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1914-18 War

Medical, Dental & Nursing

Item number: 26/68/1

Title: No 14 Australian General Hospital

July 1916 - September 1917



AWM4-26/68/1

DIARY SUBSEQUENTLY COMPILED FROM JULY 1916 TO SEPTEMBER 1917.

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CONFIDENTIAL

WAR DIARY

of

No.14 AUSTRALIAN GENERAL HOSPITAL.

Period 5th. JULY 1916 to 19th AUGUST 1916.

FORMATION OF THE UNIT.

On 5th July 1916 a "Depot Company" was formed at the Domain Camp, Melbourne, being the nucleus of the new General Hospital which had been authorised for service overseas.

The establishment which had been published was one for a 1040 bed General Hospital and differed very materially from the establishments of Imperial General Hospitals and of the Australian General Hospitals serving overseas.

The main feature of the establishment was the allotment of officers and N.C.O's to special departments, but as this establishment was subsequently reduced and altered there is no need to record the details thereof.

Captain A.H. THWAITES, A.A.M.C., was appointed O.C. of the Depot Company and acted as organising officer of the new unit, being assisted by Hon.Lieut and Q.M. J.GREEN, who prior to this transfer, was Quartermaster at No.5 A.G.H., Melbourne.

Captain E.W. GUTTERIDGE., A.A.M.C., was also attached to the Depot Company and played an important part in the training of the personnel.

The personnel was selected by Captain A.H. THWAITES from the various Hospitals, depots and camps in Victoria, every man marching in as a private whatever his previous rank. Men were selected from No.5 A.G.H., No.11 A.G.H., Broadmeadows Camp, Royal Park Camp, and nearly all the metropolitan and country camps in Victoria.

Three Medical Officers, who had been provisionally appointed to the new unit, joined the depot and assisted in the training and organisation. These Officers were Captain M.D. SILBERBERG., who was taken on strength on 14/7/16, Captain H.A.S. NEWTON on 15/7/16, and Captain R.McD. BOWMAN on 17/7/16. This latter officer had seen service at Gallipoli.

On 17th July Captain A.H. THWAITES was promoted to Major, it being intended that he should be the Registrar and Adjutant of the Unit, and Hon.Lieut J. GREEN was promoted to Hon.Captain, and provisionally appointed as Quartermaster of the unit.

On July 26th the actual formation of the hospital unit was commenced, 90 other ranks being taken on the strength of No.14 A.G.H., A.I.F., and batches of selected men were subsequently taken on strength at short intervals.

On August 13th. Major L.J.C. MITCHELL was taken on strength, having been selected as Oculist and Aurist for the hospital.

By this time the organisation and equipment of the unit had been practically completed, and the N.C.O's had been appointed and their promotions published in the orders of the Unit.

At this date it was generally understood that the hospital, was to proceed to England for duty in France. About this time however a complete change was made in the arrangements and orders were received that the establishment was to be reduced to that for a 520 bed hospital.

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A new establishment was drawn up, of which a copy is attached (Appendix "A"). This cutting down of the establishment entailed the transferring of a large number of men back to the Depot Company, and the reduction or transfer of N.C.O's who had been appointed. Four N.C.O's reverted to a lower Non-commissioned rank, and one to private, at their own request, in order to accompany the unit overseas.

So far as was possible men who had already seen service overseas, were selected for promotion to Non-commissioned ranks, and the final selection included four Staff-sergeants, three sergeants and three corporals who had previously served. The reorganisation was completed on 16th August, on which date Major A.H. THWAITES was appointed to command the unit and promoted to Lieut-Colonel.

As this alteration of the establishment was effected only a few days prior to embarkation, it will be understood that a tremendous strain was thrown on the Quartermaster's Department. The equipment and stores had been drawn and when the new table of equipment was issued all excess stores had to be returned to Ordnance.

On August 18th, Major C.LOWTHER CLARKE was taken on strength, having been appointed Registrar of the Hospital.

On August 19th, the unit embarked on No.1 Australian Hospital Ship "KAROOOLA", at the new pier, Port Melbourne, sailing at 4 p.m.

On the day of embarkation Captain H.G.LEAHY joined the unit, also Hon.Lieut E.S. MARTIN who had been appointed as Dental Officer, and Hon.Lieut O.D.WARD, the Lieutenant Dispenser of the Hospital.

The actual strength of the unit upon embarkation was as follows:

Officers:	9
Nursing Staff:	30
Other Ranks:	<u>153</u>
Total	<u>192</u>

The remainder of the nursing staff appointed to the hospital--five sisters and eight staff nurses--had already embarked for England being utilised for duty on different transports. These nurses subsequently joined the unit in Egypt.

With the exception of the Matron, who had been Principal Matron of the Second Military District, the whole of the Nursing Staff had previously served in the A.I.F. overseas.

An analysis of the previous occupations of the other ranks shows a remarkably small percentage of labourers, and the educational standard of the staff was high.

The attached list of trades (Appendix "B") includes many skilled trades and many professional men. Special training in hospital duties was arranged while in camp, batches of men being sent to the wards and operating theatres of the Melbourne, Alfred, St.Vincent's, and Eye & Ear Hospitals.

The physical standard of the staff was exceptionally high for a hospital unit, and subsequent events in Egypt proved the value of this, when for a considerable period it was necessary to overwork the whole staff of orderlies.

The attached list (Appendix "C") shows the final selection of Medical Officers and the special duties allotted to them.

The position of Major for pathological work was filled by a Captain owing to the fact that Major.H.PRIESTLY, who was selected for the position, could not be spared from his Civil Government post.

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	Offi- cers	WOs	S/Sgts and Sgts	Rank and file	Rid- ing horses	Tot- al	Rem- arks
Lieut-Colonel in charge	1				1	1	
Lieut-Colonels	2				2	2	
Majors	6					6	
Captains	10					10	
Quartermaster (Hon.Capt)	1					1	
Pharmacist (Hon.Lieut)	1					1	
Warrant Officers		2				2	
(Specialists)			3			3	
(Dispenser)			1			1	
Staff/Sgts (Nursing and							
General)			1			1	
(Steward)			1			1	
(Clerk)			1			1	
(Nursing			3			3	
General			1			1	
(Steward)			1			1	
Sergts. (Cook)			1			1	
(Pack Store)			1			1	
(Linen Store)			1			1	
(Clerks)			3			3	
(Eye and Ear				1		1	
General				3		3	
Corporals (Steward)				1		1	
(Cooks)				2		2	
(Clothing store)				1		1	
(Clerks)				3		3	
(Steward's stores)				2		2	
(Cooks)				(a) 3		3	
(Clothing store)				1		1	
(Pack store)				1		1	
Privates (Linen store)				1		1	
(Clerks)				2		2	
(Ward duties)				66		66	
(Batmen)				(b) 25		25	
(Supernumeraries)				6		6	
Total General Hospital	21	2	18	(c) 118	3	159	-

(a) 1 for Female nursing Staff (b) 4 for Female Nursing Staff,
(c) Of these 40 may be specially enlisted men.

ATTACHED

The above establishment includes 1 Lance Sergeant and 4 Lance corporals.

Dental Services.

- 1 Lieutenant Dentist.
- 1 Staff Sergeant Mechanic
- 1 Private Orderly.

Nursing Services.

- 1 Matron.
- 14 Sisters.
- 28 Staff Nurses.

RECORD OF PREVIOUS OCCUPATIONS OF OTHER RANKS *30/9/17*

Clerks	54
Labourers	25
Salesmen	18
Students	9
Chemists	5
Ministers of Religion	4
Carpenters	4
Cooks	4
School teachers	4
Dentists	2
Dental Mechanics	2
Jewellers	2
Tailors	2
Laboratory assistant, electrician, watchmaker, musician, sanitary inspector, motor mechanic, surveyor, tram inspector, meat inspector, solicitor, engineer, surgical instrument maker - of each	1.

No.14 AUSTRALIAN GENERAL HOSPITALAPPENDIX "C" *E 34*MEDICAL STAFF *5*

Lieut-Colonel in charge.	Lt-Col. A.H. Thwaites.
Lieut-Colonel Senior Physician.	Lt-Col. C.B. Blackburn.
Lieut-Colonel Senior Surgeon.	Lt-Col. A. J. H. Saw.
Major. Radiologist.	Major W.L. Kirkwood.
" Oculist and Aurist.	" L.J.C. Mitchell.
" Registrar.	" C. Lowther Clarke.
" Physician.	" L.S. Latham.
" Surgeon.	" E.B. Brown.
" Pathologist.	Capt. N.H. Fairley.
Captains (10)	Hon. Major A.W. Marwood.
	Capt. M.D. Silberberg.
	" H.G. Leahy.
	" E.D. Ahern.
	" A. Badock.
	" H.F.H. Elvins.
	" R.McD. Bowman.
	" E.W. Griffiths.
	" P.J.B. Murphy.
	" A.M. Aspinall.
Quartermaster.	Hon. Capt. J. Green.
Pharmacist.	Hon. Lieut. O.D. Ward.
Dental Officer.	Hon. Lieut. E.S. Martin.
Matron.	Miss Rose Creal.

CONFIDENTIAL.

WAR DIARY

of

No.14 AUSTRALIAN GENERAL HOSPITAL.

Period 19th. August to 23rd. September 1916.

The Hospital Unit (as previously detailed) sailed from Port Melbourne on No.1 Australian Ship "KAROOIA" on August 19th 1916.

Lieut-Colonel T.G. WILSON who was C.O of this Ship, did everything in his power to make the voyage a comfortable and a happy one, and cordial relations were established, and maintained throughout the voyage, between the Staff of the Hospital Ship and that of No.14 A.G.H.

The first few days of the voyage were characterised by rough weather and little could be done in the way of organisation or training until Cape Leeuwin had been passed.

On 22/8/16 the Commanding Officer appointed Major.C.LOWTHER CLARKE to carry out the duties of Adjutant in addition to those of Registrar, and this allotment of duties remained unchanged throughout the command of Lt-Col A.H. THWAITES and subsequently of Lt-Col R. MACDONALD.

ACCOMODATION.

The accomodation provided was exceedingly good. Three of the officers occupied cabins, while the remaining six were quartered in a small ward, used as an officers ward, when the Ship carried invalids.

The Matron and some of the Sisters were given cabins, and the remainder had a large, airy ward, containing swinging cots, set apart for their use.

The other ranks occupied wards fitted with fixed berths.

MESSING.

The food provided was good throughout the voyage, and no complaints were received.

LAUNDRY.

The Unit were allowed to use the Ship's laundry, a reasonable price-list being issued.

It was found necessary to put all clothes through a steam sterilizer, owing to the occurrence of "DHOBI'S ITCH". This parasitic disease had occurred amongst the staff of the Hospital Ship and had only been checked by the complete sterilization of all clothing. Despite this precaution several cases occurred amongst the members of the Unit and were found difficult to cure.

DRESS.

The lack of an issue of drill slacks or "shorts" was felt during the voyage, but the men were allowed to wear the dungaree trousers with which they had been issued whilst in Camp.

The opinion was formed that an issue of "shorts" to Troops travelling by the Red Sea route-- such issue to be withdrawn on completion of the voyage-- would be of considerable benefit.

ROUTINE.

The Unit provided its share of the Ship's duties, such as Guards and Deck Picquets, and the Officers shared with the Hospital ship Officers the duties of Officer i/c Guard and Orderly Medical Officer.

Physical Drill parades were held daily between 9.45 a.m and 10.15 a.m. and between 2.30 p.m and 3.0 p.m, ample deck space being available for the purpose.

ROUTINE continued.

Boat-drills were held several times during the voyage, particularly when nearing the Gulf of Aden.

Training: This took the form of lectures and demonstrations, which were given in the afternoons. These demonstrations on nursing were of a practical nature, equipment being borrowed from the Hospital Ship, and the Matron being assisted by the Sisters. A specimen syllabus of lectures for one week is attached (Appendix "A")

PORTS of CALL.

The first port of call was Fremantle, which was reached at 11.a.m. on August 25th. General leave was granted to all ranks, and those who had relatives in or around Perth were allowed to remain on shore overnight.

The Ship left Fremantle at noon on the following day, heading for Colombo. The ultimate destination of the Unit was still in doubt when the ship left Melbourne, but it was now evident that Egypt was the goal. †

The next port of call was Colombo, which was reached on the evening of Sept 5th. Here the ship stayed 40 hours, during which all ranks had an opportunity of shore leave, and many were able to visit Kandy.

The voyage was resumed at noon on Sept 7th.

No men were left behind at either of these ports of call and there were no cases of drunkenness or absence without leave.

MEDICAL.

During the voyage the health of the troops was consistently good, and there were only ten admissions to Hospital, all of which were for diseases of a minor character. One operation was performed for "MUSCLE HERNIA".

The majority of the unit had been inoculated prior to embarkation, but the vaccinations had not been completed. These were done, and dental inspections were held and all ranks rendered dentally fit.

DISCIPLINE.

A high standard of discipline was maintained, only one breach being reported. In this case a Lance Corporal was reverted to the ranks for falling asleep whilst in charge of a night guard.

ORGANISATION.

During the voyage the Commanding Officer held frequent conferences with those of the Officers who had had previous experience in Hospital administration, and instructions for Officers, Matron, Sisters, Wardmaster, Ward Orderlies etc, were drawn up. These were modelled on those laid down in the Regulations for the Army Medical Services (Imperial), modified where considered advisable.

The duties of the N.C.O's were laid down and all concerned were instructed in their special duties, in order that the Unit might be able to commence its work with the minimum of confusion and delay.

RECREATION.

The facilities for recreation on board the Ship were excellent.

A large swimming bath was erected and hours allotted for its use.

A Concert party was formed and concerts, debates etc, were held in a ward which had been cleared and set apart for the purpose.

Speaking generally the Unit were very fortunate in being allowed to travel on a Hospital Ship in extreme comfort.

DISEMBARKATION.

The "KAROOOLA" arrived at Port Tewfik (the port of Suez) on the morning of September 19th and berthed at the Coal Quay.

It was then ascertained that No.14 A.G.H. was to relieve No.3 A.G.H. at Abbassia and that the latter unit was to proceed to the United Kingdom on the "KAROOOLA"

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8DISSEMBARKATION continued.

Great disappointment was occasioned by the instruction that all Hospital equipment was to be left on board, and to be taken over by No.3 A.G.H. Much of the equipment had been specially selected, that of the special departments in particular, and the Unit grudged having to give this up in exchange for worn equipment.

However, permission was obtained from the A.D.M.S. A.I.F., Col.R.M. DOWNES, to land special Surgical equipment, and an attempt was made to sort out the necessary cases. Owing to the short time available before disembarkation, and the difficulty of finding the required cases in the holds, only a few cases could be landed.

The greatest loss sustained in this manner was the fine set of surgical instruments selected in Melbourne. The set taken over from No.3 A.G.H. was not a good one, and it was never possible to obtain subsequently from the Imperial Authorities instruments equivalent in quantity and quality to those left behind on the "KAROOIA"

A special train arrived alongside the ship, in the early hours of 20th September and all baggage and the small quantity of equipment was loaded before daylight. The train left at 10.a.m. and arrived at Abbassia siding, immediately in front of the Main Barracks, about 6.p.m.

The C.O of No.3 A.G.H. had made all necessary arrangements for the accomodation of the Officers, Nurses, and other ranks, the latter being accomodated in two Vacant wards.

The Officers, Nurses and other ranks spent the afternoon of September 21st and the whole of September 22nd in the wards and Offices becoming acquainted with their respective duties, and at 9.a.m. on September 23rd. No.14 A.G.H. commenced its work in Egypt, the whole of the personnel of No.3 A.G.H. being withdrawn, with the exception of Lt-Col C.G. MacKNIGHT? nine Captains, Lt-Col C.J. MARTIN (PATHOLOGIST), one sister and twelve Staff-Nurses.

These Officers and Nurses were required to enable the Medical work to be carried on pending the arrival of the balance of the Staff of No.14 A.G.H.

This "take-over" was effected without any trouble or difficulty, and no hiatus occurred either in the Medical or the Administrative work of the Hospital.

On September 22nd a large number of invalids had been transferred to the Australian Hospital Ship "KANOWNA", with the result that there were only 366 patients in the Hospital on the morning of Sept 23rd.

On Sept 22nd the Medical Staff had been augmented by the arrival from Australia by the "MOOLTAN" of Lt-Col A.J.H. SAW, the Senior Surgeon, and Captain A.BADOCK, both from the 5th Military District.

There was no formal "take-over" by Lt-Col A.H. THWAITES from Col B.J. NEWMARCH, C.M.G., but the Quartermaster of No.3 A.G.H. Lieut G.M. GLEN, remained to check equipment, stores, barrack damages etc, with the Quartermaster of the incoming unit.

The conditions existing at this time, and the initial difficulties met with, will be set out in the next instalment of this War Diary.

APPENDIX "A".

SYLLABUS OF LECTURES.

Sept 11th to 18th 1916.

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Sept. 11th. Registrar. Qualifications of an orderly. Hospital etiquette. Hygiene of Hospital. Ventilation, Lighting, Warming and Cleanliness of Wards. Prevention of infection. Contagion. Isolation. Sanitation as applied to a Hospital.

Sept. 12th. Demonstration. Matron Creal. Bed-making, management of helpless patients. Use of thermometer. Methods of taking pulse, respirations etc. and recording same on Hospital Chart. External applications. Fomentations, poultices, Local applications of heat and cold. Hot and Cold packs. Counter-irritation. Mustard, Blisters, etc.

