

R.A.M.C.,  
WAREHAM CAMP,  
DORSET.

March 12th, 1915.

himself by clinging on to the rails. We got back to harbour alright, and, though at the time I hated it, I am convinced that that "initiation" has saved me many abdominal pangs since. On one occasion the rolling was so bad that the ward-room clock hanging on one bulkhead smashed itself up against the bulkhead on the opposite side of the wardroom. We have, of course, been out in gales since, but that gives you some idea of what it's like.

Sometime in November we took part in the bombardment of Zeebrugge. We fully expected we should be well peppered by the German batteries, but as far as I could see, we were not fired on at all. We went pretty close in, and if they'd liked they could have had a "silting" shot at us. It was a fine sight to see the 12 inch "projs" from the big ships bursting on shore and sending up columns of smoke and water. When we left the place it was in flames that could be seen for miles.

On January the 24th I had my first real baptism of fire. The Germans were sighted about 7.30. I was asleep, and the first I knew of the action was the steward waking me with "Enemy's opened fire on us, Sir." I nipped up on deck to an accompaniment of "plunks" as the German salvo fell just short of our foc'sle. As soon as our ships began to reply, they turned tail and went like rabbits for home. Soon after, our battle cruisers came up going "full bat," and as Ross, of the "Tiger," told you in last month's number, settled their hash pretty well. It was a magnificent sight to see these ships—the finest in the world—tearing at full speed through the water. We could see the fall of shell from both sides, sending up columns of smoke and water as they burst in the water around ours and the German ships. The result of the fight you know. I can well understand Ross saying it is "all or nothing" in a naval battle.

On March 10th we took part in the sinking of the German submarine U12. After being rammed by the "Ariel" she came to the surface, and the "Attack" and ourselves let her have a few shells to make sure. After a few shots the crew came out on to the conning tower and waved surrender. We lowered boats, and managed to save 10 out of 27, of which the "Acheron" got six. Unfortunately I had not my camera on board, because the conditions were most favourable for a good photograph.

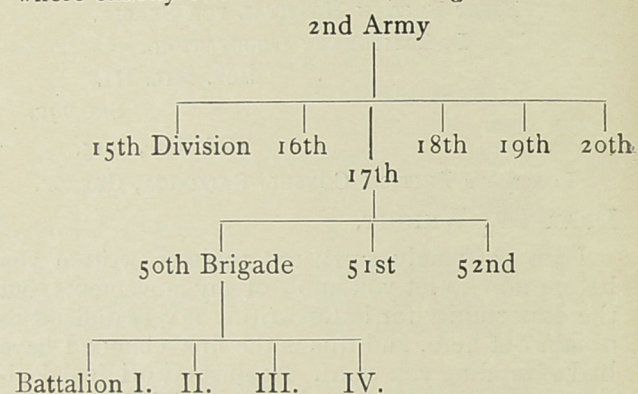
Well, John, I think that finishes my stock of "copy" (if it's any use to you). I have seen a good many "Londoners" lately, and they all seemed very fit. Curiously enough, both the Fleet Surgeons here are friends of Mr. Furnivall's. They tell me he's a great water-polo player, so I look to you to remember that when we start the next swimming season. Cheerio! John.

Yours,

R. O. TOWNEND.

In the last and illuminating number of the *Gazette* the war zone is well represented by "London" men, but there is no contribution from Kitchener's new army, and it may be of interest to include one in your next.

The unit to which we are attached is the 50th Brigade of the 17th Division, stationed at Wareham. The Division is the basis of organization of the field armies, and of these six go to comprise one army. The 17th is a Division of the 2nd army. It takes some time for a civilian suddenly pitchforked into military life to place himself, and it is only by visualising this genealogical tree that it becomes possible to appreciate where exactly one's little bit is being done.



As a matter of fact there are five battalions stationed here, the Divisional pioneer battalion being included, and there are, in addition, such other Divisional troops as R.E., A.S.C. and Cycling Company, making in all a total of about 7,000 men. The effect of such an invasion upon a small town like Wareham, with a normal population of about 2,000, can be imagined, and this ancient and historic little place, with its Roman walls, and renowned for the stand which Alfred made against the Danes, is getting back some of its own. The camp started under canvas early in September, but after three months, moved, or rather was driven, into huts by wind and rain.

