st August, 1918.
is herewith forwarded to you, in reference to your CR.AIF.22473/21/21 (MS)
of 23rd April, 1918.

Number of men reporting to Command Depots:-	2735
Number of men discharged to Overseas Training Brigade:-	1402.
Number of men discharged elsewhere:-	1387
Total number discharged:-	2789

(From 27-7-18 to 31-8-18.)

GROUP HOSPITAL:

Number of General cases admitted to G.C.H.:-	673.
Number of Mumps cases " " "	15.
Number of Measles " " "	7.
Total Admissions:-	<u>695.</u>



SICK PARADES:

Average daily Sick Parade of Hurdcott Area 218.

VENEREAL DISEASE:

Number of cases treated in Hurdcott Area:-(With signs.)	199.
Number of cases cured in Hurdcott Area:-	161.
Number of cases evacuated to 1st A.D.H. from Area:- (V.D.42)	45.
Number of cases evacuated to 1st A.D.H. from Area:-(V.D.20)	60.

SCABIES:

Number of cases treated in lines, in Hurdcott Area:-	166.
Average duration of treatment:-	5 Days.

DIPHTHERIA:

Number of cases of Diphtheria transferred to Civil Isolation, Salisbury:-

No.3 Command Depot:-	5 (one positive.)	Total	8.
No.4 Command Depot:-	3 (" ")		

One ?Diphtheria from 2nd Training Brigade, H.Qrs. isolated in segregation Area 9th Training Battalion. (negative.)

CEREBRO SPINAL MEMINGITIS:

Number of above cases transferred to Civil Isolation Hospital:-	1.
(from No.4 Command Depot "positive")	

All contacts of above Diphtheria and C.S.M. cases proved negative.

4006
154-10

SCABIES.

94

No of cases treated in the lines in Hurdcott Area.	166
Average duration of treatment.	5 days.

TRAINING BRIGADE.

	<u>O.Ranks.</u>	<u>Offrs.</u>
Number of reinforcements arrived from Australia.	694	14
Number of men transferred overseas.	500	33

PERSONNEL IN AREA.

Number of Medical Officers at the end of the month.	29
Number of Dental Officers at the end of the month.	24

CHANGES OF POLICY.ETC.

The treating of contacts of mumps and measles in a Levick spray ~~box~~ Chamber has been discontinued as per instructions contained in A.A.M.C.Orders No 680 of 14.8.18.

TRAINING OF Bla CLASS.

The inclusion to the list of exercises of Musketry Drill has proved very satisfactory in the graduated training of Bla Classes in Command Depots of this Area.

REVIEWAL BY D.M.S. A.I.F. OF CASES IN No 3 COMMAND DEPOT.

On 8.8.18 we received instructions that the D.M.S.,A.I.F. and A.D.M.S.,A.I.F.Depots in U.K. would review the following types of cases at No 3 Command Depot.

- 25 Cases undergoing Massage Treatment. (Blb)
- 25 Cases undergoing Remedial Treatment. (Blb)

Cases of Blb and Bla who had been in the Depot 3 months or more.

After going through 25 Massage cases so many were considered by the D.M.S. A.I.F. as B2B that he ordered an immediate parade of all patients undergoing Massage and Remedial exercises. As a result of this parade 120 men were reclassified B2b by the D.M.S., A.I.F.

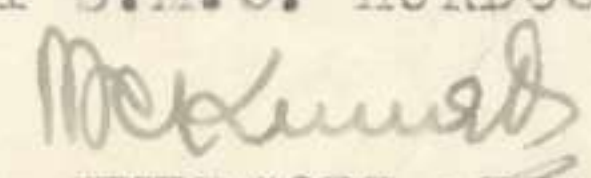
The majority of these cases so classified were those with Gun Shot Wounds of the hands, there could be little excuse for the wrong classification given by the Medical Officers in charge of Classification Huts at No. 3 Command Depot, in a few cases which were obviously B2b. The only excuse that can be offered is that they have had many men who had been boarded B2b at No. 3 Command Depot and who had been returned from No. 2 Command Depot, Weymouth as Blb, and as a result only B2b cases which could not possibly be disputed as such were sent. Cases about which there might be some slight doubt were being kept back. ~~Adding~~ to this fact that the procedure was being carried out a little too much and the result was as the D.M.S. found.

PROCEDURE REGARDING SANITARY REPORTS: The S.S.O., Wylve Valley visited this Area on the 2-9-18 and during an interview, it was decided to forward to him, each week, a copy of the Area Sanitation Report for his information.

SANITATION. The sanitary condition of Camps in this Area has, generally speaking, been kept very satisfactory. All matters adversely reported upon in the weekly reports, during the month of August, 1918 have been rectified.

PERSONAL. On 16-8-18 (A.I.F., List No. 370 appointments & promotions) Major B.C. Kennedy, A.A.M.C. was promoted to the Temporary Rank of LT. COL. whilst carrying out the duties of S.M.O. HURDCOTT AREA.

FOVANT.
3-9-1918.


 LIEUT. COL.
 S.M.O. HURDCOTT AREA. A.I.F.

J.M.S.
In reply please quote

HA/1126/138.

C.O., 2ND TRAINING BRIGADE,
FOVANT.

Headquarters,
2nd Training Brigade,
Fovant.
1st September, 1918.

93

I wish to forward the following medical report for the month ending 31st August, 1918:-

The average sick parades and evacuations to hospital have been as follows:-

Sick Parades.

5th Training Battalion - 24 per day.

9th Training Battalion - 33 per day.

Sent to Hospital (General Cases).

5th Training Battalion - 33, average 1 per day) Total 127.

9th Training Battalion - 94, average 3 per day)

Of the total 127 sent to hospital, 40 were admitted to Fovant Military Hospital, and 87 to Group Clearing Hospital, Hurdcott.

DIPHTHERIA: 3 suspect cases of Diphtheria occurred in 2nd Training Brigade during the month, one case from 5th T.B. which was transferred to Civil Isolation Hospital, Salisbury, and 2 cases, one of which occurred at 2nd Training Brigade Headquarters and the other at 9th T.Bn., were isolated in the segregation area 9th T.Bn. pending the result of bacteriological examination of swabs. This examination proved negative in both cases as also in the former case from 5th T.Bn.

INFECTIOUS DISEASES: The number of infectious cases admitted to Group Clearing Hospital from 2nd Training Brigade, Fovant, for the month ~~xxx~~ is as follows:-

	<u>Mumps</u>	<u>Measles</u>	<u>Total.</u>
5th Training Battalion -	4	2	6
9th Training Battalion -	11	3	14
		Grand Total	20.

Of the number (20) of infectious cases that occurred during the month 13 cases occurred among troops ex H.M.T. "ORONTES", the remaining 7 occurring among previous arrivals.

VENEREAL DISEASE: Number of cases who received early treatment in the Brigade for the month:-

5th Training Battalion - 42)
9th Training Battalion - 58) Total - 100.

Of the 100 who reported for early treatment 29 showed definite signs of the disease; of these cases 19 were cured and discharged to lines and 10 were evacuated to 1st A.D.H., Bulford, in addition to 11 other cases of V.D., making a total of 21 admissions to hospital from this Brigade for the month. This gives an average of less than one case in every 2043 on the average daily ration strength of the 5th and 9th Training Battalions combined.

SCABIES: The number of scabies treated and cured in lines for the month are as follows:-

	<u>Treated.</u>	<u>Cured.</u>	<u>Under treatment.</u>
5th Training Battalion -	10	4	9
9th Training Battalion -	22	25	5
Totals -	32	29	14

@ 3 remaining under treatment from previous month.

8 remaining under treatment from previous month.

SANITATION: General sanitation of camps occupied by 2nd Training Brigade is fairly satisfactory.

Continued.