Sept. 13th. Major. Mitchell. Lotions in common use. Methods of administering drugs, enemata, hypodermic injections, salines etc. Hypnotics. Drug rashes.

Sept. 14th. Personal Hygiene.

O.C.

Sept. 15th. Capt. Silberberg. Inflammation, suppuration, ulceration, gangrene, and septicaemia. Healing and dressing of wounds, burns and scalds. Bed-sores-- prevention and treatment.

Sept. 18th. Capt. Silberberg. General symptoms. Value of close observation, Temperature, rigors, pain, dyspnoea, expectoration, Haematemesis, diarrhoea, melaena, abdominal distention, haemoptysis, state of pulse, collapse, cyanosis, sweating, delirium, vomiting, oedema, and tenderness.

(Signed) C. LOWTHER CLARKE. Major.
Adjutant, No. 14 Australian General Hospital.

CONFIDENTIAL

WAR DIARY

of

No. 14 AUSTRALIAN GENERAL HOSPITAL.

Period 23rd. Sept. to 30th. September, 1916.

The Hospital, taken over by No. 14 A.G.H. from No. 3 A.G.H. on the morning of the 23rd. September was situated in the Main Barracks, ABBASSIA. These Barracks were in a state of considerable disrepair at the beginning of the war, but had been renovated and adapted for use as a hospital before being occupied by No. 3 A.G.H. early in 1916, on the return of this latter unit from LEMNOS.

The general plan was that of a square of two-storied buildings with additional blocks outside and parallel to three of the sides of the square. Wide verandahs on every building increased the accommodation and allowed of many patients living in the open air. Ablution rooms were situated between each two adjacent wards, while pantries and lavatories were built out off the verandahs.

The Hospital could hold 1,100 to 1,200 patients without difficulty, and this could be increased to 1,600 by putting the Staff into tents and converting two mess-rooms into wards. The various store-rooms were large and convenient, separate places being set apart for Pack-store, Clothing store, Linen store, Ironmongery store, Paint shop and Motor Garage. A large room was set apart as a Recreation Hall and used for concerts, lectures etc. The Garrison Chapel was contained within the Hospital buildings, being the only portion of the Barracks not taken over by the O. C., No. 14 A. G. H.

THE OPERATING THEATRE: was not well designed, being hot and ill-ventilated, but the work done in it was satisfactory, though at certain times the need for a second theatre made itself felt.

SURGICAL STORES:

Although this store was well stocked, the quality of the stores was not good. A large quantity of material was returned to the Base Depot of Medical Stores, consisting of obsolete and worn instruments and appliances. The condition of the Surgical instruments taken over has already been referred to.

THE DISPENSARY: was large and well-designed and the stock adequate for immediate requirements.

THE PATHOLOGICAL DEPARTMENT had been under the charge of Lieutenant Colonel C. J. MARTIN and was excellently fitted and stocked. It comprised five rooms and was undoubtedly the best laboratory to be found in any Military Hospital in Cairo. The one defect in equipment was the want of a good microtome, a deficiency that caused much trouble. Some specially selected equipment had been left on the "KAROO LA" upon disembarkation.

X-RAY DEPARTMENT:

The equipment of this department was only fair and frequent breakdowns occurred during the first two months, in fact for some weeks no radiological work could be undertaken.

MASSAGE AND ELECTRO-THERAPEUTIC DEPARTMENT:

This department contained no special equipment except a small hot-air bath and two batteries. Two Masseuses had been attached to the Nursing Staff of No. 3 A.G.H. but the Establishment of No. 14 A.G.H. included no special personnel to carry out this work, which had therefore, to be done by orderlies who had had a certain amount of experience previously. This lack of skilled Masseurs or Masseuses was a serious defect in an otherwise excellent Establishment. A General Hospital requires a good Massage Department, for in addition to the usual cases requiring

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treatment, there are always a large number of cases of myalgia and fibrositis met with on active service.

EYE AND EAR DEPARTMENT:

The Army equipment which No. 3 A. G. H. proposed to leave behind was quite inadequate for the requirements of a General Hospital to which all Australians in Egypt are sent. An arrangement was therefore entered into by which Lieutenant Colonel THWAITES purchased the special equipment held by No. 3 A. G. H. which had been obtained in the first instance from the Australian Red Cross Society. The money for this purchase was taken from the sum of £500 which had been entrusted to Lieutenant Colonel THWAITES on leaving Australia by the Red Cross Society. Full particulars of this somewhat unusual transaction will be found in the report forwarded by Major L. J. C. MITCHELL on the work of this department.

GENERAL EQUIPMENT:

The general equipment of the Hospital was, in the main, in a poor condition, having been in use for a considerable time. A large bulk store, full of stores of all descriptions, was taken over, but the contents of individual cases and bales could not be checked with the Quartermaster of No. 3 A. G. H. at the time. Many of these stores had been unopened since the transfer to ABBASSIA from LEMNOS, and the contents of bales etc. did not tally with the description on the outside when the subsequent check was carried out. Many weeks later, when all equipment had been carefully checked and taken up on the ledgers, it was possible to return to Ordnance miscellaneous excess stores to the value of some thousands of pounds.

The Staff of No. 3 A. G. H. on the arrival of No. 14 A. G. H. consisted of 26 Officers, 107 Sisters and Staff Nurses and 225 Other Ranks.

It was found very difficult to administer a hospital contained in such large buildings with a staff which was numerically small compared to that of the out-going unit, and it was fortunate that there were only 366 patients in hospital at the time of the take-over. However, within six weeks the numbers increased to 520 - the full complement of No. 14 A. G. H. - and were never less than this total during the succeeding twelve months, rising on the other hand to as high as 1,150.

On taking over on September 23rd. a census of patients actually in hospital was taken and there were found to be 366 patients. The office records handed over by No. 3 A. G. H. did not agree with this total but showed a big discrepancy, the books showing 70 men to be in hospital who had actually been discharged previously.

On September 24th. the whole Staff of No. 3 A. G. H., with the exception of the Officers and Nurses previously enumerated, entrained for ALEXANDRIA for embarkation on the "KAROOOLA".

CASUALTIES:

During the period under review four other ranks were admitted to hospital.

CONFIDENTIAL

WAR DIARY

of

14th. AUSTRALIAN GENERAL HOSPITAL.

Period - October, 1916.

During this month there was a gradual rise in the number of patients in Hospital, the total reaching approximately 500 by the end of the month.

The number of beds equipped, namely 570, was increased to 600 on October 6th., and again to 770 on October 31st. by the opening of new wards and by the increasing of the number of beds in existing wards.

In a hospital such as this, where all patients who are boarded to Australia have to remain awaiting embarkation, the normal cycle shows a gradual increase in numbers until a Hospital Transport sails, when the numbers necessarily drop again. The occurrence of heavy fighting will, of course, materially alter this cycle.

Lieutenant Colonel C.J.MARTIN remained in charge of the Pathological Department, and his knowledge, experience and personality were of very great benefit to the new unit.

One of the Garrison Fire Engines was quartered in the Main Barracks, and fire parties were detailed and drilled in the use of this engine in the event of a fire.

(A photograph of one of these parties is attached - APPENDIX "A")

No Unit colors having been allotted, application was made to the A.D.M.S., A.I.F., and the use of a chocolate diamond with a horizontal bar of olive green was approved.

On October 16th. and 17th. the first Conscription Referendum was held, the votes of patients being taken on the first day and those of the Staff on the second day.

Medical Officers acted as Authorised Witnesses in their own wards and the voting was completed quickly.

It cannot be said that the patients took a very great interest in the question set before them and many men refrained from voting.

PERSONNEL:

During the month the following Officers of the Staff arrived from Australia:-

On 7/10/16.	Lieut-Col.	C.BRICKERTON-BLACKBURN	-	Senior Physician.
	Major.	W.L.KIRKWOOD.	-	Radiologist.
	Major.	L.S.LATHAM.	-	Physician.
	Major.	E.E.BROWN.	-	Surgeon.
	Hon.Major.	A.W.MARWOOD.	-	"
	Captain.	H.F.H.ELVINS.	-	"
	Captain.	N.H.FAIRLEY.	-	Pathologist.
On 19/10/16.	Captain.	E.D.AHERN.		
On 20/10/16.	Captain.	E.W.GRIFFITHS.		

On October 14th., Lieutenant-Colonel MacKNIGHT, Lieutenant G.M.GLEN (Quartermaster), and Nine (9) Captains of the Staff of No. 3 A. G. H. entrained to ALEXANDRIA for embarkation.

One Nurse was taken on strength during the month.

One other rank was transferred out of the Unit to the A.I.F. Canteens.

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DISCIPLINE:

Only one minor offence was reported amongst the personnel.

SICKNESS:

Officers. Captain N.H.FAIRLEY was a patient in the hospital for three days suffering from "BACILLARY DYSENTERY".

Other ranks. Fourteen (14) other ranks were admitted to hospital during the month.

STRENGTH.

The effective strength at the end of the month was:-

	<u>Unit.</u>	<u>Attached.</u>	<u>Total.</u>
Officers. - -	19.	3.	22.
Nurses. - -	30.	13.	43.
Other ranks.- -	148.	6.	154.

CONFIDENTIAL

WAR DIARY

of

No.14 AUSTRALIAN GENERAL HOSPITAL.

Period November, 1916.

During the month the number of patients in hospital increased rapidly from 520 to 740 on November 19th., but the departure of a Hospital Transport relieved the strain, and at the end of the month there were about 600 patients left.

The main difficulties at this time were due to the shortage of orderlies, and it was becoming evident that the provision of a General Hospital staffed for 520 beds was not sufficient to meet the requirements of the whole A.I.F. in Egypt.

There was no difficulty as regards the Officers and Nursing Staff, and it cannot be said that they were at any time overworked, but the number of orderlies was often insufficient. There was a fairly high percentage of sickness amongst the latter, but the main reason was to be found in the multiplicity of positions, not allowed for in establishment, for which orderlies had to be used.

Amongst these positions may be mentioned, postal orderlies, telephone switch attendants, despatch rider, motor driver, carpenters, painters, blacksmith, bootmaker etc.

The fact that the cooking and scullery work was done by natives under the messing contractor enabled the unit to carry on, however, satisfactorily, though the hours of duty of the orderlies were often very long.

During the month a radical change was made in the distribution of ward orderlies. Whereas these orderlies had been working in two shifts, a day and a night shift, the night shift was now divided into two sections, one section being on duty from 7 p.m. to 7 a.m., and the other from 5 a.m. to 1 p.m. These sections exchanged duties every seven days. This new system provided a greater number of orderlies - i.e. the day shift and one section of the night shift - during the busy part of the twenty-four hours, and left a minimum on duty during the slack hours between 8 p.m. and 5 a.m. This system worked admirably, was much appreciated by the orderlies and has been in vogue ever since this date.

On October 13th. CAIRO was bombed by an enemy aeroplane, but no bombs fell near ABBASSIA, and no patients were admitted as a result of this attack.

The hospital patients had previously worn khaki drill suits as hospital uniform, but owing to the complaints from the Military Police as to their difficulty in distinguishing patients on leave in CAIRO, and owing to the colder weather, the blue uniform suits used in Imperial Hospitals were re-introduced.

An arrangement was made by which the Hospital provided a Medical Officer to inspect the Sanitation of the Australian Depot Stores at GHEZIREH at regular intervals.

PERSONNEL:

Arrivals during the month from AUSTRALIA:

On 10/11/16: Captain R.T.FETHERSTONHAUGH.
On 21/11/16: Captain P.J.B.MURPHY.
 Captain A.M.ASPINALL.

Departures:

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PERSONNEL (Contd):

Departures:

- On 3/11/16: Captain A.BADOCK. - to Aust.Remount Depot.
- On 4/11/16: Lt.Col. C.J.MARTIN. - to Alexandria for embarkation,
- On 18/11/16: Captain E.W.GRIFFITHS - to Royal Australian Naval
Bridging Train.
- On 24/11/16: Captain P.J.B.MURPHY - to Austn.Training Depot, Moascar.

During the month 19 Nurses were taken on strength, including 13 who had originally been allotted to the Unit but had gone to England on different transports prior to the embarkation of the Unit.

On November 20th., the Hospital Transport "AYRSHIRE" left SUEZ for AUSTRALIA, carrying as invalids, 5 Officers and 207 Other ranks who were patients in the hospital.

Four Nurses from the staff returned to Australia on this ship on duty.

CASUALTIES:

Admissions to Hospital:

- Officers..... 1. - Hon.Major MARWOOD - "Dysentery".
- Nurses..... 2.
- Other ranks...13.

DISCIPLINE:

Only one case in Orderly Room.

EFFECTIVE STRENGTH:at the end of month:

	<u>Staff.</u>	<u>Attached.</u>	<u>Total.</u>
Officers. ...	17	3	20.
Nurses. ...	40	17	57.
Other ranks....	143	11	154.

CONFIDENTIAL

WAR DIARY

of

No. 14 AUSTRALIAN GENERAL HOSPITAL.

Period - DECEMBER, 1916.

During this month the number of patients in Hospital remained remarkably constant, the total fluctuating between 560 and 620. The Australians in SINAI were not engaged in any fighting of any importance and very few wounded were admitted during the month.

While the life in the SINAI PENINSULA was exceedingly monotonous, it must be admitted that the health of the troops was excellent, and the incidence of serious or epidemic disease was remarkably low. The number of Medical cases admitted was twice that of the surgical cases.

Of the discharges during the month 62 % went direct to duty without any intermediate stage in a Convalescent Hospital or Camp.

CHRISTMAS DAY: was spent in a very happy fashion by the patients.

The Nurses and patients showed great keenness in the decorating of the wards, and there was much friendly rivalry between the various wards. The Messing Contractor provided extra food and luxuries and the Australian Red Cross Society supplemented the food and also gave Xmas presents to all the patients. The same Society provided a good orchestra to play in the Hospital during the afternoon. In the evening a Concert was given to the patients by the "KOOKA-BURRAS" Concert Party, who made their debut on this occasion. This party was recruited from amongst the Hospital orderlies and was directed by Private F. St. LEDGER, a musician of considerable note in civil life. This concert party subsequently became an important factor in the social life of the Hospital, and, confining their efforts to the amusement of hospital patients only, gave a large number of performances in the various Imperial Hospitals in and around CAIRO.

(A photograph of the original party is attached - APPENDIX "A").

On BOXING DAY, the Annual Garrison Sports were held, at which teams from a large number of Units competed. There sports were won by No. 14 A. G. H. by a handsome margin, the runners-up being a combined Australian and New Zealand team from the Imperial Camel Corps.

The end of the year was clouded by the first loss by death of a member of the Unit. No. 15220, Private R. G. D. KNOX was seen to leave ABBASSIA alone on Xmas Day about 5 p.m. and was never seen again alive. After twelve days interval his body was found in the NILE at BENHA, 45 minutes journey by train from CAIRO.

The Registrar and Pathologist identified his body and attended his funeral in the Greek Cemetery at BENHA on 9th. January, 1917.

A Court of Enquiry was subsequently held, but nothing could be proved as to how he met his death. The fact, however, that he had been robbed and that there was evidences of a violent blow on the head, lead one to believe that he was the victim of foul play.

A short Memorial Service was held in the Garrison Chapel at 6 p.m. on January 11th. 1917 at which every available member of the Unit was present.

PERSONNEL:

Twelve (12) Nurses left behind by No. 3 A. G. H. embarked for England on December 11th. 1916.

There were no changes amongst the Officers.

DISCIPLINE:

There were five (5) minor offences dealt with during the

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DISCIPLINE (Contd):

month, four of which were cases of over-staying of ordinary leave by short periods.

CASUALTIES:

Ten (10) other ranks were admitted to Hospital during the month, but there was no sickness amongst the Officers or Nurses.

THE EFFECTIVE STRENGTH at the end of the month was:-

	<u>Staff.</u>	<u>Attached.</u>	<u>Total.</u>
Officers. ...	18	3	21.
Nurses. ...	45	-	45.
Other ranks....	134	27	161.

Two photographs are attached which indicate the structure of the Hospital and the decorations on Christmas Day.

APPENDIX "B" shows a verandah scene, and -

- APPENDIX "C" a ward interior.

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WAR DIARY

of

No. 14 AUSTRALIAN GENERAL HOSPITAL.

Period - JANUARY, 1917.

This month was an exceedingly busy one for the Hospital. On December 23rd. 1916 fighting had occurred at MAGDABA and the casualties amongst the Australian Troops were numerous. The successful raid into PALESTINE and the capture of RAFA on January 7th. brought a further influx of wounded to the Hospital.

On January 2nd. the Dermatological Section, which had been left behind by No. 1 Australian Dermatological Hospital at ABBASSIA, was absorbed by No. 14 A. G. H., and 171 patients were transferred to the latter and quartered in tents at the rear of the hospital. These patients were subsequently included in all ordinary hospital records, the identity of the old section being completely obliterated by the order of the G.O.C. Delta & Western Force. Further reference to this absorption is made in the War Diary of the Dermatological Section.

The number of patients increased from 570 on January 1st. to 740 on January 2nd. after which date there was a daily rise until the maximum was reached on January 15th., when the Hospital contained 925 patients.

On January 21st., 267 patients were evacuated to Australia by the "EURIPIDES", and the bed-state then remained at between 650 and 700.