Each hut is 60 ft. by 20 ft., and is made to hold 30 men, allowing 40 cubic feet of space per man, serving for their sleeping and living room. Unfortunately, owing to the premature occupation, the cart had to be placed before the horse, and this large town of wooden huts was occupied first, and road-making, sanitation and lighting came later, the result being that we are only now emerging from the condition of chaos which reigned supreme everywhere. The sanitary condition of the camp is now satisfactory, with well made latrines of pail-midden and dry earth variety, wash-houses, drying sheds and kitchens, while

H.M.S. "ATTACK,"  
1st DESTROYER FLOTILLA,  
c/o G.P.O.

DEAR HOLLINGS,

Your request that I should write you an account of my impressions of the life of a Surgeon Probationer is one which I comply with readily, in the hope that it may encourage other people who have "joined up" to tell us something of the things that have been happening to them. Our life is essentially a very isolated one; we see the daily papers only when in harbour, and letters from quondam fellow clerks and dressers, in France or wherever they may be, would be more than welcome. Rarely have we realised more how valuable the *Gazette* must be to people who have "gone down" from the hospital than we did when the first war-number arrived.

My impression of my own job is that, from the point of view of the medico, it is the very best job of the war, and I think my self-congratulation is largely justified. The surgeon probationer has none of the six months' training of recruits and lecturing in physiology that rumour tells us the R.A.M.C. are having to put up with, and, while the full surgeon in the Navy is sitting and drinking his pay in a big ship that rarely goes to sea, the S.P. is dashing about the North Sea in a destroyer and seeing all that there is to be seen; and if he is fortunate enough to be in a modern flotilla that means a good deal. Wherever there is an action between battleships, battle-cruisers, cruisers, or destroyers themselves, there the destroyer must be, if not actually firing herself, to protect the big ships from submarines. If there are mines to be laid or sunk, mine-layers to be chased, a sea-plane raid to be made, or a hostile coast to be bombarded, the destroyer is sure to take her share, and will probably witness the sinking of at least one submarine before the war is over; more than this the censor would not allow me to say.

From being a mere clerk or dresser-boy, the S.P. will find himself "principal medical officer," with the coxswain as his trusty lieutenant, of one or perhaps two ships, and will be responsible for the temporary care of all casualties or sickness that may occur therein. Of sickness he will probably have little to deal with, and diagnosis is easy. All cases with a pain anywhere amidships, from an alcoholic gastritis to a lobar-pneumonia, are diagnosed as "catarrh," and the patient will be very contemptuous of you if you tell him he has anything else. He is despatched to a depot-ship, whence, if he is really ill, he fetches up at a naval hospital where he receives very skilled treatment. The chief duty of a S.P. is to deal out such medicine as will warn off malingerers, who are legion. Of accidents when the sea is rough there are generally not a few. People who are picked up by a wave and hurled from one side of the ship to the other are always liable to injury.

septic tanks and filter beds protect the drainage area from pollution; incidentally the salmon fishing in a neighbouring river will probably produce rich harvests from now onwards.

The R.A.M.C. of this Brigade is officered by civilians holding rank of temporary Lieutenant under a Divisional S.M.O., who is a regular R.A.M.C. Lt. Col. Except for the daily struggle with Army forms, which range from one up to the thousands, and the constant searching for the right one, the work is not very taxing. One M.O. acts as M.O. of the Brigade, and receives and passes on the orders from the S.M.O. To each M.O. is assigned a battalion, and his immediate duties lie with everything which appertains to sickness and unfitness in his battalion. The daily routine consists of sick parade, as we must call it now in preference to O.P's., office work, sanitary round, inoculations, vaccinations, inspections of troops, and examinations of recruits. Not the least arduous task is the weeding out of the unfit, and the diagnosis and treatment of the scrimshanker. The commonest causes of unfitness have been defective eyesight, abnormalities of the feet, and debility. The defective eyesight is generally noticed first by the C.O. during the first course of musketry. In one of the battalions, composed mostly of miners, there has been a good deal of nystagmus, which, even if combined with  $\frac{6}{8}$  vision, renders a man quite incapable as a shot. There has been comparatively little serious illness, and only one epidemic—influenza. One case of cerebro-spinal meningitis died, and there were two cases of sudden death due to alcoholism and heart trouble. "Kitchener's army throat," a very painful pharyngitis, with or without laryngitis and loss of phonation, has been very prevalent, and occurred either as a prominent symptom of influenza or synchronised with the epidemic.

