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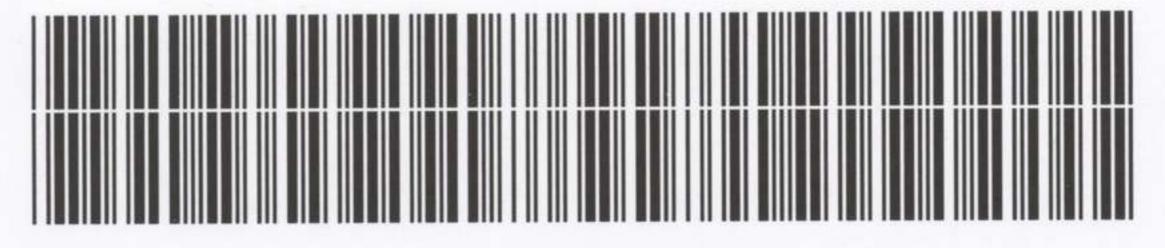
Australian Imperial Force unit war diaries, 1914-18 War

Medical, Dental & Nursing

Item number: 26/70/5 Part 2

Title: No 1 Australian Stationary Hospital

June 1915



AWM4-26/70/5PART2

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Appendix No. appendese Mudros, Lemnos Island. June 201 1915 To Captain Maxwell. Chief Censor. G.H.Q. Would you please let me have censor stamp as soon as possible. (Sgd) H.W.Bryant. Lieut-Colonel. Censor Stamp No. W 2580 received and Receipt sent on June 18

appendere II

Appendix No. 2. 7

2

Lemnos Island.

June 6th 1915

To Colonel.Neher,

本

H.M.T. "Aragon"
Mudros Bay.

I have the honour to report that I have been informed that Commissions are now being granted to Dentists who are doing dental and other duties in the A.M.C.

Should this be so, I strongly recommend Sergeant.H.S.Marshall who is doing duty with this Hospital.

This N.C.O. is in every way qualified for appointment to a commission, and since March 4th, when we arrived at Mudros, he has been acting as a dentist whenever he has been able to find time, and has been of great service to the forces that were collecting during the last three months.

He has mended many plates and bridges, besides stopping and extracting many teeth.

Since wounded have been coming to this Hospital, he has also attended many bad mouths, and the whole of his time could be easily taken up by dental work on this island."

I have the honour to be, Sir,

Your obedient servant,

H.W.Bryant.V.D. Lieut-Colonel. O.C. l A.S.H. OFFICE OF THE ASSISTANT DIRECTOR OF MEDICAL SERVICES, AUST. FORCE.

From A.D.M.S.,

Australian Force,

Headquarters,

CAIRO.

O.C.,

First Australian Stationary Hospital, LEMNOS ISLAND.

With reference to your recommendation of June 6th of Sgt.
H.S.Marshall as for appointment as to the Dental Force:

Could you please let me know if he is a qualified dentist or a mechanical dentist.

The favour of a speedy reply will oblige.

Cairo, June 29, 1915

(sgnd) J.W.Barrett,
A.D.M.S., Aust. Force.

To Col J.W.Barrett,

A.D.M.S., Aust Force.

(2)

Sgt Marshall is a recorded dentist in Victoria. He was working many years with Drs. Ray Jovell, and Arthur under my own personal supervision.

(Sgnd) H.W.Bryant, Lt-Col., O.C., No.1 A.S.Hosp.

appendix Ho. 3.

L of C.

The D.D.M.S.

The attached complaint from the A.D.M.S. N.Z. and Australian Division is forwarded.

L/C Moore belongs to the Canterbury Yeomanry Cavalry, which forms part of the N.ew Zealand Mounted Rifles.

Anzac. 5/6/15

(Sgd)G.H.C.Thorn. Lt-Col. A.D.M.S.

Headquarters. June 6th

To A.D.M.S.

L of C.

I am directed by the A.D.M.S. to forward attached letter from O.C. N.Z.F.A. for your consideration and action.

P.L. Fenwick. Lt-Col. D.A.D.M.S. NZ and Aus Div. H. Q.

A.D.M.S. N Z and Australian Div.

I regret to have to report the following case:

7/377, L/C Moore.M.O. of C.Y.C.Regt has returned here
on 2nd June as fit for duty.

His regimental M.O. sent him here at once, and on examination we found him to have a temperature of 101 degrees, and a bullet wound in the upper part of the chest on the right side at the back. The bullet could be easily seen and felt in front below the nipple.

The right pleura contained fluid, probably blood at first, and later pus. The bullet had penetrated the lung and lodged just under the skin, and had obviously been untreated by anyone with elementary medical knowledge. I sent him off immediately to the Hospital Ship.

(Sgd) C.Begg. Lt-Col. O.C. N.Z.Fd.Amb.