(2)

REINFORCEMENTS: 694 other ranks and 14 Officers marched into 2nd Training Brigade from Australia during the month, these being men who left Australia ex H.M.A.T's "ORONTES", ~~and~~ "FIELD MARSHALL", "ORMONDE" and "PORT DARWIN". All except 9 other ranks arrived by the "ORONTES". These 9 soldiers arrived by H.M.A.T's "ORMONDE" and "PORT DARWIN" but did not arrive with the original ~~graft~~ owing to sickness during the voyage.

M. Hurdcott
S.M.O. HURDCOTT AREA, A.I.F. LIEUT. COL.

A.A.M.C. Order No. 611 of 29-5-18 states that S.M.O's will see men who have been found more suitable for A.A.M.C., A.A.S.C., Pioneers etc., than for Infantry, on account of age and other reasons, On the third day after they arrive from Australia.

I think that it would be more suitable if the time allowed was three weeks. The men one sees on the third day are men who for some markedly obvious defects have been picked out by the Regimental Medical Officer. Men with slight defects must necessarily be passed as fit for Infantry by the R.M.O. as he wishes to make Infantry men of them if possible, and the only way one can do that is to try them out.

By the time they have been given a fair trial, say three weeks, and it has been decided whether they are suitable or otherwise, they are already classed as Infantry men. If it has been decided that the man is then unfitted for Infantry work, he has to be boarded and oft times one finds such a case when it is very difficult to find at the board that the man physically is other than "A" class, the only trouble being that he is in the Boards' opinion "A" class but more suited for some other branch of the service than Infantry.

I therefore think that men should remain as General Reinforcements until say, three/weeks after their arrival, being worked during the time.

Company Commander, Training Officer and R.M.O's would have an opportunity of seeing these men, and if any, at the end of three weeks were found unsuited for Infantry on account of some disability, they could be sent along to the S.M.O. and he could recommend them being sent to some particular arm of the service.

(Sgd) B.C. Kennedy Lieut. Colonel.
S.M.O. HURDCOTT AREA. A.I.F.

Copy.

J.A.E.

In reply please quote:-
HA/14/707.

Headquarters.
2nd Training Brigade.
Fovant.
23rd August 1918.

To:- A.D.M.S., A.I.F.
Bhurtpore Barracks.
Tidworth.

re: Training of "Bla's".

Whilst present at a graduated training parade at No 4 Command Depot during the week, and in conversation with the Training Officer there, it was suggested that Roller Skating be used as a suitable method to make men fit. I think this idea would be a satisfactory one, more especially during the winter months, when it will be difficult to get regular training for men of this category.

I understand that an attempt was made some time ago to introduce skating at No 3 Command Depot, but had to be abandoned by reason of the floor of the building not being specially constructed for that purpose; it became unfit for skating after a few weeks use. If it were possible to obtain an Aeroplane Hangar of the large canvas and wood portable type, as used in France by the R.A.F., and have same erected at No 4 Command Depot with a special floor laid down, for the purpose of skating, this I think would meet with the requirements.

With reference to the procuring of skates, arrangements might be made with the Australian Red Cross for their supply.

Nearly all men would be able to take this form of exercise, except in the case of men with G.S.Ws. involving joints of lower limbs, and perhaps a few of Blal class. The mere fact, that these men would not be allowed to skate would be an incentive for them to try and make themselves fit, by regular attendance at Massage and R.C. classes in order that they could be able to go on the skating rink. I think it would be possible to arrange for all men in the Depot to be able to have at least one hours skating each day, if the exercise was taken in the building of the size suggested, viz. an Aeroplane Hangar.

It would be preferable to arrange classes according to their categories, Blal, Bla2, Bal3 etc., so that men of the higher categories would not be on the floor at the same time as those of the lower categories. In my opinion the men who would benefit most by this form of training, would be the men unfit on account of irregular action of the heart, Gas cases and as well as men suffering from wounds involving the muscles of thigh and legs; even men with a disability of upper limbs would be able to get partially hardened prior to going to O.T.B.

The building could be used in the evenings for Concert Parties, perhaps Cinema Shows, or preferably as a Skating Rink for which there would be a nominal charge for admission. A Band or Orchestra supplied by the Depot would make the concern an immensely popular one. I think that if this were done, in a very short time the cost of the initial outlay would soon be defrayed.

With regard to the disadvantages of this form of training, the initial financial outlay seems to be the chief obstacle. That there will be casualties from falls is certain, but I think that the percentage of accidents causing more than a temporary disablement would be very small.

(Signed) B.C.KENNEDY. LT. COLONEL.
S.MO. HURDCOTT AREA. A.I.F.

WAR DIARY

Army Form C. 2118.

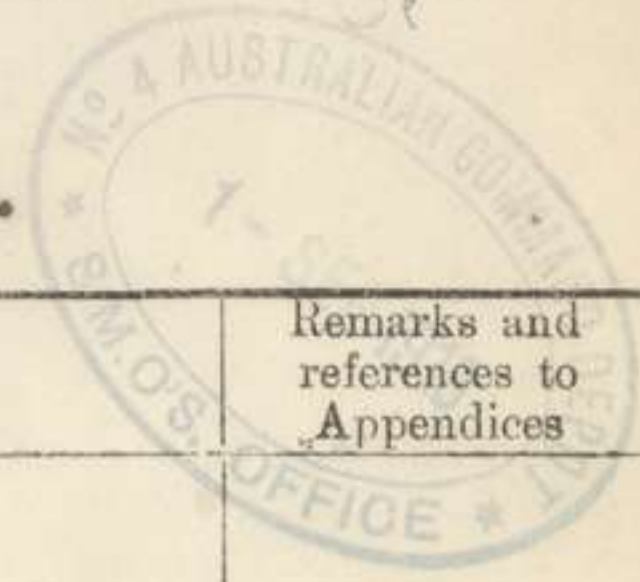
Instructions regarding War Diaries and Intelligence Summaries are contained in F. S. Regs., Part II. and the Staff Manual respectively. Title pages will be prepared in manuscript.

or
INTELLIGENCE SUMMARY.

No. 4 COMMAND DEPOT, HURDCOTT.

(Erase heading not required.)

Place	Date	Hour	Summary of Events and Information	Remarks and references to Appendices														
			<p align="center"><u>Summary for War Diary August 1918. No. 4 Command Depot Hurdcott.</u></p> <p><u>INFECTIOUS DISEASE.</u> During the month there was one case of Diphtheria. Contacts were all swabbed with negative results. One man was evacuated from the Command with Influenza and subsequently contracted C.S.M. from which he died. There were no carriers amongst the contacts.</p> <p><u>HEALTH.</u> The daily average on Sick Parade for the month was 67. The number of admissions to Hospital for the month exclusive of V.D. & Scabies was 152. During the month there was one death that of No. 2227 Pte. Mason G.H. 5th. Pnrs. this man was evacuated from this Depot to Group Hospital with Influenza which was subsequently diagnosed as C.S.M.</p> <p><u>SANITATION.</u> The sanitation of the Depot has been satisfactory.</p> <p><u>EARLY TREATMENT</u> results for month.</p> <table border="0"> <tr> <td>Gonorrhoea cases treated in lines</td> <td align="right">61</td> </tr> <tr> <td>" evacuated to Bulford</td> <td align="right">24</td> </tr> <tr> <td>Venereal Sores evacuated to Bulford</td> <td align="right">22</td> </tr> <tr> <td>Gonorrhoea cases cured in lines</td> <td align="right">65</td> </tr> <tr> <td>Per centage of cures</td> <td align="right">75%</td> </tr> </table> <p><u>DENTAL STAFF.</u> The Dental Staff at present in the Depot consists of 1 S.D.O. and 12 Officers.</p> <p><u>MEDICAL STAFF.</u> The Medical Staff of this Depot consists of 1 S.M.O. and 5 Officers.</p> <p><u>DEPOT STRENGTH.</u> The Depot strength has dropped from 3840 at the beginning of the month to 3697.</p> <p><u>Massage & Remedial Gymnastics.</u></p> <table border="0"> <tr> <td>Daily average of Massage cases for Month</td> <td align="right">350</td> </tr> <tr> <td>Daily average of Remedial Gymnastic cases</td> <td align="right">330</td> </tr> </table>	Gonorrhoea cases treated in lines	61	" evacuated to Bulford	24	Venereal Sores evacuated to Bulford	22	Gonorrhoea cases cured in lines	65	Per centage of cures	75%	Daily average of Massage cases for Month	350	Daily average of Remedial Gymnastic cases	330	
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James Donaldson
S.M.O. No. 4 COMMAND DEPOT