We are still maturing, but no longer in mud as Kipling described it; the vile weather, which proved so inappropriate a culture medium, has been dead against the training of troops, and especially of absolutely raw material, but since this has improved progress has been rapid, and an army of confident and well set-up soldiers is emerging from the mob of green and clumsy civilians. The physique and intelligence of these men of this Northern Division is good, and would compare favourably with a similar Division of regulars, while the "spiritual" atmosphere embodied in the voluntary system is a prominent feature. Men who give up £3 to £6 a week as their normal earnings are not in for this without the desire and determination to get their money's worth in a different direction, and if only the need of haste, which is ever visible, does not lead to their being rushed out before they are fully trained, the great expectations of these new armies is likely to be fulfilled.

H. THWAITES.



In my own humble opinion the Admiralty would have done better to carry one sick-berth steward in each ship. He would probably have been just as competent to supply first-aid, and they would thereby release 100 medical students to become qualified, but they would have robbed us of experiences which we shall treasure for the rest of our lives, and the relief of the naval officer at having a real doctor aboard is so great that a S.P., if he behaves himself, will find himself an honoured guest. I know of several people just past their 2nd M.B., who by the exercise of a little professional assurance have come to be regarded as no ordinary doctors.

The naval officer is nothing if not generous. He is essentially human and without humbug, and his good manners and bad language make him a most delightful messmate.

Life in a destroyer is very free and easy, as compared with that in a big ship. You can cut your captain for a drink and call him most things if you lose, you can dress like a second-rate pirate at sea, and you have the free run of the bridge or any other part of the ship. If you are a person who in peace-time goes down to the sea in ships you can pick up many valuable tips in seamanship and navigation, and can often make yourself useful aboard.

But against all these advantages the would-be S.P. must prepare himself to undergo the very acme of discomfort. Sea-sick he is sure to be, and sea-sick again, and probably sea-sick once more, but by the time that he has ceased to salute commissionaires, has learnt to say that he is "in a ship," not "on a boat," and has been fined several rounds of port, he will have got over the worst of it, and he can assure himself, if it is any consolation, that at least 50% of his companions continue to be sea-sick after many years at sea. He must prepare himself never to take his clothes off or turn in at sea, to doss down, if he would sleep, on any fixed piece of furniture he can find, and to be thoroughly wet through from the time he leaves harbour to the time he regains it. The North Sea in winter is no drawing-room and the spray comes right over a destroyer even in fine weather, while if it is at all rough she ships them green, and it is impossible to keep her dry below. The table and chairs have taken charge, and are hurled with the force of a cannon ball from one side of the mess to the other; the "charity mail" is floating about the deck (floor) in six inches of sea-water, coated with a layer of soot washed down the chimney of the stove (of course unlit), and you sit about the mess with long faces and aching joints, clinging on to anything solid and cursing your lot and one another. But it's worth it.

In the rare bursts of fine weather that we get in winter, things are very different and life is full of

incident. Even when we are not actually engaged in some form of Hun-harrying, there is always something doing, from gunnery practice on the corpse of a mine-struck whale to pistol-practice on the ward-room cushions. I think the only real disadvantage to the life is the absolute mental stagnation of it. It is perhaps a good thing for the Country that the naval officer does not read Apologetics, but drinks gin and curses the Kaiser, but for anyone who has started on an academic life the time, which at present goes extraordinarily quickly, would after awhile become very irksome. However he can, with a little agitation, resign whenever he likes.