4/6/15



"The .O.C.

No 1 Australian Stationary Hospital.
Mudros.

Re Loe/Cpl Moore, Canterbury Yeomanary Cavalry.

This patient was admitted to F Ward under my care on May 28, having walked from the Australian Pier to the Hospital.

He gave the history that he had been injured 8 days previously and complained of pain on the right side of the chest below the nipple, where he said, a bullet had struck his bandolier. He said nothing whatever about being hit by a bullet behind the chest. I did not find any evidence of pleurisy or other lung involvement. I did not feel any foreign body beneath the skin, which was unbroken; nor would I have expected anything of this sort from the history he gave me. He did not seem at all seriously ill while in the Hospital, having a normal temperature and pulse during that time. He was kept at rest, and after a few days, his pain disappeared. He was allowed up on May 30th and discharged on June 1.

I enclose his temperature chart and diet and history sheet, which speak for themselves.

June 12th 1915:

(Sgd) T.G.Wilson. No 1 Aust. Stationary. Hospital.

To D.D.M.S. L of C, G.H. Q. H.M.T. "Aragon"

N

Attached explanation from Major Wilson forwarded herewith.

Major Wilson naturally took the man's explanation of his injury as correct. The patient was one of 84 admitted at the same time, and he had no note indicating the nature of his injury or of previous treatment. He was able to walk up a steep hill to the Hospital, and his pulse and temperaure showed no disturbance.

His temperature on leaving here was 98 deg., his pulse 56. and his respiration 18.

I need hardly point out that such symptoms did not indicate a Pleura with fluid in - much less pus.

(Sgd) H.W.Bryant. Lt-Colonel

June 14 1915

A N Z A

Head Qrs.

No 408, Pte. A.G.King, 5 L.H. is stated to be in Hospital at Kemnos suffering from a supposedly self inflicted wound. It is requested that when he is sufficiently recovered, he be sent to re rejoin his regiment, so that his case may be imquired into, and if necessary disciplinary action taken. This memorandum is sent now in case the return of this man to australia for discharge on account of medical or physical unfitness is contemplated by the medical authorities.

(Sgd") J.K.Forsyth.

A A and QMG

for G.O.C. 1 Aust.Div.

D.A.G. G.H.Q. M.E.F.

May arrangements be made please for the above mentioned man to be returned to his unit, as soon as he is sufficiently recovered.

(Sgd) W Hancock. Maj.

DAAQWG. Lt-Ceneral; Comd Aust.N.Z.A.C.

D.D.M.S.

Please take the necessary steps to ensure that this man is returned to the 1st Aust. Div. as soon as he is fit to leave Hospital.

G.H.Q. M.E.F.

(Sgd) Beynon. AAG.

D.D.M.S. L of C. Mudros.

For information, necessary action and return.

(+)

GHQ 7/6/15

(Sgd) W.G.Birrell.
Surgeon-General
DWS MRF

To O.C. 16 Stationary Hospital. To O.C. No 1 Aust. Stationary. Hospital.

Passed to you for information and necessary action please. If this man is in your Hospital, you will please arrange that he is returned to the 1st Australian Division on discharge from Hospital. Please return.

J.Maher-Colonel.

10/6/15

From 16 th Stationary Hospital stating that King not patient there.

B.D.M.S.

Attached report from Major. Wilson of this unit will explain condition of Private King. . As soon as he is well ehough he will be returned to his unit.

> (Sgd) H.W.Bryant. No 1 Au . Stat. Hospital.

Medical Report on Private King. No 408, 5th L.H.

by Major Wilson.

Has a bullet wound going right through the left hand in the middle of the palm. It has been done over three weeks, and the X-Ray examination shows a fracture of the 3rd metacarpal bone about its middle. The wounds on the palm and dorsam of the hand ought to be healed in about 10 days time, but the index and long fingers have had their flexor and long tendons (Signed) T.G.Wilson. injured.

17/6/15

1.A.S.H.

Appendix No.4 Mudros, Lemnos Island. July 3rd 1915 To D. D. M. S. General Headquarters. With regard to Circular memo dated June 28th marked "Confidential" and "Urgent" which I received on July 1st, I enclose documents which give the admissions and discharges occurring in this Hospital over a period extending from May 21st for six weeks. The O.C. Otago Regiment days that he has sent 82 men off from Anzac with minor ailments, and that up to June 22nd, only five We have had 16 men of this regiment during the period referred to, and their average stay in this Hospital has been 8 days. Instead of being minor cases they include Enteric fever, pneumonia, hernia, Complicated measles and gonorrhoea. Of these 16 cases, 5 were sent to the Base, three to duty, (one in three days, one in five days, and one in 12 days) and six were sent to the convalescent depot within from three to 11 days. The statement that most of these cases went to the Australian Hospital at Lemnos cannot refer to us, as we have only had 16 out of 82 cases. Now, one of the most reliable sergeant-majors of the Otago, Regiment has made a tabulated set of charges, which I will reply to in the same order:-(1) Is the Sergeant Major or the Medical Officer to be the judge of the fitness of the soldiers to return to duty. Omiting the serious cases in the 16 mentioned, the average stay of the remainder in this Hospital was 42 days. About visiting the village. That is outside my jurisdiction, as an Assistant Provost Marshall was appointed, whose duty it was to prevent any men without passes going into the village. Notices were posted in each ward, and also read out by wardmasters almost every day, and these pointed