WAR DIARY

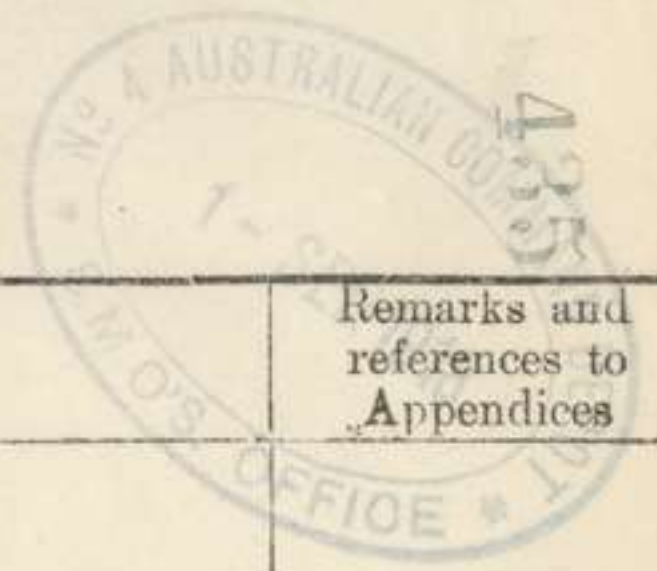
Army Form C. 2118.

Instructions regarding War Diaries and Intelligence Summaries are contained in F. S. Regs., Part II. and the Staff Manual respectively. Title pages will be prepared in manuscript.

or
INTELLIGENCE SUMMARY.

(Erase heading not required.)

No. 4 COMMAND DEPOT. HURDCOTT.



Place	Date	Hour	Summary of Events and Information	Remarks and references to Appendices
			(2)	
			<u>PARTICULARS OF EVACUATIONS.</u>	
			A3 personnel to Overseas Training Brigade 1044)	
			do Training Battalions 25) Total A3's evacuated for month 1069	
			Australia cases to No. 2 Command Depot Weymouth for Revision. 75	
			Home Service personnel for duties. 10	
			BIB cases to No. 3 Command Depot for treatment. 23	
			Grand Total	<u>1177</u>
			Total marched in for Month 1143	
			Total marched out for Month 1177	
			The total No. of A3's evacuated from this Depot for the 6 months March to August was 6534	
			As against 5155 for the previous 6 months.	

JD

James D. ...
S.M.O. No. 4 COMMAND DEPOT.

D. O. & L., London, E.C.
A5001 Wt. 1 71/M2031 750,000 5/17 Sch. 52 Form C2. 6/14

WAR DIARY

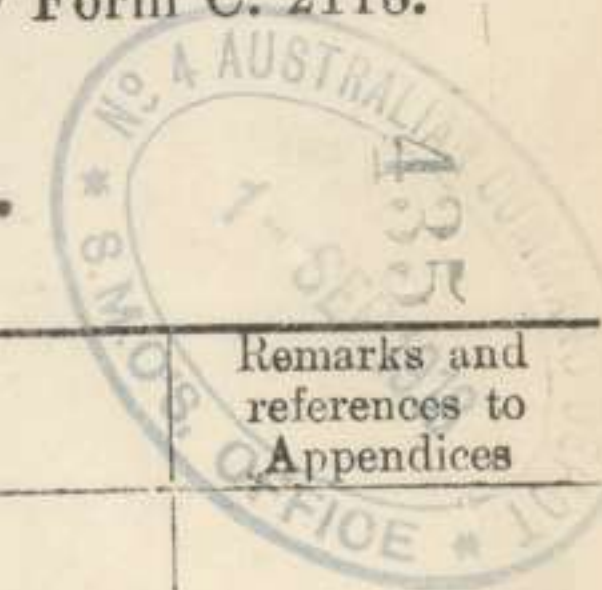
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No. 4 COMMAND DEPOT. HURDCOTT.

(Erase heading not required.)



Remarks and references to Appendices

Place	Date	Hour	Summary of Events and Information								
			M/in.	M/Out A3's.	M/Out. Board Cases.	(3) Evac. To Fovant Hosp.	Evac. to Group C. Hosp.	V.D. Cases.	V.D. Cured.	V.D. Evac. Bulford.	Scabies.
August.	1st.	23	1			3	5	5	3		4
	2nd.	53	53				6	3	5	4	1
	3rd.	20	44			1	6	2	3		4
	4th.	1				1	1	3	1		2
	5th.	97	47		11	1	5	6	2		2
	6th.	28	35				3	4		2	3
	7th.	34	42		1		6	9	2	2	6
	8th.	25	61			1	5	7	9	2	2
	9th.	63	41			2	2	2	2		
	10th.	27	32			1	1	3	3	3	4
	11th.						2	2	2	2	2
	12th.	48	36		3		3	2	2		2
	13th.	49	31		1	1	2	9	3		2
	14th.	20	32		2		2	5	7	2	2
	15th.	38	41			1	9	1	5	2	2
	16th.	39	41		1		8	7		1	4
	17th.	22	55				7	3	3	2	
	18th.						6	2	1		
	19th.	62	25		1	1	4	4		3	
	20th.	49	39		1	2	3	3	4	1	3
	21st.	57	49		2		4	5	2	2	3
	22nd.	36	46			2	3	5	2		2
	23rd.	65	37		2		7	6	1	3	
	24th.	5	38			1	1	5	1	7	1
	25th.							2	1		1
	26th.	58	30				6	1	1	1	1
	27th.	67	43		3		7	2	4		1
	28th.	43	30		57	1	11	4	4	2	
	29th.	36					3	7	1	2	3
	30th.	57	92		2		5	2	5	2	1
	31st.	21	48					8	4	1	6
			1143	1039	87	19	133	127	83	46	69

London, E.C. 4, Sch. 52, Form C. 2118

S.M.O. No. 4 COMMAND DEPOT

bb

From 435 S.M.O.

No.4 Command Depot, C O P Y.

100.

To Lt.Col. Kennedy,
S.M.O.
Hurdcott Area., A.I.F.
POVANT.

MONTHLY REPORT OF HEALTH AND SANITATION.

I have the honour to report as follows:-

HEALTH. The health of the troops in this Command during the month of August has been satisfactory.

Average number on morning Sick Parade.	67.
No. Of Scabies for Month.	69.
No. of General cases admitted to Hospital. exclusive of V.D. and Scabies.	152.
Infectious Cases (1 Diphtheria, 13 suspect Diphtheria)	24.
No. of contacts in lines at date (Sus. Diphtheria)	26.
No. of V.D. cases for month, (105 with discharge and 22 sores.)	127.
No. of V.D. cases evacuated to Bulford, (24 Gonorrhoea, 22 sores)	46.
No. of V.D. cases with discharge cured in lines.	65 75%
Now undergoing treatment in lines.	19.

V.D. cases evacuated to Bulford.

<u>Local.</u>	<u>Where acquired.</u>	
	<u>London.</u>	<u>Elsewhere in U.K.</u>
Nil.	32.	11

SANITATION. The sanitation of the Camp is satisfactory. The ventilation regulations have been carried out in the Huts, Latrines, Kitchens Institutes etc. have been kept in a clean and satisfactory condition.