The strain thrown on the orderlies was very great during the busiest part of the month. Fortunately, just at the time of stress a large party of Nurses arrived from Australia, sixty in number, and from the nursing point of view the patients were well cared for. The greatest difficulty lay in keeping the wards and buildings generally clean, for Australian patients at this time showed no inclination to do anything for themselves, and it was not until later that the idea of working whilst in hospital was instilled into the minds of patients who were practically convalescent. Another difficulty during the month was the drying of linen, owing to the occurrence of damp weather. The laundry arrangements at the Hospital were exceedingly crude and there was no system of drying clothes by heat.

An interesting event was the marriage of one of the Nursing Staff, Staff Nurse R.M. ROBSON, to an Australian Officer of the Imperial Camel Corps who had been a patient in the Hospital. The ceremony took place in the Garrison Chapel (APPENDIX "A"), and a photograph (APPENDIX "B") attached indicates the ordeal that the newly-married couple had to undergo at the hands of "Camera fiends", who are depicted waiting for them at the conclusion of the service.

PERSONNEL:

Arrivals:

On 2/1/17:	Captain R. McD. BOWMAN	- from Dermatological Section.
On 10/1/17:	60 Staff Nurses	- from Australia.
On 13/1/17:	2 Sisters	- from India.

Departures:

On 15/1/17:	Captain H.G. LEAHY	- to 3rd. L.H. Field Ambulance.
On 21/1/17:	2 Sisters & 3 S/Nurses	- to Australia on duty on the Hospital Transport "EURIPIDES"
On 16/1/17:	8 Sisters & 27 S/Nurses	- Left for Alexandria for embarkation to England.

These Nurses were all original members of the Unit, but they had previously served in Egypt during a summer.

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REINFORCEMENTS:

No other ranks had joined the Unit since its departure from Australia, but during the month 6 privates from the Remount Unit, who had elected to do A.A.M.C. work in preference to being returned to Australia for discharge, were sent for ward training. These men were old and never proved efficient orderlies.

DISCIPLINE:

Four (4) minor offences were dealt with during the month.

CASUALTIES:

One Officer - Captain H.F.G. ELVINS - was admitted to Hospital with "Paratyphoid Fever". This officer had subsequently to be invalided to Australia.

One Nurse was admitted to Hospital during the month, and thirteen (13) other ranks.

THE EFFECTIVE STRENGTH at the end of the month was :-

	<u>Staff.</u>	<u>Attached.</u>	<u>Total.</u>
Officers. ...	17	3	20.
Nurses. ...	68	-	68.
Other ranks. ...	143.	40	183.

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WAR DIARY

of

No. 14 AUSTRALIAN GENERAL HOSPITAL.

Period - FEBRUARY, 1917.

This month was an uneventful one. The number of patients in Hospital averaged about 700, the daily admissions and discharges balancing one another. The total admissions for the month were approximately 500, of which 65 % were medical cases. About 70 % of discharges were direct to duty.

During the month the shortage of drugs, occasioned by the loss by enemy action in the MEDITERRANEAN of ships bringing medical supplies, became marked, and certain drugs such as ether, glycerine, hydrogen peroxide etc. were almost unobtainable.

In order to effect the maximum economy in the use of drugs, a Hospital Pharmacopoeia was drawn up and medical officers instructed that the stock mixtures contained therein were to be used wherever possible.

Some difficulty arose over the shortage of ether, because some of the medical officers objected to using chloroform or ether in a Clover's Inhaler for inducing anaesthesia. The open ether method had, however, to be discarded on account of its extravagance and the "closed ether" method was mainly used.

The Surgical Staff of the Hospital was strengthened during the month by the arrival of Major J.C.STOREY, who was transferred from the 3rd. Light Horse Regiment, of which he had been the R. M. O.

PERSONNEL:

Arrivals:

On 16/2/17: Captain A.M.DAVIDSON - from 4th. Austn. Camel Regt.
On 21/2/17: Captain R.A.BAKER - from Australian Training Depot, MOASCAR.

Departures:

On 10/2/17: Captain E.D.AHERN - to the Anzac Mounted Divisn.
On 19/2/17: Captain A.M.ASPINALL - to the newly-formed 4th. Light Horse Fld.Ambulance.
On 26/2/17: Captain A.M.DAVIDSON - to the 10th.Light Horse Regt.

One of the Hospital orderlies, No. 15084, Private N. a'B. T. BACKHOUSE, was granted a commission as a Chaplain (4th.Class) and was attached to the Hospital for duty.

DISCIPLINE:

There were four (4) cases dealt with during the month, of which three were cases of drunkenness amongst men attached for duty.

CASUALTIES:

There were no Hospital admissions amongst the Officers or Nursing Staff.

Ten (10) other ranks were admitted during the month.

THE EFFECTIVE STRENGTH at the end of the month was:-

	<u>Staff</u>	<u>Attached.</u>	<u>Total.</u>
Officers. ...	15	6	21.
Nurses. ...	68	-	68.
Other ranks. ...	129	39	168.

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Three photographs are attached as ~~APPENDICES~~ to this months report.

- APPENDIX "A": A group of wounded Australian patients.
- APPENDIX "B": Patients handing in their dirty hospital clothing and drawing fresh issue.
- APPENDIX "C": A Sunday morning scene. A Garrison Battalion leaving the Hospital after attending a church parade.

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WAR DIARY

of

No. 14 AUSTRALIAN GENERAL HOSPITAL.

Period - MARCH, 1917.

During this month there were just over 500 patients admitted, and of these 65 % were medical cases.

On March 7th., the Hospital Transport "WILLOCHRA" sailed from SUEZ for AUSTRALIA, and 178 patients were evacuated to this ship.

The numbers in Hospital soon rose again, reaching nearly 700 at the end of the month.

On March 24th., an order was issued by the G. O. C., Delta & Western Force that all Hospital patients charged with drunkenness or bringing liquor into hospital must be tried by Court-Martial.

There had been numerous cases of this nature in the different Cairo Hospitals and the authorities intended to impress on patients the seriousness of such offences.

This order seemed to have some deterrent effect, but the position was never a satisfactory one on account of the long period that frequently elapsed between the offence and the trial, which could only take place on the patients discharge from Medical charge when fit to undergo punishment. This order was cancelled about three (3) months later, when the power was given to Officers Commanding Hospitals to inflict forfeiture of pay for offences committed in hospital.

During the month the dietary of the Hospital Staff was reduced, the Contractor receiving 1/9d. per head per day instead of 2/6d. as heretofore. The whole question of the messing contract is discussed elsewhere.

PERSONNEL:

On March 1st., Sisters E.H.CHAPMAN and E.M.WOODS were promoted to Head Sisters.

One Nurse arrived from INDIA on 10/3/17, while four (4) Staff Nurses were sent to AUSTRALIA on duty on the "WILLOCHRA".

DISCIPLINE:

Three (3) offences were committed during the month - of a minor nature.

CASUALTIES:

Captain M.D.SILVERBERG was admitted to Hospital with an uncertain intestinal condition.

Three (3) Nurses and fourteen (14) other ranks were admitted during the month.

THE EFFECTIVE STRENGTH.

	<u>Staff.</u>	<u>Attached.</u>	<u>Total.</u>
Officers. ...	12	6	18.
Nurses. ...	63	-	63.
Other ranks. ...	126	40	166.

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WAR DIARY

of

No. 14 AUSTRALIAN GENERAL HOSPITAL.

Period - APRIL, 1917.

During this month the work of the Hospital changed materially in character owing to the heavy fighting that occurred about this time at GAZA in PALESTINE.

The policy of sending all Australian patients to No. 14 A.G.H. was still adhered to where reasonably possible, though many of the wounded did not reach CAIRO until many days after being wounded on account of the long distance to be traversed. Over 700 cases were admitted, and on April 25th. there were 1,030 patients in Hospital. It was found impossible to carry on with the Staff on orderlies, and nineteen (19) patients due for discharge were classified "temporary base" and attached to the staff.

The work done by the whole staff of the Hospital during this and the succeeding months is worthy of special note and commendation.

The effective strength was still but little greater than that of a 520 bed hospital, and twice this number of patients had to be cared for. The leave of the orderlies had to be reduced and they frequently had to work 12 or 14 hours a day for a week without any relaxation.

The Nursing Staff also rose to the occasion in a wonderful way, and every member of No. 14 A. G. H. has the right to be proud of the unit's work during this and the succeeding months.

On April 18th., just prior to the rush of work, the Hospital was officially inspected by Surgeon-General J. MAHER, D.M.S. of the Egyptian Expeditionary Force. This Officer expressed satisfaction with the work and condition of the hospital, and recorded his opinion in the Visitors' Book in the following terms:-

"Hospital in excellent order. Everything most satisfactory".

A photograph showing General MAHER talking to the O.C., Lieut-Colonel A.H. THWAITES, is attached (APPENDIX "A").

The A.D.M.S. of the District - Colonel GORDON HALL, who had accompanied the D.M.S. on his inspection, addressed a full parade of Officers and other ranks, congratulating the Unit on its work, and speaking in complimentary terms of the reputation which the Hospital had gained and maintained with the Imperial Authorities. A photograph of Colonel GORDON HALL addressing the parade is attached (APPENDIX "B").

On April 24th., a fire occurred at the Sisters' Quarters owing to carelessness on the part of Native servants, but fortunately very little damage resulted.

At about this time there was a tightening-up in the privileges granted to Officer patients, and an order was issued that no leave was to be granted to extend after 8 p.m. A request for discretionary power for the O.C. to grant leave until 10 p.m. in the case of Convalescent Officers or Officers awaiting return to Australia, was refused.

On April 30th., Lieut-Colonel A. BICKERTON BLACKBURN assumed temporary command of the hospital, owing to the departure of Lieut-Colonel THWAITES to No. 2 Australian Stationary Hospital, EL ARISH, and pending the arrival of Lieut-Colonel R. MacDONALD, to command vice Lieut-Colonel THWAITES.

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PERSONNEL:

Arrivals:

On 9/4/17: Captain M.D.SILBERBERG - rejoined from Hospital.
On 11/4/17: Captain E.W.GRIFFITHS - from the Royal Australian
Naval Bridging Train.

DISCIPLINE:

Five (5) cases were dealt with during the month, one, being a serious charge against one of the "B" class men attached, which was dealt with by Field General Court-Martial.

CASUALTIES:

Captain M.D.SILBERBERG was re-admitted to Hospital with "Irritable Heart" and had to be returned to Australia subsequently. This Officer had done excellent work as a physician and as a member of the Medical Invaliding Board, his knowledge of diseases of the heart being of the greatest value.

Two (2) Sisters and fourteen (14) other ranks were admitted during the month.

EFFECTIVE STRENGTH:

		<u>Staff.</u>	<u>Attached.</u>	<u>Total.</u>
Officers.	...	17	4	21.
Nurses.	...	61	-	61.
Other ranks.	...	141	48	189.

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WAR DIARY.

of

No.14 AUSTRALIAN GENERAL HOSPITAL.

MONTH of MAY 1917.

During this month the full effect of the fighting at GAZA was felt and the Hospital had an exceedingly busy time.

The maximum was reached on May 10th. when the number of patients in Hospital was 1145.

New wards had been opened and beds placed on the verandahs, while the Operating Theatre was in use from early morning until late at night, two tables being in constant use in the one room.

During the latter part of the month, the discharge of lightly wounded cases, to Convalescent Depots, and the departure of the British Hospital Ship "NEURALIA" on 21/5/17 with 168 Australian Invalids, relieved the strain, and by May 31st the numbers had been reduced to 860.

The Hospital Staff showed evidence of overwork, and the admissions to Hospital for the month were, 2 Officers, 7 Nurses, and 26 other ranks.

The total admissions for the month were 1221, and for the first time in the history of the Unit the surgical cases greatly outnumbered the Medical cases.

Lt-Col R.MACDONALD assumed command of the Unit on May 7th, bringing with him from No.2 Australian Stationary Hospital, several Non-commissioned officers and men to replace a similiar number who accompanied Lt-Col THWAITES from No.14 A.G.H. to No.2 A.S.H.

On May 21st Major J.C. STOREY received promotion to Temporary Lieut-Colonel.

The admission to Hospital of Lieut E.S. MARTIN, the Dental Officer attached to the Hospital, for "Nervous Breakdown", was unfortunate, for this Officer had set a high standard of efficiency and hard work.

During the month the band of the Royal Welsh Fusiliers commenced a series of fortnightly performances in the Barrack Square, which were very much appreciated by the patients, for this was the best Military band in Egypt.

PERSONNEL:

ARRIVALS.

On 1/5/17	Captain F.L. TRINCA	from AUSTRALIA ex "ITRIA"
On 14/5/17	Captain R. BASSETT	
On 15/5/17	Captain C.R. HODGSON)
	Captain E.C. THOMPSON)
	Captain C.R. WIBURD) from AUSTRALIA
	Captain R.J. SILVERTON)
	Captain J.W. SMITH)
	Captain C.W.W. MURRAY)
	Captain R.J. HUNTER)

DEPARTURES.

On 16/5/17	Captain F.L. TRINCA	to Anzac Mounted Division.
On 19/5/17	Captain's WIBURD, MURRAY, THOMPSON, and HUNTER	to Field Units.

One (1) Sister and Twenty Nine (29) Staff Nurses were taken on strength from Australia ex "KANOWNNA", causing a surplus of Nurses on the strength of the Hospital.

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25DISCIPLINE.

Five (5) minor offences were dealt with during the month. The discipline of the Staff had been excellent from the date of arrival in Egypt, which is all the more creditable when the temptations of a city such as Cairo are taken into consideration.

CASUALTIES.

Major L.S. LATHAM was admitted to Hospital and also Lieut E.S. MARTIN.

Seven (7) Nurses and twenty six (26) other ranks, were admitted during the month.

EFFECTIVE STRENGTH.

	<u>STAFF.</u>	<u>ATTACHED.</u>	<u>TOTAL.</u>
OFFICERS.	20	4	24
NURSES.	91	-	91
OTHER RANKS.	133	44	177

CONFIDENTIAL.

WAR DIARY.

of

No.14 AUSTRALIAN GENERAL HOSPITAL.

MONTH of JUNE 1917.

During this month the number of patients in Hospital fluctuated between 900 and 1000.

The admissions numbered 1035, of which 60% were Medical cases.

The Senior Physician, Lt-Col C.BICKERTON BLACKBURN, paid a visit to the Australian Units in the field, under instructions from A.D.M.S. A.I.F.

The object of this tour was to enable this officer, who was President of the Medical Invaliding Board, to appreciate the conditions of life of the troops in the field, and also to enquire into the causes of the large numbers of cases of so-called "SEPTIC SORES" which had been occurring.

It is of the greatest importance that the Presidents of Invaliding & Classification Boards should keep in touch with the conditions at the front, seeing that they have to decide as to the fitness of men to return to the firing line.

During the month considerable inconvenience was caused by the low pressure of the water supply at the Hospital. It was a common occurrence to find that the water would not reach the latrines, bathrooms etc on the upper storey, and as the weather was very hot the condition of the latrines became a menace to health.

Strong representations were made to higher authority and after about three weeks the full pressure was restored.

The blue hospital uniform suits were found to be too thick for patients going on leave and the grey pyjamas issued by the Army were used as walking out suits.

The Red Cross Society provided all the sleeping suits used by patients in Hospital.

PERSONNEL.

ARRIVALS.

On 13/6/17 Major. L.S. LATHAM rejoined the Staff from Hospital

DEPARTURES.

On 10/6/17 Capt. E.W. GRIFFITHS to Australian Training Centre Moascar.

On 28/6/17 Capt. R.McD.BOWMAN to 2nd.Light Horse Field Ambulance.

DISCIPLINE.

Three (3) minor offences were dealt with during the month.

CASUALTIES.

Major L.S. LATHAM was again admitted to hospital on 30th June with "IRRITABLE HEART".

The sickness amongst the Staff was unusually high, as a result of the stress of work at this time, eight (8) Sisters and seventeen (17) other ranks being admitted to Hospital.

EFFECTIVE STRENGTH.

	<u>STAFF.</u>	<u>ATTACHED.</u>	<u>TOTAL.</u>
OFFICERS.	18	2	20
NURSES.	87	-	87
OTHER RANKS.	136	37	173

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CONFIDENTIAL.

WAR DIARY

of

No.14 AUSTRALIAN GENERAL HOSPITAL.

MONTH of JULY 1917.

During the month the bed-state still varied between 900 and 1000. The admissions numbered 940, of which 70% were Medical Cases.

The Senior Surgeon and President of Surgical Boards, Lt+Col A.J.H. SAW, visited the field units, just as the Senior Physician had done during June.

During the month, in consequence of complaints in reference to the quality of the food supplied by the Contractor, the Commanding Officer convened a Court of Enquiry to take evidence and report on the whole question of the messing.

This Court found that the food was on the whole sufficient in quantity and of good quality, and that with a few minor exceptions the complaints were ungrounded.

The real trouble was that, owing to the great rise in the cost of food in Egypt, the contracting Company was finding it exceedingly difficult to make the contract pay, and constant vigilance on the part of the Hospital Authorities was required to keep the Company up to the mark.

Although the cost of food had risen by nearly 100% since the contract had been drawn up, there had been no alteration in the price paid to the Company, so it was evident that the latter must have made a very large profit during 1916, when prices were much lower.

The large SWIMMING BATH in the Hospital Buildings was opened during the month, and proved a great boon to the Staff during the hot weather.