But I have already written, I feel sure, far more than you intended me to. You ask for my impressions. I think my chief impression is of the absolutely unquestionable superiority of the British Navy to the German or any other Navy in ships, guns, gunnery, seamanship, tactics or anything else. The Germans know it only too well, but in this self-deprecating country you need to serve in the Navy to realise it fully. One has been accustomed in peace-time to regard the British Navy as good but untried, and the adage that "Britannia Rules the Waves" as possibly so much "hot air." But I can assure you that it is not so, and to be present at a single action would convince the most dyspeptic pessimist that it will be a very long time before England loses her right to claim the title of Mistress of the Seas.

In conclusion, it may seem disloyal to the Hospital, but I would most sincerely advise any student who has not much chance of qualifying before the end of the War, to "waste" a few months as a surgeon probationer. New destroyers are being commissioned every month, and in one of these he will miss little of the fun. He must prepare himself for discomfort, and for tackling gin-tickled tempers, but such discomfort as he will suffer is but a small price to pay for a wonderful experience and the privilege of sitting at meat with God's very best gentlemen; only let him have a sense of humour.

In haste,

Yours very sincerely,

HAROLD B. PADWICK.

2ND LONDON GENERAL HOSPITAL,  
ST. MARK'S COLLEGE,  
CHELSEA, S.W.  
19th May, 1915.

To the Editor, the "London Hospital Gazette."  
SIR,

At a recent meeting of the officers under my command I gave the following details of the work

accomplished, since the outbreak of war, by the 2nd London General Hospital and its sections.

All the officers doing duty at this Hospital are members of the staff of either the London, St. Thomas's or Guy's Hospital, and it was suggested that your readers would be interested in these figures.

I have much pleasure, therefore, in forwarding the following statement.

I am,

Your obedient servant,

E. M. L. ALLENDEN,

*Lt.-Col. Commanding 2nd London General Hospital.*

Total numbers admitted to Hospital between August 5th, 1914, and May 4th, 1915.

*Expeditionary Force—*

Officers	...	...	312
Rank and File	...	...	3,719
			<u>4,031</u>

*United Kingdom—*

Officers	...	...	29
Rank and File	...	...	3,013
			<u>3,042</u>

GRAND TOTAL ... .. 7,073

*Deaths—*

Expeditionary Force	...	18
United Kingdom ...	...	20
		<u>38</u>

*Invalided out of the Service—*

Expeditionary Force	...	178
United Kingdom ...	...	218
		<u>396</u>

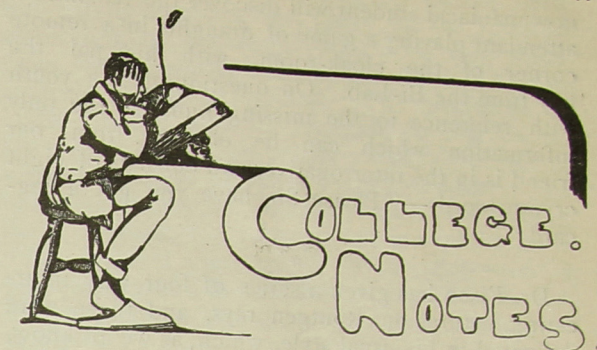
*Numbers under treatment in Hospital on May 4th—*

Expeditionary Force	...	539
United Kingdom ...	...	328
		<u>867</u>

*Total returned to Duty—*

Expeditionary Force	...	3,396
United Kingdom ...	...	2,476
		<u>5,872</u>

There were 52 officers in Hospital on May 4th, 1915.



"Watch and Swot" is the motto in the College these days. The University and Conjoint Examinations are due to appear in a week's time, "and now all the youth of England is on fire and silken dalliance in the wardrobe lies." Hot coffee and wet towels are much in evidence, and many illustrious youths are burning the midnight oil. Well, we can only hope for as good results as last time, when out of 18 who went up, 15 got through.