HURDCOTT.
1-9-18.

(Sgd) J. Macdonald, Major.
S.M.O., No.4 Command Depot.

In reply please quote
D/S/8

To/ S.M.O.
Hurdcott Area
Fovant

The following are the statistics of the Group Clearing
Hospital and Depot for the Month of August 1918

HEALTH

Admissions, Discharges and Transfers from Depot and other Units.
(Group Hospital)

Admissions	Depot	Other Units
General	424	249
Mumps.	Nil	15 15
Measles	1.	6
Diphtheria	5. (1 Positive)	Nil
C.S.M.	Nil	Nil
	430	259 Total 689-700

Discharges	Depot	Other Units
General	252	287
Mumps	Nil	4
Measles	Nil	7
Diphtheria	Nil	Nil
C.S.M.	Nil	Nil
	252	298 Total 550

Transfers	Depot	Other Units
General	209	32
Mumps.	Nil	Nil
Measles	Nil	Nil
Diphtheria	5 (1 Positive)	Nil
C.S.M.	Nil	Nil
	214	32 Total 246

Transferred to Park House for Wasserman Test " 2.
(From Observation Hospital)

Scabies

Admissions from Depot during August 1918 are as follows:-

Admitted	61.
Discharged To Lines	57.
Average time of Treatment	5 Days.

E. T. Hut

Number received treatment during August 1918 are as follows:-

Washed Out	Sealed Up	Total	Cured
2362	78	2440	76

Venereal Disease

The number of cases transferred to 1st A.D.H. Bulford for August 1918 is as follows:-

V.D. 20 :-	13		
V.D. 42? :-	25	Total	38

Which gives an average of one case in every 2755 on the Ration Strength of the Depot From 1st to 31st August 1918. Of the cases transferred to 1st A.D.H. the localities in which the disease is stated to have been contracted are as follows:-

London	Elsewhere in U.K.	Outside U.K.	Total
20	18	Nil	38

Sick Parades

No of men on sick parade during Aug 1918 :- 2499

Dressing Dept

During the period from 1st to 31st Aug
 Received Dressings:- 1224.
 Average period of treatment 8 Days

Massage Dept

During the month of Aug Received treatment :- 1154
 No Classified to higher categories :- 224
 No Boarded 228
 No on treatment at present:- 471 (furlough 120) 591
 Average period of treatment 15 Days
 No discharged same category :- 111

Boards

No of men boarded during Aug 1918 is as follows:-

B2a	Ci	B2b	C2	Ciii	Total
148	61	366	30	44	649

Gymnasium

The following is a summary of work carried out by Gymnasium of this Depot for August 1918

No Treated	No Dis; Bla or Higher	No disc'd other-Categories	Average time Treatment
856	263	109	18 Days

No of cases continuing treatment 484
 " " Without alteration of classification 170

Hurdcott
 1-9-18.

.....Major
 S.M.O. No 3 Command Depot A.I.F.

For W.D.

103

APPENDIX J

FROM S.M.O. Parkhouse
TO A.D.M.S. A.I.F.
Tidworth.

CENTRAL REGISTRY
No. *7747*
HEAD QUARTERS
DEPUTY A.D.M.S.

S.M.O. 217

4 SEP. 1918
TIDWORTH

9 AM 4 SEP

Half Yearly Report of C.T.D. Parkhouse (1.1.18 to 30.6.18.)

Herewith copy of the above as requested in your telephone communication of even date - please.

Parkhouse

3rd September 1918.

Alcock

Major.

S.M.O. Parkhouse Camps.

*3926
154*

PA

FROM S.M.O. Parkhouse
TO A.D.M.S. A.I.F.
Tidworth.

S.M.O. 217

Half Yearly Report of C.T.D. Parkhouse (1.1.18 to 30.6.18.)

Herewith copy of the above as requested in your telephone communication of even date - please.

Parkhouse

3rd September 1918.

Alcock

Major.

S.M.O. Parkhouse Camps.

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(1918-1919 of U.S. Army)

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(1918-1919 of U.S. Army)

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P.
Would like another copy
of report used for
DW 2/9/18

CONVALESCENT TRAINING DEPOT. 164

HALF YEARLY REPORT (1.1.18 to 30.6.18.)

Medical Records of the Convalescent Training Depot show, that during the above period the following number of men were treated and passed through the Depot.

Syphilis	Division	Admitted	1203	Discharged	1196
Gonorrhoeas	"	"	1100	" and transferred	1082

The majority of the above number have been as in previous half years returned to their various Units A or B1A4 Class.

SYPHILIS SECTION.

1. Routine Treatment.

The same Routine was carried out as previously and which was detailed in Half Yearly report (1.7.17 to 31.12.17) Table A shows the number of injections of Arseno - benzol preparations and Mercury given during the 6 months.

Table A.

Intravenous Injections of Arseno - Benzol preparations	7662
Intramuscular Injections of Mercurial Cream	7662

2. Primary Cases Treated.

Table B.

No. treated.	No. positive after 7 injections.	No. positive after 10 injections	No. positive after 13 inj
670	93	11	2
% of total treated during first course <i>only</i>	% of total treated during second course	% of total treated requiring third course only	% of total discharged positive
86.1%	12.2%	1.2%	.3%
	First Course	Second Course	Third Course.
Average length of stay in days.	50.7 days	65.8	94.9

3. Secondary Cases treated.

These cases were all of definite Secondary nature and evinced one or more of general secondary symptoms such as Rashes Mucous patches etc.

Table C.

185

Number treated and Results.

Number Treated	No positive after 7 injections	No positive after 10 injections	No positive after 13 injections
254	84	19	3

Percentage Results of Secondary Cases.

of total treated requiring first course only	% of total treated requiring second course only	% of total treated requiring third course only	% of total treated discharged positive.
66.9%	24.8%	7.4%	1.2%

Daily Average stay of Secondary Cases.

First Course	Second Course	Third Course.
46.3	63	90.1

Tertiary and Preexisting Cases.

Cases in this Category show either definite Tertiary Symptoms or, history of Primary Lesion of many years standing.

Table D.

Numbers treated and Results.

Total treated	No. positive after 7 injections	No positive after 10 injections	No. positive after 13 injections.
21	6	4	2

Percentage Results of Treatment.

of No. treated requiring first course only.	% of No. treated requiring second course only.	% of No. treated requiring third course only.	% of No. treated discharged positive
71.4	9.5	9.5	9.5

Daily Average stay of Tertiary etc Cases.

First Course.	Second Course.	Third Course.
52	73	107

Mixed Syphilis and Gonorrhoea Cases.

These included those recently treated for Gonorrhoea or relapse and a large number who have suffered with 20 at some previous time. The Anti-syphilitic treatment apparently lighting up some latent Gonococci.

a) Mixed Primary

Table E.

Number treated and Results.

Total treated	No. positive after 7 injections	No. positive after 10 injections	No. positive after 13 injections.
111	13	3	Nil

435

Percentage Results of treatment.

106

% of No. treated requiring first course only.	% of No. treated requiring second course only.	% of No. treated requiring third course only.	% of No. treated discharged positive.
88.2%	9.009	2.7	Nil

Daily Average Stay.

First Course.	Second Course.	Third Course.
27.1	42.3	83.6

Table F.

(b) Mixed Secondary.

Number treated and Results.

Total treated	No. positive after 7 injections	No. positive after 10 injections	No positive after 13 injections.
7	2	Nil	Nil

Percentage Results of Treatment.

% of No. treated requiring first course only.	% of No. treated requiring second course only.	% of No. treated requiring third course only.	% of No. treated discharged positive.
71.4	28.4	Nil	Nil

Daily Average Stay.

First Course.	Second Course	Third Course.
31.6	43	Nil

Continuation Course.

Table G.

Number Treated and Results.