On July 11th the Hospital Transport "PORT SYDNEY" sailed from Suez, and 179 patients were evacuated to this ship. The former O.C. Lt-Col A.H. THWAITES, was invalided to Australia on this ship.

ARRIVALS:

On 2/7/17 Capt R.G. WOODS from 2nd.Lt Horse Field Ambulance.
On 19/7/17 Hon-Major.J.K.RICHARDS from AUSTRALIA
On 24/7/17 Capt.H.A. LAMBERT, Dental Officer, assumed command of No.71 Dental Unit attached to the Hospital
on 25/7/17 Twenty Nine (29) Nurses were taken on strength from AUSTRALIA.

DEPARTURES:

On 11/7/17 Four (4) Nurses sailed on the "PORT SYDNEY" on Transport Duty.
Twenty (20) Nurses were loaned to Imperial Hospitals for duty, as the nursing staff of the Hospital was unnecessarily large.

DISCIPLINE.

Five (5) offences were dealt with during the month.

CASUALTIES.

Hon-Major A.W. MARWOOD and Capt R.H. FETHERSTONHAUGH were admitted to Hospital.

Also four (4) Nurses and eighteen (18) other ranks.

EFFECTIVE STRENGTH:

	<u>STAFF.</u>	<u>ATTACHED.</u>	<u>TOTAL.</u>
OFFICERS	18	5	23
NURSES	105	-	105
OTHER RANKS	132	49	181

Three photographs are attached to this report (Appendices A.B.& C) which illustrate the departure of Invalids for embarkation to Australia.

The system adopted was to load walking cases and cot cases simultaneously at different places.

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WAR DIARY.

of

No.14 AUSTRALIAN GENERAL HOSPITAL.

MONTH of AUGUST 1917.

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During this month 1059 patients were admitted, of whom 72% were Medical cases, the average number of beds occupied remaining at about 1000.

The question of increasing the establishment to that of a 1040 bed Hospital had been the subject of correspondence for some months, and the prospects of approval being obtained were now good.

On 23rd August the Transport "BOORARA" left for Suez and 79 Invalids were evacuated to this ship.

As the "BOORARA" was not fitted as a Hospital Transport only men who were able to look after themselves were sent on her, and each patient had the position explained to him and signed a declaration that he was willing to travel on an ordinary transport in preference to waiting for the sailing of a Hospital Transport.

This precaution was taken to prevent men from making complaints on reaching Australia as to the accomodation and diet, which were those provided on an ordinary troop-ship.

Major L.S.LATHAM was invalided to Australia on this ship, This Officer had done most valuable work as a physician and as a member of the Standing Medical Board, and the Staff of the Hospital suffered a serious loss by his breakdown.

PERSONNEL:

ARRIVALS:

- On 2/8/17 Major A.W.MARWOOD rejoined the Unit from Hospital.
- On 6/8/17 Capt R.H.FETHERSTONHAUGH rejoined from Hospital.
- On 8/8/17 Capt P.A.MORRIS and Capt H.F.H.ELVINS from Australia
This latter officer had been invalided in the previous March, but had made a complete recovery.
- On 29/8/17 Major W.W.McLAREN from 1st.L.H. Field Ambulance.
- On 30/8/17 Major W.R.C.MAINWARING from No.2 A.S.H

DEPARTURES.

- On 31/8/17 Major W.L.KIRKWOOD left to assume command of No.2 AUST. STATIONARY HOSPITAL.
His position as Radiologist was filled by Capt H.F.H. ELVINS.
- On 31/8/17 Hon-Major J.K.RICHARDS to No.2 A.S.H.
- On 12/8/17 Twenty eight (28) Nurses left for duty with Australian Nursing units at Salonica.

DISCIPLINE.

Five (5) offences were dealt with during the month.

CASUALTIES.

Capt P.A.MORRIS was admitted to Hospital on 11th August with "DYSENTERY"
Four (4) Nurses and twenty one (21) other ranks were admitted during the month.

EFFECTIVE STRENGTH:

	<u>STAFF.</u>	<u>ATTACHED.</u>	<u>TOTAL.</u>
OFFICERS.	20	4	24
NURSES	66	-	66
OTHER RANKS	123	55	178

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CONFIDENTIAL

WAR DIARY

of

No.14 AUSTRALIAN GENERAL HOSPITAL.

MONTH of SEPTEMBER 1917.

During this month 945 patients were admitted, of whom 73% were Medical cases.

The approval had now been obtained for the increasing of the establishment and the Hospital officially became a 1040 bed Hospital, when Temporary Colonel W.E. SUMMONS arrived from England and assumed command on Sept 27th.

Lt-Col R.MACDONALD who had held the command for nearly five months was transferred to England.

On September 22nd an Anniversary Dinner and Concert was held to commemorate the completion of twelve months service in Egypt, all Officers and other ranks being present.

A copy of the programme is attached (Appendix A)

PERSONNEL:

ARRIVALS:

On 4/9/17 Hon-Capt J.A. HEATH attached as second Quartermaster
On 20/9/17 Capt. A.M. DAVIDSON from 3rd.L.H. Field Ambulance.
On 20/9/17 Capt. P.A.MORRIS from Hospital.
On 24/9/17 Capt.E.N.BATEMAN from 2nd.L.H. Field Ambulance.
On 26/9/17 T/Col W.E.SUMMONS from Overseas.

DEPARTURES.

On 1/9/17 Lt-Col J.C.STOREY to Field Operating Unit.
On 22/9/17 Capt P.A.MORRIS to 3rd.L.H.Field Ambulance
On 25/9/17 Capt J.W.SMITH to 2nd.L.H.Field Ambulance.

During the month Capt N.H.FAIRLEY was detached to the Anzac Field Laboratory for 11 days, to conduct a special investigation into a series of cases of BILHARZIOSIS occurring in a troop of Yeomanry Capt J.GREEN the Quartermaster was also detached temporarily for duty with Field Medical Units.

DISCIPLINE.

Three (3) cases were dealt with during the month

CASUALTIES.

There was no sickness amongst the Officers or nurses but **nineteen(19)** other ranks were admitted to Hospital.

EFFECTIVE STRENGTH:

	<u>STAFF.</u>	<u>ATTACHED.</u>	<u>TOTAL.</u>
OFFICERS	20	5	25
NURSES	70	-	70
OTHER RANKS	119	78	197

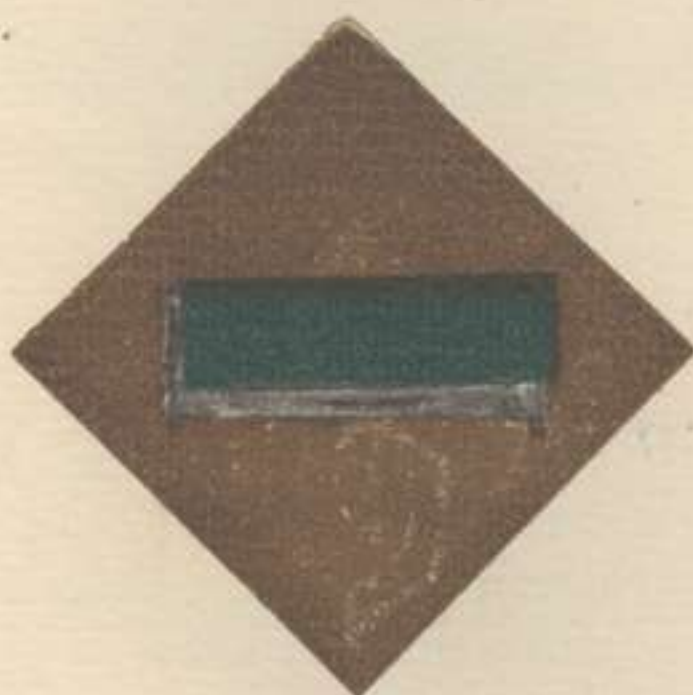
A photograph (Appendix "B") is attached showing Col W.E.SUMMONS addressing the other ranks on parade.

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14th AUSTRALIAN GENERAL HOSPITAL,

EGYPT.

[APPENDIX 'A']



ANNIVERSARY
DINNER & CONCERT

To Officers, N.C.O's & Men.

Abbassieh,
CAIRO,
22nd September, 1917.

08



M E N U

Loup de Mer à la Belle Vue.

Côtelettes d'agneau Mentenon.

Poularde Rôtie au petit sallé.

Haricots verts Panachés.

Gâteau Suisse.

Glacé à la Vanilla.

Fruits de Saison.

Toast - - - The King.

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MUSICAL PROGRAMME.

- Song, - - - - "Three Angels" - Mabel C. Down.
Pte. C. KILNER.
- Song, - - - - "Piccadilly" - Ralph Roberts.
Pte. C. NEWELL.
- Recitation, - - - "The Bells" - Edgar Allan Poe.
Pte. R. G. NEWSON.
- Violin Solos, - - - "Dance Suite Henry VIII." E.G. Jones.
"Morris Dance," "Shepherds' Dance," "Torch Dance"
Pte. J. A. NAIRN.
- Song, - - - - "At the Mississippi Cabaret"— A. S. Brown.
S'Sgt. FRANKLAND.

PRESENTATION OF SWIMMING TROPHIES
won at Sports held 16th August.

- Humourous Song, - - - "My Word" - Sterndale Bennett.
Sgt. E. J. FAIRNIE.
- Song, - - - - "Rolling down to Rio" - E. G. Jones.
Capt. SILVERTON.
- Humourous Duet, - - - Selected.
Ptes. COOKE and HARGREAVES.
- Accompanist - - - - Cpl. R. E. SUTTON.

GOD SAVE THE KING.

No. 14
AUS. GEN. HOSP.
File. 47/1/6958

22/9/17

The Staff of the Hospital reached Egypt on Hospital ship "Karoo" on September 19th 1916, disembarked and proceeded to Cairo on the 20th September and at 9 o'clock on the morning of 23rd September took over from No.3 Australian General Hospital, the hospital located in the Main Barracks, Abbassia, Garrison.

On the day of taking over from No.3 A.G.H. there were 570 equipped beds of which 360 were occupied. The small number of beds equipped is explained by the fact that the outgoing Unit had been instructed to leave sufficient equipment for a 520 bed Hospital only, whereas the small number of patients is explained by the departure of a Hospital ship carrying invalids to Australia on the day prior to the taking over.

The whole Staff of No.3 A.G.H., entrained for Alexandria on 24/9/1916 with the exception of 11 Officers who remained until 14/10/16 in order to enable the Unit to carry on pending the arrival of the balance of its own medical officers from Australia.

The Dermatological Hospital, on the Heliopolis Road, was administered by Lt-Col. A.H.Thwaites the O.C., and one medical officer resided at the Hospital. This arrangement regarding the Dermatological Section remained in force until 2/1/17 when the whole Venereal section was absorbed by No.14 A.G.H., and accommodated in tents at the rear of the Main hospital. After ~~xxx~~ nine months the venereal patients were transferred on 2nd October 1917 to the charge of No.2 Australian Stationary Hospital at Moascar. During the time that this Hospital was responsible for the venereal cases little difficulty was experienced in their management and breaches of discipline were comparatively rare, though it was of course necessary to have a permanent "B" class guard of considerable size attached to the Hospital in order to enforce the isolation.

During the period 23rd September to 19th November 1916 there was a gradually rise in the number of patients owing to the accumulation of boarded cases and just prior to the departure of H.T."Ayrshire" on the latter date the number of occupied beds reached 740, that is to say 220 over and above establishment.

During the latter part of November and December the average number of occupied beds was about 570 but the occurrence of fighting at Magdaba on 23/12/16 and Rafa on 7/1/17 caused a influx of a large number of wounded men and on January 15th 1917 the total reached 920.

The departure of H.T."Euripides" at the latter end of January relieved the situation and during February and March and early part of April the Staff was able to cope with the work although the shortage of orderlies for Nursing and General duties rendered the proper care of the hospital difficult and made it necessary to over work the staff of orderlies whose health appreciably suffered thereby.

On the 30th April 1917 Lt-Col Thwaites was transferred to command No.2 A.S.H., and on the 6th May Lt-Col.R.Macdonald from the latter hospital assumed command of this Unit. During the seven days interregnum Lt-Col. C.B.Blackburn, who has held the position of Senior Physician since the formation of the unit, administered the command.

Lt-Col.R.Macdonald remained in charge of the hospital during the rest of the period under review in this report.

The occurrence of heavy fighting at Gaza on the 19th April and the following days led to the admission of a large number of wounded Australian patients, the maximum being reached on the 9th May when the number of occupied beds reached 1143. A great strain was thrown on the Staff of the Hospital at this time as no reinforcements had been received since reaching Egypt and the establishment was still that for a 520 bed hospital. Between 20 and 30 "B" class men of Light Horse units were temporarily attached to the hospital and by this means the situation was relieved. Many of the "B" class men subsequently became proficient as orderlies and have been retained on the staff of the Hospital.

During the period May to September 23rd 1917 the average number of beds occupied remained constantly between 950 and 1000.

During the whole year under review no A.M.C. reinforcements were received with the exception of six members of the Remount Unit who were sent for training upon the partial disbandment of their own unit.

The administration of the Hospital has been carried out under the A.D.M.S., of the Delta District entirely and the relationship of the hospital to the Imperial Authorities has been a satisfactory one in every way, no friction having arisen.

For all purposes of supplies the hospital has been under the Barrack Services and has not dealt directly with the Army Ordnance Department.

The system of working under Barrack Hospital schedules has at times proved irksome and it is hoped that it may be possible to change this system shortly.

The Australian Red Cross Society has rendered invaluable assistance in supplying comforts for the patients and in supplementing medical and surgical supplies when the same could not be obtained from Army stocks.

The Society has provided amusements such as lectures, concerts &c., for patients and has arranged a regular series of bi-weekly outings, for convalescent patients, which have been of great value to the latter.

A Red Cross kitchen has been established for invalid cooking and has proved most satisfactory.

With the assistance of the Red Cross Society a concert party was formed from amongst the staff of the hospital named the "Kookaburras" and this party has given concerts to patients in this and neighbouring hospitals with great success.

During the twelve months under review the patients and staff have been fed by the Nungovitch Hotels Coy., under contract with the Imperial Authorities. The food has on the whole been good and sufficient and complaints have been very rare, but at the present time owing to the increase in the cost of food the state of affairs is not so satisfactory and it is evident that fresh arrangements will have to be made with the Contractor if a satisfactory diet is to be maintained.

During the year the hospital was inspected by the Commander In Chief, General Sir. Archibald Murray and on the 18th April 1917, an official inspection was held by Surgeon General J. Maher the D.M.S., E.E.F., who recorded the result of his inspection in the following words:

"Hospital in excellent order. Everything most satisfactory".

All patients treated have been Australians with the exception of a small number of New Zealand patients treated in the Venereal Section.

The following reports of different departments show the work done during the year.-

STATISTICAL.

Admissions	9380
Minimum number of beds equipped occupied	360 (23/9/16).
Maximum number of beds equipped occupied	1143 (9/5/1917)
Average number of beds occupied 1st 6 months.	610.
Average number of beds occupied 2nd 6 months.	915.
Average daily admissions	25.6
Deaths	17.
Percentage death rate.	.183
Average number of days in hospital of patients discharged (includes venereal and boarded cases)	30.52 days.
Percentage of patients discharged to	
(a) Convalescent Hospitals or Depots.	31.68
(b) Duty	51.7
(c) Australia.	11.89
(d) England	.1
Average number of boarded per month	97.6

Details of patients discharged to Australia:-

<u>Transport.</u>	<u>date.</u>	<u>Officers.</u>	<u>O/Ranks.</u>
"Ayrshire"	20/11/1916.	5	207
"Euripides"	21/1/17.	4	263
"Willochra"	7/3/17	10	168
"Neuralia"	21/5/17	9	159
"Port Sydney"	10/7/17	15	164
"Boorara"	23/8/17	3	76
		<u>46</u>	<u>1037</u>

14th A.G.H

-3-

ending Sept. 22nd 1917

834³
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OPERATIONS.

Major. 318. Minor 778

The above operations were performed in the Operating Theatre under general anaesthesia.

X RAY DEPARTMENT.

Bones and joints.	571
Genito-urinary	76
Digestive	67
Respiratory	59
Cranial sinuses	4
Foreign bodies	298
Treatment - Diseases skin.	29
Cicatrices	4
Circulatory	6

MASSAGE DEPARTMENT.

This department has been under the supervision of the Officer in charge of the X Ray Department and has been staffed by one Staff Sergeant and three privates. It is suggested that the Massage Department could be greatly improved by the addition of substitution of trained Masseuses as was the case in No. 3 A.G.H, to which two such Masseuses were attached. Owing to the shortage of Orderlies it was found necessary to close this department during the rush that followed the fighting at Gaza in April 1917, for several weeks. The total attendances for treatment at this Department during the year were..... 11,232.

EYE, EAR, NOSE & THROAT DEPARTMENT.

Operations 405. Major. 296 Minor 109.

As follows:-

Cataract	1.	
Sclerotomy (for chronic glaucoma)	4.	
Enucleation of globe.	4.	
Excision of Lacrimal Sac	3.	
Pterygium.	51.	
Trachoma	10.	
Ectropion	2.	
Mastoid (acute)	3.	
Necrosis of temporal bone	1.	
Frontal sinus	1.	
Extraction of bullets.	4.	
Tonsillectomy	130.	
Submucous resection	82	
Minor operations:-		
Meibomian cysts.	28	
Others under local or general anaesthesia.	81	405.