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There is much talk in these days about the medical student and the way in which his conscience should lead him; now, we say flatly, that the opinion of all educated people in this country is that a medical student who, before the War, was not attached to any combatant unit, should continue his professional studies and do his utmost to get qualified. There are far too many badges seen on civilians now-a-days. Badges for knitting socks, and minding horses, and other pastimes, are totally unnecessary, but it seems to be the *ne plus ultra* among one's fellow mortals to wear a highly decorated emblem in the lapel of one's coat. And besides, if it is worn in the cap the badge may possibly designate the wearer as a member of the Crouch End Gladiators Cycling Club out for a Sunday run to Epping and back. Badges are totally unnecessary. If Lord Kitchener sees fit to give us a State badge with the letters M.S. on it all well and good, but even then we might be taken for a Maternity Sister, and imagine, my gentle readers, the indignation of the Nursing Staff at such a *contretemps*.

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The Athenæum is very quiet now. One can sit in peace after lunch, and there is no need to dodge stray copies of the A.B.C. which fly hither and thither, hurled by restless youths who doubtless wish to emulate the exploits of an American baseball enthusiast. But still, the Athenæum boy continues on his way with a persistent force, reminding of the Russian steam roller. "Mr. Perkins is requested to ring up the above number." On looking for the "above number" it is discovered to be conspicuous by its absence, and having searched high and low for the boy, the



now maniacal student will discover the Athenæum attendant playing a game of draughts in a remote corner of the cloak-room, with his pal the boy from the Bi-Lab. On questioning the youth with reference to the missing number, the only information which can be elicited from our friend is in the interrogative, and consists of eight cryptic words—"Please Sir, have you got a fag-card?"

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Dr. Fison has given a series of four very interesting lectures on Röntgen rays, and these were delivered in his usual style, which, as we all know, is delightful. This is the only relaxation we have had this term, and one clamours for more.

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Dr. Leonard Hill has been sent to the front just recently, and has returned with a full knowledge of the gas which the Germans have used against us. We are having an article from him, dealing with this subject, in the next issue, and then probably we shall hear some real truth as to what the stuff is.

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We beg to tender our warmest congratulations to our lecturer on pharmacology, Mr. E. Mellanby, on his receiving the degree of M.D. of the University of Cambridge.

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To conclude in true military phraseology—on the rest of the front there is nothing to report.

## REVIEWS

*Muler's Short Manual of Analytical Chemistry*, tenth edition. Edited by J. Thomas, B.Sc. Lond. Baillière, Tindall & Cox. 6/- net.

This is an excellent manual, and well deserves the favourable consideration which has already carried it to a tenth edition.

In qualitative testing for acid radicles, the application of the group reagents to the prepared *neutral* solution would perhaps have made a useful additional "step"; this would disclose for instance the presence of sulphites and arsenites. In discussing the detection of bromides in presence of iodides (p. 79), the method of removing the iodine as cuprous iodide before testing for the bromide might have been described with advantage. In the present edition the section on quantitative analysis has been somewhat improved in arrangement and extended in scope; the section relating to food analysis now includes cocoa. Among minor improvements we notice with pleasure that sodium hydroxide is no longer called sodium

hydrate. The manual has many special features which make it particularly interesting and useful to students of pharmacy and medicine.

*The Heart in Early Life*, by G. A. Sutherland, M.D., F.R.C.P. pp. xvi. + 211. Oxford University Press.

This book comes to us as a very welcome addition to the numerous works on cardiology, dealing as it does with that portion of cardiology which has perhaps been least investigated. Many are the pitfalls into which we may fall in the examination, treatment, and especially the prognosis, of cardiac disturbance in children, and to the avoidance of such pitfalls the teaching of this book seems specially directed.

It would be idle to attempt to criticise the teachings of Dr. James Mackenzie, which are set out in a most clear and concise form in this book, whilst the author substantiates all his statements with such convincing cases that adverse criticism is impossible.

The section on cardiac irregularity we think is particularly interesting and instructive, whilst the chapter dealing with murmurs about the heart contains a fund of teaching and good counsel in the regulation of the life of the patient.

The whole book is written in a most interesting style, and is especially praiseworthy for the conspicuous absence of anything of the nature of "padding." The pulse tracings and electrocardiograms are numerous, and illustrate the text in a very lucid manner.

In conclusion, we wish the book the success that it undoubtedly deserves.