Total treated.	No. positive after 7 injections.	No. positive after 10 injections.	No. positive after 13 injections.
104	24	6	Nil

Percentage Results of Treatment.

% of No. treated requiring first course only.	% of No. treated requiring second course only.	% of No. treated requiring third course only.	% of No. discharged positive.
76.9	17.3	5.7	Nil

Average Stay in days.

First Course.	Second Course.	Third Course.
41.5	69	94

The same system of notification of men due for Blood Test is ~~is~~ carried out as previously with the exception that men may now report direct to C.T. Depot for Blood Tests. This obviates the losing of 3 or 4 days pay which existed under the old system.

Discipline and Training.

There has been regular training out during the 6 months, the effect of which is reflected in the improved discipline.

Attendance at treatment parades has been exceptionally good consequently crimes for non-attendance have been reduced to a minimum.

The system of training is carried out according to Syllabus as during the previous 6 months. The system of dressing and treatment parades is as laid down in last report.

Incidence of Reactions.

Dermatases.

These were less in number than for previous six months being 9 as against 15 for period (1.7.17 to 31.12.17.)

Severe.

There were two cases (severe) which were transferred to No. 1. A.D.H. for treatment.

1 after 7 injections (Galyl and Novarsenobillon)

1 after 8 injections (Kharsivan and Galyl)

Mild.

There were six mild cases which were not transferred to Hospital, subsequently recovering and completing their courses without any further symptoms.

Acute Yellow Atrophy of Liver.

There was one case of which a report has already been forwarded.

Arsenical Jaundice.

There were three cases which recovered under treatment and completed their course without untoward results.

Herpes.

During the six months there were recorded 43 cases of Herpes. Various nerve routes being affected amongst above number.

Pseudo-Anaphylaxis.

No cases of hyper-sensitiveness were noticed on the tables.

Minor Reactions.

These were small in number and usually had disappeared by following morning and have been less in number than was the case in the previous six months.

Summary of Syphilis Case.

Number remaining under treatment 31.12.17	No admitted 1.1.18 to 30.6.18	Average weekly admissions	No discharged 1.1.18 to 30.6.18.	Average weekly discharges
313	1203	46.2	1196	46

Total ~~xxx~~ number remaining under treatment 30.6.18 303

Average weekly number under treatment 1.1.18 to 30.6.18. 286

Compared with figures for six months ending 31.12.17 it is noticed that there are 220 less admissions and 139 less discharges for the period of 1918.

All other matters were similar to previous period as regards Technique with the exception that Novarseno-billion was supplied mainly for the current six months instead of Galyl and Kharsivan.

Evacuated to General Hospital 10 as follows:-

G.S.W. Neck	1	Mumps	3
Bronchitis	2	Acute Yellow Atrophy	1
Pharyngitis	1	Pneumonia	1
Sycosis	1		

Transferred to 1st A.D.H. Bulford with relapse of Gonorrhoea 28

*Alcock
man*

In this section a modified scheme of training was laid down and records were kept of all cases returned to Bulford after April 1st 1918. It was decided to record the number recurring before training and the number recurring after training.

System of Inspection in C.T. Depot.

All cases on marching in are "carded" and examined the morning after admission. Any cases exhibiting a discharge on short arm examination have a smear taken of discharge; if on staining, the smear shows evidence of gonococci; the case is returned for further treatment to Bulford and marked as "before trial".

Cases which show no evident discharge on marching in carry out the modified training and on Monday and Thursday morning at 7.a.m. a water test is taken with a preparatory short arm examination. Any case of discharge on short arm is smeared and examined microscopically; if gonococci are present the case is returned to No. 1. A.D.H. and is recorded as an "After trial" cases. All cases are examined by Medical Officer prior to marching out and passed as fit or unfit for discharge to Unit.

Summary of Gonorrhoea Cases.

Cases remaining 30.12.17	No. admitted 1.1.18 to 30.6.18	Weekly average admissions	No. discharges to Units after training.	Weekly average to Units.
34	1100	42.3	856	32.9
No. discharged to No.1. A.D.H. for further treatment for 6 months.	No. discharged to No.1. A.D.H. Trial 1.4.18 to 30.6.18.		No. discharged to No.1. A.D.H. "With Trial" 1.4.18 to 30.6.18.	
236	36		82	

It was noticed that cases undergoing Anti-syphilitic treatment a large number of cases developed a gonococcal discharge probably due to lighting up of a latent gonococcal condition.

*Alcock
Mayer*

STATEMENT OF WORK PERFORMED BY AUSTRALIAN SANITARY SECTION DURING AUGUST, 1918.

STATION.	QUARTERS SPRAYED						CLOTHING & BEDDING									STRENGTH		REMARKS Showing change of personnel & points of spec. interest.								
	After cases of Infec. Disease			Apart from cases of Infec. Disease			Sprayed Prior to Sterilization			Steam Sterilized			Apart from cases of Infec. Disease		Officers	N.C.O's.	O/Ranks.									
	Ambulance Cars	Huts	Tents	Other Quarters	Huts	Tents	Other Quarters	Kits	Paillasses	Blankets	Kits	Paillasses	Blankets	Kits					Paillasses	Blankets	Bundles of Clothing	Blankets	Bedding	Bundles of Clothing		
CODFORD	-	46	4	3	-	-	2	2	-	-	-	-	-	4	19	360	-	-	-	3670	-	-	-	1	3	
HURDCOTT	24	24	37	3	14	-	4	151	251	2944	-	-	-	151	359	3395	-	-	30	19020	-	-	-	1	4	
SUTTON VEIY	5	7	-	-	30	1	10	13	13	45	7	18	663	84	84	270	59	-	11	4542	-	15	-	1	7	
WEYMOUTH	12	2	-	-	15	-	44	37	37	138	-	60	480	-	37	138	40	-	76	5531	163	74	-	1	2	
TIDWORTH	-	-	-	-	-	-	-	-	-	370	2	2	2	2	2	70	-	-	-	370	-	-	1	-	1	
TOTAL:	41	79	41	6	59	1	60	203	301	3497	9	80	1145	241	501	4233	99	-	117	52955	163	89	1	4	17	

287

5235

38,576

K. H. S. [Signature]
S.M.O.

APPENDIX
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WAR DIARY

or

INTELLIGENCE SUMMARY.

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Place	Date	Hour	Summary of Events and Information	Remarks and references to Appendices
Personnel.			The following transfers of Dental Personnel have been effected during the month:-	
			Officers marched in from D.M.S. 1.	
			" " " " Australia. 2.	
			" " out to D.M.S. 3.	
			" " " " Australia. -.	
			Other Ranks " in from D.M.S. 3.	
			" " " " " Australia. 1.	
			" " " out to D.M.S. 2.	
			" " " " " Australia. -.	
			" " " in ex Combatant Units. 13.	
			" " " out to " " 1.	
			Transfers effected within the Command:-	
			Officers. 20. Mechanics. 17. Orderlies 10.	
Dental Unfits.			<u>A. Command Depots</u> ;+	
			The continued heavy flow of troops through Command Depots has further	
			increased the number of men retained in Command Depots for Dental Treatment only, there	

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Army Form C. 2118.

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Place	Date	Hour	Summary of Events and Information	Remarks and references to Appendices
			<p>being 2,054 on 31st. August as against 1,855 on 31st. July, whereas 4995 were made fit during the month. The Dental Staff allotted to these Depots is capable of completing more than the number stated, but the interruptions mentioned last month have again caused a reduction of output. These interruptions are of various natures and are difficult to set down, but a note was made of the more serious during August with the following results. -</p> <p>No. 1 Command Depot:- 1 day men refused to go on Parade. $\frac{1}{2}$ day muster parade - Troops addressed by Hon. W. Hughes. 1 day failure of supply of paraffin.</p> <p>No. 3 Command Depot:- $\frac{1}{2}$ day - Presentation of decorations by G.O.C. Shortage of Methylated Spirits for some days.</p> <p>No. 4 Command Depot:- 1 day - Sports meeting. Shortage of Methylated Spirits for some days.</p> <p>Thus it will be seen that at least 4 whole days were lost in addition to less lengthy losses of time due to pay parades, kit inspections, etc.</p> <p>I do not consider it possible to prevent all this waste of time though every effort should be made, and is made, to avoid any serious break in the continuity of effort where possible.</p>	

A6945 Wt. W11422/M1160 350,000 12/16 D. D. & L. Forms/C./2118/14.