Number of pairs of spectacles prescribed:

Lawrence and Mayo.	168	
Joseph Beinisch Bey	189	
Army Spectacle Depot.	54.	411

Total number of visits of patients seen in Surgery; 7387

Eye cases	4575
Ear "	1355
Nose "	1098
Throat"	359

PATHOLOGICAL DEPARTMENT.

During the year a great deal of original work on the subject of Bilharziosis has been carried out by the Pathologist, Capt. N.H. Fairley. This work includes the elaboration of a Complement-Fixation Test for this disease analogous to the Wassermann Reaction for syphilis. This test has proved specific for Bilharzia and it has been possible to establish the presence of the disease prior to the onset of symptoms.

Wassermann reactions have been carried out for neighbouring hospitals and at the present time all the British Hospitals in Cairo and Ismailia are sending their specimens for a Wassermann reaction to this Hospital.

Dermatological - Venereal.	Pos.	Neg.
Gonococci. (urethral discharge).	571	583
Wassermann Test (Syphilis)	105	388
Treponema Pallida (Chancre)	4	10.
Vaccines.	108.	

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	Pos.	Neg.
Antopsies.	12	
Patho. sections of Tissues or Tumours.	46	
Inoculations. T.A.B.	340	
Choleza.	1	
Examination of stools.		
Microscopic appearance	125	120
Amoebae Histolytica	13	119
Amoebae Histolytica cysts.	32	92
Other Protozoa and Cysts	35	10
Dysentery - Shiga)		
" - Flexner)	12	131
Typhoid		12
Paratyphoid		
Bilharzia	46	113
Cholera		3
Ascaris Leumbricoides	1	
Examination of blood.		
Differential counts - eosinophilia	61	31
Malaria	62	137
Filaria		5
Relapsing Fever	5	10
Blood picture		3
Blood culture	3	42
Blood count	170	58
Haemoglobin	44	
Typhoid	8	5
Complement Fixation (Bilharzia)	26	60
Examination of urine.		
Chemical for albumin Bile &c.	40	92
Microscopical	157	107
Cultural	20	39
Bilharzia	68	80
Examination of sputa.		
Tubercle	19	336
Pneumococci	1	
Examination of throat swabs.		
Diphtheria	20	182
Pseudo diphtheria	1	
Other organisms	12	8
Examination of gums.		
Vincent's Angina	47	3
Other organisms	4	
Examination skin, lesions furunculosis.		
Fungi		3
Other organisms	8	2
Examination of Patho eudates and cerebro spinal fluid.		
Pleural exudate	1	
Cerebro spinal fluid	1	1
Cultures for gall bladder		2
Oriental sore	1	
Miscellaneous	84	
Total examinations made	--	5101.

DENTAL DEPARTMENT.

In addition to carrying out dental work for patients in hospital dental treatment has been provided for Australian units in and around Cairo, including Imperial Camel Corps, Remount Depot and Australian Depot Stores.

Patients attended to	9876.
Teeth extracted	2273
Amalgam fillings	2089
Cement "	772
Porcelain "	99
Root "	543
Dressings	452
Crowns	43
Minor operations	1898
Partial upper dentures	503
Partial Lower dentures	363
Full upper dentures	74
Full lower dentures	22

14^a A.4.H -5-

ending Sept 22nd 1917.

834
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DENTAL DEPARTMENT (contd)

Repairs.	342
Cases Gingivitis	675

DISPENSARY.

An exact record has been kept of the quantities of drugs actually consumed in the hospital during the 12 months. The department has worked smoothly during the year although at times it has been much understaffed.

In conclusion it is desired to place on record an appreciation of the loyalty of the whole of the Staff of Officers, Nursing Staff, Warrant Officers, Non Commissioned Officers and Men. When it is realised that throughout the year the hospital has carried a number of patients greatly in excess of establishment -- reaching at one time ~~twice~~ more than twice the number of established beds -- and that during this period the effective strength of the unit has been under the establishment laid down for a 520 bed hospital, it will be seen that the work of the hospital could not have been carried out, as it has been, to the satisfaction of the Imperial Authorities and Australian Headquarters, had not the whole staff shown a uniform and constant devotion to duty.

The discipline of the Staff has been excellent and only one case of venereal disease has occurred during the year amongst members of the Staff.

The records of the work done by every department of the hospital during the year have been preserved and detailed information of the work of any one department can be supplied at any time.

C. H. Clarke

Registrar, No.14 General Hospital. A.I.F.,
for Officers Commanding ~~the~~ during the period.

Abbassia.
8/12/1917.

CONFIDENTIAL

WAR DIARY.

of

No.14. AUSTRALIAN GENERAL HOSPITAL.

A GENERAL REPORT ON THE YEAR. SEPT 1916 TO SEPT 1917.

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ADMINISTRATION.

The Hospital was situated in the Delta District and the C.O. was therefore responsible to the ADMS of this District for the administration of the Hospital.

The A.D.M.S. A.I.F. controlled the posting and promotion of A.A.M.C. personnel, all orders for transfers etc being transmitted through A.D.M.S. Delta District.

There was some confusion in the early days owing to the dual control, but subsequently the Imperial authorities ceased to claim any rights in directing the personnel of the Unit and everything worked amicably.

The only other matter of administration controlled by A.I.F. HEADQUARTERS direct, was that of pay, allowances and regimental funds.

All other financial questions concerning the Hospital were dealt with through the Imperial authorities, the Capitation Rate for A.I.F. troops being by this time in force.

Just after the arrival of the Unit the system of obtaining whatever was wanted by Local Purchase Order from Australian Headquarters was discontinued, and supplies had to be obtained from Ordnance and Base Depot of Medical Stores.

To the Australian mind the delay often experienced in obtaining supplies through the ordinary Army channels was irksome and savoured of "red-tape", but there is no doubt that the previous method was an extravagant one and encouraged the demanding of articles which were not absolutely essential.

Economy was forced on the Unit and the lesson was a valuable one.

During the whole year the Hospital was administered under the Barrack Services, owing to its location in the Main Barracks, Abbassia.

This was a serious drawback and the cause of much irritation. Suppose, for example, a hundred ward lockers were urgently required. Demand was made to Officer i/c Barracks, Abbassia, who passed the Indent to Officer i/c Barrack Services, who again passed it to C.O.O.

Ordnance thereupon delivered the lockers to the Barracks store from which place they had to re-issued to the Hospital.

The whole system was cumbersome, and it would have been far better to deal with Ordnance direct, as practically all the Imperial Hospitals in Cairo did.

This is a point worth recording for future guidance in Australia---that a General Hospital should not come under the Barrack Services, on Active Service.

The relationship between the Imperial authorities and the Hospital during the year was very satisfactory. The A.D.M.S. of the District was always most helpful and considerate, and willing at all times to allow modification of the usual methods to suit Australian ways and ideas.

DISCIPLINE.

In this matter the Hospital was entirely under the G.O.C. of the District, but representations could always be made to Australian Headquarters who would take up any matter with the former, when Australian interests demanded it.

DISCIPLINE continued.

The Staff of the Hospital were remarkably well conducted and the record of offences is extraordinarily light for a Unit stationed in a city like Cairo.

The question of the discipline of Hospital patients bristled with difficulties.

The main offences committed by patients, are breaking out of Hospital, overstaying leave, drunkenness, and bringing liquor into Hospital.

During the first 8 months the system was to charge the offender before the O.C. on the following morning. If the latter considered that a case had been made out, he remanded the accused to be dealt with on discharge from Hospital.

This system was a bad one from every point of view.

(1). It is against all the principles of Military law to have a charge hanging over a soldier for any length of time.

(2). The patient, having been remanded, was under open arrest, and could not be granted leave.

(3). In the case of Boarded patients awaiting transport to Australia the only thing to do was to send the charge report to Australia with him when he sailed. This meant that unless someone "lost" the report the man arrived in Australia with a charge against him.

(4). The patients bitterly resented the fact that they couldn't be dealt with summarily and "be done with it".

(5). On a man's discharge to his Unit with a charge against him, His Commanding Officer would frequently dismiss the case or inflict a totally inadequate sentence.

It will be easily seen that with the Military Police in Cairo laying charges, the Records Section following up these charges, and Commanding Officers of Units complaining that their men were too harshly dealt with in Hospital, by being deprived of leave when once "crimed"; the position of the O.C. of the Hospital was not an enviable one.

On April 18th, on account of inadequate punishments awarded by Unit Commanders for offences committed in Hospital, an order was issued that the Commandant Australian Headquarters would deal with all these cases on discharge. However, on June 5th the Army Council Instruction giving O.C. of Hospitals the power to award forfeiture of pay and deal summarily with such cases came into effect. This new system worked admirably and the patients were the first to appreciate its advantages.

Speaking generally the discipline of patients was good. On paper it would not compare favourably with that of Imperial Hospitals in Cairo, but it must be remembered that the patients in No.14 A.G.H. were granted much more leave and possessed much more money than their British comrades.

The leave granted was 10% daily, from 1 to 5 p.m. in the winter and from 2 to 6 p.m. in the summer. These hours were rigidly adhered to and under no circumstances was leave granted in the evening. It was found by experience that the only fair way is to make no exceptions to leave rules--whatever the circumstances.

It was found that a general impression prevailed with the Imperial authorities that all Australian Units were grossly extravagant.

Every possible opportunity was taken to refute this charge, and on two occasions it was possible to prove conclusively that such a charge could not be laid at the door of No.14 A.G.H. One was a question of fuel consumption and the other of the amount of washing per head. In each case figures were produced to show that the Unit was far less extravagant than the very Hospitals which had been held up as models of economy.

The system of office administration differed materially from that of Imperial Hospitals, the main feature being the centralization of all clerical and administrative work in the Registrar's Office.

The result was that Sisters i/c of Wards and Ward Sergeants were relieved of all clerical work, and were able to devote their whole time to the practical side of their work.

The general principle was that the Hospital was administered in every detail from the Office, instead of the office recording afterwards what had been done in the Hospital. For example, inter-ward transfers were only effected on an order from the office, whereas in some Imperial Hospitals the Ward Sister effects the transfer and then notifies the office of what has been done.

A card system was kept in the office of every patient in Hospital, and it was possible to give full information about any present or past patient within one minute.

The position of the Hospital was rather a unique one, being the only Base Hospital for the A.I.F. in Egypt and the channel through which every Australian had to pass before returning to duty or to Australia.

Permission was obtained to hold the Medical History Sheets of all A.I.F. troops in Egypt and, as patients passed through, a resumé of their case-sheet was entered on the History Sheet. The result has been that there is a very complete record at the Hospital of the Medical History of all Australians in Egypt, and this record proves of immense value when men come before Invaliding or Classification Boards.

MESSING CONTRACT.

When No.14 A.G.H. took over from No.3 A.G.H. the GEORGE NUNGOVITCH HOTEL COMPANY held a contract for the supply of all diets and extras (except wines, spirits, stout, aerated waters etc) to patients and Staff. The contract rates were 4/6 per diem for Officers, 2/6 per diem for other ranks and also for the Staff. The Contracting Company provided all cooks etc and waiters for the mess-rooms.

Two N.C.O's supervised the kitchen but did no cooking themselves. This Contract was never satisfactory for the following reasons.

(1). Egyptian Natives are very dirty in their habits and no amount of training can ever teach them to be otherwise.

(2). The food was cooked and served in a style foreign to the Australian and not to his taste.

(3). Supplies such as meat and butter were local, the contractor having no access to Army stocks of these articles.

(4). The tendency of the Egyptian seems to be to cheat when-ever possible, and though the Company did its best it was defrauded daily by the army of native sub-contractors, drivers, and servants.

The result was that the whole messing arrangements required the most careful supervision and even with this supervision it was difficult to get a square deal.

There is no doubt that a Hospital in Egypt is much better provided for when on Army Rations than under contract, though it is probable that the latter arrangements is cheaper when the cost of transport and labour is taken into consideration.

INVALIDING.

The work of the Standing Boards during the year was most satisfactory. The Hospital was fortunate in the fact that the Senior Physician, Lt-Col C. BICKERTON BLACKBURN, and the Senior Surgeon, Lt-Col A.J.H. SAW, held their positions as President of the Medical & Surgical Boards respectively throughout the year without a break. The completeness of the Medical history of every patient who had passed through the Hospital, and the personal recollection of the soldier by the President of the Board, ensured a careful and weighed judgement in every case.

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34INVALIDING continued.

One problem was the long stay in Hospital of boarded men awaiting transport to Australia.

A handful of boarded men in a ward will undoubtedly spoil the morale of the rest of the patients in that ward, and will be the cause of much exaggeration of symptoms in some cases.

It would be a great advantage if boarded men could be transferred away from a General Hospital and kept quite apart from unboarded men.

NURSING STAFF.

Throughout the year the whole nursing staff, under the Matron, Miss. R. CREAL, worked with consistent loyalty and devotion to duty. The relationship between the Matron and her Nurses on the one hand, and the Officers and other ranks of the Unit on the other, was invariably one of mutual consideration and help. Friction in ward administration was unknown and the interests of patients were the sole objective.

In their handling of the patients the nurses showed skill and tact, and the standard of nursing was exceedingly high. Always adaptable and resourceful, always cheerful and capable, the nursing staff earned and won for themselves the deep respect and affection of all Australians in Egypt.

The accommodation for the Nursing Staff was very good, being situated in the Hareem Buildings about 100 yards from the Main Barracks, and including a large sheltered garden.

The statistical and professional sides of the work done by the Hospital have been dealt with in other reports, and this diary deals only with some of the problems that arose during the year.

CONFIDENTIAL.

WAR DIARY.

of

No.14 AUSTRALIAN GENERAL HOSPITAL.

RED CROSS ACTIVITIES DURING THE YEAR. SEPT 1916 TO SEPT 1917.

Throughout the year the Australian Red Cross Society rendered invaluable assistance in every branch of the work of the Hospital, in fact to such an extent that it is difficult to see how the work could have been carried out without this assistance.

The ADMINISTRATION was assisted by the provision of a small motor car for the use of the C.O., Matron, or other Officer on Hospital business; of a motor cycle for the despatch rider; of two typewriting machines; of a duplicating machine; of a filing cabinet for the custody of correspondence on a business system; and of special printing where such was unobtainable from Army sources.

NATIVE CARPENTERS were employed to repair damaged Red Cross articles, and to do the hundred and one jobs of all kinds that are always necessary in a big Hospital.

To the WARDS the Society supplied counter-panes and screen-covers of white linen, bearing a Red Cross. The whole Hospital was fitted with these articles, which did much to brighten the wards and give them a clean and well-cared-for appearance.

CLOTHING was supplied to patients both in Hospital and on discharge, including pyjamas, shirts, drawers, socks and towels, as well as sea kit bags.

BOOTBLACKS were paid to clean the boots of patients in bed and of those who could not look after themselves.

COMFORTS of every conceivable kind were issued to patients on requisition and no patient went short of any reasonable article he required. Articles required for the benefit of patients, which could not be obtained from Army stocks, were always provided when requisition was made. These included special instruments, drugs, splints, and boots for deformed feet. Fly-proof windows and doors were fitted throughout the Hospital, and verandah blinds when required.

AMUSEMENTS:

Two billiard-tables were fitted up in the Hospital and maintained for the use of patients. Four pianos were loaned, two being for the use of patients, one for the Nursing staff, and one for the Orderlies.

An outdoor cinema was erected and shows given two or three times a week, the cost of which was shared equally with the Regimental Fund of the Unit. These cinema performances were a great boon to the patients and much appreciated.

OUTINGS for Convalescents were conducted twice a week, large parties being taken to places of interest in and around Cairo, such as the Pyramids of Giza and the Barrage, the men being given a good tea at each outing.

A photograph is attached (Appendix "A") of one of these parties at the Barrage.

A RED CROSS KITCHEN was established which proved of very great value to sick patients, and of assistance to the Medical Officers in the treatment of such patients. A copy of the circular issued regarding this Kitchen is attached (Appendix "B").

The Society also materially assisted the Staff, by providing articles to make the Sister's Quarters comfortable, and by giving the Orderlies games, music, and sporting materials.

30/9/17

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RED CROSS KITCHEN.

30/9/17
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A Red Cross Kitchen has now been established at this Hospital by the Australian Branch of the British Red Cross Society.

PRINCIPLES. This Kitchen is intended to supplement the diet provided by the Contractor and must not be regarded as the sole source of supplies for patients on light diet.

That is to say - foods must not be requisitioned for on the Kitchen until full use has been made of the diet provided by the Contractor. For example, - milk should be not be requisitioned for on the Red Cross Kitchen unless the full allowance drawn from the Contractor is inadequate for a patient's needs.

REQUISITIONS. Requisitions will be made on the proper form which is supplied to wards.

All requisitions must be delivered at the Red Cross Kitchen before 10 a.m. on the day prior to the one on which the articles are required.

These forms must not be used for any purpose other than the proper one.

DELIVERY. All food for the kitchen must be called for at 12 noon and all trays, bowls, &c., belonging to the Kitchen must be returned at 9 a.m. each morning. Great care must be taken that all such articles are returned to the Kitchen.

Sisters in charge of Wards will utilise the services of Convalescent Patients for the delivery of articles and for the collection of all supplies from the Red Cross Kitchen. Orderlies must not be used for these purposes.