*A Text-Book of Medical Jurisprudence and Toxicology*, by Professor Glaister, M.D., D.P.H. (Camb.), F.R.S.E. Third edition. Edinburgh, C. and S. Livingstone, 1915. Cash price, 15/- net.

This third edition follows its predecessor published in 1910. From this it differs but slightly in subject matter, the book being divided into two sections, the first devoted to medical jurisprudence, with an able treatise on the lunacy laws of England, Scotland and Ireland, whilst the second deals with the general and minuter details of toxicology. The chief addition is a short sketch of the composition, duties, statutory powers and penal resolutions of the General Medical Council, to which the author devotes the first half-a-dozen pages of the book.

The author lays stress on the variations in procedure and technicalities in England and Scotland.

As regards the style and phraseology of the book, these are excellent, affording easy, light and interesting reading. Cases are quoted briefly and concisely to emphasise the author's points, and these are chosen from among the most recent of practical importance.

The illustrations, of which there are 137 and 1 coloured plate, leave something to be desired in clearness. The essential details of the picture is often obscured by the inky black background, the one merging into the other quite unnecessarily. Yet the author does not frequently refer to them in the text.

The book is of medium weight, the paper smooth and good, with a faint sheen. The printing is slender, clear and well spaced. The binding would be improved by fastening the individual sections more evenly.

The subject matter is rather too full for students working for the qualifying examinations, yet they are strongly recommended to use this as a book of reference when studying smaller treatises on these subjects, seeing that Professor Glaister is the authority so frequently quoted in them.

*Materia Medica and Therapeutics*, by J. Mitchell Bruce and Walter Dilling. Tenth edition. Cassell & Co., Ltd. Price 6/6 net.

The changes in the newly issued B.P. have been many, including the employment of the metric system.

To meet these, this new edition of an old well established manual has been produced. So complete is this revision that we may commend it to new readers as an up-to-date, complete and very practical manual of both materia medica and therapeutics. The preliminary chapters on practical pharmacy are very useful; the richest part of the volume undoubtedly is Part III., on general therapeutics, which if studied should make the student an intelligent prescriber and not an ignorant cynic of drugs. Digitalis, radium, neo-salvarsan and carbon dioxide snow are all fully dealt with; the manual is complete, it is the best we know of, and is issued at a very reasonable price.

*Treatment of Tuberculosis and Lupus with Oleum Allii*, by W. C. Minchin. Second edition, 1915. 5/-.

The somewhat unfortunate style in which this small book is written diminishes considerably the value of its contents and the interest that it might otherwise have aroused on the subject of the treatment of tuberculous affections by garlic preparations. Seven cases of bone, testicle and

gland tuberculosis are reported as having been wonderfully improved and cured by the external application of the emplastrum allii, and seven cases of pulmonary tuberculosis treated by the author's inhalation method. The treatment of lupus is rather cursorily discussed in four pages, three cases being particularly noted, all of which were diagnosed as lupus erythematosus. The following suggestive passage indicates the value of garlic preparations as a remedy in diphtheria:—"I feel that I must appeal to the profession to give garlic a trial in this disease, especially as it is not necessary in doing so to exclude the use of serum!"

*Evolution and Disease*, by S. T. C. Nash, M.D., Captain, R.A.M.C., T., S.S. Published by John Wright and Sons, Bristol. 3/6 net.

"Evolution and Disease" is a small volume based on three lectures delivered under the Chadwick Trust for the year 1913. A short but interesting account is given of the various epidemics which swept across Europe, and particularly the British Isles, from the 7th Century of our Era, and the part which such conditions as poverty, overcrowding, famine and the absence of sanitation played in these epidemics is clearly and strikingly shewn. The different features which characterised the various visitations are ascribed to the action of local environmental influences on the pathogenic organisms, and the author definitely ranges himself among those who combat the theory of the unalterable specificity of disease. While the book has a special interest and value for those working in State Medicine, the contribution which it makes, from the point of view of the epidermologist, to the discussion of such problems as evolution and heredity is both helpful and noteworthy.