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WAR DIARY

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Army Form C. 2118.

Place	Date	Hour	Summary of Events and Information	Remarks and references to Appendices
			<p>Definite allowance, however, should be made for these contingencies when working out the percentage of Dental Personnel necessary for any given number of troops.</p>	
			<p>Taken over a period of some months it appears that an efficient Dental Section can complete the dental fitness of 30 men per week with the mouths of soldiers in the state at present existing in the A.I.F., but I am firmly convinced that the general fitness is rapidly improving and the quality of work executed is also improving. It is an indisputable fact that if a dental operator is faced with a greater quantity of work than can be encompassed without undue haste and strain the quality and permanency of his work will suffer, and, up to the present, this state of affairs has, more or less, generally existed in the A.I.F., and, though conditions are now improving we should be guarded against putting up the volume of work executed under these conditions as a standard.</p>	
			<p>Investigations during July and August have disclosed the fact that approximately 10% of men have been refusing treatment, but this percentage has been now greatly reduced by two means.</p>	
			<p>A. Greater care has been exercised, by examining Officers, to explain the necessity for the work.</p>	

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WAR DIARY

or

INTELLIGENCE SUMMARY.

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Army Form C. 2118.

Instructions regarding War Diaries and Intelligence Summaries are contained in F. S. Regs., Par. II, and the Staff Manual respectively. Title pages will be prepared in manuscript.

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Place	Date	Hour	Summary of Events and Information	Remarks and references to Appendices
			<p>B. A new regulation under Defence Act which practically makes submission to treatment compulsory.</p>	
			<p>The check examination of troops on marching into the Overseas Training Brigade from Command Depots is, to my mind, the most important link in our organisation, and a similar check to this should always be arranged for where possible.</p>	
			<p>Training Battalions.</p>	
			<p>There is practically nothing new of importance to report on in these Areas, and the "dental unfits" are still only about 10% of the troops undergoing training.</p>	
			<p>Equipment.</p>	
			<p>All equipments have now been standardised as far as possible, which fact denotes a further step forward in the completeness of our organisation. The standard equipment as laid down is particularly economical and withal sufficient, but the attachment of an instrument fitter to the staff of the Officer in charge of Base Stores would ensure instruments, which have been returned to store for repair or other reasons, being again issued in a better working condition.</p>	
<p>A6945 Wt. W11422/M1160 350,000 12/16 D. D. & L. Forms/C./2118/14.</p>				

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WAR DIARY

or

INTELLIGENCE SUMMARY.

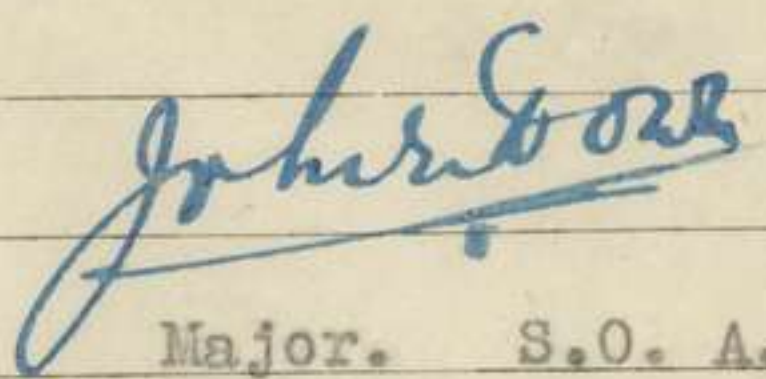
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Army Form C. 2118.

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Instructions regarding War Diaries and Intelligence Summaries are contained in F. S. Regs., Par. II, and the Staff Manual respectively. Title pages will be prepared in manuscript.

Place	Date	Hour	Summary of Events and Information	Remarks and references to Appendices
Appendices.			A synopsis of the examination of drafts from Australia during the month is attached marked appendix 1.	
			Weekly consolidated returns, showing work executed by Dental Units in A.I.F. Depots in U.K., marked appendix 2.	
		A.	<p style="text-align: right;">  Major. S.O. A.D.S. A.I.F. Depots in U.K. </p>	
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Result of Dental Examination of Troops arriving from Australia during month of August 1918.

Date of arrival.	Transport.	No.	Trng Bn.	No. Fit.	No. Unfit.	Req "X"	Req "Y"	Req "D"	Req "S"	"X" Reqd.	"Y" Reqd.	"D" Reqd.	Fit.	Examined by & Remarks.
28-8-18.	Field Marshal	85	14th	60	23	1	12	4	2	2	21	13	71%	Capt. Wright. 2 men in Hospital.
"	do.	155	14th	112	43	2	20	11	4	2	31	24	72%	Capt. Wright. 18 men in Hospital.
13-8-18.	Orontes.	54	14th	22	32	2	26	7	1	2	35	10	41%	Capt. Wright. 1 man in Hospital.
"	do.	142	14th	70	72	3	52	17	5	4	78	27	49%	Capt. Wright. 7 men in Hospital.
"	do.	108	14th	53	55	5	40	9	1	9	63	16	49%	Capt. Wright. 30 men in Hospital.
28-8-18.	Field Marshal	108	12th	80	28	1	10	15	-	3	22	32	74%	Capt. Amphlett. 23 men in Hospital.
27-8-18.	do.	143	1st.	74	69	7	46	10	-	9	79	14	52%	Lieut. Bell.
14-8-18.	Orontes.	67	1st.	13	54	16	40	15	1	26	88	18	20%	Lieut. Bell.
13-8-18.	do.	3	Pion.	3	-	-	-	-	-	-	-	-	100%	Lieut. Huet.
14-8-18.	do.	182	RBAA.	167	15	-	10	5	-	-	11	5	92%	Capt. Bennett.
13-8-18.	do.	88	AAMC.	43	45	2	37	8	-	3	63	12	49%	Lieut. Hunter.
27-8-18.	Field Marshal	9	AAMC.	2	7	2	5	3	1	5	7	3	22%	Lieut. Hunter.
13-8-18.	Orontes.	70	5th.	7	63	10	43	28	30	15	109	35	10%	Capt. Donovan. 1 man V.D. in Hospital
26-8-18.	Field Marshal	138	5th.	53	85	8	31	29	42	10	42	35	38%	Capt. Satchell. 1 man in Hospital.
	Forward.	1352		759	593	59	372	161	87	90	649	244		

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Date of arrival.	Transport.	No.	Trng. Bn.	No. Fit.	No. Unfit.	Req. "X"	Req. "Y"	Req. "D"	Req. "S"	"X" Reqd.	"Y" Reqd.	"D" Reqd.	Fit.	Examined by & remarks.
	Forward.	1352		759	593	59	372	161	87	90	649	244		
22-8-18.	Orontes.	191	9th.	79	112	3	75	46	6	4	156	47	41%	Capt. Dunn. 4 men in Hospital.
29-8-18.	Field Marshal	273	9th.	148	125	2	60	80	3	2	78	91	54%	Capt. Dunn. 10 men in Hospital.
TOTALS.		1816		986	830	64	507	287	96	96	883	382	54%	



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- AUSTRALIAN DENTAL SERVICES. -