The success of this Kitchen is dependent upon the co-operation of the Sisters in charge of Wards and the Officer Commanding is confident that the latter will make full use of the Kitchen and will be careful to exercise strict economy and to avoid any abuse of this new and valuable source of supply.

Chouther Clarke

Major.
Adjutant for O.C., No. 14 Gen. Hospital. A.I.F.,

Abbassia.
7/6/1917.



No 14 AUSTRALIAN GENERAL HOSPITAL

XRAY DEPARTMENT

UNIT

The 14th Australian General Hospital was a double general hospital located in Cairo and afterwards in Port Said.

In Cairo the Hospital occupied the buildings formerly used as Egyptian Cavalry Barracks which were suitable for Hospital requirements.

In Port Said the buildings used belonged to the Suez Canal Co. In both places the Xray department was accommodated in brick buildings.

The great majority of cases dealt with were the result of direct violence by G:S:W: or accident, injuries to bones & joints greatly predominating; localisation of foreign bodies, examinations of the Respiratory, Circulatory, Digestive & Genito-urinary systems for the various conditions affecting these systems.

Therapeutic work was mainly confined to the treatment of skin diseases, principally eczema, psoriasis, & oriental sore. It is only during the past few weeks that therapeutic treatment has been available owing to the difficulty experienced in obtaining necessary equipment.

STAFF.

The staff of the Department consists of a medical officer in charge as Radiologist.

A Staff Sergeant as Assistant Radiologist & who was also an expert photographer & useful mechanic.

A private who could assist either in the X Ray room or in the darkroom doing the developing of plates & who was also useful as a mechanic. Both the S/sgt. & the private were engaged in the work of the X Ray department only.

The Radiologist in charge, also had charge of the Electrotherapeutic & Massage Department.

Both the Radiologist & Assistant Radiologist have had several years experience in Radiography.

ACCOMMODATION

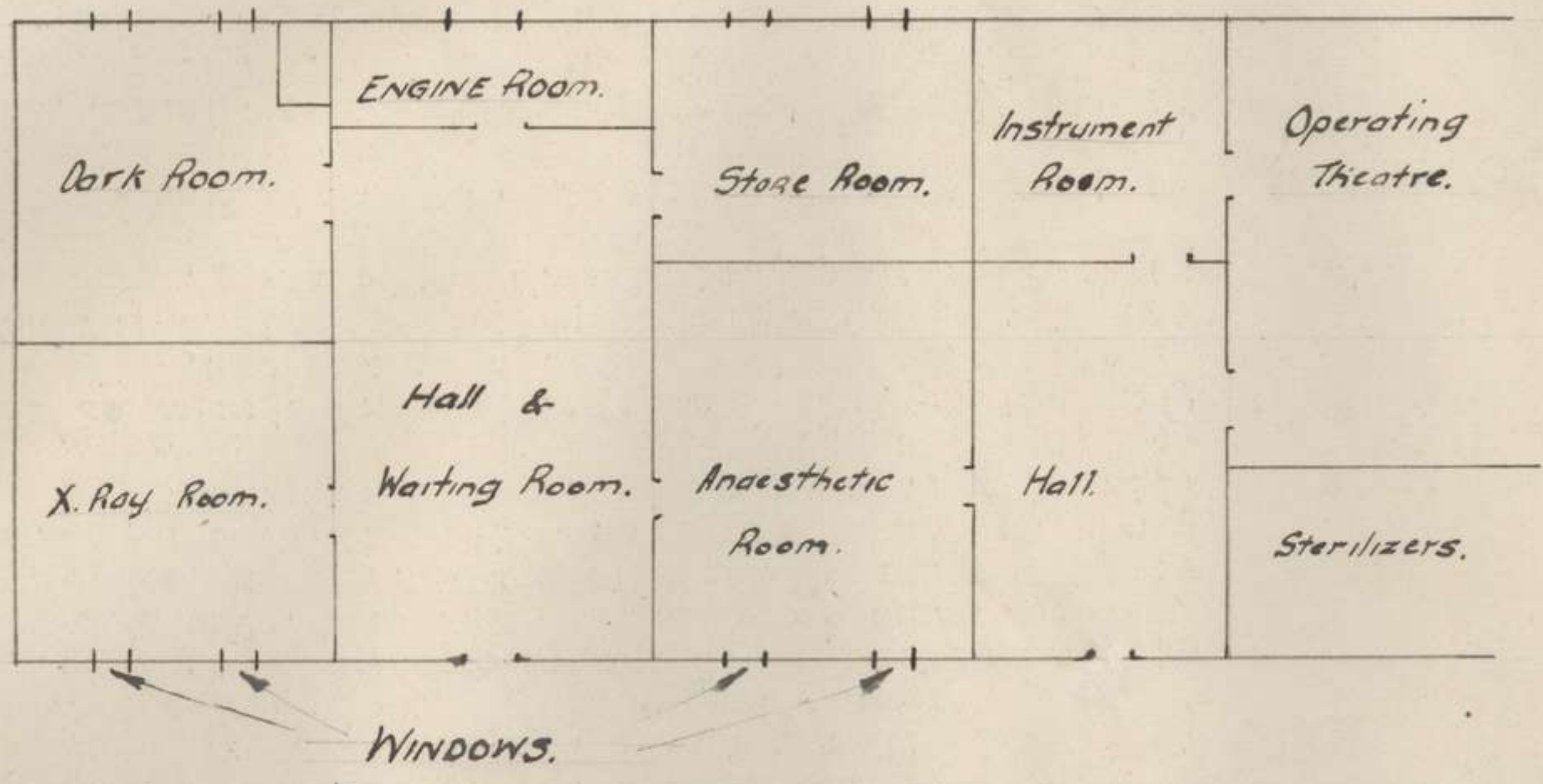
In Cairo the X Ray department had the use of three large lofty well ventilated rooms, one as an examination room containing the Coil, Couch & accessories, one as a dark room conveniently supplied with water & the other as a store room for plates, spare tubes & photographic material. A smaller room was used to accommodate the engine & dynamo for generating the electric supply for the X Ray coil.

The X Ray room & dark room were suitably darkened & light proof.



(2)

GROUND PLAN showing position of X RAY DEPARTMENT in relation to OPERATING THEATRE: : ABBASSIA : CAIRO.



Reference to the accompanying ground plan shows that the X Ray room was fairly convenient to the Operating Theatre. Both rooms were on the ground floor & on the same level so that the patient could be wheeled in from one room to another as occasion required.

The plan that worked most admirably in cases of localisation of foreign bodies, was to bring the patient to the X Ray room first, the F:B: was then localised in the presence of the operating surgeon, the patient was then transferred to the Anaesthetic room for preparation & subsequently to the operating theatre. Only very occasionally was it found necessary to bring the patient back again to the X Ray room for further examination & then the surgeon would continue his search for the F:B: under the fluorescent screen, the part on which he was working being protected by sterilised towels.

VENTILATION. The rooms were ventilated by means of two large folding windows which reached almost to the ceiling & were quite adequate for requirements.

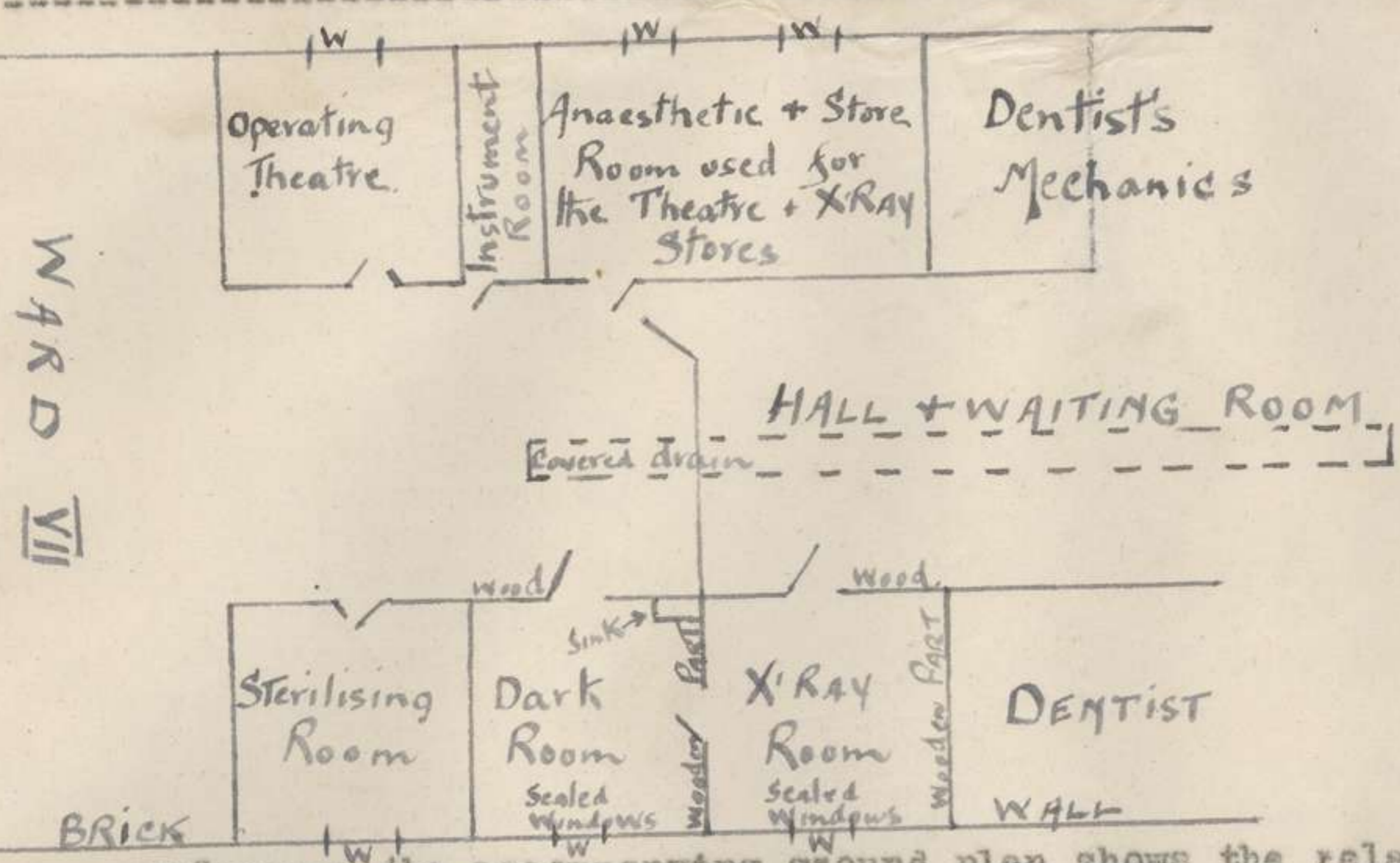
ACCOMMODATION. In Port Said the accommodation was more or less improvised by the erection of wooden partitions at the end of Ward 7. These partitions which are 8 feet 3 inches in height, divided the space available into two rooms; the examination room, & the dark room with a connecting door.

A flat roof covered both rooms with two vents each 12 inches square in the examination room, & one round vent in the dark room.

During the summer months the work in these rooms was very trying owing to the inadequate ventilation and would have been unbearable without the use of a powerful electric fan.



(3)
GROUND PLAN showing position of X RAY DEPARTMENT in relation to
OPERATING THEATRE :: PORT SAID.



Reference the accompanying ground plan shows the relation of the X Ray room to the Operating Theatre.

ELECTRIC CURRENT: The current used for lighting the Hospital both in Cairo & Port Said was obtained from the mains of the Electric Lighting Co. This was an alternating current & could not be used for our X Ray outfit without a transformer. As no transformer was available the current for the X Ray work was generated by means of a 4 H.P. Lister Bruston Engine & dynamo generating 110 volts of 18 amperes. Although this generating plant has been in constant use for three years, has had a considerable amount of rough usage in being moved about and does not quite generate its full capacity of current, it is still doing good work and the results obtained are, in the main, entirely satisfactory.

APPARATUS: In Cairo the apparatus used was Butt's Field Service Outfit 1915 pattern. The first coil lasted for about nine months when the condenser burnt out. Another similar coil was obtained which was still working satisfactorily when this Unit was transferred to Port Said.

In Port Said the coil was a large one of German make (Siemens & Halske) 20" spark gap. The switch board was also of German make & a Zenith Mercury interrupter with coal gas as a di-electric.

COUCH The X Ray Couch was Butt's Field Service pattern with 3 ply wooden top & tube carrier beneath the table capable of being moved longitudinally & transversely.



(4)

COUCH:

This form of tube carrier & the table itself are both very good for screening purposes as the whole area of the surface of the patient can be quickly & systematically searched

The table top was replaced by a sliding panel top made by the Hospital Carpenter, & fitted on to the iron frame work.

This slide panel top proved of immense benefit, especially in localising work, as it enabled the Radiologist to localise F:Bs easily & accurately without moving the patient & in cases of badly injured patients the top could be quickly removed & the patient examined without moving from his stretcher, the stretcher being placed on the framework of the table.

In screening work also a panel could be removed beneath the part to be screened so that there was no woodwork interposed between the patient & the tube.

One tube stand only was available with a movable arm carrying the tube & enabling the tube to be placed at varying heights and angles for overhead work. At least two tube stands with tube carriers should form part of the equipment.

PROTECTION:

The tube box was lined with a protective covering of lead and rubber, but the box did not entirely enclose the tube. The protection extended in front & on the sides of the tube with an iris diaphragm in front to enable the direct rays to be concentrated as desired.

Tube boxes so protected do not give sufficient protection to the operator from the secondary rays. To afford further protection a lead rubber screen 27" x 19" was attached to rollers running along a metal rod at the side of the table & extending from the top of the table to the floor. This lead rubber screen was part of the equipment supplied with the Field Service Outfit. The Operator wore a large size lead rubber apron extending from the neck to the knees, lead rubber leather gloves & lead glasses. Such protection is very necessary to X Ray workers & appears to be sufficient.

SCREEN:

The viewing screen was 12" x 9", protected by lead glass in a wooden frame with protective metal handles. These handles were dispensed with as they added considerably to the weight of the screen & good gloves were found to be sufficient protection to the operator's hands.

TUBES:

The tubes used were "Mammoth" & an American make of tube, both with heavy targets, the sizes being 6" 8" & 9" and fitted with automatic regulator.

The "Mammoth" tubes were invariably very soft & required careful working up to get sufficient penetration. They required careful handling with frequent periods of rest.

The American tubes were invariably hard & would stand a tremendous amount of work.

The larger tubes were found to be much more satisfactory than the smaller tubes.



TUBES:

(5)

They maintained their balance longer, would stand heavier discharges & altogether had a longer "life"

It is essential to have a good supply of tubes of varying degrees of vacuum, the soft new tubes being used for the thinner parts such as the hands & gradually worked up to be used for the thicker parts of the body.

Harder tubes are required for radiography of the kidney area, spine, skull, pelvis & abdomen.

Once a tube has been properly seasoned it should last for a long time if properly used.

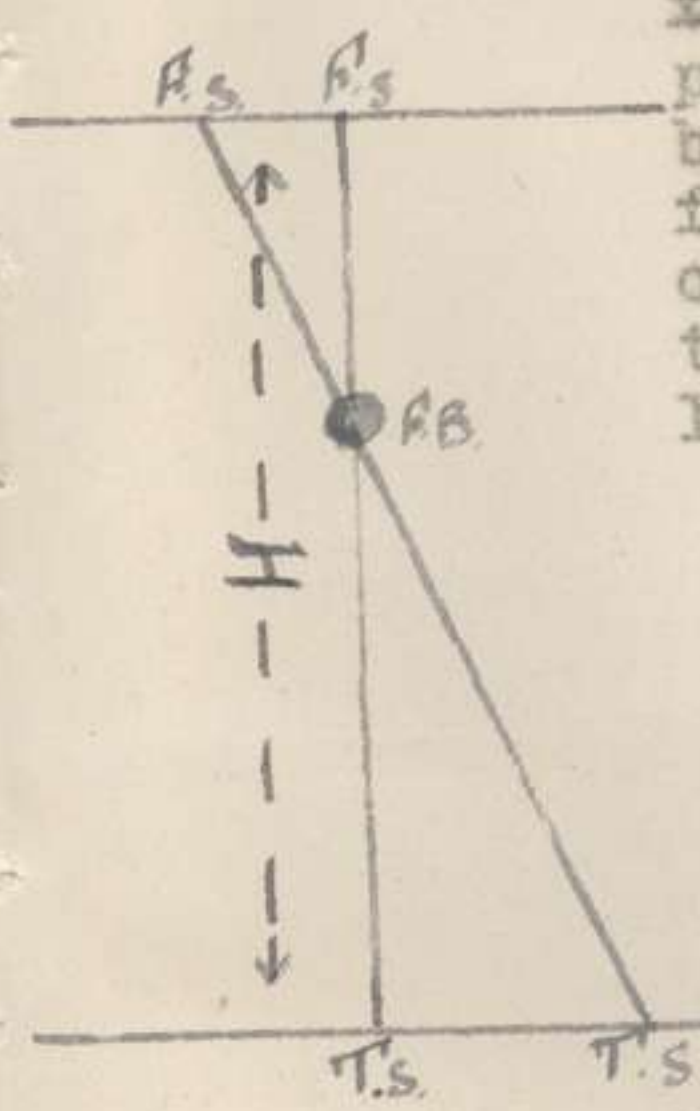
The many essential points in connection with the use of the X Ray tube can only be gained by experience.