*Emergencies in Medical Practice*. Bale, Sons & Danielsson. 21/- net.

This book is an English translation of the third edition of a German work, "The Pathology and Treatment of Morbid Conditions that may suddenly endanger life," by Dr. R. Lenzman of Dinsberg. The German title is certainly the more appropriate for the volume. Comprising close on 600 large octavo pages, it contains an account of the pathology, symptoms and treatment of the complications or sequence of every disorder that may possibly be fatal, including those of pregnancy and poisoning. The book is an excellent example both of the merits and defects of the German system of instruction. The effort to be thorough and to leave nothing undescribed, and the inability to distinguish between



the essential and the unimportant. Thus, no less than 20 pages, are devoted to a description of Tracheotomy, but we should be sorry for the practitioner, inexperienced in the operation, who attempts to open the trachea after reading the description in the book. Amongst so many exclusions and exceptions the main object is likely to become obscured. Ten pages are taken up with the treatment of Epistaxis, of which several are used up in describing methods which the author believes to be useless.

The translation is clear, and we should think accurate; at all events the cumbrous German style is carefully preserved. It is a pity that a uniform system of weights and measures is not adhered to. Doses are usually metric, but there are many relapses into the apothecaries' weights. The prescriptions would have been more useful if they had been revised by a competent English pharmacist. Many of the preparations advised are unknown to English medicine, and some of the names are mis-spelt. It is absurd, for instance, to speak of "granules" of powdered guaiacol.

#### WHAT SHALL WE DRINK?

Those who, in the interests of the country, have decided to follow the example set by the King in banishing wines, spirits and beer from the Royal household during the war, will find an admirable substitute for their usual alcoholic beverage in Barley Water made from Robinson's "Patent" Barley. Made according to the recipe of a famous chef (Mr. H. Hammond, M.C.A., formerly Chef de Cuisine, Bachelors' Club) it is at once a sustaining and delicious beverage:—

"Put the outside peel of two lemons into two quarts of water, add eight lumps of sugar and boil for ten minutes. To this add two dessert spoonfuls of Robinson's 'Patent' Barley, previously mixed to a smooth paste with a little cold water. Continue to boil for five minutes and allow to cool. When cool, strain off through fine muslin and add ice and lemon juice to taste."

#### EXAMINATION RESULTS

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###### Part I.

Deacon, J. N. Sanyal, S. K.

###### Part II.

Batchelor, S. Woo, A. W.

##### SECOND M.B. (Part II.)

Adler, G. Gluckman, H.  
Aylward, R. D. Watt, F. W. A.  
Douglas, H. L. Wells, A. W.

† Dist. in Pharmacology.

##### SECOND M.B. (Part I.)

Eidinow, A. Senitzky, S. N.  
Evans, F. A. Slater, B. L.  
Foner, A. Toop, H. M.

##### UNIVERSITY OF OXFORD

###### FINAL B.M., B.Ch.

Burrell, C. M. Inman, R. J.

##### UNIVERSITY OF CAMBRIDGE

###### M.D.

Mellanby, E.

###### THIRD M.B., B.C.

###### Part I.

Liang, P. K.

###### Part II.

Ingle, L. M. New, W.

###### SECOND M.B., B.C.

###### Part I.

Beney, C. C. Lipshytz, G. T.  
Goldberg, S. V. Rhodes, H. E.

##### ROYAL COLLEGE OF PHYSICIANS

###### F.R.C.P.

Fearnside, E. G.

##### ROYAL COLLEGE OF SURGEONS

###### F.R.C.S.

Banerji, L. M. Collins, R. E.

###### L.D.S.

Herman, W. S.

##### FIRST PROFESSIONAL

###### DENTAL METALLURGY

Ball, V. H. Lawrence, F.  
Davies, T. J.

##### EXAMINING BOARD IN ENGLAND FOR CONJOINT DIPLOMA

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###### Part I.—Medicine

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Bayumi, M. Michelmores, R. G.  
\*Fahmy, M. \*Rammell, J. W.  
\*Gwynne-Jones, W. T. Reckitt, C. R.  
\*Hensman, H. S. \*Sterling, R. G.  
\*Karaka, D. P. \*Tibbles, J. R.  
Leslie, J. S. \*Vaidya, S. K.  
Liang, P. K. Watson, T. T. B.  
\*McDonnell, A. J. V.