- Weekly Consolidated Return for Week-ending 3 / 8 / 1918. -



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	Cases Treated.	Dentally Unfit.	Gun Cases.	Requiring "D".	Requiring "Y".	Requiring "X".	Men Completed.	"D" Completed.	"R" Completed.	"Y" Completed.	"X" Completed.	No. of Units.	Total Strength.
No.1. Comm. Dep. Bl a4. Bl Cases less Bl a4.	2260	1028	145	614	544	80	331	296	50	968	147	12	3911
No.2. Comm. Dep. Blb R.C.	188	79	5	14	58	5	23	17	3	59	39	1	4300
No.3. Comm. Dep. Bl a4. Bl Cases less Bl a4.	1492	63	3	23	28		61	129	51	1007	95	12	4209
No.4. Comm. Dep. Bl a4. Bl Cases less Bl a4.	1895	518	20	161	288	18	339						
Totals.	5835	1616	25	716	1274	62	28	159	30	693	147	10	3935
1st. Training Brigade.													
Trng. Bn. No....1.	188	142	1	33	131	9	45	5	6	99	29	1	1025
" " No....2.													
" " Pioneers.	90	24	1	9	9	4	41	9	4	41	5	1	476
" " R.B.A.A.	285	112		14	94	6	66	10	10	90	7	1	1699
2nd. Training Brigade.													
Trng. Bn. No....5.	188	200	3	67	139	13	93	18	20	94	10	2	1098
" " No....6.													
" " No....9.	130	570	3	133	502	39	70	41	10	184	5	2	1358
" " No....10.													
3rd. Training Brigade.													
Trng. B. No....12.	137	66	2	21	55		50	23	11	59	6	1	1499
" " No....13.													
" " No....14.	62	135	1	58	53	2	38	26	4	39	1	1	1110
" " No....15.													

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	Cases treated.	Dentally Unfit.	Gun Cases.	Requiring "D".	Requiring "Y".	Requiring "A".	Men Completed.	"D" Completed.	"R" Completed.	"Y" Completed.	"A" Completed.	No. of Units.	Total Strength.
Brought Forward.	1080	1249	11	335	983	73	403	132	65	606	63	9	8265.
Engineers, Field. Brightlingsea.	89	35	3	4	21	1	35	7	14	18		1	1020.
Engineers, Signal. Clifton, Beds.	85	125	1	31	86	7	33	7	1	87	1	1	390.
A.A.M.C. T.D. Parkhouse.	91	102	3	10	92	6	38	10	15	76	7	1	410
A. M. G. T. D. Grantham.	88	10					39	3	9	55	3	1	2438
Overseas Trng. Brigade.	367	30	1	9	12		81	15	12	69	4	1	3278
1st. M.D.E. Bulford.	177							6	8	7	15	1	247
A.I.F. Detention Bks. Lewes.	70	55	5	22	29	4	16	5	1	63	11	1	34 (259)
A.I.F. Headquarters. Tidworth.	84						15	8	5	83	5	1	1046
Total.	2131	1606	24	411	1223	91	660	193	130	1064	109	17	17128.

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- AUSTRALIAN ARMY DENTAL SERVICES -

Weekly Consolidated Return for Week-ending 10 / 8 / 1918.

	Cases Treated.	Dentally Unfit.	Gum Cases.	Requiring "D"	Requiring "Y"	Requiring "X"	Men Completed.	"Y" Completed.	"R" Completed.	"L" Completed.	"A" Completed.	No. of Units.	Total Strength.
No. 1. Comm. Dep. Bl a4. Bl Cases less Bl a4.	2300	1044 633	126 18	574 228	551 413	52 47	288 84	240	45	1051	152	12	3890
No. 2. Comm. Dep. Bl b R.S.	222	74	7	12	49	15	19	13	9	44	59	1	4089
No. 3 Comm. Dep. Bl. a4. Bl Cases less Bl a4.	1478	47 493	3 16	12 131	23 304		36 307	143	49	1034	92	11	4188
No. 4 Comm. Dep. Bl a4. Bl Cases less Bl a4.	1809	920 1625	40 20	426 688	629 1219	28 60	205 18	171	28	933	122	11	3916
Totals.	5809	4836	230	2071	3188	225	957	567	131	3062	425	35	16083.
1st. Training Brigade.													
Trng. Bn. No....1	198	128		27	120	9	54	5	10	103	17	1	1013
" " Pioneers.	99	17		5	5		38	6	4	56	11	1	478
" " R.S.A.A.	299	115		13	98	9	50	9	21	40	5	1	1632
2nd. Training Brigade.													
Trng. Bn. No....5.	198	166		61	115	8	92	16	17	119	12	2	1062
" " No....9.	108	515	3	107	456	37	48	28	11	182	6	2	1293
3rd. Training Brigade.													
Trng. Bn. No....12.	151	47	1	21	35	1	46	27	10	78	5	1	1237
" " No....14.	84	116	2	37	54	5	42	19	11	41	7	1	1013
Forward.	1137	1104	6	271	883	69	370	110	84	619	63	9	7728.

	Cases Treated.	Temporarily Unfit.	Cum Cases.	Requiring "D"	Requiring "Y"	Requiring "X"	Men Completed.	"D" Completed.	"Y" Completed.	"X" Completed.	"D" Completed.	"Y" Completed.	"X" Completed.	No. of Units.	Total Strength.
Brought Forward.	1137	1104	6	271	883	69	320	110	84	619	63	9	7728		
Engineers, Field. Brightlingsea.	108	36	3	5	24	2	46	7	12	37	2	1	1028		
Engineers, Signal. Clifton, Beds.	72	103	1	28	74	4	32	7		54	7	1	397		
A. I. C. T. D. Dovant.	78	100	2	8	82	7	27	13	3	79	7	1	409		
A. I. C. T. D. Parkhouse.	71	24			7	1	13		6	14	6	1	2449		
Overseas Eng. Brisbane.	265	46		10	20	4	56	6	23	65	7	1	3335		
1st. A. I. C. Bulford.	193							9	3	24	15	1	245		
Lewis Detention Barracks.	64	50	4	19	28	3	30	8		65	6	1	33		
A. I. C. Headquarters, Midworth.	83						19	4	6	73	8	1	1038		
Totals.	2071	1463	16	341	1118	90	593	164	137	1030	121	17	16668.		

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- AUSTRALIAN ARMY DENTAL SERVICES -

Weekly Consolidated Return for Week-ending 17 / 8 / 1918.

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	Cases Treated.	Dentally Unfit.	Gum Cases.	Requiring "Y"	Requiring "Y"	Requiring "X"	Men Completed.	"Y" Completed.	"R" Completed.	"W" Completed.	"Z" Completed.	No. of Units.	Total Strength.
No. 1. Comm. Dep. Bl a4. Bl Cases less Bl a4.	2095	963 779	108 14	432 312	484 591	49 49	232 111	239	43	879	135	15	3793.
No. 2. Comm. Dep. Bl b R.C.	147	35	9	5	25	3	16	17	6	29	23	1	4406
No. 3 Comm. Dep. Bl. a4. Bl Cases less Bl a4.	1340	84 513	6 26	23 132	48 314	2 23	47 345	90	34	931	103	10	4203
No. 4 Comm. Dep. Bl a4. Bl Cases less Bl a4.	1808	958 1507	43 16	459 608	614 1134	34 65	231 15	179	16	1095	116	13	3874
Totals.	5390	4839	222	1971	3210	225	997	525	99	2934	377	39	16456
1st. Training Brigade.													
Trng. Bn. No....1	217	150		35	135	4	38	21	2	70	64	1	1032
" " Pioneers.	55	14		7			14	3	4	13	4	1	478
" " R.B.A.A.	312	136		22	116	9	46	12	11	66	11	1	1818
2nd. Training Brigade.													
Trng. Bn. No....5.	153	196	4	86	133	13	99	17	19	94	28	2	1095
" " No....9.	96	557	2	117	495	38	43	37	18	127	4	2	1457.
3rd. Training Brigade.													
Trng. Bn. No...12.	81	52	1	18	29		40	27	6	75	5	1	1079
" " No...14.	61	271	1	65	170	10	43	20	6	33	6	1	1360
Forward.	975	1376	8	350	1072	74	323	137	66	478	122	9	8319.