Valve tubes were only used occasionally to correct and prevent inverse current.

LOCALISING METHODS:

The localisation method chiefly used and which was found to be the quickest, simplest, & most satisfactory, was the Mackenzie Davidson short method of localisation using the screen only. The tube is accurately centred & then moved till the central ray is exactly beneath the F:B:, the iris diaphragm being closed down as small as possible to ensure greater accuracy and to concentrate the Rays. The shadow of the F:B: is then marked on the skin anteriorly and posteriorly, a panel having been removed from the table top enables this to be done without moving the patient. This gives a direct line through the part examined.

The tube is then moved a known distance on the scale attached to the tube carrier, the iris diaphragm opened ~~the tube~~ as widely as required & the second position of the F:B: shadow marked on the skin. The distance between the two marks on the skin is measured, the height from the screen to the tube target is measured, the movement of the tube is known already & the depth of the F:B: is then calculated by a simple mathematical formula or the localising slide rule.



$$D = \frac{F.S. \times H}{F.S. + T.S.}$$

- D is depth of F:B:
- F.S. is F:B: shift
- T.S. is Tube shift
- H. is distance between screen & tube target.

The same principle is employed in localising F:Bs in the head. In these cases a photographic plate is used instead of the screen & two exposures made on one plate.

In all head examinations in addition to this method, plates were taken from two directions at right angles to one another.

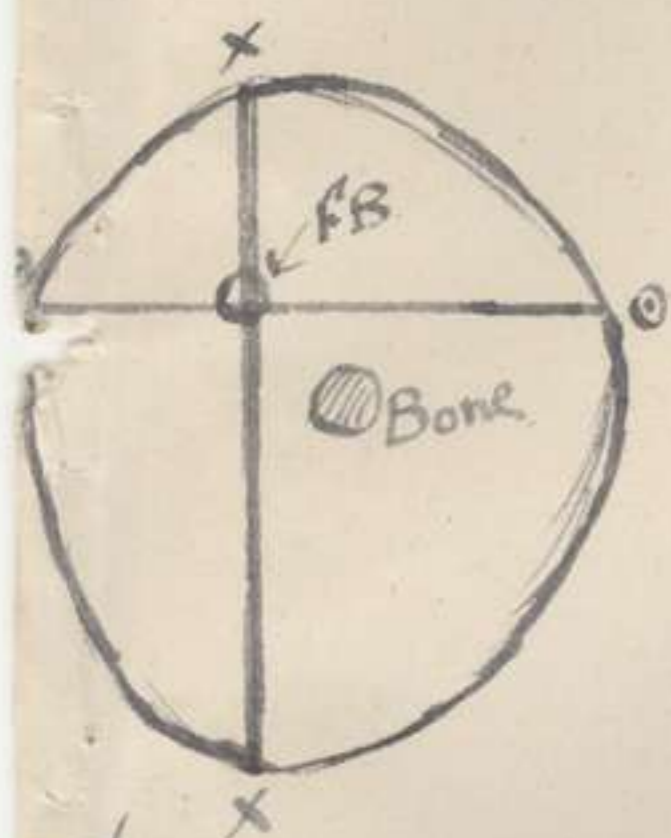
In all cases where radiographs were used to assist in localisation, two plates were taken, one in an antero-posterior direction and the other in a lateral direction.



(6)

One without the other is quite useless for localisation purposes.

Stereoscopic radiographs were found to be extremely useful in head cases & in dissected F:Bs in the region of the pelvis. These radiographs were not made as often as they might have been as the most rigid economy compatible with efficiency had to be observed in the use of plates owing to threatened shortages due to enemy action;



Diagrammatic cross section of limb.

Another simple form of localisation suitable to F:Bs in the limbs is to indicate the shadow on the anterior & posterior aspect of the limb by a mark X, turn the limb half way round and indicate the shadow on the inner & outer aspect of the limb by a mark \odot . The intersection of imaginary straight lines joining the marks X to X \oplus \odot to \odot is the position of the F:B:

The surgeon can then select the mark nearest to the F:B: for his incision or can use his own judgement according to the anatomical structures to be dealt with.

This method is very quick, simple & accurate, especially adapted for cases where the bone is not injured.

In reporting on cases of localisation it is important to describe the position of the patient on the table when the examination was made especially in cases of F:Bs embedded in the muscles of the shoulder owing to the varying position of the F:B due to muscular action.

The patient should be placed on the operating table in a similar position if possible. It is also a great advantage to the surgeon if he can see the localisation done. He retains a mental picture of the position of the F:B: & the short time so occupied often means time saved at the operation.

SPARK GAP:

In the apparatus used at Abbassia a spark gap was used in the secondary circuit & was very useful in checking inverse current.

In the apparatus at Port Said there was no spark gap in the secondary circuit & occasionally valve tubes had to be employed. A careful adjustment of the primary current, interrupter & tube was generally successful in checking inverse current, so that a spark gap was not found to be an absolute necessity, no very intense discharges being available.

PLATES:

The photographic plates used were Ilford, Wellington, Barnett, Imperial Express & Austin-Edwards films. Both Ilford & Wellington plates are very servicable for all ordinary X Ray work, but during the past twelve months, the quality of the plates supplied has been very unsatisfactory. A large percentage has been defective.



(7)

PLATES:

The Ilford plates have been more reliable than the Wellington but they are not so fast. One lot of Wellington, supplied early this year was very good & suitable for fairly fast work, but subsequent supplies were so consistently defective that they were all returned to B:D:M:S: as unserviceable. Latterly Barnett plates have been supplied & they are giving satisfactory results. The Austin-Edwards films are now being tried. Early in 1917, during a threatened shortage of plates, a small number of Imperial Express plates were purchased but were held in reserve. The few Imperial express plates used proved to be quite satisfactory. The supply of plates was always sufficient for requirements & although there were occasionally threatened shortages, there was never any actual shortage.

DEVELOPER:

The best developer was Metal Hydro quinone. This developer was subsequently replaced by the Army issue developer Sealol quinol which is very good but not equal to Metal Hydro quinone.

DISPOSAL OF PLATES:

All plates are numbered, placed in envelopes & stored in the X Ray department for reference when required. In the case of patients who have been X Rayed & boarded for Australia, the plate or plates have been sent to Australia with the patient. Defective plates or negatives have been utilised by the Engineers & more recently by the Bacteriological Laboratory at Kantara where they have been cut into glass slides for microscopic work. No lantern size plates have been used.

PRINTS:

Very few prints have been taken owing to the difficulty of obtaining suitable printing paper. In a few cases of special interest, prints have been taken at the request of the Surgeon in charge for his own record and as an addition to the War Diary. Except for record purposes prints are of doubtful value as much more information can be obtained from careful study of a good negative than from a print. The printing paper used was the Ilford P:O:P: & the Paget Prize Selftoning. Both types were army issue & almost invariably so bad that they were quite unserviceable. Primus Gaslight paper, purchased through Regimental funds has proved very satisfactory.



INTENSIFYING SCREEN.

The Intensifying screen was only used in a few cases such as the examination of the stomach after ingestion of a Bismuth meal & chest cases but the results obtained were not good.

Length of ~~examination~~ exposure for a chest without the intensifying screen was 25 - 30 seconds & the patient could generally hold his breath for that time. If that were not possible he was instructed to breathe as gently as possible & satisfactory radiographs could usually be obtained.

Length of exposure with the screen was from 6-8 secs. The use of the screen certainly shortens the exposure & in radiographing parts of the body, such as the heart lungs and stomach, where there is always some movement it has some advantages but where the part can be rendered immobile, negatives of better quality are obtained without the screen with little longer exposure.

Gastro-intestinal examinations with the opaque meal were frequently done & Bismuth Carbonate was used. Three ozs. of Bismuth Carbonate was mixed into 16 ozs of Arrowroot & milk while simmering & stirred till the mixture had the consistence of thick cream.

Screen examinations were made at two hourly intervals till the stomach was empty.

Rectal enemata of the opaque mixture were also given when the large bowel required particular examination.

About 4 ozs of Bismuth Carbonate were used in these cases & the mixture was made ~~thicker~~ more liquid than the opaque meal.

Average monthly number of cases examined. 98.

RECORDS:

During the first 18 months all records of cases examined were kept in books which are kept in the X Ray department for reference, a duplicate report of the case on a card being sent to the Medical Officer in charge of the case. One book contains a record of the case examined under the following headings:- Index No. Name. Region examined. Direction. Tube No. Alternate Spark Gap. Milliamperage. Time. Remarks.

The other book is a copy of the card which is attached to the history sheet of the patient.

During the past 8 months the card system only has been adopted, one card is sent to the ward & a duplicate is kept in a card cabinet in the X Ray department.

This system is simple & effective. An index of all cases examined is made & the report of any case examined can be obtained at once.

Type of card used is attached.



This card to be filled up and sent with the patient to the department at 9 a.m. The patient should be suitably prepared before being sent. Any rubber tissue used in the dressing should be removed. Plates taken from the department should be returned as soon as finished with.

From Hospital

Index No.

To the X Ray Department, 14th Australian General Hospital.

Plate Nos.

Surname Christian Name

Regt. or Corps Regtl. No. Ward

Medical Officer

Provisional Diagnosis

Region to be examined

Purpose of Examination

Signed

Date

REPORT :-

.....
.....
.....
.....
.....
.....

Signed

Date

A.P. & S.D., Alex./3642/3750/5:18/ 2m. (V. & G.)

6

(9)

The chief difficulty experienced has been the long delay in obtaining necessary articles of equipment & in replacing worn out articles. For several months all therapeutic work had to be suspended owing to lack of equipment. Articles which were requisitioned for last March have only just recently (November) come to hand. Many cases of cutaneous Leishmaniasis are now being given therapeutic treatment & the improvement shown in these cases has been most encouraging. It has been a severe handicap to this department to have been so long without the means of carrying out therapeutic treatment efficiently.

BEDSIDE EXAMINATIONS:

At Abbassia & Butt's trolley outfit for use in the wards was available. This apparatus can hardly be regarded as a necessity. It was only used on one occasion. It consists of a trolley on small rubber treaded wheels, with Induction Coil on top, switchboard at one end & compartments beneath for the Interrupter & the accumulator. It is a handy form of apparatus, can be easily moved about but has the disadvantage that it must be worked from accumulator.

REQUIREMENTS for APPARATUS:

It is a distinct advantage to be able to use the electrical power from a power station to work the X Ray apparatus. It is more convenient, efficient & economical, always ready for use & can be used without any alteration or modification for all types of interrupters. If the continuous current is available, it can be used direct off the mains, but if the alternating current only is available, as in Egypt, a transformer is necessary. The initial expense of the transformer may be considered heavy, but it more than compensates for the annoyance and vagaries of a petrol engine & dynamo or accumulators which require the services of a skilled mechanic to ensure harmonious working. In a large General Hospital this form of generating power should be used wherever possible. To obtain X Rays of sufficient intensity for short exposures, powerful coils have to be used & the ideal installation would be to provide duplicate installations so that the various exposures required for radiography, screening & therapeutics could be independently obtained to the best advantage. A large outfit should be reserved for fast radiographic work & a less powerful one for therapeutic work. The military radiologist in a large general hospital is called upon to undertake all classes of radiographic work, ~~especially~~ generally all the work must be done with the one apparatus. For all classes of work the essential features of the installation include an Induction Coil with 15" spark, a mercury interrupter for ordinary work & an electrolytic interrupter for fast work and heavy discharges.



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(10)

a switchboard with controls & accessories, at least 8 good tubes of varying degrees of vacuum according to the work to be done, spark gap & valve tubes to correct inverse current, oscilloscope tube, Benoist radiometer, Milliamperemeter, requirements for therapeutic work, tube stands, couch & various accessories for the protection of the operator already described. Good photographic plates with the developer specially suited to the make of the plates. Rooms as large as circumstances will permit in which to work with efficient ventilation & a supply of running water for the dark room.

The selection of a dark room is sometimes considered to be of minor importance, but a spacious well ventilated room is of great importance from the point of view of the photographer, as his health must suffer if he has to work for hours in a stuffy darkened atmosphere & it must be well equipped as the developing of the plate has an important bearing on the success or failure of the radiograph.

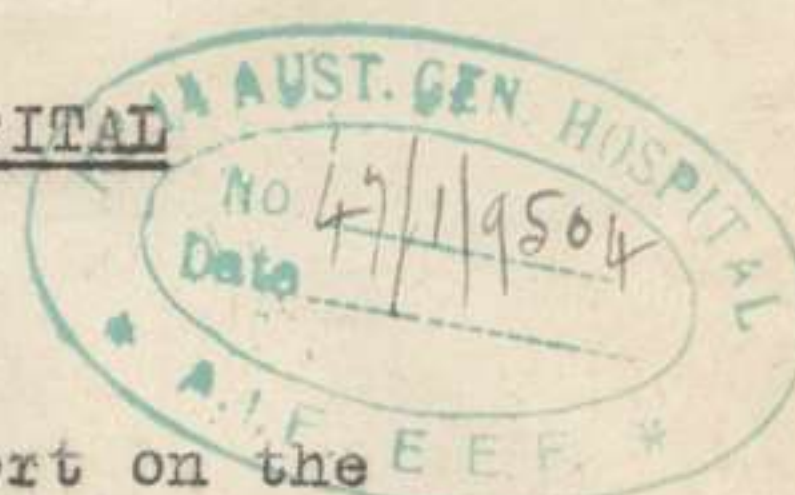
It is obviously necessary for the XRay Room to be near the Operating Theatre & it would be a great advantage if the XRay Room were also fitted up as an emergency theatre. Many cases sent for localisation of F:Bs. could be attended to at once & in cases where the surgeon finds it necessary to continue his search for the F:B: under the screen, he would do so with more confidence if he could be quite sure of his aseptic environment.

(Signed) *A. F. H. Elvins* Captain. AAMC
Radiologist, 14th General Hospital A: I: F:



No. 14 AUSTRALIAN GENERAL HOSPITAL

To: D:D:M:S:
A:I:F: Egypt.



Herewith attached is a brief report on the Nursing Services in connection with the 14th Australian General Hospital from the date of its arrival in Egypt, until 30th Sept., 1917.

Port Said,
25-8-18.

R. Neal, Matron.

W. Munnings Colonel A.A.M.C.
Commanding No. 14 Aust. Gen. Hospital A.I.F.



REPORT ON NURSING SERVICES FROM 23rd SEPT: 1916 to 30th SEPT: 1917

The unit arrived from Australia on the 21st September, 1916, and took over from No. 3 Australian General Hospital two days later. The staff consisted of Matron (Miss Creal) Nine Sisters and Twenty Staff Nurses. This number being found inadequate for the size of the Hospital (520 beds), One sister and twelve Staff Nurses were lent by No. 3. Australian General Hospital, pending the arrival of the remainder of the Staff who had gone on to England by a previous boat.

On taking over the Hospital there were between two and three hundred patients, a Transport having just left for Australia with a large number of invalids, but within a few weeks of our arrival the number of patients increased to six hundred.

We considered the buildings very suitable for a hospital, one drawback, however, being no gas supply or water laid on to the wards, which were spacious, well ventilated, clean and easily worked, with ablution and day rooms attached and telephones in almost every department. In the downstairs wards the floors were of asphalt which was easily broken and rendered those wards unsuitable for surgical cases. Another drawback was the shortage of equipment, namely ward linen, surgical appliances, instruments, etc. It was understood by our C:O: on taking over that No. 3. A:G:H: were leaving all their equipment in exchange for ours, but such was not the case, and we found that No. 3. A:G:H: had taken most of their own and all of No. 14 A:G:H: equipment. However the Australian Red Cross quickly came to the rescue with quilts, screen covers, pillow slips, extra sheets, pyjama suits, etc.

The Sisters' quarters were situated opposite the Hospital and consisted of three buildings, one of which was given up immediately to the Imperial Authorities and used for an Officers Mess. The second House was set apart for the night staff. The day staff taking the main building which had a beautiful old garden attached. The rooms were comfortably furnished with chest of drawers, hanging wardrobes and a plentiful supply of house linen etc. There were several bathrooms and a hot water service installed.

The house was under the supervision of Staff Nurse B:A: Taylor who proved herself most capable for the position. The catering was done by contract and cost 3/- per day for each member of the staff - 6d. a day more than we were allowed.

24-11-16. Three Sisters and eleven Staff Nurses (the remainder of our staff) arrived from England.

The first transport to leave Egypt with our wounded and sick was the H:T: "Ayrshire". The following Sisters' were detailed for duty, viz :-

Sister	L:M: Tremlett	(In charge)
S/Nurse	E:J: Lord	
"	F:A: Tatlow	
"	F:M: Hudson	

Sister Mabel Brown (Indian Service) reported for duty.

24-11-16. Staff Nurse J. McGregor Staff Nurse M. Livingston
 " " H. Mead " " F. Gallagher
 were transferred from Choubra Infectious Hospital, to replace the Sisters who were detailed for Transport Duty on the H:T: "Ayrshire".

11-12-16.	Staff Nurse E. Berriman	S/Nurse L. Davies
"	" K. Doyle	" S. Proctor
"	" L. Parnell	" D. Robertson
"	" M. Patterson	" D. Wearne

Staff Nurse C. Donnelly S/Nurse E.V. Hutt
 " " E.L. Tighe " R. Feegan
 the twelve Staff Nurses lent by No. 3. A:G:H: left for England by
 H:T: "Valdivia". Sister R. Clouston was ill at the time and had to
 remain in Egypt.