out that the village was out of bounds and that men were liable to punishment if they so transgressed. Besides this, I applied for an armed guard to keep them in, but this was refused by the P.M. as he had not sufficient men for those duties.

Officer at stated times each day - many of them two and three times a day -. Such Medical officers report on their condition each day, and state whether they will be fit to return to the front or the convalencent depot, or whether they will have to go to the Base.

(3) The Embarkation Officer at the Pier distributes the incoming patients at the pier to the different hospitals. He sends word to the miffer each O.C. who prepares for the number specified; and who provides means for their conveyance from them pier to the hospital.

All these cases pass through the Orderly Room, are entered in the Admission and Discharge Book, and are then sent to the various wards under the special supervision of each wardmaster. All cases are then examined by the Medical Officers, and the nature of the injuries or diseases is entered upon the ward sheet from which the diagnoses are entered each evening into the Admission and Discharge book.

On departure, a nominal roll accompanies each batch, who are conveyed under the charge of an N.C.O. He sees them safely on to a minerweeper pinnace for the mine-sweeper which is to take them to the front, or conveys them to the convalencent depot. In the case of departure for the Base, a nominal is taken by the Medical Officer on board the steamer bound for the Base.

(4) This is answered by the preceding paragraphs, and as it affects this hospital, I must point out that not only is it axtotally untrue, but is exceedingly fairunfair and irresponsible.

I feel that such statements taken from irresponsible people, and not containing any specific facts, should not obtain credence so easily with O.C.'s of regiments.

With regard to the statement of the O.C. 10th Light Horse Regt.

I enclose documents which give the admissions and discharges that passed through this Hospital. Of the 54 who have returned to duty, eights passed through this Hospital, three were sent to the Base, in three five and seven days respectively, one is still in Hospital (on whom I will attach Major Newland's report) and four were sent to the convalencent depot in six, six, seven and 10 days giving an average stay in Hospital of $7\frac{1}{2}$ days.

Of the 14 returned to duty, six were in this Hospital for an average stay of inseven days. One of the latter had a fractured meta:carpal bone and his stay was the longest.

With regard to the number of days absent for trifling illnesses, I Take it that the Medical Officer is the best judge of fitness or unfitness of a case, and, as applied to cases attended here, this is a gratuitous insult. It is very evident that no leakage has occurred here, nor any undue delay, either in passing patients too or from this Hospital.

I might suggest that whilst I was for a short time on Transport B.3.

(Alaunia) after the O.C. of the ship had rounded up everyone he could find, there was a very large number of men on board who could not be accounted for, and, if this occurs on one boat, may it not occur on many others.

(Sgd) H.W.Bryant. Lt:Colonel. O.C. 1 A.S.Hospital.

Appendix No.

No 1 Australian Stationary Hospital. Lemnos Island.

Average Admission for 6 weeks Officers.

11 per week.

" Other ranks;

Sent to front per week. for four weeks.

139 per week.

Sent to front since formation of Convalescent 'Depot.

60 during one week.

Sent to Convalescent Depot.

187

Cases sent to Base in five weeks:

482

Average per week.

96

Average stay in Hospitalm of each patient, including all cases of Enteric, Venereals, and Infectious Diseases.

between 9 and 10 days.

..... H.W. Bryant .. VD. Lieut-Colonel. O.C. 1 A.S. Hospital.

NO.1 AUSTRALIAN STATIONARY HOSPITAL,

Lemnos Island.

6.d.

PATIENTS transferred or discharged during the month of June, 1915.

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		37		14		21			28	11
		21		15					29	9
		23			10	23	7			12
		19			7 6		9			

Total, 348

Transferred Convalescent.