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	Cases Treated.	Dentally Unfit.	Cum Cases.	Requiring "D"	Requiring "F"	Requiring "X"	Men Completed.	"D" Completed.	"F" Completed.	"X" Completed.	No. of Units.	Total strength.
Brought Forward.	975	1376	8	350	1072	74	323	137	66	478	9	8319.
Engineers, Field. Brightlingsea.	83	69	3	9	34	4	34	7	5	22	1	795
Engineers, Signal. Clifton, Beds.	78	121		25	96	4	31	9		58	1	382
A. I. C. F. D. Novant.	68	120	2	19	100	6	29	10	4	77	1	456
A. I. C. F. D. Parkhouse.	81	22		5	5	1	2	3	2	13	1	2412
Overseas Engg. Brisade.	318	21	1	3	6	2	64	13	18	65	1	3188
1st. A. D. S. Bulford.	148							11	4	16	1	245
Lewes Detention Barracks.	78	54	2	21	31	7	20	11		41	1	289
A. I. C. Headquarters, Midworth.	87						28	10	1	92	1	984
Totals.	1916	1783	16	432	1344	98	531	210	100	862	17	12070.

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- AUSTRALIAN ARMY DENTAL SERVICES -



Weekly Consolidated Return for Week-ending 24 / 8 / 1918.

	Cases Treated.	Dentally Unfit.	Gum Cases.	Requiring "D"	Requiring "Y"	Requiring "X"	Men Completed.	"Y" Completed.	"R" Completed.	"I" Completed.	"A" Completed.	No. of Units.	Total Strength.
No. 1. Comm. Dep. Bl a4. Bl Cases less Bl a4.	2495	979 581	101 13	452 210	471 437	43 41	329 127	238	30	1146	154	15	3669.
No. 2. Comm. Dep. Bl b R.C.				Nil Return									5072.
No. 3 Comm. Dep. Bl. a4. Bl Cases less Bl a4.	1419	119 643	4 19	31 147	76 420	30	50 305	117	48	849	65	10	4228
No. 4 Comm. Dep. Bl a4. Bl Cases less Bl a4.	1591	1019 1501	45 13	477 593	682 1129	39 84	195 7	172	17	913	68	13	3985
Totals.	5505	4842	195	1910	3215	237	1013	527	95	2908	287	38	16954
1st. Training Brigade.													
Trng. Bn. No....1	198	144	1	31	133	6	52	12	4	125	19	1	1028
" " Pioneers.	55	11		5			17	5	3	6		1	422
" " R.B.A.A.	391	137		22	104	11	48	8	15	86	9	1	1940
2nd. Training Brigade.													
Trng. Bn. No....5.	194	163	3	82	98	11	101	16	20	140	19	2	1057
" " No....9.	90	555	1	101	490	39	32	32	11	139	2	2	1362
3rd. Training Brigade.													
Trng. Bn. No....12.	86	36	1	14	26		26	14	4	52	4	1	1016
" " No....14.	95	231	1	53	160	6	58	28	8	61	6	1	1267
Forward.	1109	1277	7	308	1011	73	334	115	65	609	59	9	8092.

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	Cases Treated.	Temporarily Unfit.	Cum Cases.	Requiring "D"	Requiring "Y"	Requiring "X"	Men Completed.	"D" Completed.	"Y" Completed.	"X" Completed.	"Z" Completed.	No. of Units.	Total strength.
Brought Forward.	1109	1277	7	308	1011	73	334	115	65	609	59	9	8092
Engineers, Field. Brightlingsea.	64	48	3	5	28	4	30	9	8	19	2	1	813
Engineers, Signal. Clifton, Beds.	78	107		22	86	4	32	9		53	10	1	382
A.I.C. T.D. Fovant.	75	97	21	23	81	6	32	10	3	80		1	426
A.I.C. T.D. Parkhouse.	95	16	1	1	4	2	44	6	18	24	4	1	2217
Overseas Eng. Brigade.	263	36	1	2	5	1	33	7	11	24	6	1	3229
1st. A.D. Bulford.	162							10	4	16	16	1	227
Leves Detention Barracks.	81	45	3	19	26	7	23	9	2	67	12	1	261
A.I.C. Headquarters, Midworth.	98						26	5	5	81	4	1	762
Totals.	2025	1626	36	380	1241	97	554	180	116	973	104	17	16409

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- AUSTRALIAN ARMY DENTAL SERVICES -

Weekly Consolidated Return for Week-ending 31 / 8 / 1918.

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	Cases Treated.	Dentally Unfit.	Gum Cases.	Requiring "D"	Requiring "Y"	Requiring "X"	Men Completed.	"Y" Completed.	"R" Completed.	"W" Completed.	"Z" Completed.	No. of Units.	Total Strength.
No. 1. Comm. Dep. Bl a4. Bl Cases less Bl a4.	2069	957	90	571	567	70	315	236	36	982	166	15	3537
No. 2. Comm. Dep. Bl b R.S.	172	150	1	53	102	16	12		12	132	76	5	4545
No. 3 Comm. Dep. Bl. a4. Bl Cases less Bl a4.	1065	103	8	29	50	1	40	90	25	447	70	6	4209
No. 4 Comm. Dep. Bl a4. Bl Cases less Bl a4.	1702	994	25	501	666	45	258	167	18	1192	100	12	3798
		1423	14	569	1089	87	11						
Totals.	5008	4729	164	2097	3230	270	925	493	91	2753	412	28	16089.
1st. Training Brigade.													
Trng. Bn. No.....1	184	180	2	31	166	9	33	15	3	54	23	1	855
" " Pioneers.	49	18	4	6	4	1	8	4	4			1	418
" " R.B.A.A.	374	174		77	148	11	61	13	11	140	12	1	1977
2nd. Training Brigade.													
Trng. Bn. No.....5.	195	147	3	84	72	7	99	15	16	139	15	1	1150
" " No.....9.	110	627	3	119	576	34	46	58	19	143	19	1	1629
3rd. Training Brigade.													
Trng. Bn. No...12.	81	57		28	36	1	30	10	4	63		1	1104
" " No...14.	93	265	1	65	171	7	55	23	17	58	1	1	1458
Forward.	1086	1468	13	410	1173	70	332	138	74	597	70	7	8591.

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	Cases Treated.	Temporarily Unfit.	Cum Cases.	Requiring "D"	Requiring "F"	Requiring "X"	Men Completed.	"D" Completed.	"F" Completed.	"X" Completed.	"D" Completed.	"F" Completed.	"X" Completed.	No. of Units.	Total Strength.
Brought Forward.	1086	1468	13	410	1173	70	332	138	74	597	70	7	8591		
Engineers, Field. Brightlingsea.	76	24	3	3	9	2	48	10	11	27	4	1	804		
Engineers, Signal. Clifton, Beds.	88	96		19	80	4	23	9	2	46	3	1	387		
A. F. C. P. D. Bovant.	67	103	3	21	78	8	26	12	3	40	7	1	408		
A. F. C. P. D. Parkhouse.	67	26	1	1	11	1	23	5	4	16	4	1	1000		
Overseas Engg. Brinslade.	350	18	2	1	4		52	8	18	20	5	1	3156		
1st. A.D. Bulford.	196							11	11	20	24	1	224		
Newes Detention Barracks.	68	46	1	19	24	6	23	8	2	71	3	1	283		
A.I.F. Headquarters, Bidworth.	82						23	15	2	33	4	1	805		
Totals.	2080	1781	23	474	1379	91	550	216	127	920	124	15	15971.		

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