The Christmas festivities of the 14th A:G:H: in 1916 were of the brightest. Everyone, both patients and staff, have reason to look back on that day as one of the happiest during Active Service experiences. For weeks beforehand enthusiastic patients hid themselves when possible and carried out original schemes in the form of large "Merry Xmas" placards etc. and they were all well rewarded for their efforts. The Nursing staff, both men and women, gave themselves up entirely to the patients during this season. Everyone did their level best to make everyone else happy. No effort was spared by all to make their ward look the prettiest on Xmas day, consequently when it came to journeying around the Hospital to find which really was the best decorated ward, one felt they had a difficult task. There were all sorts of signs and symbols of the most unique nature to prove to all outsiders that No. 14 was an Australian Hospital. In the corner of one ward an old waybacker was pictured sitting outside his humpy, nothing was forgotten, the tin dish, rabbit skins hanging on the surrounding boughs and the home letters, it looked very realistic and gathered plenty of onlookers into the ward. Then others were decorated with the different Regimental colors which pleased the boys immensely. The table decorations at dinner time were much admired. One feature, (from a Sisters' point of view) was very amusing. Those who were gifted with very artistic tastes found it difficult at times to make colors, etc. blend. Some of our good boys are very fond of colors, the lighter and more varied the better. Consequently they used to search in the remotest corners of Cairo for anything that had any sort of color in the way of decorations, so one can just imagine the state of dilemma a Sister would be in, when a patient would appear with an armful of crimson paper, when she had chosen to decorate her ward with mauve. But everyone overcame these little difficulties. The Medical Officers and Sisters had their dinner with the patients, and though it was a very very happy day, I think everyone longed for and thought of home a little more than usual. The Sisters' afterwards (on Boxing Night) had their Xmas dinner in their quarters. The Mess room was large and opened into a pretty old garden. Both places were gaily decorated and I think the dinner was greatly enjoyed by everyone. Each Sister invited a gentleman friend and games were indulged in and on Boxing Night we all felt that a very enjoyable season had passed.

13-1-17. Sisters Sorrenson and Lyons (ex India) reported for duty and were subsequently detailed for duty on Transport to Australia, as they had already done two years service in Egypt and India, and were greatly in need of a change.

Many of the Sisters who came with this unit, had already done service in Egypt and were promised a transfer to a cooler climate when an opportunity arose. This promise was fulfilled in January 1917 when the "Kaiser I Hind" arrived from Australia with sixty reinforcements on board - fifty one of whom were retained for duty here - the remaining nine together with twenty six from this unit and twenty five from Choubra Infectious Hospital left for England on 16-1-17 by the H:S: "Essesquibo", Sister F. Lowe being in charge.

20-1-17. The marriage of Staff Nurse R. Robson took place at the Garrison Chapel, Abbassia. Authority, Hqdqrs., Delta and District L. of C. Memo 8341/C of 20-1-17.

20-1-17. Staff Nurse C:A: McGillivray attached for duty from Choubra Hospital.

As A:A:N:S: were no longer required at Choubra Infectious Hospital our staff was increased by twenty five members making a total of sixty eight.

22-1-17. The following Sisters were detailed for Transport duty

to Australia.

Matron M. Graham	(In charge)
Sister Sorrenson	S/Nurse A. Pursell
" Lyons	" R. Rohson (Mrs. Wilkie)

2-2-17. Staff Nurse C:R: McDonald developed Diptheria and was transferred to Choubra Infectious Hospital.

1-3-17. Sisters E:H: Chapman and M: Woods were promoted to the rank of Head Sister.

7-3-17. The following Sisters were detailed for Transport Duty to Australia - they sailed by the H:T: "Willochria"

Staff Nurse I:M: Were	(in charge)
" " V: Kellick	
" " B: Johnston	
" " C:M: Cobley (Mrs. Potter)	

10-3-17. Staff Nurse Ethel Clapp (ex India) attached for duty pending instructions from the Matron-in-Chief, A:I:F: England.

12-3-17. Staff Nurse E:E: Butterly admitted to Hospital suffering from Para-typhoid.

3-4-17. Staff Nurses W:M: Scott; E:M:Cooke; and A:G:Bonnar were promoted to the rank of Sister.

13-4-17. With the approval of the A:D:M:S: A:I:F: Egypt six Staff Nurses were lent to No. 27 General Hospital, Abbassia, but had to be recalled after being there a fortnight - as six additional wards had been opened here to accommodate the large number of wounded admitted, and for a week all leave for the Staff had to be cancelled.

I should like to place on record the unselfish devotion to duty of all members of the Nursing Staff during that time (after the first battle of Gaza) some of whom were on duty eighteen hours at a time.

1-5-17. The unexpected arrival of the H:T: "Kanowna" with Thirty Sisters for Egypt was hailed with delight by all. The train by which they came from Suez arrived at midnight and every Sister volunteered for duty that same night, on hearing of the large number of patients in Hospital.

1-5-17. One Sister and Twenty nine Staff Nurses arrived by the H:T: "Kanowna" and were immediately attached for duty.

5-5-17. Staff Nurse C:R: McDonald resumed duty after an absence of three months illness (Diptheria)

13-5-17. Sister A:C: McGregor admitted to Hospital, Gastritis.

10-6-17. Staff Nurse V:M: Phillips admitted to Hospital and operated on immediately for appendicitis.

29-6-17. Staff Nurse A:F: Hills admitted to Hospital with Colitis.

6-7-17. The following members of the Staff were detailed for Transport Duty to Australia on H:T: "Port Sydney", viz:-

Staff Nurse Ethel Clapp	(In Charge)
" " E:M:Shiel	
" " A:M:Kimber	
" " M: Capon	

27-7-17. Acting on instructions received from the A:D:M:S: A:I:F: eighteen Staff Nurses were lent to the Imperial Hospitals in Egypt as follows, viz:-

10 to 27th General Hospital, Abbassia.
 2 to Nasriah General Hospital, Old Cairo.
 3 to 21st General Hospital, Alexandria.
 3 to 17th General Hospital, Alexandria.

5-8-17. Sister A:C: McGregor and Staff Nurse V:M: Phillips resumed duty.

8-8-17. Twenty nine Staff Nurses (ex "Mooltan" 19-7-17) taken on strength to replace the same number from this unit who were detailed for duty in Salonica.

17-8-17. Staff Nurse A:F: Hills resumed duty.

29-8-17. The marriage of Staff Nurse G: Almond A:A:N:S: A:I:F: to Capt. P:D:Bright A:I:F: Egypt, took place in the Garrison Chapel, Abbassia. Authority. D:A:D:M:S: A:I:F: Memo 464/1/2037 of 17-8-17.

1-9-17. Staff Nurse E:E: Butterly resumed duty after an illness extending over 4½ months.

27-9-17. Eighteen Sisters are still on loan to the Imperial Hospitals in Egypt.

11-9-17. The staff now number seventy two exclusive of those on loan to the British Hospitals, viz:-

Matron	1
Head Sisters	2
Sisters	8
Staff Nurses	61
Total	<u>72</u>

The A:D:M:S: in Egypt asked me to submit the names of twenty Staff Nurses whom I considered suitable for promotion to the rank of Sister. The following names were submitted, viz:-

Staff Nurse C:R: McDonald	Staff Nurse C:A: McGillivray
" " E:C: Wildash	" " L:E: Stanbrook
" " G:Fitzgerald	" " M:S: Cobcroft
" " F:C: Spavin	" " I:T: Borwick
" " E:M: Thomson	" " M:I: Crawford
" " E:H: Best	" " J:M: Tomlins
" " D:Mearns	" " A:F: Hills
" " N:Nagle	" " M:A: Mahoney
" " B:K: Smithers	" " M: Norris
" " M: Milligan	" " L:C: Bell

The Health of the Nursing Staff on the whole has been very good, taking into consideration the climate and that most of the members have found the summer very trying. The percentage of sick Sisters for the year just ended is 1.792%. When ill the Sisters are under the care of Lt: Col: Blackburn and I am confident that no Nursing Staff on Active Service receives more attention than the Members of this unit.

The hours of duty for the Nursing Staff are 7-30a.m. to 8 p.m. and 7-30 a.m. to 1 p.m. on alternate days. When practicable the Nurses get one whole day off duty in each week. They do night duty in rotation for a month at a time, on completion of which they get 24 hours off duty.

Leave has been granted as regularly as possible to each member of the unit in her turn - the rule being to give each Sister one weeks leave in six months. In January leave to Luxor

was granted to as many members of the Nursing Staff who wished to make the trip and almost every Sister availed herself of the opportunity to visit Upper Egypt. No one regretted the time spent visiting the old historical places round Luxor and Assouan. The time to return to Hospital and duty came all too soon, the days seemed hardly long enough to see all that was to be seen and many came back with the intention to revisit Luxor if the opportunity came again.

A. Reed, Matron.

Cape Hunter

Please find ~~the~~ attached
a pathetic story of a
shortly period
I hope it will meet your

requirements
All figures had to be
obtained by searching 10 large
boxes of very small cards.
It is possible that there may
be some small mistakes.

W. D. Brown

Please acknowledge with any
polite remarks you may think
fit to make

W. D.

V.D.

23/9/16

11/17

Boorman

1.

No. 14. A.G.H. Dermatological Section.
Preston Barracks. Heliopolis.
Sept 23rd. 1916 to Jan 1st. 1917.

The Venereal Hospital for the A.I.F. in EGYPT was taken over by the 14th. A.G.H. from No. 3 A.G.H. on 23rd. Sept. 1916.

Captain Parker, who had been in charge, was sick in hospital, and Captain R.A. Baker, who had been acting for him handed over to Captain R.M. Bowman a staff of 3 N.C.O.'s. and 9 other ranks with 100 patients.

This staff had been left behind by No. 1. A.D.H. when this hospital went to England.

It was a self contained unit, although a section of the General Hospital by name.

STAFF.

The staff of 12 was small when it is remembered that a Dispenser, Quartermaster, Pack Store keeper, Orderly Room clerk postal orderly and orderly N.C.O. had to be set aside, and the rest were kept fully occupied in such things as general ward duties, dressings, as well as the more special duties concerned in the treatment of Syphilis, Chancroid, and Gonorrhoea.

Those patients whose treatment was almost completed were able to maintain the general cleanliness of the Hospital.

RATIONS.

The feeding of the patients was done by local contract and they messed in a large hut built by the Red Cross.

TREATMENT.

1. SPECIAL.

~~SYPHILIS~~ SYPHILIS. - Intravenous injections of Galyl Mercurial injections, or inunctions.

CHONCHROIDS. - Black Wash, Calomel, Iodoform
~~15%~~ 50 per cent Zinc Chloride, as the

condition appeared to demand always accompanied by daily exposure to the sun's rays until the part blushed.

GONORRHOEA. - various irrigations and instillations but for the greater part, potassium permanganate was used.

A great difficulty was encountered in so much as all pathological examinations had to be made at the main hospital Abbassia, where also the Wassermann Reaction was carried out once a week by Captain N.H. Fairley.

2. GENERAL.

Every endeavour was made to occupy the minds of the patients, for which purpose the Red Cross provided games, magazines, papers, books, etc.

A portion of a large hut which had been built by the Red Cross for a Recreation Room was set aside as a library under the management of a patient.

The remainder of this hut contained lounge chairs writing tables, also a piano.

3.

Towards the end of October M. Draper O.C. @rdens at the Barrage, very kindly let us have a number of young trees and plants. Quite a number of the patients who were well enough soon became enthusiastic amateur gardeners, and several large beds were planted out, and about 40 trees put in.

The after care of these helped many to pass the time both mentally and physically occupied.

APPOINTMENTS.

Preston Barracks were very large, and only one side was being used by us. Here the patients had large airy wards, one containing patients confined to bed, and who received their treatment in the ward; three others with those patients able to walk about.

Special rooms were set aside for irrigation and treatment and a very nice theatre with an operating table and necessary fittings was available for whatever operative procedure had to be carried out.

A dispensary, drug store, pack store, Red Cross store, quartermasters store, and office were each contained in large and separate rooms. A canteen was conducted by an Egyptian who paid rent for his rights the money going to Regimental Funds.

LEAVE.

Good conduct patients were given half a day in Cairo before discharge to their units, and it was very exceptional that these men overstayed their leave, even by half an hour.

Furthermore the conditional promise of such leave in my opinion not only helped to maintain order but was a great stimulus to the patients.

Christmas Day was one of festivity and a large sports programme followed by a concert at night and presentation of prizes given by the Red Cross, made it a day which will be remembered by many with mixed feelings.

On Jan. 2nd. 1917 all the patients, 171, were transferred to No. 14. A.G.H. by motor ambulance, and placed in tents erected on the open ground behind the hospital. The Dermatological Sectn. then became known as "v" block 14th. A.G.H.

The following is a summary of admissions and discharges.

Date.	ADMISSIONS.			Total.	DISCHARGES.
	Syphilis.	Chancroids.	Gonorrhoea.		Total.
Sep. 23/30	6	7	29	42	31
Oct.	4	26	69	99	80
Nov.	6	51	58	115	82
De. 1 Jan 1.	4	44	49	97	99
Total.	20	128	205	353	282
Taken over Sept. 23				100	
Remaining and transferred to "v" block 14th A.G.H.				453	171

(4)

v. Block. 14th. A.G.H. Abbassia.
Jan 2nd. 1917. / May 25th. 1917.

The 171 Patients transferred here were placed in a number of E.P.I.P. tents, and wards for ~~the~~ lying cases were made by joining two or more tents in line. ~~The~~ ground was bounded by a four strand barbed wire fence round which an armed guard was placed.

This block was not self contained, as all the administration was carried out by 14th. A.G.H. ~~The~~

The same lines of treatment were carried out as at Boston Barracks, but the rooms for operating work, irrigation etc. were not so large or so well appointed.

In March Lieut.-Col. Saw. began to visit the block once a week for consultation over those Patients who had been in for six weeks or more.

The Red Cross built a large recreation hut about the end of March which had been greatly missed by the Patients.

The canteen was brought down and conducted on the same lines as before.

Very soon the leave which had been granted from Preston Barracks, ~~with the exception~~ was stopped by H. Quarters.

With the result that men evaded the guard at night and doubtless many absented themselves when in probably an infective condition.

One night each week the Patients had an opportunity of attending a concert in the main hospital hall.

The following is a summary of admissions and discharges. -

Date.	ADMISSIONS.				DISCHARGES.	
	Syphilis.	Chancroids.	Gonorrhoea.	Total		
Transfd. from Preston Bks.		60	102	171		
Jan.	3	9	36	48		58
Feb.	4	9	43	56		74
Mar.	6	7	63	76		71
Apr.	4	4	41	49		70
To May 25th.	3	7	31	41		56
Total.	29	96	316	441		380

Difference remaining and taken over by Captain Silvertown -112.

During this period 22 men came in to have a Wassermann Reaction done.

W. J. M. Munn
2nd Lt H. J. A.

17-2-19

5

In September 1916 the A.I.F. in Egypt consisted of 3 Light Horse Brigades and Details, Meascar Training Camp, 14th A.G.H., No. 2 A.S.H. and V.D. Hospital.

The average daily bed state of the V.D. Hospital was 120.

The I.C.C. was formed in October 1916.

For the succeeding month the daily bed state had risen to 140.

The bed state for December 1916 was 182.

The 4th Light Horse Brigade was formed on 6/2/17.

The daily bed state of the V.D. Hospital on this date was 155.

During the month of April 1917 the average daily bed state was 133.

On April 16th 1917 a Prophylactic Establishment was opened at A.I.F. Headquarters, Cairo and during May the average daily bed state at the V.D. Hospital had fallen to 116.

In August Prophylaxis was started at Port Said and during the ensuing month - September - the figures for the V.D. Hospital averaged 139.

On Oct. 28th 1917 the Jerusalem Offensive started and during the next two months few opportunities of exercising strict surveillance over Venereal Disease were available.

During December the average daily bed state of the V.D. Hospital was 143.

In February 1918 the average daily bed ~~state~~ state of the V.D. Hospital was 143.

During the occupation of Palestine which practically dated from the beginning of the offensive, 28/10/17 and still continues, the facilities for acquiring Venereal Disease in the absence of proper prophylactic measures, increased and even now when the use of prophylactic establishments is encouraged by every means, the average daily bed state of the V.D. Hospital is high.

The figures for May 1918 being 256,

and for August being 326

At the present date there are 358 men suffering from V.D.. Of this number 68% have contracted the disease in Palestine, 2% in Ismailia and ~~xxxxxx~~ about 10% in each of the towns, Cairo, Port Said and Alexandria.

As regards Port Said, the figures from Port Said for the last six months show that the percentage of cases of V.D. amongst A.I.F. troops who have been there is .04%.

The majority of soldiers now realize the advantage of Prophylaxis and our Prophylactic Depots in the base towns are being well patronized.

APPENDIX - No. 1.No. 1 AUSTRALIAN DERMATOLOGICAL HOSPITAL.

Nominal Roll of Officers on the Staff, June 1916.

Major	GRIGOR	W.E.
Major	RAFFAN	
Major	MORRIS	A.E.
Capt.	ELLIS	L.E.
Capt.	ORCHARD	W.
Capt.	WYLIE	C.J.
Capt.	DAWSON	
Capt.	BOOTH	
Capt.	CLAY	
Lieut.	DAY	(dentist - attached)