June	21	84	June	26	26
	22			27	
		21			20
	25	5		30	28

Total. 214

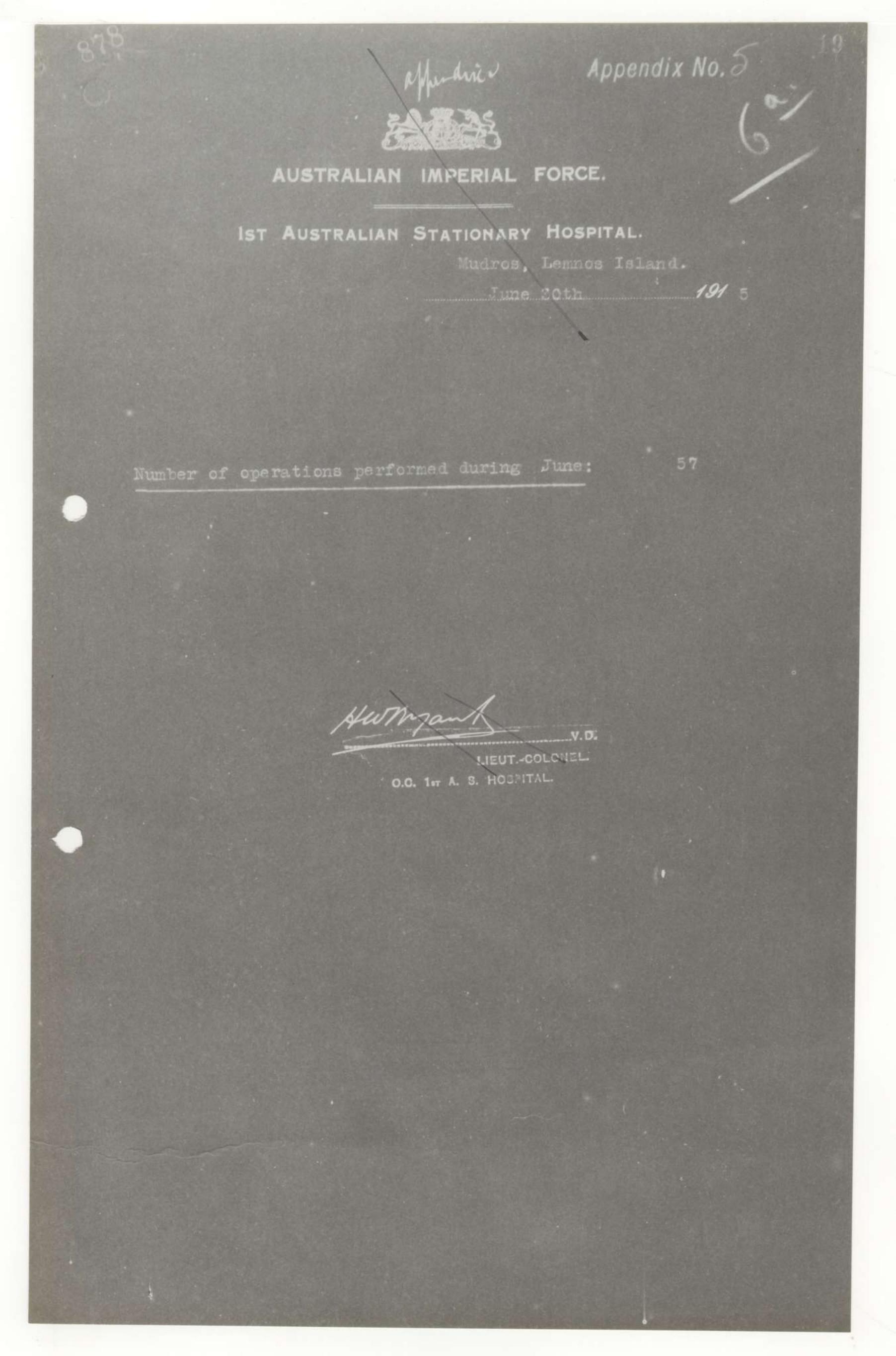
Transferred to Base.

June		65	June	27	36
		27.		28	
	16	92		30	
	24				

Total, 370

Hussyand V.D., It-Col.,

O.C., No.1 Australian Stationary Hospita



appender of

AUSTRALIAN IMPERIAL FORCE.

IST AUSTRALIAN STATIONARY HOSPITAL.

Mudros, Nemnos Island.

June 30t

191 5

Cases examined under X-Rays from June 1st to 30th inclusive.

Cases screened

No 1 Aust. Stationary. Hospital.
No 1 Aust. Stationary. Hospital.
No 15 Stationary Hospital. R.A.M.C.
No 16 Stationary Hospital. R.A.M.C.
Army Bearer Corps. (Indian)
French Base Hospital.
Greek Civilians.

27 22 2

209 Screen cases.

Number of skiagrams taken.

No 1 Aust. Stationary. Hospital. No 2 Aust. Stationary. Hospital. Army Bearer Corps (Indian) Greek Civilians.

21 5 3

30 Skiagrams.

Total exposures:

209 screened 30 skiagrams. 239 cases.

(Sgd) G.Leo. A. Coates.
Sergeant.
Radiographer.
1 A.S.Hospital.

shurry and

O.C. 1st A. S. HOSMITAL.