\* Signifies Qualification.

##### Part II.—Surgery

\*Ainsley, A. C. \*Mallinick, S.  
Ainsworth, C. G. Morley, A. H.  
\*Bayley, J. H. \*Mosse, C. G. T.  
\*Cheal, P. \*Parry-Jones, O.  
\*Collins, H. M. \*Peiris, W. S. J.  
\*Feldman, I. (Senior). \*Sanyal, S. K.  
\*Feldman, I. (Junior). \*Sterling, R. G.  
\*Habgood, G. \*Thompson, R. R.  
Jacob, L. G. \*Tibbles, J. R.  
\*McDonnell, A. J. V. \*Wallace, P.

##### Part III.—Midwifery

Ford, R. K. Puri, J. N.  
Gibson, P. C. \*Sanyal, S. K.  
Green, E. A. Summers, T. C.  
Greenish, F. H. S. \*Thompson, R. R.  
Jacob, L. G. Whyte, H.  
Morley, A. H.

\* Signifies Qualification.

##### SECOND EXAMINATION

Carroll, C. H. Spero, G. E.  
Collins, J. C. Troup, H. B.  
Croft, E. Warren, H. P.  
McRae, R. T. Watters, H. G.  
Powell, W. J. F.

##### FIRST EXAMINATION

###### Biology

Beaumont, W. Petersen, F. F.  
Corbett, I. J. Roach-Smith, C. E.  
Cruchley, I. J. Withers, G. B.

###### Practical Pharmacy

Bayumi, M. Nalliah, N. R.  
Fehrsen, F. O. Townend, R. O.  
Moftah, S. G. Zortman, J. H.

#### BIRTHS AND MARRIAGES

[Note.—In the attempt to make this column as complete as possible, the Editor would be much obliged if readers of the "Gazette" would kindly forward to him any newspaper cuttings, or other announcements of this nature, that they may chance to come across].

##### BIRTHS

WOODS.—On the 4th May, at 36, Waldemar Mansions, S.W., the wife (née Stéphanie Bellmont) of W. W. Woods, M.R.C.S., of a son.

TRAYLEN.—On Saturday, July 3rd, at 29I, Willesden Lane, N.W., the wife of C. Leonard Traylen, M.R.C.S. Eng., L.R.C.P. Lond., of a daughter.

#### MARRIAGES

ASH-PRYCE JONES.—On June 16th, at St. Mary Magdalene, Bersted, Bognor, Walter Martin Ash, M.B., B.S. Lond., Surgeon R.N., to Gladys, youngest daughter of Mr. and Mrs. S. R. Pryce Jones, of "Newcourt," Bognor.

BOWDEN-NEVILLE.—On June 17th, at St. John's Church, Bethnal Green, Lieut. Ellis Campbell Bowden, R.A.M.C., to Dorothy, second daughter of Mr. and Mrs. J. Neville, of Shoreham, and late of "Leaside," Beckenham.

BULSTRODE-WOOLMER WHITE.—On June 14th, at Salle Church, Christopher Victor Bulstrode, M.A., M.D. Cantab., Temp. Capt. R.A.M.C., to Marguerite, elder daughter of Mr. and Mrs. Woolmer White, of Salle, Norfolk, and Southleigh, Hants.

LINTON-NEWTON.—On June 23rd, 1915, at St. Nicholas' Church, Edmonsham, Dorset, by the Rev. E. F. Linton, Rector, Edward Claude Linton, Lieut. R.A.M.C. Sp. Res., to Helen Melville Newton.

MILNE-BROWN.—In Edinburgh, on 24th April, 1915, Mr. R. Milne, Assistant Surgeon to the London Hospital, was married to Miss May Brown, late "Sister Operation." Mr. W. Morris was present.

#### NOTICES

All contributions, correspondence, books for review, &c., should be addressed The EDITOR of the London Hospital Gazette, London Hospital, London, E.

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